Form **8879-EO**

IRS e-file Signature Authorization for an Exempt Organization For calendar year 2014, or fiscal year beginning 09/01___, 2014, and ending 08/31__, 20 15__ Do not send to the IRS. Keep for your records.

OMB No.	1545-1878
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Int Na

epartment of the Treasury ternal Revenue Service	► Information a	bout Form 8879-EO and	its instructions is	at www.irs.gov/for	rm8879eo.	
ame of exempt organization					Employer iden	tification number
EW JERSEY A	JDUBON SOCIE	ETY			221539	642
ame and title of officer						
RIC STILES,	PRESIDENT 8	K CEO				
Part I Type of R	eturn and Return	Information (Whole D	ollars Only)			the return of you
heck the box on line ave line 1b. 2b. 3b.	1a, 2a, 3a, 4a, or 5a 4b, or 5b, whichever below. Do not componere ► X b To ck here ► I heck here ► b ck here ► b	are using this Form 88 a, below, and the amouter is applicable, blank (lete more than 1 line in the lete more than 1 line in the let	int on that line ic (do not enter -0- Part I. rm 990, Part VIII r (Form 990-EZ, 1120-POL, line i ment income (Fo	r (ne return beind). But, if you en l, column (A), line line 9)	e 12) 1b 2b 3b	Office Was Blanking throng
Part II Declaration	on and Signature	Authorization of Office	cer			
organization's 2014 el are true, correct, and organization's electror to send the organization, (b) the authorize the U.S. Tre financial institution accreturn, and the financial Agent at 1-888-353-4 involved in the proces	ectronic return and a complete. I further onic return. I consent on's return to the IR ne reason for any decasury and its design count indicated in the all institution to debit 537 no later than 2 sing of the electronic to the payment. In	am an officer of the abaccompanying schedule leclare that the amount to allow my intermediants and to receive from the lay in processing the related Financial Agent to e tax preparation softwicthe entry to this accouptusiness days prior to the payment of taxes to reave selected a personaganization's consent to	es and statement in Part I above te service provide e IRS (a) an ackleturn or refund, a printiate an electurn for payment ant. To revoke a the payment (set eceive confident al identification n	its and to the set is the amount she, er, transmitter, or nowledgement of the date of tronic funds with of the organizat payment, I must tlement) date. I tial information number (PIN) as not the set is the set	nown on the copy of or electronic return of receipt or reason of any refund. If ap drawal (direct debion's federal taxes acontact the U.S. Talso authorize the lecessary to answ	f the a originator (ERO) n for rejection of plicable, I it) entry to the s owed on this reasury Financial financial institutions er inquiries and
Officer's PIN: check				, DIN	4 4 2 1 6	
X I authorize W	ITHUMSMITH+	ERO firm name	to	enter my PIN	Enter five numbers, it do not enter all zeros	out
being filed wire ERO to enter As an officer	th a state agency(ie: my PIN on the retuin of the organization, ated within this retuin	I4 electronically filed res) regulating charities a rn's disclosure consent so I will enter my PIN as nor that a copy of the retenter my PIN on the rest.	is part of the IRS screen. ny signature on t turn is being filed	the organization' I with a state ag	's tax year 2014 e ency(ies) regulatir	lectronically filed return
Officer's signature ▶	9. Atta			Date	▶ 03/17/20	16
	ation and Authen	tication				
		tronic filing identification	n			2 2 2 0 2
number (EFIN) follow				2	2 2 0 0 6 2 do not ente	
I certify that the above indicated above 1 co	re numeric entry is m	ny PIN, which is my sign nitting this return in acc ders for Business Retur	Quance with the	14 electronically requirements o	filed return for the	e organization
ERO's signature				Date >		
		ERO Must Retain T	his Form - See	Instructions	o Do So	
		ubmit This Form To	the IKS Unies	s requested 1	0 00 00	Form 8879-EO (2014)
For Paperwork Red	uction Act Notice, s	ee back of form.				

JSA 4E1676 1.000

PUBLIC DISCLOSURE COPY

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

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.

A F	or th	e 201	4 calendar year, or tax year begin	nning 09/01, 2014	, and ending	<u>g</u>	08/3	31, 20 ₁₅
R o	heck if ap	anliaahla	C Name of organization			D Employer id	entificati	on number
_	_ '		NEW JERSEY AUDUBON SOC	CIETY				
	Addre chang		Doing Business As			221539		
	Name	change	Number and street (or P.O. box if mail is	not delivered to street address)	Room/suite	E Telephone n	umber	
	Initial	return	9 HARDSCRABBLE ROAD			(908) 20	4-899	98
	Termi	inated	City or town, state or province, country, a	and ZIP or foreign postal code				
	Amen returr		BERNARDSVILLE, NJ 0792	24		G Gross receip	ts \$	8,481,776.
	Applio pendi	cation ing	F Name and address of principal officer:	ERIC STILES		H(a) Is this a gro subordinates		or Yes X No
			9 HARDSCRABBLE ROAD BE	ERNARDSVILLE, NJ 07924	:	H(b) Are all subore		ed? Yes No
I	Tax-ex	empt st	ratus: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1)	or 527	If "No," atta	ch a list. (se	ee instructions)
J	Websi	ite: 🕨	WWW.NJAUDUBON.ORG			H(c) Group exem	ption numb	per 🕨
K	Form o	of organ	nization: X Corporation Trust	Association Other >	L Year of	formation: 1910 M	State of I	legal domicile: NJ
P	art I	Sui	mmary		•	·		
	1	Briefly	y describe the organization's mission or	r most significant activities: WORKS	TO FOSTI	ER ENVIRONMEN	TAL A	WARENESS
ė			A CONSERVATION ETHIC IN					
auc		ANI	MALS AND PLANTS AND PROM	MOTE PRESERVATION OF N	J NATURAI	L HABITATS.		
/err	2	Check	k this box	iscontinued its operations or dispose	ed of more tha	n 25% of its net asset	 S.	
Governance	3	Numb	per of voting members of the governing	body (Part VI, line 1a)			3	19.
	4		per of independent voting members of t				4	19.
Activities &	5		number of individuals employed in cale				5	120.
ŧΞ			number of volunteers (estimate if necess				6	950.
Ac	1		unrelated business revenue from Part V				7a	0
			nrelated business taxable income from I				7b	0
						Prior Year		Current Year
_	8	Contri	ibutions and grants (Part VIII, line 1h)			5,242,37	75.	5,751,113.
Revenue	9	Progra	am service revenue (Part VIII, line 2g)	COP	Y FOR	611,35		882,746.
) Ve	_	Invest	tment income (Part VIII, column (A), line	PUBLIC II	NSPECTION	197,5		150,991.
ž			revenue (Part VIII, column (A), lines 5,			225,83		244,075.
	12		revenue - add lines 8 through 11 (must		ı	6,277,13		7,028,925.
_	13		s and similar amounts paid (Part IX, colu			0,2,,,20	0	7,020,020
	14		its paid to or for members (Part IX, colu				0	
	4-		es, other compensation, employee bene	3,462,18	37	3,570,806.		
Expenses	162		ssional fundraising fees (Part IX, column			3,102,10	0	
ben	h	Total	fundraising expenses (Part IX, column (I	D) line 25) > 733 458				
Ĕ	17		expenses (Part IX, column (A), lines 11			1,841,30	16	3,125,030.
			expenses. Add lines 13-17 (must equal			5,303,49	_	6,695,836.
	19		nue less expenses. Subtract line 18 from			973,64		333,089.
-S	_	Kevei	Tue less expenses. Subtract line to from	Tillie 12		Beginning of Current		End of Year
Net Assets or Fund Balances	20	Total	accete (Port V. line 16)		ŀ	28,053,32		27,991,032.
\sse	21		assets (Part X, line 16)			602,23		503,752.
nd/	22		liabilities (Part X, line 26)		i i	27,451,08		27,487,280.
	rt II		ssets or fund balances. Subtract line 21 gnature Block	nom line 20.		27,431,00	, , .	27,407,200.
			of perjury, I declare that I have examined this	is return including accompanying sched	ules and statem	ents and to the hest o	f my kno	wledge and helief it is
true	e, corre	ect, and	complete. Declaration of preparer (other than	n officer) is based on all information of whi	ich preparer has	any knowledge.	i iliy kilo	wiedge and belief, it is
Sig	ın		Signature of officer			Date		
He		'	ERIC STILES	DDECT	DENT & CI			
			Type or print name and title	PREST	DENI & CI	<u> </u>		
			Type or print name and title (Type preparer's name	Preparer's signature	Date		; PTIN	N
Paid	d			sparor o orginaturo	Jaic	Check	J "	
Pre	parer		HERINE BENDALL	<u> </u>		self-employ		00521196
Use	Only	_	s name WITHUMSMITH+BROW	<u> </u>	\ 1			027092
N 4	. 41- "		s address > 1 SPRING STREET		ŊΤ	Phone no.	132-8	328-1614
			cuss this return with the preparer show	, , , , , , , , , , , , , , , , , , , ,				X Yes No
For	Pape	rwork	Reduction Act Notice, see the separat	e instructions.				Form 990 (2014)

_	rm 990 (2014)	Page Z
P	art III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	_ X
1	Briefly describe the organization's mission:	
	THE NEW JERSEY AUDUBON SOCIETY IS A PRIVATELY SUPPORTED,	
	NOT-FOR-PROFIT, STATEWIDE MEMBERSHIP ORGANIZATION (SEE SCHEDULE O FOR	
	DETAILS).	
_		
2	Did the organization undertake any significant program services during the year which were not listed on the	_
		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 If "Yes," describe these changes on Schedule O.	X No
	If "Yes," describe these changes on Schedule U.	حال ام ما
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to	
	the total expenses, and revenue, if any, for each program service reported.	Ulliels,
	the total expenses, and revenue, if any, for each program correct reported.	
4-	(Code) \(\(\Gamma\) \(\Gamma\)	
4a	(Code:) (Expenses \$	
	EDUCATION AND SANCTUARIES - PROMOTE EDUCATIONAL AWARENESS AND	
	ENVIRONMENTAL PROTECTION THROUGH SUMMER CAMPS, FIELD TRIPS, LECTURES AND WEEKEND EVENTS AND TO MAINTAIN WILDLIFE SANCTUARIES,	
	EDUCATIONAL CENTERS AND OTHER PROPERTIES. FOR A MORE DETAILED	
	DESCRIPTION OF THE PROGRAM SERVICES PROVIDED, SEE SCHEDULE O FOR	
	NEW JERSEY AUDUBON'S CONSERVATION UPDATE.	
	NEW CERSEL ACCORDERVATION OFDATE.	
	(Code:) (Expenses \$\(\) 1,674,184. including grants of \$\(\) (Revenue \$\(\))	
	STEWARDSHIP - ENCOURAGE AND SUPPORT SOUND CONSERVATION AND	
	STEWARDSHIP PRACTICES AND LAWS. FOR A MORE DETAILED DESCRIPTION OF	
	THE PROGRAM SERVICES PROVIDED, SEE SCHEDULE O FOR NEW JERSEY	
	AUDUBON'S CONSERVATION UPDATE.	
4c	(Code:) (Expenses \$ 1,501,504. including grants of \$) (Revenue \$)	
	RESEARCH AND MONITORING - DISSEMINATE AND ADVANCE KNOWLEDGE OF THE	
	NATURAL ENVIRONMENT THROUGH EDUCATIONAL AND RESEARCH PROGRAMS AND	
	PUBLICATIONS. FOR A MORE DETAILED DESCRIPTION OF THE PROGRAM	
	SERVICES PROVIDED, SEE SCHEDULE O FOR NEW JERSEY AUDUBON'S	
	CONSERVATION UPDATE.	
4d	Other program services (Describe in Schedule O.)	
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	• Total program service expenses ► 5,400,749.	

