Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Information about Form 990 and its instructions is at www irs gov/form990 retax year beginning OCT 1, 2013 and ending SEP 30,

Α	For the	lpha 2013 calendar year, or tax year beginning $$ OCT $$ $$ 1 , $$ $$ $$ $$ $$ 20 $$ 1 $$ $$ and ending	<u>S</u> ĔP 30, 2014	
	Check if applicable		D Employer identif	ication number
	Addres change	STEEP ROCK ASSOCIATION INC.		
Ē	Name change Initial	Doing Business As		*****
Ļ	return	Number and street (or P.O. box if mail is not delivered to street address)		
Ļ	Termin ated	1.0. DOX 275		-868-9131
F	Amend return Applic	Uity or town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	1,945,869.
	⊥ltion pendin	F Name and address of principal officer: STEVEN H LAW	H(a) Is this a group	
		P.O. BOX 279, WASHINGTON DEPOT, CT 06794	for subordinate	
_	T		527 H(b) Are all subordinates	
		empt status: X 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or lete WWW.STEEPROCKASSOC.ORG		a list. (see instructions)
			H(c) Group exemption	M State of legal domicile: CT
	art I		rear of formation: 1901	M State of legal domicile: C 1
		Summary Difference of the state of the stat	סוום ססדוואיים ד	
S	1 .	Briefly describe the organization's mission or most significant activities: $ extstyle TO extstyle ex$	TAMP IN DED I	KOLFKITES
Jan				
Governance		Check this box if the organization discontinued its operations or disposed of r		assets.
é		Number of voting members of the governing body (Part VI, line 1a)		30
∞ ∞		Number of independent voting members of the governing body (Part VI, line 1b)		5
ţį		Total number of individuals employed in calendar year 2013 (Part V, line 2a)		216
Activities &		Total number of volunteers (estimate if necessary)		
Ac		Total unrelated business revenue from Part VIII, column (C), line 12		
_	d	Net unrelated business taxable income from Form 990-T, line 34		
		Ocatilla ticas and avanta (Data)(III. line 41a)	Prior Year 472,862.	Current Year 1,431,993.
ne		Contributions and grants (Part VIII, line 1h)	4/2,002.	
Revenue		Program service revenue (Part VIII, line 2g)	105,893	
Be		Investment income (Part VIII, column (A), lines 3, 4, and 7d)	103,093.	
	1	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	578,755	1
_		Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	378,733.	
		Grants and similar amounts paid (Part IX, column (A), lines 1-3)	0.	
	1	Benefits paid to or for members (Part IX, column (A), line 4)	199,386	
Expenses	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	199,300.	0.
en	Ioa	Professional fundraising fees (Part IX, column (A), line 11e)	0.	0.
Ä	D	Total fundraising expenses (Part IX, column (D), line 25) 48,723.	191,451.	220,270.
		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	390,837	
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	187,918.	
_ 2	19	Revenue less expenses. Subtract line 18 from line 12		
Net Assets or Fund Balances	20	Total access (Days V. Bro. 10)	Beginning of Current Year 12,730,070.	End of Year 14,011,969.
ASSE	20	Total assets (Part X, line 16)	8,240.	
let/	21	Total liabilities (Part X, line 26)	12,721,830	
P	22 art II	Net assets or fund balances. Subtract line 21 from line 20 Signature Block	12,721,030	13,003,323.
_		Ities of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the hest of n	ny knowledge and helief it is
		t, and complete. Declaration of preparer (other than officer) is based on all information of which preparer		ily kilowicage and belief, it is
	, 001100	t, and complete. Declaration of proparer (other than officer) is based on an information of which prop	Arci ilas arīy knowicuge.	
ei.	.n	Signature of officer	I Date	
Sig He		STEVEN H LAW, EXECUTIVE DIRECTOR		
пе	e	Type or print name and title		
_		Print/Type preparer's name Preparer's signature	Date Check	PTIN
Pai	d	FIORITA, KORNHAAS & COMPA	01/15/15 if self-emplo	 ved ₽00638833
	parer	Firm's name FIORITA, KORNHAAS & COMPANY, PC	Firm's EIN	**_****
	Only	Firm's address 146 DEER HILL AVENUE	I IIIII 5 LIN	
030	, only	DANBURY, CT 06810	Phone no 20	3-790-1040
N4c	v +b > 15		Filolic IIU. Z C	
ivia	y ine it	RS discuss this return with the preparer shown above? (see instructions)		X Yes No