PUBLIC DISCLOSURE COPY NEW JERSEY AUDUBON SOCIETY

Form 990 (2014) Page **3**

Part IV **Checklist of Required Schedules** No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," Х 1 Х Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 2 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 Χ 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 Χ 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, 5 Χ 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 Χ "Yes," complete Schedule D, Part I 6 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 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III Χ 8 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 9 Χ 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted Χ endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 10 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. a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," Χ complete Schedule D, Part VI 11a 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 Χ 11b 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 Χ d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets 11d Χ Χ e 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 the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X Χ 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," Х complete Schedule D, Parts XI and XII 12a 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 Χ 12b Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E. Χ 14a Did the organization maintain an office, employees, or agents outside of the United States? 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 Χ 14b Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV Χ 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other Χ assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 16 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 Χ 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 Χ 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 Χ Χ 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H 20a **b** If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Page 4 Form 990 (2014)

Part	Checklist of Required Schedules (continued)			ugo I
rait	Checklist of Required Schedules (Continued)		Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
21	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
22	Part IX, column (A), line 2? 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			
23	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			
24 a	\$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		Х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?.	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year	240		
С	to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	244		
23a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	204		
b	year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?			
	If "Yes," complete Schedule L, Part I	25b		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any	200		
20	current or former officers, directors, trustees, key employees, highest compensated employees, or			
	disqualified persons? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,			
	substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			
	Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? <i>If</i> "Yes," <i>complete</i>			
	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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes,"			
	complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		X
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable			
	related organization? If "Yes," complete Schedule R, Part V, line 2	36		X
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		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	

Form 990 (2014) Page **5**

Par	·			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable 1a 25	1		
	Effect the number of Forms W-20 included in line 1a. Effect-0- in not applicable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Х	
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
Zu	Statements, filed for the calendar year ending with or within the year covered by this return 120			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		Х
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			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		Х
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			
5a	(FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		Х
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Х
	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
	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	ا ا		
7	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
а	and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Х	
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			
	required to file Form 8282?	7c		Х
	If "Yes," indicate the number of Forms 8282 filed during the year			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
_	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	,		
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990. Part VIII, line 12, for public use of club facilities 10b			
11	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12 a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	12-		
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a		
h	Enter the amount of reserves the organization is required to maintain by the states in which			
~	the organization is licensed to issue qualified health plans 13b			
С	Enter the amount of reserves on hand			
14 a	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		

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.

Sect	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 19			
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain in Schedule O.			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 19			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with			
	any other officer, director, trustee, or key employee?	2		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct			
	supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	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?	7a	X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members,			
	stockholders, or persons other than the governing body?	7b	X	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during			
	the year by the following:			
а	The governing body?	8a	X	
b	Each committee with authority to act on behalf of the governing body?	8b	X	_
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at			
Cast	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	- \	X
Secti	ion B. Policies (This Section B requests information about policies not required by the Internal Revenue	Coae	<i>}.)</i> Yes	No
		40-	162	X
	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters,	406		
	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b 11a	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	па	21	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	12a	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	120		
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give	12b	Х	
•	rise to conflicts?	120		
С	describe in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written whisheblower policy?	14	Х	
15	Did the process for determining compensation of the following persons include a review and approval by			
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
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 arrangement			
	with a taxable entity during the year?	16a		Х
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?	16b		
Sect	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 990-T (Section	501(c)(3)s	only)
	available for public inspection. Indicate how you made these available. Check all that apply. X Own website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of into	erest	policy	, and
	financial statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and record	ls:▶		

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Part VII

NEW JERSEY AUDUBON SOCIETY 221539642

 -,										9
Compensation	of	Officers,	Directors,	Trustees,	Key	Employees,	Highest	Compensated	Employees,	and
Independent Co	ontr	actors								

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

- 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.

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

(A) Name and Title	(B) Average hours per week (list any	box,	unles	neck ss pe	ition more	e than c is both or/trust	an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	the organization (W-2/1099-MIS		organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1)ISOBEL WAYRICK	1.00									
BOARD CHAIR		Х		Х				0	0	0
(2)M. KAREN THOMPSON, ESQ.	1.00									
SECOND VICE-CHAIR	0	Х		Х				0	0	0
(3)RANDY JONES	1.00									
FIRST VICE-CHAIR		Х		Х				0	0	0
(4)THEODORE G. KOVEN	1.00									
SECRETARY		Х		Х				0	0	0
(5)ALAN H. BERNSTEIN, ESQ.	1.00									
DIRECTOR	0	Х						0	0	0
(6)JOHN M. BLOOMFIELD	1.00									
DIRECTOR	0	Х						0	0	0
(7)ISMAEL CALDERON	1.00									
DIRECTOR	0	Х						0	0	0
(8)CONSTANCE CAMPANELLA	1.00									
DIRECTOR	0	X						0	0	0
(9) CHARLES M. CHAPIN, III	1.00									
DIRECTOR	0	X						0	0	0
(10) HELEN DAVIS CHAITMAN, ESQ.	1.00									
DIRECTOR	0	Х						0	0	0
(11)HARRIETT DRUSKIN	1.00									
DIRECTOR	0	X						0	0	0
(12)JAMES GIBSON	1.00									
DIRECTOR	0	X						0	0	0
(13)CAROLE HUGHES	1.00									
DIRECTOR	0	X						0	0	0
(14) DIANE C. LOUIE, MD, MPH	1.00									
DIRECTOR	0	X						0	0	Form 990 (2014)

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JSA.

Form 990 (2014)												F	Page (
Part VII Section A. Officers, Directors, Tru	ustees, Ke	y En	nplo	ye	es,	and I	Hig	hest Compensat	ed Employ	yees (c	ontinue	ed)	
(A) Name and title	(B) Average hours per week (list any hours for	box,	unles er and	Pos heck ss pe	erson	e than c is both tor/trust	an tee)	(D) Reportable compensation from the	(E) Reportable compensation from related organizations		com	(F) stimated nount o other pensati	f ion
	related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099	-MISC)	org an	om the anizatio d relate anizatio	on d
15) V. GUY MAXWELL DIRECTOR	1.00	Х						0		0			
16) ASHLEY D. REY TREASURER	1.00	Х		Х				0		0			
17) GERALDINE A. SMITH, ESQ. DIRECTOR	1.00	X								0			
18) ANN LAWRENCE	1.00									0			
DIRECTOR 19) MEREDITH MUELLER	1.00	X						0		0			
DIRECTOR 20) ERIC P. STILES	45.00	X						0		0			
PRESIDENT & CEO 21) SUDHA IYER	45.00			Х				128,288.		0		1,5	517
VP FINANCE & ADMINISTRATION	0			Х				96,003.		0		7,6	553
1b Sub-total								0		0			(
c Total from continuation sheets to Part VII, S	_						>	224,291.		0			L70.
d Total (add lines 1b and 1c)						e) who	o re	224,291. eceived more than	\$100,000 (이 of		9,1	L70.
reportable compensation from the organizatio	n ▶		1									1.4	
3 Did the organization list any former office	er directo	or or	tri	iste	<u>_</u>	kev e	mr	olovee or highes:	t compens	ated		Yes	No
employee on line 1a? If "Yes," complete Sched											3		Х
4 For any individual listed on line 1a, is the organization and related organizations groups													
individual											4		X
5 Did any person listed on line 1a receive or for services rendered to the organization? If "Y											5		Х
Complete this table for your five highest component compensation from the organization. Report of the compensation from the organization.													
year. (A)								(B)			(C)		
Name and business add	dress							Description of se	ervices	С	ompen		
ATTACHMENT 1													

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

Part VIII Statement of Revenue

		Check if Schedule O contains a respor	nse or note to an	y line in this Part V	'III		Х
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a b c d e f	Federated campaigns	462,296. 2,775,104. 2,513,713.				
	g h	Total. Add lines 1a-1f		5,751,113.			
nue			Business Code				
Program Service Revenue	2a b c	PROGRAM FEES FEES FOR USE OF SOCIETY FACILITIES TRAVEL FEES INCOME	900099 532000 900099	798,741. 6,875. 77,130.	798,741. 6,875. 77,130.		
	d e f	All other program service revenue					
Pro	g	Total. Add lines 2a-2f		882,746.			
	3 4 5	Investment income (including divider and other similar amounts). ATTACHMENT Income from investment of tax-exempt bond Royalties	proceeds	91,432. 0			91,432
	6a b	Gross rents	(ii) Personal				
	d	Net rental income or (loss)		0			
	7a	Gross amount from sales of (i) Securities	(ii) Other				
		assets other than inventory 660,689.	45,800.				
	b	Less: cost or other basis					
		and sales expenses 546,930.	100,000.				
	C d	Gain or (loss)	-54,200.	59,559.			59,559
Φ	8a	Gross income from fundraising		59,559.			59,559
Other Revenue	Ja	events (not including \$ of contributions reported on line 1c).					
Ä		See Part IV, line 18 a					
the		Less: direct expenses b					
Ò	9a	Net income or (loss) from fundraising events Gross income from gaming activities. See Part IV, line 19 a		0			
	b	Less: direct expenses b					
	С	Net income or (loss) from gaming activities		0			
	10a	Gross sales of inventory, less returns and allowances a					
	b c	Less: cost of goods sold ATCH 3 b Net income or (loss) from sales of inventory	805,921.	244 25-			044.0==
	٣	Miscellaneous Revenue	Business Code	244,075.			244,075
	11a						
	b						
	С						
	d	All other revenue					
	e	Total. Add lines 11a-11d		0			
	12	Total revenue. See instructions		7,028,925.	882,746.		395,066

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Part IX Statement of Functional Expenses

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

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

	Check if Schedule O contains a response or note to any line in this Part IX						
	not include amounts reported on lines 6b, 7b, 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 domestic organizations						
	and domestic governments. See Part IV, line 21	0					
2	Grants and other assistance to domestic						
	individuals. See Part IV, line 22	0					
3	Grants and other assistance to foreign						
	organizations, foreign governments, and foreign						
	individuals. See Part IV, lines 15 and 16	0					
4	Benefits paid to or for members	0					
5	Compensation of current officers, directors,						
	trustees, and key employees	224,291.	161,713.	38,962.	23,616.		
6	Compensation not included above, to disqualified						
	persons (as defined under section 4958(f)(1)) and						
	persons described in section 4958(c)(3)(B)	0					
7	Other salaries and wages	2,724,495.	2,061,605.	302,783.	360,107.		
8	Pension plan accruals and contributions (include						
•	section 401(k) and 403(b) employer contributions)	11,109.	11,109.				
9	Other employee benefits	311,552.	256,543.	16,718.	38,291.		
10	Payroll taxes	299,359.	216,304.	46,038.	37,017.		
11	Fees for services (non-employees):	·	·		<u> </u>		
	Management	0					
	Legal	0					
	Accounting	38,500.		38,500.			
	Lobbying	0					
	Professional fundraising services. See Part IV, line 17	0					
	Investment management fees	0					
	Other. (If line 11g amount exceeds 10% of line 25, column						
	(A) amount, list line 11g expenses on Schedule O.) ATCH 4	1,550,983.	1,423,204.	53,220.	74,559.		
12	Advertising and promotion	29,600.	27,912.	728.	960.		
13	Office expenses	454,497.	314,767.	10,486.	129,244.		
14	Information technology	0					
15	Royalties	0					
16	Occupancy	259,155.	243,274.	9,236.	6,645.		
17	Travel	116,677.	102,139.	4,964.	9,574.		
18	Payments of travel or entertainment expenses						
	for any federal, state, or local public officials	0					
19	Conferences, conventions, and meetings	0					
20	Interest	0					
21	Payments to affiliates	0					
22	Depreciation, depletion, and amortization	224,996.	181,785.	12,963.	30,248.		
23	Insurance	111,071.	89,587.	15,740.	5,744.		
24							
	above (List miscellaneous expenses in line 24e. If						
	line 24e amount exceeds 10% of line 25, column						
	(A) amount, list line 24e expenses on Schedule O.)						
а	PROGRAM EXPENSES	301,009.	280,994.	3,959.	16,056.		
b	BAD DEBT EXPENSE	10,000.	10,000.				
c	WORLD SERIES OF BIRDING	28,542.	19,813.	7,332.	1,397.		
d							
е	All other expenses						
25	Total functional expenses. Add lines 1 through 24e	6,695,836.	5,400,749.	561,629.	733,458.		
26	Joint costs. Complete this line only if the						
	organization reported in column (B) joint costs from a combined educational campaign and						
	fundraising solicitation. Check here if						
	following SOP 98-2 (ASC 958-720)	0					
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Form **990** (2014)

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NEW JERSEY AUDUBON SOCIETY

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Balance Sheet Part X Beginning of year End of year Cash - non-interest-bearing 185,474. 214,655. 1 300,375. 309,456. 2 Savings and temporary cash investments 2 Pledges and grants receivable, net 3 204,035. 3 669,935. 4 Accounts receivable, net 304,805. 4 568,812. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L Loans and other receivables from other disqualified persons (as defined under section O 5 0 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L 6 n 0 23,224. 19,163. 7 Notes and loans receivable, net ATCH 5 7 Inventories for sale or use 546,703. 521,942. 8 Prepaid expenses and deferred charges ATCH 6 . . . 52,698. 62,653. 9 10a Land, buildings, and equipment: cost or 27,467,005. 10a other basis. Complete Part VI of Schedule D 5,544,185. b Less: accumulated depreciation 10b 22,172,875. **10c** 21,922,820. 3,379,532. 3,167,466. Investments - publicly traded securities ATCH 7 11 11 Investments - other securities. See Part IV, line 11 12 118,492. 12 112,000. Investments - program-related. See Part IV, line 11 0 13 Λ 13 0 14 14 Intangible assets Other assets. See Part IV, line 11 760,689. 426,550. 15 15 27,991,032. 28,053,322. 16 16 Total assets. Add lines 1 through 15 (must equal line 34) Accounts payable and accrued expenses 304,735. 17 233,769. 17 18 Grants payable _______ O 18 0 19 Deferred revenue ATCH 8 368,466. 19 199,017. 20 0 20 Tax-exempt bond liabilities 0 Escrow or custodial account liability. Complete Part IV of Schedule D 0 0 21 21 Liabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 0 0 22 Secured mortgages and notes payable to unrelated third parties 0 23 0 23 Unsecured notes and loans payable to unrelated third parties 0 24 0 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 0 25 0 of Schedule D Total liabilities. Add lines 17 through 25....... 602,235. 503,752. 26 26 Organizations that follow SFAS 117 (ASC 958), check here 🕨 🐰 and **Fund Balances** complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 6,409,011. 27 6,801,153. Temporarily restricted net assets 28 1,658,514. 28 1,339,704. 29 19,383,562. 19,346,423. 29 Organizations that do not follow SFAS 117 (ASC 958), check here ō complete lines 30 through 34. Capital stock or trust principal, or current funds Assets 30 30 Paid-in or capital surplus, or land, building, or equipment fund 31 31 Retained earnings, endowment, accumulated income, or other funds 32 32 Š 33 Total net assets or fund balances 27,451,087. 27,487,280. 33

27,991,032. Form **990** (2014)

34

Total liabilities and net assets/fund balances...._....

28,053,322.

34

Form 99	90 (2014)				Pa	ge 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			28,9	
2	Total expenses (must equal Part IX, column (A), line 25)	2		6,6	95,8	36.
3	Revenue less expenses. Subtract line 2 from line 1	3			089.	
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		27,4	51,0	87.
5	Net unrealized gains (losses) on investments	5		-2	59,7	757.
6	Donated services and use of facilities	6				0
7	Investment expenses	7				0
8	Prior period adjustments	8				0
9	Other changes in net assets or fund balances (explain in Schedule O)	9		_	37,1	39.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line					
	33, column (B))	10		27,4	87,2	280.
Part	XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					
					Yes	No
1	Accounting method used to prepare the Form 990: CashX Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," e	xplain	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 con	npiled	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	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audi	ted oi	n a			
	separate basis, consolidated basis, or both:					
	Separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for or	oversi	ght			
	of the audit, review, or compilation of its financial statements and selection of an independent acc	ounta	nt?	2c	X	
	If the organization changed either its oversight process or selection process during the tax year, e					
	Schedule O.	-				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as se	t forth	in in			
	the Single Audit Act and OMB Circular A-133?			3a	X	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not und	ergo	the			
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such au			3h	X	

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SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

Attach to Form 990 or Form 990-EZ.

Department of the Treasury Internal Revenue Service Name of the organization

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

OMB No. 1545-0047

Inspection

Employer identification number

NEV	J J	ERSEY AUDUBON SOCIET	ГҮ				223	1539642
Pa	rt I	Reason for Public Cha	rity Status (All c	rganizations must o	complete	e this pa	art.) See instructions	
The	org	anization is not a private fou	ndation because it	is: (For lines 1 through	gh 11, ch	neck only	one box.)	
1		A church, convention of ch	urches, or associa	tion of churches desc	ribed in s	section 1	70(b)(1)(A)(i).	
2		A school described in secti	on 170(b)(1)(A)(ii)	. (Attach Schedule E.)				
3		A hospital or a cooperative	hospital service o	rganization described	in sectio	n 170(b)	(1)(A)(iii).	
4		A medical research organiz	zation operated in	conjunction with a hos	spital de	scribed in	n section 170(b)(1)(A)	(iii). Enter the
		hospital's name, city, and s	•	•	-			. ,
5		An organization operated		a college or universit	y owne	d or ope	erated by a governme	ntal unit described in
		section 170(b)(1)(A)(iv). (C		J	•	•	, ,	
6		A federal, state, or local go		rnmental unit describe	d in sect	tion 170(b)(1)(A)(v).	
7	Х	An organization that norm	_			-		om the general public
		described in section 170(b)	=	•		Ū		
8		A community trust describe			Part II.)			
9		An organization that norma					contributions, member	ership fees, and gross
		receipts from activities rel						•
		support from gross invest	-			-		
		acquired by the organizatio						,
10		An organization organized				-	•	
11		An organization organized	•	-	-			ry out the purposes of
		one or more publicly suppo	•	•	-			
		the box in lines 11a through	-			-		
а		Type I. A supporting orga					•	=
		the supported organization		•	-			
		organization. You must c				.,,		
b		Type II. A supporting org	-		nnection	n with its	supported organization	on(s), by having
		control or management of						
		organization(s). You must		=		.с ро.сс.	io mar outino, or man	ago ano cappontoa
С		Type III functionally inte	-		ated in c	onnectio	n with, and functional	ly integrated with.
_		its supported organization						.,g.a.ca,
d		Type III non-functionally		•				ted organization(s)
		that is not functionally into						= ::
		requirement (see instruct	-	-	-		· ·	
е		Check this box if the orga	•	-				I. Type III
		functionally integrated, or						., .,,,
f	En	iter the number of supported			, , , , ,			
g		ovide the following information	•	orted organization(s).				
		lame of supported organization			(iv) Is the	organization	(v) Amount of monetary	(vi) Amount of
				(described on lines 1-9 above or IRC section	listed in yo	ur governing ment?		other support (see instructions)
				(see instructions))	docu	mentr	instructions)	instructions)
					Yes	No		
/A\								
(A)								
(B)								
(D)								
(C)								
(C)								
(D)								
(5)								
(E)								
\ - /								
T - 4							I	1

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

Schedule A (Form 990 or 990-EZ) 2014 Page **2**

Part II

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

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

800	tion A. Public Support	is to quality ui	ider the tests i	isted below, p	nease comple	te i ait iii.)	
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(6) 2012	(a) 2013	(e) 2014	(I) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,636,969.	3,171,600.	4,924,858.	5,242,375.	5,751,113.	23,726,915.
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						0
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0
4	Total. Add lines 1 through 3	4,636,969.	3,171,600.	4,924,858.	5,242,375.	5,751,113.	23,726,915.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount						
6	shown on line 11, column (f). Public support. Subtract line 5 from line 4.						1,135,133.
Sec	tion B. Total Support						22,591,782.
	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
7	Amounts from line 4	4,636,969.	3,171,600.	4,924,858.	5,242,375.	5,751,113.	23,726,915.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	247,099.	182,972.	232,512.	91,036.	91,432.	845,051.
9	Net income from unrelated business activities, whether or not the business is regularly carried on						0
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0
11	Total support. Add lines 7 through 10						24,571,966.
12	Gross receipts from related activities, etc. (s	see instructions) .				12	8,054,213.
13	First five years. If the Form 990 is f organization, check this box and stop here						
	tion C. Computation of Public Sup						01 04 04
14	Public support percentage for 2014 (li		-			14	91.94%
15	Public support percentage from 2013					15	
16a	331/3% support test - 2014. If the c	•					
	this box and stop here. The organizati	•		-			• • —
b	331/3% support test - 2013. If the concept this box and stop here. The org	-					
172	10%-facts-and-circumstances test - 2	•					
114	10% or more, and if the organization						
	Part VI how the organization meets to					=	-
	organization			•	•		▶
b	10%-facts-and-circumstances test - 2						and line
J	15 is 10% or more, and if the organization	`	•		•		
	Explain in Part VI how the organizati						-
	supported organization				•	•	
18	Private foundation. If the organization						
	instructions						▶ □

Schedule A (Form 990 or 990-EZ) 2014

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

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

Sec	tion A. Public Support				<u>'</u>	,	
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")						
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an						
	unrelated trade or business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
	to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to the						
	organization without charge						
6	Total. Add lines 1 through 5						
	Amounts included on lines 1, 2, and 3						
	received from disqualified persons						
b	Amounts included on lines 2 and 3						
	received from other than disqualified						
	persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support (Subtract line 7c from						
	line 6.)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) 2014	(f) Total
9	Amounts from line 6						
10 a	Gross income from interest, dividends,						
	payments received on securities loans, rents, royalties and income from similar						
	sources						
b	Unrelated business taxable income (less						
	section 511 taxes) from businesses						
	acquired after June 30, 1975						
С	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on					<u> </u>	
12	Other income. Do not include gain or						
	loss from the sale of capital assets						
	(Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)						
14	First five years. If the Form 990 is for	the organization	n's first, second,	third, fourth, or	fifth tax year a	as a section 501(c)(3)
	organization, check this box and stop here	<u></u>	<u></u> .	<u> </u>	<u></u> .		▶ 🔲
Sec	tion C. Computation of Public Sup						
15	Public support percentage for 2014 (line 8,	column (f) divide	ed by line 13, colu	mn (f))		15	%
16	Public support percentage from 2013 Sche	dule A, Part III, lir	ne 15			16	%
Sec	tion D. Computation of Investmer	t Income Per	centage				
17	Investment income percentage for 2014 (lin					17	%
18	Investment income percentage from 2013	Schedule A, Part	III, line 17			18	%
19 a	331/3% support tests - 2014. If the org					e than 331/3 %, a	and line
	17 is not more than 331/3%, check this	s box and sto	here. The org	anization qualifies	as a publicly	supported organi	zation 🕨 🗌
b	331/3% support tests - 2013. If the orga	nization did not	check a box on	line 14 or line 19	a, and line 16 is	s more than 331/3	3 %, and
	line 18 is not more than 331/3 %, check						
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	, check this bo	ox and see instr	uctions >

JSA 4E1221 2.000 Schedule A (Form 990 or 990-EZ) 2014 Page 4

Part IV **Supporting Organizations**

(Complete only if you checked a box on line 11 of Part I. If you checked 11a of Part I, complete Sections A and B. If you checked 11b of Part I, complete Sections A and C. If you checked 11c of Part I, complete Sections A, D, and E. If you checked 11d of Part I, complete Sections A and D, and complete Part V.)

Secti	on A. All Supporting Organizations		Vaa	NI.
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by		Yes	NO
2	class or purpose, describe the designation. If historic and continuing relationship, explain. Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control? Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations; (b) individuals that are part of the charitable class benefited by one or more of its supported organizations; or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.	9с		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer (b) below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to			

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determine whether the organization had excess business holdings.)