Form 990 (2013) STEEP ROCK A Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?		х	
•	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for		21	
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
•	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	•		
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	X	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
h	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	Ha		
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		Х
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			٦,
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		Х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18		Х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2013) STEEP ROCK ASSOCIA Part IV 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			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No", go to line 25a	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a	05-		х
L	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L. Part I	25b		х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or	200		
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	X	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			37
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	Х	X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Λ	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation		Х	
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations?	30	21	
31	If "Yes," complete Schedule N, Part I	31		х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
U _	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
35a	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		<u> </u>
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			77
00	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?		Х	
	Note. All Form 990 filers are required to complete Schedule O	38	27	

Form 990 (2013) STEEP ROCK ASSOCIATION INC. Part V Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response or note to any line in this Part V											
			Yes	No								
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable											
	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable											
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming											
	(gambling) winnings to prize winners?	1c										
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,											
	filed for the calendar year ending with or within the year covered by this return 2a 5											
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)											
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X									
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b	X									
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			ĺ								
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X								
b	If "Yes," enter the name of the foreign country: ►											
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.											
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X								
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X								
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		<u> </u>								
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			37								
	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 gifts											
_	were not tax deductible?	6b										
7	Organizations that may receive deductible contributions under section 170(c).	7-		Х								
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If "Yes," did the organization notify the donor of the value of the goods or services provided?	7a										
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required	7b										
·	to file Form 8282?	7c		Х								
А	If "Yes," indicate the number of Forms 8282 filed during the year 7d	70										
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х								
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х								
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g										
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h										
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting											
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8										
9	Sponsoring organizations maintaining donor advised funds.											
а	Did the organization make any taxable distributions under section 4966?	9a										
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b										
10	Section 501(c)(7) organizations. Enter:											
	Initiation fees and capital contributions included on Part VIII, line 12											
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities											
11	Section 501(c)(12) organizations. Enter:											
	Gross income from members or shareholders											
b	Gross income from other sources (Do not net amounts due or paid to other sources against											
40	amounts due or received from them.)	40										
	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.	120										
а	Is the organization licensed to issue qualified health plans in more than one state?	13a										
h	Note. See the instructions for additional information the organization must report on Schedule O. Enter the amount of reserves the organization is required to maintain by the states in which the											
D	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans											
_	Enter the amount of reserves on hand 13c											
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X								
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		_ - _								
	, provide the prov											

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. X Check if Schedule O contains a response or note to any line in this Part VI Section A. Governing Body and Management Yes No 30 1a Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 30 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other Х officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision Х 3 of officers, directors, or trustees, or key employees to a management company or other person? X 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 6 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Х more members of the governing body? 7a b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or X persons other than the governing body? 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: X a The governing body? 8a X Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a 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, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe in Schedule O the process, if any, used by the organization to review this Form 990. Х **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a X b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done Х 12c Did the organization have a written whistleblower policy? X 13 13 X 14 Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent 15 persons, comparability data, and contemporaneous substantiation of the deliberation and decision? Х a The organization's CEO, Executive Director, or top management official 15a X Other officers or key employees of the organization 15b 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 Х taxable entity during the year? b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements? Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed $\overline{
ightharpoons}$ 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 Upon request X Own website X Another's website Other (explain in Schedule O) Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. State the name, physical address, and telephone number of the person who possesses the books and records of the organization:

STEVEN H LAW - 860-868-9131

WASHINGTON DEPOT,

06794

2 GREEN HILL ROAD,

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

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

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

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

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

Check this box if neither the organiz (A)	(B)	Ĭ			C)			(D)	(E)	(F)
Name and Title	Average	١	Position					Reportable	Reportable	Estimated
riame and ride	hours per	box	(do not check more than one box, unless person is both an				h an	compensation	compensation	amount of
	week	er box,		d a d	irecto	or/trus	tee)	from	from related	other
	week (list any hours for							the	organizations	compensation
		ordirector	e e			ated		organization	(W-2/1099-MISC)	from the
	related	ıstee	truste		gy.	bens		(W-2/1099-MISC)		organization
	organizations below	ual tri	ional		ploye	t co m				and related organizations
	line)	Individual trustee	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations
(1) KIRSTEN J FELDMAN	4.00	-	-	0		Ξ 65	Œ			
CHAIRMAN OF THE BOARD	1100	x		х				0.	0.	0.
(2) EUGENE PINOVER	4.00	Ħ						•	•	•
PRESIDENT		x		х				0.	0.	0.
(3) NATALIE H DYER	4.00								-	
SECRETARY		x		х				0.	0.	0.
(4) WILLIAM BARDEL	4.00									
TREASURER		x		х				0.	0.	0.
(5) LINDA ALLARD	2.00									
TRUSTEE		x						0.	0.	0.
(6) PEGGY ANDERSON	2.00									
TRUSTEE		x						0.	0.	0.
(7) SHEILA ANSON	2.00									
TRUSTEE		X						0.	0.	0.
(8) MARK AVERILL	2.00									
TRUSTEE		Х						0.	0.	0.
(9) RANDY BERNARD	2.00									
TRUSTEE		Х						0.	0.	0.
(10) TODD B CATLIN	2.00									
TRUSTEE		Х						0.	0.	0.
(11) WILLIAM R COLEMAN	2.00									
TRUSTEE		Х						0.	0.	0.
(12) WILLIAM A DAVIDSON	2.00								_	
TRUSTEE		Х						0.	0.	0.
(13) WILLIAM FAIRBAIRN	2.00	ļ								
TRUSTEE		Х						0.	0.	0.
(14) JOE GITTERMAN	2.00	ļ								
TRUSTEE		Х						0.	0.	0.
(15) JOHN A HERRMANN, JR.	2.00	۱								•
TRUSTEE		Х		_	_	<u> </u>		0.	0.	0.
(16) GREGORY HEYMAN	2.00	ļ.,							_	_
TRUSTEE		Х		_		<u> </u>		0.	0.	0.
(17) PETER R HOULDIN	2.00	\ , ,								_
TRUSTEE		Х						0.	0.	0.

Form 990 (2013)

k	*	*	*	*	Page 8
					Page

Form 990 (2013) STEEP RO	CK ASSO	CIZ	AT.	101	<u> </u>	INC	. <u> </u>		**_*	***	***	Paç	ge 8
Part VII Section A. Officers, Directors, Trus	stees, Key Em	ploy	/ees	, an	d Hi	ighe	st C	Compensated Employe	es (continued)				
(A)	(B)				C)			(D)	(E)			(F)	
Name and title	(do	not c	Pos	ition	than	one	Reportable	Reportable		Est	imated		
	hours per	box	t, unle	ss pe	rson	is bot	h an	compensation	compensatio			ount of	i
	week	\vdash	T a	10 a 0	T CCIC)/ ii us	100)	from	from related			other	
	(list any hours for	or director						the organization	organizations (W-2/1099-MIS			oensati om the	on
	related	e or d	tee			sated		(W-2/1099-MISC)	(88-2/1099-18113	,0)		nizatio	n
	organizations		al trus		ee/ee	mpen		(** 27 1000 141100)			_	relate	
	below	Individual 1	Institutional trustee		nplo	st co	ia ei					nizatior	
	line)	Indivi	Instit	Officer	Key employee	Highest compensated employee	Form						
(18) ELIOT JOHNSON	2.00												
TRUSTEE		Х						0.		0.			0.
(19) MICHAEL LLOYD	2.00												
TRUSTEE		Х						0.		0.			0.
(20) MARK LYON - EX OFFICIO	2.00												
TRUSTEE		Х						0.		0.			0.
(21) ERIC MADOFF	2.00	1								_			_
TRUSTEE		Х						0.		0.			0.
(22) AUDREY HEFFERNAN MEYER	2.00												_
TRUSTEE		X						0.		0.			0.
(23) BEN NICKOLL	2.00	ļ											_
TRUSTEE	0.00	Х						0.		0.			0.
(24) KIRSTEN PECKERMAN	2.00	١,,											^
TRUSTEE	2 00	Х						0.		0.			0.
(25) WHITNEY M RAITH	2.00	X						0.		0.			0.
TRUSTEE	2.00	1	-					0.		<u> </u>			<u>.</u>
(26) RAYMOND W REICH TRUSTEE	2.00	x						0.		0.			0.
		<u> </u>					Ļ	0.		0.			0.
1b Sub-total	U. Castian A							0.		0.			0.
c Total from continuation sheets to Part V								0.		0.			0.
d Total (add lines 1b and 1c)							20 5		000 of rapartable				<u>·</u>
compensation from the organization	ioi iiiiiitea to ti	1056	11516	eu a	DOVE	e) wi	10 11	eceived more man \$100	,000 or reportable	Е			0
compensation from the organization												Yes	No
3 Did the organization list any former officer	director or tri	ıeta	o ka	av er	mnlc	N/AA	or	highest compensated e	mnlovee on	Ī			
line 1a? If "Yes," complete Schedule J for s											3		Х
4 For any individual listed on line 1a, is the s													
and related organizations greater than \$15									and organization		4		Х
5 Did any person listed on line 1a receive or									idual for services				
rendered to the organization? If "Yes," con	•				-			-			5		Х
Section B. Independent Contractors	•										•		
1 Complete this table for your five highest co	ompensated in	dep	ende	ent c	onti	racto	ors t	that received more than	\$100,000 of com	npens	ation fr	om	
the organization. Report compensation for	the calendar y	ear	endi	ing v	vith	or w	ithir	n the organization's tax	year.				
(A)								(B)			(C)	
Name and business	address	N	INC	E				Description of s	services	C	ompen	sation	
							4						
							\dashv						
									1				

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization
SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 STEEP RO	CK ASSO	CIZ	AT.	101	1	INC	С.		**_**	****
Part VII Section A. Officers, Directors, Tru	ıstees, Key Er	mplo	oyee	s, a	nd l	ligh	est	Compensated Employ	rees (continued)	
(A) Name and title	(B) Average hours			(O Pos	C) ition that	١		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	per week (list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(27) THOMAS M RICKART TRUSTEE	2.00	х						0.	0.	0
(28) ALLISON RUBLER TRUSTEE	2.00	х						0.	0.	0
(29) STEPHEN G SOLLEY TRUSTEE	2.00	х						0.	0.	0
(30) PEARY STAFFORD TRUSTEE	2.00	х						0.	0.	0
(31) EDMUND J WHITE TRUSTEE	2.00	x						0.	0.	0
(32) JOHN A MILLINGTON HONORARY TRUSTEE	1.00	x						0.	0.	0
HONOKAKI IKOSIBB								0.	0.	<u> </u>
Total to Part VII, Section A, line 1c										

The state of the s	Ра	rt VII							
1			Check if Schedule O con	tains a response	or note to any li	(A)	(B) Related or exempt function	(C) Unrelated business	Revenue excluded from tax under sections
2 a MAP SALES 813312	Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Membership dues Fundraising events Related organizations Government grants (contributions, gifts, grange) Similar amounts not included about the contributions of the contributions included in lines.	1b 1c 1d 1d 1e	419,412. 843,500.				
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax-exempt bond proceeds 5 Royalties 6 a Gross rents		2 a b c d e f	MAP SALES OTHER FEES AND HIKERS CHALLENG All other program service revo	INCOME GE	Business Code 813312 813312 813312	1,930. 1,500. 595.	1,500.		
c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 8 a Gross income from fundraising events (not including \$		3 4 5 6 a	Investment income (including other similar amounts) Income from investment of ta Royalties Gross rents	g dividends, interests: ax-exempt bond p (i) Real	est, and oroceeds	36,195.		3,098.	33,097.
C Gain or (loss) 58,514. d Net gain or (loss) 58,514. 8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18		c d 7 a	Rental income or (loss) Net rental income or (loss) Gross amount from sales of assets other than inventory Less: cost or other basis	(i) Securities 473,656.	(ii) Other				
c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d	Revenue	d	Gain or (loss) Net gain or (loss) Gross income from fundraisir including \$	58 , 514 • ng events (not of		58,514.			58,514.
10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code 11 a b c d All other revenue e Total. Add lines 11a-11d	Other Rev	с 9 а	Net income or (loss) from fun Gross income from gaming a Part IV, line 19	draising events ctivities. See	>				
11 a		10 a	Gross sales of inventory, less and allowances	returns a					
		b c d	All other revenue Total. Add lines 11a-11d				4 005	2 000	91 611.

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).