Schedule A (Form 990 or 990-EZ) 2014

ocneau	ie A (Form 990 or 990-EZ) 2014		- 1	Jage ⊃
Part	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
	below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
С	A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.	11c		
Secti	on B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to			
•	regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the			
	tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or			
	controlled the organization's activities. If the organization had more than one supported organization,			
	describe how the powers to appoint and/or remove directors or trustees were allocated among the supported			
	organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
_				
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part			
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Socti	on C. Type II Supporting Organizations			
Jecu	on c. Type it Supporting Organizations		Yes	No
_			163	NO
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
		1		
Secti	on D. All Type III Supporting Organizations			
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the		Yes	No
•	organization's tax year, (1) a written notice describing the type and amount of support provided during the prior			
	tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of			
	the organization's governing documents in effect on the date of notification, to the extent not previously			
	provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described in (2), did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Secti	on E. Type III Functionally-Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see ins	structi	ons):	
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instruc	ctions).		
		,	Yes	No
2	Activities Test. Answer (a) and (b) below.			
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
		Za		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more			
	of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the			
	reasons for the organization's position that its supported organization(s) would have engaged in these			
	activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer (a) and (b) below.			
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? Provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each			
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		

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Schedule A (Form 990 or 990-EZ) 2014 Page 6

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	nizations	3	29.7
1 Check here if the organization satisfied the Integral Part Test as a qualifying			structions. All
other Type III non-functionally integrated supporting organizations must cor	nplete Se	ections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year
		(7) Their real	(optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other			
factors (explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d	3		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by .035	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2 Enter 85% of line 1	2		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4 Enter greater of line 2 or line 3	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		
7 Check here if the current year is the organization's first as a non-functional	y-integra	ted Type III supporting	organization (see
instructions).	-		•

Page 7 Schedule A (Form 990 or 990-EZ) 2014

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)						
Secti	on D - Distributions			Current Year		
1	Amounts paid to supported organizations to accomplish ex					
2	Amounts paid to perform activity that directly furthers exer	npt purposes of supporte	ed			
	organizations, in excess of income from activity					
3	Administrative expenses paid to accomplish exempt purpo	ses of supported organiz	zations			
4	Amounts paid to acquire exempt-use assets					
5	Qualified set-aside amounts (prior IRS approval required)					
6	Other distributions (describe in Part VI). See instructions.					
7	Total annual distributions. Add lines 1 through 6.					
8	Distributions to attentive supported organizations to which	the organization is resp	onsive			
	(provide details in Part VI). See instructions.					
9	Distributable amount for 2014 from Section C, line 6					
10	Line 8 amount divided by Line 9 amount					
\$	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2014	(iii) Distributable Amount for 2014		
1	Distributable amount for 2014 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2014					
	(reasonable cause required-see instructions)					
3	Excess distributions carryover, if any, to 2014:					
а						
b						
С						
d						
е	From 2013					
f	Total of lines 3a through e					
g	Applied to underdistributions of prior years					
h	Applied to 2014 distributable amount					
i	Carryover from 2009 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.					
4	Distributions for 2014 from Section					
	D, line 7: \$					
	Applied to underdistributions of prior years					
	Applied to 2014 distributable amount					
С	Remainder. Subtract lines 4a and 4b from 4.					
5	Remaining underdistributions for years prior to 2014, if					
	any. Subtract lines 3g and 4a from line 2 (if amount					
	greater than zero, see instructions).					
6	Remaining underdistributions for 2014. Subtract lines 3h					
	and 4b from line 1 (if amount greater than zero, see					
_	instructions).					
7	Excess distributions carryover to 2015 . Add lines 3j and 4c.					
8	Breakdown of line 7:					
а						
b						
С						
d	Excess from 2013					
е	Excess from 2014					

Page 8 Schedule A (Form 990 or 990-EZ) 2014

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Schedule A (Form 990 or 990-EZ) 2014

221539642

PUBLIC DISCLOSURE COPY

Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

NEW JERSEY AUDUBON	SOCIETY 221539642					
Organization type (check o	nne):					
Filers of:	Section:					
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization					
	4947(a)(1) nonexempt charitable trust not treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					
General Rule For an organizati	on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 by or property) from any one contributor. Complete Parts I and II. See instructions for determining a II contributions.					
Special Rules						
regulations under 13, 16a, or 16b, \$5,000 or (2) 2%	on described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3 % support test of the r sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line and that received from any one contributor, during the year, total contributions of the greater of (1) of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
contributor, durin	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one ng the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, tional purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.					
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year						
=	nat is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, nust answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its					

Form 990-PF, Part I, line 2, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

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

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

Page 2

Name of organization NEW JERSEY AUDUBON SOCIETY

Employer identification number 221539642

(a)	(b)	(c) Total contributions	(d)
No.	Name, address, and ZIP + 4		Type of contribution
1		\$508,367.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
2_		\$1,126,218.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
3		\$125,790.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
4		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
5_		\$991,828.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Type of contribution
6		\$165,936.	Person Payroll Noncash (Complete Part II for noncash contributions)

Page 2

Name of organization NEW JERSEY AUDUBON SOCIETY

Employer identification number 221539642

Part I	Contributors (see instructions). Use duplicate copies of Pa	art I if additional space is nee	ded.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7 _		\$350,000.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8 _		\$522,042.	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Page 3 **Employer identification number**

Name of organization NEW JERSEY AUDUBON SOCIETY 221539642

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is nee	eded.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)	Page
Name of organization NEW JERSEY AUDUBON SOCIETY	Employer identification number
	221539642

Part III	Exclusively religious, charitable, etc.								
	that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of <i>exclusively</i> religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$Use duplicate copies of Part III if additional space is needed.								
(a) No.									
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
		(e) Transf	er of gift						
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee					
(a) No.									
from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
	(e) Transfer of gift								
	Transferee's name, address, ar	nd ZIP + 4	Relatio	nship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
		(a) Transf	or of gift						
	(e) Transfer of gift								
	Transferee's name, address, an	nd ZIP + 4	Relatio	onship of transferor to transferee					
(a) No. from	(b) Purpose of gift	(c) Use	of gift	(d) Description of how gift is held					
Part I	(b) Fullpose of glit	(0) 036	OI YIII	(a) Description of now girt is near					
		(e) Transf	er of gift						
	Transferee's name, address, at	nd ZIP + 4	Relatio	nship of transferor to transferee					

JSA 4E1255 1.000

PUBLIC DISCLOSURE COPY

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

	e organization answered "Yes," (see separate instructions), ther	to Form 990, Part IV, line 5 (Proxy າ	Tax) (see separate in	structions) or Form 990-E	EZ, Part V, line 35c (Prox
	Section 501(c)(4), (5), or (6) orga	anizations: Complete Part III.			
	e of organization			Employer ide	ntification number
	JERSEY AUDUBON SOCI			22153	
Pai	rt I-A Complete if the c	organization is exempt under	section 501(c) or	is a section 527 orga	nization.
1	Provide a description of the	organization's direct and indirect	political campaign ac	ctivities in Part IV.	
2	Political expenditures			▶ \$	
3	Volunteer hours				
Par	t I-B Complete if the c	organization is exempt under	section 501(c)(3).		
1	Enter the amount of any exc	cise tax incurred by the organization	n under section 495	5,,,,,, ▶\$	
2		cise tax incurred by organization m			
3		a section 4955 tax, did it file Form			
4a					
	If "Yes," describe in Part IV.				
Par	t I-C Complete if the c	organization is exempt under	section 501(c), ex	cept section 501(c)(3).
1	Enter the amount directly e	expended by the filing organization	n for section 527 ex	xempt function	
				•	
2		ng organization's funds contributed			
		es			
3		enditures. Add lines 1 and 2. Er			
4 5	Enter the names, addresses organization made payment the amount of political cont	e Form 1120-POL for this year? and employer identification numbers. For each organization listed, entributions received that were prond or a political action committee (per (EIN) of all section ter the amount paid optly and directly de	on 527 political organization from the filing organization livered to a separate po	ations to which the filing cation's funds. Also ente plitical organization, suc
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0
(1)					
(2)					
			1		
(3)					
(4)					
(5)			-		
(6)					

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

Page 2

RSEY AUDUBON SOCIETY 221539642					
	RSEY	AUDUBON	SOCIETY	221	.539642

P	art II-A	Complete if the org	anization is exen	npt under sectior	501(c)(3) and f	iled Form 5768 (elec	ction under		
A	Check ▶ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).								
В	Check ▶	if the filing orga	nization checked l	oox A and "limited	control" provisio	ns apply.			
			on Lobbying Expend			(a) Filing	(b) Affiliated		
		(The term "expendit	ures" means amour	nts paid or incurred.)	organization's totals	group totals		
1 a	a Total lob	bying expenditures to in	nfluence public opini	on (grass roots lobb	ying)	21,948.			
ŀ	o Total lob	bying expenditures to influence a legislative body (direct lobbying)				20,350.			
(Total lob	bying expenditures (ad	d lines 1a and 1b)			42,298.			
(d Other ex	empt purpose expendit		5,920,080.					
	e Total exempt purpose expenditures (add lines 1c and 1d)					5,962,378.			
f	f Lobbying nontaxable amount. Enter the amount from the following table in both								
	columns.					448,119.			
		ount on line 1e, column (a	, , , , , , , , , , , , , , , , , , ,	•	s:				
	Not over			amount on line 1e.					
		0,000 but not over \$1,000		us 15% of the excess					
		000,000 but not over \$1,5		us 10% of the excess					
		500,000 but not over \$17,		us 5% of the excess of	ver \$1,500,000.				
	Over \$17		\$1,000,000						
		ots nontaxable amount				112,030.			
ŀ		line 1g from line 1a. If				0	0		
i		line 1f from line 1c. If z				0	0		
j		is an amount other th			-				
	reporting	g section 4911 tax for t					Yes No		
				aging Period Unde					
	(S	ome organizations tha					ns below.		
			See the separat	te instructions for I	ines 2a through 2	f.)			
_			Lobbying Exper	nditures During 4-Ye	ear Averaging Peri	od			
_	Colorati	on veer (or fined veer	7 7 1						
		ar year (or fiscal year peginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
		nontaxable amount	430,565.	457,965.	383,422	448,119.	1,720,071.		
ŀ	b Lobbying	ceiling amount							

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) Total		
2a Lobbying nontaxable amount	430,565.	457,965.	383,422.	448,119.	1,720,071.		
b Lobbying ceiling amount (150% of line 2a, column (e))					2,580,107.		
c Total lobbying expenditures	29,602.	27,804.	45,057.	42,298.	144,761.		
d Grassroots nontaxable amount	107,641.	114,491.	95,856.	112,030.	430,018.		
e Grassroots ceiling amount (150% of line 2d, column (e))					645,027.		
f Grassroots lobbying expenditures	11,570.	6,991.	8,847.	21,948.	49,356.		

Sche	dule C (Form 990 or 990-EZ) 2014					Р	age 3
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	T file	d For	m 576	8		
Eor	each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed	(a	a)	(b)			
	cription of the lobbying activity.	Yes	No		Amoui	nt	
a b c d e f g h i j 2a b	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? Total. Add lines 1c through 1i Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? If "Yes," enter the amount of any tax incurred under section 4912	Yes	No		Amoui	nt	
С	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?						
Pa	rt III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5)	, or s	section			
	501(c)(6).					. 1	
	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carry over lobbying and political expenditures from the prior year? Tomplete if the organization is exempt under section 501(c)(4), section 501 (c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," answered "Yes."	(c)(5) OR (l	, or s	section	1 2 3	yes , is	No
1	Dues, assessments and similar amounts from members			1			
Prov	Section 162(e) nondeductible lobbying and political expenditures (do not include amount political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for and political expenditure next year? Taxable amount of lobbying and political expenditures (see instructions) Total Aggregate amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible for any additional information and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible location and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Taxable amount of lobbying and political expenditures (see instructions) Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) due If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion excess does the organization agree to carryover to the reasonable estimate of nondeductible location and political expenditures (see instructions)	es of th	ne ng	2a 2b 2c 3 4 5	I-A, line	es 1	and

Schedule C (Form 990 or 990-EZ) 2014

Page 4

Part IV Supplemental Information (continued)

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SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

► Attach to Form 990.

Open to Public

OMB No. 1545-0047

▶ Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Inspection Internal Revenue Service Name of the organization Employer identification number NEW JERSEY AUDUBON SOCIETY 221539642 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 5 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 used 6 only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose Yes No 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 land for public use (e.g., recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Х Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation 2 Held at the End of the Tax Year easement on the last day of the tax year. 2. 2a 54.00 2b 2c Number of conservation easements on a certified historic structure included in (a) Number of conservation easements included in (c) acquired after 8/17/06, and not on a 2d historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ ______ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 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: 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: Revenue included in Form 990, Part VIII, line 1 **▶** \$ _

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2014

▶ \$

Sche	dule D (Form 990) 2014								F	Page 2
Par	t III Organizations Maintainii	ng Collections of	Art, Hist	orical T	reasures,	or Oth	er Similar Ass	ets (co	ntinue	∋d)
3 a	Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply): Public exhibition d Loan or exchange programs									
b	Scholarly research	e Other								
С	Preservation for future gene	rations		-						
4	Provide a description of the organ		and expla	in how t	hev further	the ord	anization's exem	nt purpo	se in	Part
-	XIII.		aa 0,4		,		,aa	.р. рр		
5	During the year, did the organization	on colicit or receive o	lonations of	fort bioto	orical trace	roc or a	thar cimilar			
J								□ vaa		7 N.
_	assets to be sold to raise funds rath							Yes		No
Pal	t IV Escrow and Custodial Ar or reported an amount or			e organi	ization ans	swerea	res to Form 9	90, Part	IV, III	ne 9,
1 2	Is the organization an agent, truste	ae custodian or othe	ar intermed	iary for c	ontributions	or other	assets not			
ıa				-				Yes		No
	included on Form 990, Part X?							res	•] NO
b	If "Yes," explain the arrangement i	n Part XIII and comp	piete the foil	lowing tac	oie:	1				
							Amount			
С	Beginning balance									
d	Additions during the year				1d					
е	Distributions during the year				1e					
f	Ending balance									
2a						ustodial	account liability?	Yes	3	No
b	If "Yes," explain the arrangement i									1
Par										
ı aı	Endowment i unus: com	(a) Current year	(b) Prior		(c) Two year		(d) Three years back		ır vears	hack
1a	Beginning of year balance	709,880.		2,128.		,991.	499,759			622.
_		709,880.					499,139	. 4,	914,	022.
b	Contributions		۷۶	9,708.	159	,185.				
С	Net investment earnings, gains,									
	and losses	-12,359.	82	2,976.	28	,782.	46,377	•	329,	878.
	Grants or scholarships									
е	Other expenditures for facilities									
	and programs	25,431.	74	4,932.	23	,830.	38,145		264,	026.
f	Administrative expenses							2,	538,	715.
g	End of year balance	672,090.	709	9,880.	672	,128.	507,991		499	759.
2	Provide the estimated percentage	of the current year e								
a	Board designated or quasi-endown			(00:u:::: (a))	riola ao.				
b	Permanent endowment ▶ 98.0									
C	Temporarily restricted endowment									
C	. ,		000/							
_	The percentages in lines 2a, 2b, a	•								
3a	Are there endowment funds not in	the possession of the	ie organiza	tion that	are neid an	ia aamin	istered for the			
	organization by:								Yes	No
	(i) unrelated organizations							3a(i)		X
	(ii) related organizations							3a(ii)		X
b	If "Yes" to 3a(ii), are the related or	ganizations listed as	required on	Schedule	R?			3b		
4	Describe in Part XIII the intended u	uses of the organiza	tion's endov	wment fur	nds.					
Par	t VI Land, Buildings, and Equ	ipment.								
	Complete if the organiza									
	Description of property	(a) Cost or (invest	other basis iment)		or other basis ther)		umulated eciation	(d) Book v	alue	
1a	Land	,	,	,	60,929.			18,2	260,9	29.
b	Buildings				10,701.	3.8	60,150.		50,5	
C	Leasehold improvements			., 1	,	5,5	, = 3 3 4	5,5	/ -	
d	Equipment			1 7	95,375.	1 6	84,035.	1	11,3	210
e	0.1			 /	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1,0	UI,UJJ.		, <u></u>	1 0.
	<u> </u>		• 000 Death	V 001	· /D\ /: 41	2/01 1		01 0		200
ıota	II. Add lines 1a through 1e. (Column	ı (a) must equal Forn	ı 990, Part 1	л, column	ו (ש), Ilne 10	J(C).)	🏲	ZI,9	22,8	5∠U.

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NEW JERSEY AUDUBON SOCIETY

Schedule D (Form 990) 2014 Page 3 **Investments - Other Securities.** Part VII Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12. (a) Description of security or category (b) Book value (c) Method of valuation: (including name of security) Cost or end-of-year market value (1) Financial derivatives (2) Closely-held equity interests (3) Other_ (B) (C) (D) (E) (F) (G) (H) Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ Investments - Program Related. Part VIII Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13. (b) Book value (a) Description of investment (c) Method of valuation: Cost or end-of-year market value (1)(2)(3)(4)(5)(6)(7)(8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15. (a) Description (b) Book value (1)(2)(3)(4)(5)(6)(7)(8)(9)Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) Part X Other Liabilities. Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25. 1. (a) Description of liability (b) Book value (1) Federal income taxes (2)(3)(4)(5)(6)(7)(8)Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)

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

JSA 4E1270 1.000

Schedu	e D (Form 990) 2014		Page 4
Part	Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	١.	
1	Total revenue, gains, and other support per audited financial statements	1	6,797,547.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	•	
а	Net unrealized gains (losses) on investments 2a -259,757.		
b	Donated services and use of facilities 2b		
С	Recoveries of prior year grants 2c		
d	Other (Describe in Part XIII.) 2d 11,318.		
е	Add lines 2a through 2d	2e	-248,439.
3	Subtract line 2e from line 1	3	7,045,986.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Pagerika in Part VIII)		
b	Other (Describe in Part XIII.) Add lines 4a and 4b -17,061.	4.5	17 061
с 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	4c 5	-17,061. 7,028,925.
Part		_	7,020,025.
ı aıt	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.	• • • •	
1	Total expenses and losses per audited financial statements	1	6,761,354.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities 2a		
b	Prior year adjustments 2b		
С	Other losses 2c		
d	Other (Describe in Part XIII.) 2d 11,318.		
е	Add lines 2a through 2d	2e	11,318.
3	Subtract line 2e from line 1	3	6,750,036.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b		
b	Other (Describe in Part XIII.) Add lines 45 and 45	4.	F4 200
с 5	Add lines 4a and 4b Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	4c 5	-54,200. 6,695,836.
Part		3	0,000,000.
	e the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Pa	rt V. li	ne 4: Part X. line
2; Par	XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional inform	nation	
SEE	PAGE 5		
			_

Schedule D (Form 990) 2014

Page 5

Part XIII Supplemental Information (continued)

SCHEDULE D, PART II, LINE 5

CONSERVATION EASEMENT MONITORING PROTOCOL IS INTENDED TO AID IN THE CONSERVATION EASEMENT MONITORING PROCESS FOR NEW JERSEY AUDUBON SOCIETY. CONSERVATION EASEMENTS ARE DEFINED AS A VOLUNTARY AGREEMENT BETWEEN NJA AND A LANDOWNER THAT LIMITS THE TYPE OR AMOUNT OF DEVELOPMENT ON THEIR PROPERTY WHILE AT THE SAME TIME ALLOWING THE LANDOWNER TO MAINTAIN PRIVATE OWNERSHIP OF THE LAND. NJA ACCEPTS THE EASEMENT WITH UNDERSTANDING THAT IT MUST ENFORCE THE TERMS OF THE EASEMENT IN PERPETUITY. AFTER THE EASEMENT IS SIGNED, IT IS RECORDED WITH THE COUNTY REGISTER OF DEEDS AND APPLIES TO ALL FUTURE OWNERS OF THE LAND. CONSERVATION EASEMENT MONITORING PROTOCOL INVOLVES A SITE VISIT (MONITORING) AND FOLLOW-UP REPORT. SITE VISITS ARE PERFORMED ANNUALLY BY A NJA REPRESENTATIVE. THE LANDOWNER IS CONTACTED PRIOR TO THE SITE VISIT AND IS INVITED TO PARTICIPATE (HOWEVER PARTICIPATION IS NOT MANDATORY). THE DATE OF EASEMENT MONITORING MAY VARY ANNUALLY (I.E. SEASONALLY) TO MAXIMIZE OPPORTUNITY TO OBSERVE A WIDER VARIETY OF PLANTS AND ANIMALS MAKING USE OF THE EASEMENT. THE EASEMENT MONITORING REPORT IS COMPLETED DURING THE SITE VISIT AND PLACED IN THE PROPERTY FILE. PHOTOS ARE TAKEN AT EACH SITE VISIT AS PART OF THE MONITORING REPORT. A FOLLOW-UP LETTER IS SENT TO THE LANDOWNER HIGHLIGHTING THE RESULTS OF THE SITE VISIT.

SCHEDULE D, PART II, LINE 9

EXPENSES ASSOCIATED WITH ACQUIRING AND MAINTAINING THE EASEMENTS ARE EXPENSED.

Schedule D (Form 990) 2014

Part XIII Supplemental Information (continued)

SCHEDULE D, PART X, LINE 2

NEW JERSEY AUDUBON SOCIETY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE. ACCORDINGLY, THE FINANCIAL STATEMENTS DO NOT REFLECT A PROVISION FOR FEDERAL INCOME TAXES. THERE WERE NO UNCERTAIN TAX POSITIONS AT AUGUST 31, 2015 AND 2014. THE SOCIETY DID NOT HAVE ANY INCOME TAX RELATED PENALTIES OR INTEREST FOR THE YEARS IN QUESTION.

SCHEDULE D, PART XI AND XII, 2D

IN-KIND CONTRIBUTIONS OF \$11,318

SCHEDULE D, PART XI, 4B

A CHANGE IN VALUE OF CRT OF \$37,139 LESS A LOSS ON DISPOSAL OF ASSETS OF \$54,200.

SCHEDULE D, PART XII, LINE 4B

LOSS ON DISPOSAL OF ASSETS: -\$54,200.

SCHEDULE F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

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

OMB No. 1545-0047 2014 **Open to Public**

Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** NEW JERSEY AUDUBON SOCIETY 221539642 General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Part I Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (d) Activities conducted in (b) Number of (c) Number of (e) If activity listed in (d) is (f) Total offices in the émployees, region (by type) (e.g., a program service, expenditures for describe specific type of fundraising, program services, region agents, and and investments investments, grants to recipients independent service(s) in region in region contractors in region located in the region) (1) SOUTH AMERICA PROGRAM SERVICES SHOREBIRD RESEARCH 147,062. (2) CENTRAL AMERICA/CARIBBEAN PROGRAM SERVICES ECO-TOURS 17,047. (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13)(14)(15)(16)(17)3a 164,109.