0001	Check if Schedule O contains a respons			· · · · · · · · · · · · · · · · · · ·	
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				·
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
_	trustees, and key employees				
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and	225,977.	189,996.	9,977.	26,004.
_	persons described in section 4958(c)(3)(B)	443,311.	103,330.	3,311.	20,004.
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9					
10	Other employee benefits Payroll taxes	18,365.	15,409.	820.	2,136.
11	Fees for services (non-employees):	10,3031	13/1031	0201	2/2301
	Legal	12,367.	10,575.	1,792.	
	Accounting	7,075.	,	7,075.	
	Lobbying	,			
	D (' ' ' ' ' ' ' ' ' O D ' ' ' ' ' ' ' ' '				
	Investment management fees	17,566.		17,566.	
g					
	column (A) amount, list line 11g expenses on Sch O.)	1,526.	529.	997.	
12	Advertising and promotion				
13	Office expenses	29,536.	10,916.	11,207.	7,413.
14	Information technology	431.		431.	
15	Royalties			4====	
16	Occupancy	23,094.	5,374.	17,720.	
17	Travel	209.	209.		
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials	239.		239.	
19	Conferences, conventions, and meetings	2,149.		2,149.	
20	Interest	2,147.		2,140.	
21 22	Payments to affiliates	16,469.	15,995.	474.	
23	Insurance	23,644.	5,734.	17,910.	
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)			,,	
а	STEWARDSHIP GENERAL	50,051.	50,051.		
b	DEVELOPMENT EXPENSE	13,105.	,		13,105.
c	MEMBERSHIP SERVICES	9,210.	9,210.		<u> </u>
d	STEWARDSHIP-WHIP GRANTS	4,960.	4,960.		
е	All other expenses	8,639.	8,574.		65.
25	Total functional expenses. Add lines 1 through 24e	464,612.	327,532.	88,357.	48,723.
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)				
33201	0 10-29-13				Form 990 (2013)

Form 990 (2013) Part X Balance Sheet

Pai	τχ	Balance Sneet			
		Check if Schedule O contains a response or note to any line in this Part X			<u></u>
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	311,596.	1	118,257.
	2	Savings and temporary cash investments		2	391,173.
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	3,098.
	5	Loans and other receivables from current and former officers, directors,			
		trustees, key employees, and highest compensated employees. Complete			
		Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under			
		section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ts		employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	7	Notes and loans receivable, net		7	112,500.
Ä	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges	2,977.	9	4,623.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 11,597,133.			
	b	Less: accumulated depreciation 10b 158,636.	10,603,209.	10c	11,438,497.
	11	Investments - publicly traded securities		11	
	12	Investments - other securities. See Part IV, line 11	1,810,633.	12	1,874,936.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,655.	15	68,885.
	16	Total assets. Add lines 1 through 15 (must equal line 34)	12,730,070.	16	14,011,969.
	17	Accounts payable and accrued expenses	8,240.	17	13,944.
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
es	22	Loans and other payables to current and former officers, directors, trustees,			
₽		key employees, highest compensated employees, and disqualified persons.			
Liabilities		Complete Part II of Schedule L		22	
_	23	Secured mortgages and notes payable to unrelated third parties		23	110 -00
	24	Unsecured notes and loans payable to unrelated third parties		24	112,500.
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17-24). Complete Part X of			
		Schedule D	0 040	25	106 444
	26	Total liabilities. Add lines 17 through 25	8,240.	26	126,444.
		Organizations that follow SFAS 117 (ASC 958), check here ▶ X and			
Ses		complete lines 27 through 29, and lines 33 and 34.	10 ((4 045		12 772 026
and	27	Unrestricted net assets	12,664,245.	27	13,773,926.
Bal	28	Temporarily restricted net assets	57,585.	28	111,599.
<u>lu</u>	29	Permanently restricted net assets		29	
Ţ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶			
s O		and complete lines 30 through 34.			
set	30	Capital stock or trust principal, or current funds		30	
As	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated income, or other funds	10 701 000	32	12 005 525
_	33	Total net assets or fund balances	12,721,830.	33	13,885,525.
	34	Total liabilities and net assets/fund balances	12,730,070.	34	14,011,969.

Were the organization's financial statements audited by an independent accountant?

review, or compilation of its financial statements and selection of an independent accountant?

Act and OMB Circular A-133?

If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis,

c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit.

If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. **3a** As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit

Consolidated basis

☐ Consolidated basis

or audits, explain why in Schedule O and describe any steps taken to undergo such audits

Separate basis

consolidated basis, or both:

X Separate basis

Both consolidated and separate basis

Both consolidated and separate basis

Form **990** (2013)

Х

Х

Х

2b

2c

За

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.

Open to Public

OMB No. 1545-0047

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.