For Paperwork Reduction Act Notice, see the Instructions for Form 990. JSA

from continuation sheets to Part I Totals (add lines 3a and 3b)

Schedule F (Form 990) 2014

Total

164,109

NEW JERSEY AUDUBON SOCIETY 221539642

Schedule F (Form 990) 2014

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
1)									
2)									
3)									
l)									
5)									
5)									
7)									
3)									
))									
0)									
1)									
12)									
∣3)									
14)									
15)									
16)									
2 En		nt organizations listed above antee or counsel has provide	d a section 501(c)(3) equivalency letter	r		>		

Schedule F (Form 990) 2014

Page **3**

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16. Part III Part III can be duplicated if additional space is needed. (h) Method of valuation (e) Manner of (f) Amount of (g) Description (a) Type of grant or assistance (b) Region (c) Number of (d) Amount of of non-cash cash non-cash disbursement recipients cash grant assistance assistance (book, FMV. appraisal, other) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)(11) (12)(13)(14)

Schedule F (Form 990) 2014

(15)

(16)

(17)

(18)

NEW JERSEY AUDUBON SOCIETY

Schedule F (Form 990) 2014 Page **4**

Part	V Foreign Forms			
1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No	
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; do not file with Form 990)	Yes	X No	
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No	
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No	
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No	
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)	Yes	X No	

Schedule F (Form 990) 2014

NEW JERSEY AUDUBON SOCIETY

Schedule F (Form 990) 2014 Page 5

Part V **Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

Schedule F (Form 990) 2014

221539642

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

NEW JERSEY AUDUBON SOCIETY

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

Employer identification number

221539642

b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?. 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?. 32 b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	Par	Types of Property							
2 Art - Historical treasures			Check if	Number of contributions or	Noncash contribution amounts reported on		deter		
2 Art - Historical treasures	1	Art - Works of art							
3 An - Fractional interests .	2								
A Books and publications	3								
goods,	4	Books and publications							
6 Cars and other vehicles	5	Clothing and household							
6 Cars and other vehicles		goods							
8 Intellectual property	6								
8 Intellectual property	7	Boats and planes							
9 Securities - Publicly traded	8								
11 Securities - Partnership, LLC, or trust interests. 12 Securities - Miscellaneous. 13 Qualified conservation contribution - Historic structures 14 Qualified conservation 15 Real estate - Residential . 16 Real estate - Commercial . 17 Real estate - Other . 18 Collectibles. 19 Food inventory. 20 Drugs and medical supplies . 21 Taxidermy . 22 Historical artifacts . 23 Scientific specimens . 24 Archeological artifacts . 25 Other ► (9		X	12.	118,943.	FMV			
or trust interests	10	Securities - Closely held stock							
12 Securities - Miscellaneous	11	Securities - Partnership, LLC,							
13 Qualified conservation contribution - Historic structures		or trust interests							
contribution - Historic structures 14 Qualified conservation contribution - Other	12	Securities - Miscellaneous							
structures 14 Qualified conservation contribution - Other	13	Qualified conservation							
14 Qualified conservation contribution - Other		contribution - Historic							
contribution - Other		structures							
15 Real estate - Residential	14	Qualified conservation							
16 Real estate - Commercial		contribution - Other							
17 Real estate - Other	15	Real estate - Residential							
18 Collectibles	16	Real estate - Commercial							
19 Food inventory	17	Real estate - Other							
Drugs and medical supplies	18	Collectibles							
Taxidermy	19	Food inventory							
Historical artifacts	20	Drugs and medical supplies							
23 Scientific specimens	21	Taxidermy							
Archeological artifacts	22	Historical artifacts							
25 Other ▶() 26 Other ▶() 27 Other ▶() 28 Other ▶() 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	23	Scientific specimens							
26 Other ►() 27 Other ►() 28 Other ►() 29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	24	Archeological artifacts							
Other ►() Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	25	Other ►()							
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	26								
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	27								
which the organization completed Form 8283, Part IV, Donee Acknowledgement		Other ►()							
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	29								
During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?		which the organization completed F	Form 8283,	Part IV, Donee Acknowledg	jement	29			
28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 X 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? 5 If "Yes," describe in Part II. 32 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,								Yes	No
to be used for exempt purposes for the entire holding period?	30a					_			
b If "Yes," describe the arrangement in Part II. 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?. 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?. 32 b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,									
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?				olding period?			30a		X
contributions?. 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?. 32b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	b								
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,	31	•	•	• •	•				
contributions?							31	Х	
 b If "Yes," describe in Part II. 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 	32a	_	-	_	•				
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked,							32a		X
deceribe in Dort II	33	_	amount in	column (c) for a type of pro	pperty for which column (a)	is checked,			
describe in Part II.		describe in Part II.							

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2014)

NEW JERSEY AUDUBON SOCIETY 221539642

Schedule M (Form 990) (2014) Page 2 Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Schedule M (Form 990) (2014) JSA

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No. 1545-0047

2014

Open to Public Inspection

Department of the Treasury Internal Revenue Service 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.

Name of the organization

NEW JERSEY AUDUBON SOCIETY

Employer identification number

221539642

FORM 990, PART VI, SECTION A, LINE 6
THE SOCIETY HAS AN ESTIMATED 20,000 MEMBERS.

FORM 990, PART VI, SECTION A, LINE 7A

THE SOCIETY HAS MEMBERS WHO MAY ELECT ONE OR MORE MEMBERS OF THE GOVERNING BODY.

FORM 990, PART VI, SECTION A, LINE 7B

THE DECISIONS OF THE GOVERNING BODY ARE SUBJECT TO APPROVAL BY MEMBERS OF

THE ORGANIZATION BY A TWO-THIRDS VOTE OF THE MEMBERS PRESENT AND VOTING

AT THE SOCIETY'S ANNUAL OR BUSINESS MEETING.

FORM 990, PART VI, SECTION B, LINE 11B

THE FORM 990 WAS PREPARED BY THE OUTSIDE AUDIT FIRM THAT HAS EXPERIENCE

IN THE PREPARATION OF THE FORM AND WAS REVIEWED AND APPROVED BY THE

EXECUTIVE AND FINANCE COMMMITTEES AND THEN PROVIDED TO THE FULL BOARD OF

DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 12C

EACH MEMBER OF THE BOARD OF DIRECTORS IS REQUIRED TO SIGN AN ANNUAL

DISCLOSURE REPORT REGARDING ANY CONFLICTS OF INTEREST AND RISKS OF FRAUD

WITHIN THE ORGANIZATION.

FORM 990, LINE VI, SECTION B, LINE 15

THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS REVIEWS AND APPROVES

THE COMPENSATION OF THE PRESIDENT & CEO OF THE SOCIETY ANNUALLY. KEY ELEMENTS OF THE PROCESS INCLUDE USE OF BENCHMARKING TO DETERMINE COMPARABLE COMPENSATION AND TO FACILITATE A PROCESS WHERE PERSONS WITH CONFLICT OF INTEREST WITH RESPECT TO THE COMPENSATION AGREEMENT ARE EXCLUDED FROM THE PROCESS.

FORM 990, PART VI, SECTION C, LINE 19

THE SOCIETY DOES NOT MAKE PUBLIC ITS BY-LAWS WHICH ARE ITS GOVERNING

DOCUMENTS. THE SOCIETY EVALUATES THE BY-LAWS ON A REGULAR BASIS AND

AMENDS THEM AS CIRCUMSTANCES CHANGE. WHEN AN AMENDMENT IS RECOMMENDED BY

THE BOARD OF DIRECTORS, NOTICE IS GIVEN TO THE MEMBERS THAT A PROPOSED

AMENDMENT WILL BE CONSIDERED AT THE ANNUAL OR BUSINESS MEETING OF THE

SOCIETY AND THE TEXT OF SUCH PROPOSED AMENDMENT WILL BE MADE AVAILABLE IN

ADVANCE OF THE MEETING UPON REQUEST.

THE AUDITED FINANCIAL STATEMENTS AND THE FORM 990 ARE MADE AVAILABLE ON THE ORGANIZATION'S WEBSITE.

FORM 990, PART III, LINE 4A, 4B, & 4C STEWARDSHIP

ONE OF THE MOST EXCITING PROJECTS IN RECENT NJ AUDUBON HISTORY IS THE QUAIL RESTORATION INITIATIVE. THIS AMBITIOUS ENDEAVOR TO RESTORE NORTHERN BOBWHITE TO NEW JERSEY BECAME REAL WHEN WE RELEASED 80 WILD NORTHERN BOBWHITE, CAPTURED AND TRANS- LOCATED FROM GEORGIA, ONTO THE PINE ISLAND CRANBERRY PROPERTY IN THE HEART OF THE PINELANDS. THE FIRST YEAR'S

RESULTS WERE IMPRESSIVE WITH 14 CONFIRMED NESTS AND 66 HATCHED CHICKS.

THIS WAS THE FIRST CONFIRMED NESTING AND HATCHING OF NORTHERN BOBWHITE IN

THE NJ PINELANDS SINCE THE 1980S! THE PROJECT HAS JUST BEGUN AS WE WILL

BE CONDUCTING TWO MORE RELEASES OVER THE COMING YEARS, AND TRACKING AND

DOCUMENTING THE QUAIL'S SURVIVAL AND HABITAT USE.

WE JOINED WITH MORE THAN FIFTY OTHER NON-PROFIT ORGANIZATIONS ON THE DELAWARE RIVER WATERSHED INITIATIVE, A BOLD ENDEAVOR SPEARHEADED BY THE WILLIAM PENN FOUNDATION TO PROTECT AND RESTORE WATER QUALITY ACROSS A 13,500 SQUARE MILE AREA. WE LEAD EFFORTS TO ENGAGE FARMERS AND LANDOWNERS IN THE IMPLEMENTATION OF BEST MANAGEMENT PRACTICES THAT SAFEGUARD WATERWAYS, REDUCE WATER USE, AND IMPROVE WILDLIFE HABITAT. WE ARE WORKING IN TWO DISTINCT REGIONS OF THE STATE, THE HIGHLANDS REGION AND THE AREA OVERLAPPING THE KIRKWOOD-COHANSEY AQUIFER (LARGELY SOUTHERN NJ). IN THE HIGHLANDS REGION WE HAVE SUPPORTED THE INSTALLATION OF COVER CROPS ON MORE THAN 400 ACRES OF FARMLAND, WORKED ON 23 ACRES OF WETLAND RESTORATION, 30 ACRES OF GRASSLAND RESTORATION, AND MORE THAN THREE MILES OF RIPARIAN RESTORATION. IN THE KIRKWOOD-COHANSEY REGION WE LAUNCHED A SMALL GRANTS PROGRAM TO FUND CONSERVATION PRACTICES AND HAVE FUNDED PROJECTS COVERING CLOSE TO 1,000 ACRES. THIS MEANS SUPPORTING THE USE OF COVER CROPS, IRRIGATION EFFICIENCY IMPROVEMENTS, INSTALLATION OF GRASSED WATERWAYS AND RIPARIAN BUFFERS.

WE ENTERED INTO A PARTNERSHIP WITH THE NEW JERSEY INVASIVE SPECIES STRIKE
TEAM TO RAISE AWARENESS ABOUT THE IMPACT INVASIVE SPECIES HAVE ON NATIVE

Employer identification number

221539642

SYSTEMS AND TO DIRECTLY ERADICATE INVASIVE SPECIES POPULATIONS THROUGHOUT THE STATE. CONSEQUENTLY, WE'VE ENGAGED NEW PARTNERS IN THE ERADICATION OF INVASIVE PLANTS AT HIGH PRIORITY FOREST SITES, HELD MORE THAN 10 OUTREACH EVENTS INVOLVING MORE THAN 800 INDIVIDUALS, TRAINED NUMEROUS PARTNERS AND PRIVATE LANDOWNERS IN INVASIVE SPECIES ERADIATION TECHNIQUES AND DIRECTLY ERADICATED OVER 230 INVASIVE PLANT POPULATIONS, MANY OF WHICH ARE NEWLY EMERGING SPECIES THAT POSE SIGNIFICANT RISK TO NATIVE PLANTS AND WILDLIFE.

OUR FOREST STEWARDSHIP AND RESTORATION WORK CONTINUES TO DIRECTLY CREATE, IMPROVE AND RESTORE HABITAT FOR NUMEROUS BIRDS AND OTHER WILDLIFE, WHILE ALSO IMPROVING FOREST HEALTH. ACROSS NEW JERSEY WE DEVELOPED OR IMPLEMENTED MORE THAN 20 FOREST STEWARDSHIP PLANS THAT COVER MORE THAN 20,000 ACRES. THE WORK HAS INVOLVED CREATING SMALL PATCHES OF HABITAT FOR GOLDEN-WINGED WARBLERS AND OTHER YOUNG FOREST SPECIES IN NORTHWESTERN NJ, CREATING HABITAT FOR RED-HEADED WOODPECKERS IN NORTHERN AND SOUTHERN NJ, RESTORING AREAS DAMAGED BY THE HEMLOCK WOOLY ADELGID AT THE JANET VAN GELDER WILDLIFE SANCTUARY, AND CREATING HABITAT, WHILE REDUCING WILDFIRE RISK, AT THE HOVNANIAN SANCTUARY IN OCEAN COUNTY.

POLICY & ADVOCACY

AT THE STATE LEVEL, THERE WERE A NUMBER OF SUCCESSFUL POLICY ACTIONS

DURING THE YEAR. ONE OF THE MOST SIGNIFICANT ACCOMPLISHMENTS WAS THE

ADVANCEMENT OF STATE LEGISLATION AND THE ULTIMATE PASSAGE OF A PUBLIC

221539642

Employer identification number

QUESTION ESTABLISHING A PERMANENT FUNDING SOURCE FOR THE PRESERVATION AND STEWARDSHIP OF OPEN SPACE AND PARKS. WE COORDINATED A ROBUST STATE-WIDE CONSERVATION FUNDING BALLOT MEASURE WHICH PASSED WITH 65% VOTER SUPPORT IN NOVEMBER 2014 AND WILL PROVIDE \$2 BILLION IN FUNDING OVER THE NEXT 20 YEARS FOR ACQUISITION OF OPEN SPACE AND STEWARDSHIP OF PRESERVED LANDS AND PARKS. THIS WILL PROVIDE SIGNIFICANT PROTECTION FOR VALUABLE HABITAT AS WELL AS PROTECTING WATER, AND CLEAN, SAFE PLACES FOR OUR CHILDREN TO PLAY. ADDITIONALLY, WE FOCUSED EFFORTS ON ENSURING HEALTHY SUSTAINABLE FORESTS BY ADVANCING FOREST STEWARDSHIP AND SUSTAINABLE HEALTHY FORESTS INITIATIVES INCLUDING THE PRESCRIBED BURNING ACT AND THE NJ HEALTHY FORESTS ACT. FINALLY, WITH A GOAL TO REDUCE INVASIVE SPECIES IN NJ (WHICH GREATLY DAMAGE OUR PUBLIC AND PRIVATE LANDS) AS WELL AS PROMOTE NATIVE SPECIES AND POLLINATORS, WE WORKED TO DEVELOP AND INTRODUCE LEGISLATION TO REDUCE OR PROHIBIT INVASIVE SPECIES, PROMOTE NATIVE SPECIES, PROTECT

AT THE FEDERAL LEVEL, WE WORKED IN COALITION WITH ORGANIZATIONS FROM FOUR OTHER STATES TO PARTNERS IN APPLYING FOR AND SECURING \$13.5 MILLION IN REGIONAL CONSERVATION PARTNERSHIP PROGRAM FUNDING FROM THE NATURAL RESOURCE CONSERVATION SERVICE FOR THE DELAWARE RIVER WATERSHED. WE ALSO WORKED TO ADVANCE THE DELAWARE RIVER BASIN CONSERVATION ACT TO ENCOURAGE COORDINATION, RAISE AWARENESS AND BRING MORE RESOURCES TO THIS VALUABLE WATERSHED. WE CONTINUED EFFORTS TO SUPPORT THE LAND AND WATER CONSERVATION FUND, FOUGHT AGAINST DAMAGING CLEAN WATER ACT RIDERS, SECURED CONTINUED FUNDING FOR NJ UNDER THE STATE AND TRIBAL WILDLIFE

Schedule O (Form 990 or 990-EZ) 2014

Name of the organization

NEW JERSEY AUDUBON SOCIETY

221539642

GRANT PROGRAM AND ADVOCATED FOR, SECURED AND CELEBRATED THE FEDERAL PROTECTION OF THE RED KNOT UNDER THE ENDANGERED SPECIES ACT.

NEW JERSEY AUDUBON DIRECTLY REACHES 18,759 CHILDREN AND 22,762 ADULTS

EDUCATION:

THROUGHOUT THE YEAR BY CONDUCTING 2,173 PROGRAMS. THESE PROGRAMS ARE CONDUCTED BY THE ORGANIZATION'S PROFESSIONAL STAFF AT SIX NATURE CENTERS, AS WELL AS TRAINED VOLUNTEERS. IN ADDITION, CLOSE TO 40,000 PEOPLE VISITED OUR CENTERS AND WALKED OUR TRAILS. DURING THE YEAR WE SAW SIGNIFICANT GROWTH IN OUR URBAN EDUCATION PROGRAMS IN JERSEY CITY, NEWARK, NEW BRUNSWICK, MORRISTOWN AND LINDEN BY WORKING WITH SCHOOLS, AFTERSCHOOL PROGRAMS AND OTHER YOUTH-SERVING ORGANIZATIONS. OUR TEAM ALSO GREW THE STATEWIDE YOUTH BIRDING PROGRAM TO ENCOURAGE YOUNG PEOPLE TO LEARN ABOUT CONSERVATION THROUGH BIRDS AND BIRD WATCHING. OUR CENTER-BASED PROGRAM SLATE IS DIVERSE AND TAILORED TO THE INDIVIDUAL SITE. PROGRAMS CONSISTED OF PRE-K INTRODUCTIONS TO NATURE THROUGH THE SEASONS TO COMMUNITY-PROGRAMMING THAT BUILD CONNECTIONS WITH INDIVIDUALS AND LOCAL GROUPS LIKE THE JERSEY CAPE MILITARY SPOUSES CLUB. WE MEET WITH SCOUT GROUPS AND ENGAGE SCOUTS IN STEWARDSHIP PROJECTS AT THE CENTERS. WE ENCOURAGE FAMILY GROUPS TO HELP MONITOR BLUEBIRD BOXES. ME HOLD PROGRAMS AND SALES TO ENCOURAGE THE USE OF NATIVE PLANTS IN INDIVIDUAL AND COMMUNITY GARDENS. DURING SUMMER 2015, OUR STATEWIDE TEAM CONDUCTED THREE WEEKLONG TEACHER SUMMER INSTITUTES TO PROVIDE K-12 TEACHERS WITH BACKGROUND IN ECOLOGY,

ENVIRONMENTAL SCIENCE, SUSTAINABILITY AND EDUCATIONAL PEDAGOGY THAT HELPS

MEET STATE AND FEDERAL LEARNING STANDARDS. STAFF PARTICIPATED IN

NUMEROUS ANNUAL EDUCATION CONVENTIONS AND CONFERENCES BY CONDUCTING

WORKSHOPS. WORKING CLOSELY WITH STATE AND NATIONAL PARTNERS, NEW JERSEY

AUDUBON CONTINUES TO WORK ON HIGH-PROFILE PROJECTS LOOKING AT COASTAL

COMMUNITY RESILIENCY AND HOW TO TEACH ABOUT THIS TO HIGH SCHOOL

STUDENTS.

OVER 27,000 PEOPLE VISITED THE NEW JERSEY AUDUBON MIGRATION WATCHES

DURING THE YEAR. THESE SITES PROVIDE PEOPLE WITH ACCESS TO WILDLIFE

MIGRATION PHENOMENA (HAWK MIGRATION, SONGBIRD MIGRATION, BUTTERFLY

MIGRATION) AND ALSO OPPORTUNITIES TO LEARN MORE ABOUT HOW THEY CAN HELP

THESE SPECIES.

WHILE MOST OF OUR PROGRAMS REVOLVE AROUND NEW JERSEY'S HABITATS, ANIMALS, PLANTS AND NATURAL PHENOMENA, NEW JERSEY AUDUBON IS WELL-REPRESENTED ON AN INTERNATIONAL LEVEL. NEW JERSEY AUDUBON'S CAPE MAY BIRD OBSERVATORY (CMBO) PARTICIPATED IN THE FIRST EVER INTERNATIONAL BIRD OBSERVATORY CONFERENCE IN FALSTERBO, SWEDEN. CMBO ALSO PARTICIPATED IN AN ENRAM (EUROPEAN NETWORK FOR THE RADAR SURVEILLANCE OF ANIMAL MOVEMENT) MEETING IN THE HULA VALLEY, ISRAEL, WHERE STAFF SHARED HOW US RADAR CAN BE USED TO VISUALIZE BIRD MIGRATION, QUANTIFY STOPOVER HABITAT OF MIGRATING BIRDS, AND CONNECT A BROAD AUDIENCE TO THE CONSERVATION NEEDS OF MIGRANTS. THE ECO-SCHOOLS USA IN NEW JERSEY PROGRAM, A PARTNERSHIP BETWEEN NEW JERSEY AUDUBON AND NATIONAL WILDLIFE FEDERATION WORKED COLLABORATIVELY WITH THE EPA TAIWAN TO CONNECT SCHOOLS IN NEW JERSEY WITH SCHOOLS IN TAIWAN WITH A COMMON GOAL OF BUILDING PARTNERSHIPS IN SCHOOL

Schedule O (Form 990 or 990-EZ) 2014

Name of the organization

NEW JERSEY AUDUBON SOCIETY

Employer identification number

221539642

SUSTAINABILITY ACTIONS.

RESEARCH

FUNDED BY A \$1.28 MILLION GRANT THROUGH THE NATIONAL FISH AND WILDLIFE FOUNDATION, NJ AUDUBON LED STONE HARBOR RESTORATION EFFORTS, IMPROVING CRITICAL HABITAT FOR ENDANGERED BEACH NESTING AND MIGRATORY SHOREBIRDS WHILE PROTECTING NEIGHBORING COMMUNITIES FROM STORM SURGES. AFTER MONTHS OF PLANNING, HUGE EARTH MOVERS REPLENISHED SAND ON ERODED BEACHES AT STONE HARBOR POINT TO RAISE THE NESTING GROUNDS FOR FEDERALLY THREATENED PIPING PLOVERS AND STATE ENDANGERED BLACK SKIMMERS AND LEAST TERNS-JUST IN TIME FOR SPRING MIGRATION AND BREEDING SEASON. WE CREATED 25 ACRES OF ELEVATED HABITAT THEREBY REDUCING THE POTENTIAL FOR FLOODING OF NESTS OF THE BEACH NESTING BIRDS, AND PROVIDING ROOSTING AREAS FOR MIGRATORY SHOREBIRDS. A RESILIENCY DUNE THAT PROVIDES STORM PROTECTION FOR THE RESIDENTS OF THE BOROUGH OF STONE HARBOR LIVING NEAR STONE HARBOR POINT THROUGH MONITORING WE CONTINUE TO ASSESS AND EVALUATE WAS ALSO CREATED. THE SUCCESS OF THIS PROJECT, INCLUDING THE RESPONSE OF BEACH-NESTING BIRDS AND MIGRATORY SHOREBIRDS TO THE HABITAT RESTORATION. WE ARE ALSO CONDUCTING BENTHIC INVERTEBRATE SURVEYS TO EVALUATE HOW OUR INTERTIDAL SAND HARVESTING APPROACH TO BEACH RESTORATION AFFECTED THESE INVERTEBRATE COMMUNITIES. FINALLY, WE IMPLEMENTED PREDATOR AND HUMAN-INDUCED DISTURBANCE CONTROL PROGRAMS, AND AN EDUCATION/OUTREACH PROGRAM AT THE PROJECT SITE.

Employer identification number

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WE CONTINUE THE INTENSIVE MIGRATION MONITORING OF SEMIPALMATED SANDPIPERS
THROUGH BANDING AT DELAWARE BAY AND IN THE WINTERING GROUNDS IN SOUTH
AMERICA, AND OUR WORK WITH PARTNERS IN SOUTH AMERICA TO REDUCE HARVEST OF
SHOREBIRDS. DELAWARE BAY IS A CRITICAL STOPOVER FOR SHOREBIRDS TO REST,
FEED AND FATTEN UP DURING NORTHBOUND MIGRATION TO THE ARCTIC BREEDING
GROUNDS. THOUSANDS OF BIRDS HAVE BEEN BANDED, MORE THAN 2000 IN 2015
ALONE. TO ADEQUATELY ADDRESS THE CONSERVATION NEEDS OF THESE SHOREBIRDS,
THE PROJECT HAS EXPANDED INTERNATIONALLY TO INCLUDE NOT ONLY THE DELAWARE
BAY, BUT ALSO WINTERING AND MIGRATION STAGING AREAS ALONG THE NORTHEAST
COAST OF SOUTH AMERICA, SPECIFICALLY FRENCH GUIANA, SURINAME AND
NORTHEASTERN BRAZIL. WE ARE ALSO WORKING WITH MANOMET CENTER FOR
CONSERVATION SCIENCE AND THE ARCTIC SHOREBIRD DEMOGRAPHIC NETWORK (ASDN)
TO BETTER UNDERSTAND LINKS BETWEEN BREEDING POPULATIONS IN THE ARCTIC AND
SUBARCTIC AND MIGRATION AND WINTERING POPULATIONS.