Inspection **Employer identification number**

		STEEP F	ROCK ASSOCIAT	I NOI'	NC.				*	*_***	***	
Part I Re	eason	for Public Cha	rity Status (All organiz	ations mu	st complet	te this part	t.) See inst	ructions.				
1	urch, co nool des spital or	nvention of churche cribed in section 1 a cooperative hosp	es, or association of chur 70(b)(1)(A)(ii). (Attach Sc ital service organization o	ches desc hedule E.) described	ribed in se in section	ection 170	(b)(1)(A)(i) (A)(iii).		i). Enter	the hospital	's nam	ne,
city, An o sect A fec An o sective An o sective An o sective An o active incorr See sective An o active incorr See sective An o formore desc a By cl found f If the supp g Since (i) (iii)	anization is not a private foundation because it is: (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. a Type I b Type II c Type III Functionally integrated d Type III Non-functionally integrated By checking this box, I certify that the organization is not controlled directly											
(i) Name of sup organizatio		(ii) EIN	(described on lines 1-9 above or IRC section	in col. (i) li	sted in your document?	organizat (i) of you	ion in col. r support?	organizatio (i) organiz U.S	on in col. ed in the .?	` '		netary
Total												

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

Schedule A (Form 990 or 990-EZ) 2013

200	
	age 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.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3						
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						
	Public support. Subtract line 5 from line 4.						
	ction B. Total Support	1		1	1	1	
	ndar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
_	Amounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. Add lines 7 through 10	-1- (40	
	Gross receipts from related activities					12	
13	First five years. If the Form 990 is for	-			•		ightharpoonup
Sec	organization, check this box and stop ction C. Computation of Publ			•••••			
	Public support percentage for 2013 (column (fl)		14	%
	Public support percentage for 2012 Public support percentage from 2012					15	
	33 1/3% support test - 2013. If the						
100	stop here. The organization qualifies	•		•		•	
r	33 1/3% support test - 2012. If the						
	and stop here. The organization qual	-					
17=	10% -facts-and-circumstances tes						
.,,	and if the organization meets the "fac						
	meets the "facts-and-circumstances"			=	=	-	
۲	10% -facts-and-circumstances tes	-	-				
	more, and if the organization meets the						
	organization meets the "facts-and-cire		•		•		
18	Private foundation. If the organization						

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 b	elow, please comp	olete Part II.)				
Sec	tion A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	208,858.	1850684.	332,999.	467,189.	588,493.	3448223.
	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	4,165.				4,025.	8,190.
	Gross receipts from activities that						7 - 2 - 2 - 2
	are not an unrelated trade or bus- iness under section 513						
	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	213,023.	1850684.	332,999.	467,189.	592,518.	3456413.
	Amounts included on lines 1, 2, and 3 received from disqualified persons	69,999.	260,532.	40,473.	146,784.	133,105.	650,893.
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		612,880.	32,500.		103,330.	•
C	Add lines 7a and 7b	101,188.	873,412.	72,973.	173,741.	236,435.	1457749.
	Public support (Subtract line 7c from line 6.) tion B. Total Support						1998664.
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9	Amounts from line 6	213,023.	1850684.	332,999.	467,189.	592,518.	3456413.
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	27,242.	33,020.	28,819.	31,124.	33,097.	153,302.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	27,242.	33,020.	28,819.	31,124.	33,097.	153,302.
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on					3,098.	3,098.
12	Other income. Do not include gain or loss from the sale of capital	12,571.	7,581.	3,839.	5,673.	,	29,664.
	assets (Explain in Part IV.) ············· Total support. (Add lines 9, 10c, 11, and 12.)	252,836.	1891285.	365,657.		628,713.	3642477.
	First five years. If the Form 990 is for			-	·		
	check this box and stop here	ŭ		*	•	. , . ,	
	tion C. Computation of Publ						·····
	Public support percentage for 2013 (l			volumn (f))		15	54.87 %
						16	F 4 00
	Public support percentage from 2012 tion D. Computation of Inves					16	54.28 %
	•			- 10 1 (6)		47	4.21 %
	Investment income percentage for 20					17	
	Investment income percentage from 2					18	
	33 1/3% support tests - 2013. If the more than 33 1/3%, check this box a	-					/ is not
b	33 1/3% support tests - 2012. If the	organization did n	ot check a box on	line 14 or line 19a	a, and line 16 is mo	ore than 33 1/3%,	and
	line 18 is not more than 33 1/3%, che	eck this box and st	t op here. The orga	nization qualifies	as a publicly supp	orted organization	▶∐
20	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check th	nis box and see ins	structions	<u></u> ▶□

SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

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.