A NEW ERA OF TECHNOLOGY HAS BEEN ADDED TO THE NJ AUDUBON'S HARBOR HERONS FORAGING SURVEYS. FOR THE PAST SEVERAL YEARS, DEDICATED CITIZEN SCIENCE VOLUNTEERS HAVE SPENT HUNDREDS OF HOURS COLLECTING DATA ON HARBOR HERON FORAGING LOCATIONS IN NYC AND NJ. IN 2015 WE EMPLOYED EMERGING TRANSMITTER TECHNOLOGIES TO MONITOR AND TRACK POST BREEDING AND WINTER SITE USE BY GREAT EGRETS IN COLLABORATION WITH WATERBIRD SCIENTISTS AT LENOIR-RHYNE UNIVERSITY AND FRIENDS UNIVERSITY. IN JUNE 2015, TWO ADULT GREAT EGRETS WERE CAPTURED AT WOLF'S POND, STATEN ISLAND, AND FITTED WITH SOLAR POWERED GPS/GSM TRANSMITTERS. THE TWO BIRDS, CLARENCE AND EDWARD, WERE 'ADOPTED' BY THE CITIZEN SCIENTISTS AND LOCAL CLASSROOMS ON STATEN

Employer identification number

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ISLAND TEXT US INFORMATION ABOUT THEIR LOCATION 3 TIMES/DAY. THE PUBLIC CAN FOLLOW THEIR MOVEMENTS AND SEE THE DATA ON MOVEBANK.ORG. WE WATCHED THEM SPEND A LOT OF TIME ON STATEN ISLAND, JAMAICA BAY, AND DELAWARE BAY DURING THE POST BREEDING SEASON, AND IN NOVEMBER THEY BOTH MIGRATED CLOSE TO CHARLESTON, SOUTH CAROLINA, SEPARATELY BUT ENDING UP ONLY ABOUT 50 MILES FROM EACH OTHER.

THROUGH OUR COSTAL IMPOUNDMENT CLIMATE RESILIENCY WORK, A COLLABORATIVE PROJECT WITH SEVERAL PARTNERS, WE PRODUCED A GIS CATALOG OF 165 COASTAL IMPOUNDMENTS FROM VIRGINIA TO MAINE. THIS INCLUDES INFORMATION ABOUT OWNERSHIP, MANAGEMENT AND ECOLOGICAL RESOURCES AS WELL AS PRELIMINARY LIDAR-BASED VULNERABILITY ANALYSIS. WE DEFINED 'COASTAL IMPOUNDMENTS' AS IMPOUNDED (USUALLY DIKED) AREAS ADJACENT TO TIDAL WATERS, WITHIN WHICH WATER LEVELS ARE (OR HAVE BEEN) ACTIVELY MANAGED TO BENEFIT WILDLIFE. IMPOUNDMENTS HAVE BEEN AND CONTINUE TO BE OF GREAT IMPORTANCE FOR THE ECOLOGICAL RESOURCES THAT THEY SUSTAIN. THESE INCLUDE POPULATIONS OF BREEDING, WINTERING AND MIGRATING BIRDS. IN FACT, SOME OF THE MOST POPULAR BIRDING SPOTS IN THE STATE AND THE REGION ARE IMPOUNDMENTS (FORSYTHE, HEISLERVILLE, KINGSLAND, JAMAICA BAY, BOMBAY HOOK, PARKER RIVER). COASTAL IMPOUNDMENTS MAY ALSO BE THE FIRST LINE OF DEFENSE FOR ADJACENT COMMUNITIES AGAINST THE IMPACTS OF STORMS, TIDAL SURGES AND RISING SEA LEVELS. WE ARE EXPLORING THE SOCIETAL AND ECOLOGICAL IMPORTANCE OF THESE SITES WITH THE PURPOSE OF PROVIDING MANAGEMENT RECOMMENDATIONS FOR SAFEGUARDING COASTAL IMPOUNDMENTS IN AN ERA OF CHANGING CLIMATE.

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NEW JERSEY AUDUBON PARTNERED WITH THE NEW JERSEY ENDANGERED AND NONGAME SPECIES PROGRAM AND CONSERVE WILDLIFE FOUNDATION TO IMPLEMENT A STATEWIDE SURVEY FOR BLACK RAIL DURING THE 2015 FIELD SEASON. POPULATIONS OF THE EASTERN BLACK RAIL HAVE DECLINED SIGNIFICANTLY IN RECENT YEARS, YET LITTLE IS KNOWN ABOUT THIS SECRETIVE MARSH BIRD. SPECIFIC GOALS OF THE PROJECT ARE TO DOCUMENT THE CURRENT GEOGRAPHICAL RANGE OF BLACK RAIL IN NEW JERSEY; TO ASSESS POPULATION CHANGES SINCE THE LAST SURVEY WAS CONDUCTED IN THE 1980S; AND TO CONTRIBUTE TO THE DEVELOPMENT OF RANGEWIDE STATUS ASSESSMENT AND MANAGEMENT PLANS. WE HELD TWO TRAINING WORKSHOPS FOR CITIZEN SCIENCE VOLUNTEERS, AND A TEAM OF OVER 40 CITIZEN SCIENTISTS PARTICIPATED IN THE SURVEY. OBSERVERS CONDUCTED STANDARDIZED PLAYBACK SURVEYS AT THEIR ASSIGNED SURVEY POINTS, AND REPEATED THE SURVEY THREE TIMES DURING THE BREEDING SEASON, BETWEEN MAY 15TH AND JULY 15TH. WE PLAN TO EXPAND GEOGRAPHIC COVERAGE IN 2016, AND REPEAT SURVEYS AT SELECTED POINTS TO DETERMINE INTER-ANNUAL VARIABILITY.

NEW JERSEY AUDUBON CONTINUE TO ASSESS THE RESPONSE OF WILDLIFE SPECIES TO ROUTINE MAINTENANCE ACTIVITIES ON PSEG TRANSMISSION LINE CORRIDORS IN THE HIGHLANDS. THE GOAL OF THIS PROJECT IS TO DEVELOP MANAGEMENT RECOMMENDATIONS THAT MEET SAFETY AND REGULATORY REQUIREMENTS FOR POWERLINE RIGHTS-OF-WAY, WHILE ALSO PROVIDING HABITAT FOR EARLY SUCCESSIONAL SPECIES OF CONSERVATION CONCERN. IN 2015, WE COMPLETED THE FIFTH YEAR OF BIRD, REPTILE, AMPHIBIAN, AND HABITAT SURVEYS ALONG SELECTED SPANS. WE ALSO WORKED CLOSELY WITH PSEG AND THE NJ ENDANGERED AND NONGAME SPECIES PROGRAM TO DEVELOP SPAN-SPECIFIC MAINTENANCE PLANS

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FOR AREAS THAT PROVIDE CRITICAL HABITAT FOR BREEDING GOLDEN-WINGED WARBLER POPULATIONS. INITIAL IMPLEMENTATION OF THESE TREATMENTS WILL BEGIN DURING THE WINTER OF 2015/2016, AND WE WILL BEGIN TO ASSESS RESPONSE OF GOLDEN-WINGED WARBLER AND OTHER WILDLIFE SPECIES DURING THE 2016 FIELD SEASON.

FORM 990, PART III, LINE 1

FOUNDED IN 1897 AND ONE OF THE OLDEST INDEPENDENT AUDUBON SOCIETIES, NEW JERSEY AUDUBON HAS NO CONNECTION WITH THE NATIONAL AUDUBON SOCIETY. NEW JERSEY AUDUBON FOSTERS ENVIRONMENTAL AWARENESS AND A CONSERVATION ETHIC AMOUNG NEW JERSEY'S CITIZENS; PROTECTS NEW JERSEY'S BIRDS, MAMMALS, OTHER ANIMALS AND PLANTS, ESPECIALLY ENDANGERED AND THREATENED SPECIES; AND PROMOTES PRESERVATION OF NEW JERSEY'S VALUABLE NATURAL HABITATS.

ATTACHMENT 1

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
H4 ENTERPRISES, LLC 411 COURT HOUSE SOUTH DENNIS RD CAPE MAY, NJ 08210	CONTRACT SERVICES	483,291.
LJ NILES ASSOCIATES 516 FARNSWORTH AVE BORDENTOWN, NJ 08505	CONTRACT SERVICES	115,282.
MASTER DESIGN STUDIO, INC. 32531 N. SCOTTSDALE ROAD SCOTTSDALE, AZ 85266	CONTRACT SERVICES	195,613.

PUD	LIC DISCLOSU	RE COPT		
Schedule O (Form 990 or 990-EZ) 2014				Page 2
Name of the organization			Employer identifica	
NEW JERSEY AUDUBON SOCIETY			22153964	:2
			ATTACHMENT 2	
FORM 990, PART VIII - INVESTMENT INCOM	<u>E</u>			
	(A)	(B)	(C)	(D)
	TOTAL	RELATED OR	UNRELATED	EXCLUDED
DESCRIPTION	-	EXEMPT REVENUE	BUSINESS REV	
INTEREST AND DIVIDEND INCOME	91,432	•		91,432.
TOTAL C	91,432	_		91,432.
TOTALS	<u> </u>	≐		
		_		
		-	ATTACHMENT 3	
FORM 990, PART VIII - GROSS SALES AND	COST OF GOOD	S SOLD		
GROSS SALES LESS RETURNS AND ALLOWANCE	S		1,049,996.	
GROOD BINDS HEED RETORING THAT THE CHILD			1,010,000.	
INVENTORY AT BEGINNING OF YEAR			521,942.	
PURCHASES		• • • • • • • • • • • • • • • • • • • •	830,682.	
CALADIEC AND WACEC				
SALARIES AND WAGES		• • • • • • • • • • • • • • • • • • • •		
OTHER COSTS				
				_
SUBTOTAL			1,352,624.	-
MINES THE THE THEORY			F46 F02	
MINUS ENDING INVENTORY		• • • • • • • • • • • • • • • • • • • •	546,703.	
COST OF GOODS SOLD			805,921.	-
				=
		-		4
		<u>=</u>	ATTACHMENT 4	4
FORM 990, PART IX - OTHER FEES				
	(A)	(B)	(C)	(D)
	TOTAL	PROGRAM	MANAGEMENT	FUNDRAISING
DESCRIPTION	FEES	SERVICE EXP.	AND GENERAL	EXPENSES
CONTRACT & OTHER FEES	1,550,983	. 1,423,204.	53,220.	74,559.
CONTRACT & OTHER PLES	1,550,963	. 1,723,204.	J3, ZZU.	74,00%.
TOTALS	1,550,983	. 1,423,204.	53,220.	74,559.
- -				

Schedule O (Form 990 or 990-EZ) 2014 Page 2

Name of the organization Employer identification number

NEW JERSEY AUDUBON SOCIETY 221539642

ATTACHMENT 5

FORM 990, PART X - NOTES AND LOANS RECEIVABLE

BORROWER: REVOLVING LOAN PROGRAM

INTEREST RATE: 1.000000

REPAYMENT TERMS: 30 TO 90 DAY REPAYMENTS

SECURITY PROVIDED: SECURED BY STATE LOAN PROGRAM

PURPOSE OF LOAN: LOW INTEREST, SHORT TERM LOANS TO FARMERS

TOTAL BEGINNING NOTES AND LOANS RECEIVABLE ______23,224.

TOTAL ENDING NOTES AND LOANS RECEIVABLES _______19,163.

ATTACHMENT 6

FORM 990, PART X - PREPAID EXPENSES AND DEFERRED CHARGES

ENDING BOOK VALUE

PREPAID INSURANCE 24,457.

PREPAID SUPPLIES 23,041.

PREPAID PROGRAM FEES 15,155.

TOTALS _____62,653.

ATTACHMENT 7

FORM 990, PART X - INVESTMENTS - PUBLICLY TRADED SECURITIES

ENDING COST

DESCRIPTION BOOK VALUE OR FMV

MUTUAL FUNDS 3,167,466. FMV

TOTALS _____3,167,466.

Schedule O (Form 990 or 990-EZ) 2014 Page 2 Name of the organization Employer identification number NEW JERSEY AUDUBON SOCIETY 221539642 ATTACHMENT 8 FORM 990, PART X - DEFERRED REVENUE ENDING DESCRIPTION BOOK VALUE REFUNDABLE ADVANCES 145,086. PROGRAM FEES 53,931. TOTALS 199,017.