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

2013
Open to Public Inspection

Name of the organization

STEEP ROCK ASSOCIATION INC.

Employer identification number ** - * * * * * *

Pai	rt I Organizations Maintaining Donor Ad		or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part I		(I-) From the conduction
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisor	_	
	are the organization's property, subject to the organization		
6	Did the organization inform all grantees, donors, and do		-
	for charitable purposes and not for the benefit of the do	, , , , , ,	
<u> </u>	impermissible private benefit?		
	rt II Conservation Easements. Complete if the		rt IV, line 7.
1	Purpose(s) of conservation easements held by the organ		wis allowing automatic and area
	Preservation of land for public use (e.g., recreation	· 🖂	orically important land area
	Protection of natural habitat	Preservation of a certific	ed historic structure
_	X Preservation of open space		
2	Complete lines 2a through 2d if the organization held a	qualified conservation contribution in the form of	a conservation easement on the last
	day of the tax year.		Hold at the Ford of the Tay Veen
	-		Held at the End of the Tax Year
а	***************************************		
b	,		
С			20
d		•	1 1 21
_	listed in the National Register		
3	Number of conservation easements modified, transferre	ed, released, extinguished, or terminated by the c	organization during the tax
		on easement is located	
4	Number of states where property subject to conservation		
5	Does the organization have a written policy regarding th		X Yes No
•	violations, and enforcement of the conservation easeme		
6	Staff and volunteer hours devoted to monitoring, inspec		4 500
7	Amount of expenses incurred in monitoring, inspecting,		, , , ,
8	Does each conservation easement reported on line 2(d)		
•	and section 170(h)(4)(B)(ii)?		
9	In Part XIII, describe how the organization reports conse	·	
	include, if applicable, the text of the footnote to the orga	anization's financial statements that describes th	e organization's accounting for
Dai	rt III Organizations Maintaining Collection	ne of Art Historical Treasures or Oth	per Similar Assets
ı aı	Complete if the organization answered "Yes" to F		iei olilliai Assets.
10	If the organization elected, as permitted under SFAS 11		ant and balance shoot works of art
Id	historical treasures, or other similar assets held for publi		
			ce of public service, provide, in Part Alli,
L	the text of the footnote to its financial statements that d		and belonge about works of ort. historical
b	7 .		
	treasures, or other similar assets held for public exhibition	on, education, or research in furtherance of publi	ic service, provide the following amounts
	relating to these items:		•
	(i) Revenues included in Form 990, Part VIII, line 1		
0		al transition or other similar appets for financial a	
2	If the organization received or held works of art, historication following appropriate ways and the following appropriate ways are standard and are consistent and ar		gairi, provide
_	the following amounts required to be reported under SF		• •
a	Revenues included in Form 990, Part VIII, line 1		
р	Assets included in Form 990. Part X		▶ 5

Complete in the organization answered Tes To Form 990, Fart IV, line Tra. See Form 990, Fart X, line To.												
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value								
1a Land		11,294,150.		11,294,150.								
b Buildings		64,326.	48,010.	16,316.								
c Leasehold improvements												
d Equipment		91,409.	73,273.									
e Other		147,248.	37,353.	109,895.								
Total. Add lines 1a through 1e. (Column (d) must equa	ıl Form 990, Part X, colur	mn (B), line 10(c).)	>	11,438,497.								

Schedule D (Form 990) 2013

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	

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

SCHEDULE L

Department of the Treasury

Internal Revenue Service

Transactions With Interested Persons

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a,

28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

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

Open To Public Inspection

OMB No. 1545-0047

(Form 990 or 990-EZ)

Name of the organization		ROCI	K ASSOCI	ΔͲΤ	ON	TNC	_				-	ident		on nu	mber	
Part I Excess	Benefit Trans							aniz	ations only).							
	if the organization									art V.	line 40	Db.				
1			elationship bety										(d)	Corre	cted?	
(a) Name of disqua	alified person	` '	person and organization (c) Description of transaction											Yes N		
2 Enter the amount	of tax incurred by	the or	rganization man	agers	or disc	qualifie	d persons du	ring	the year under							
section 4958											▶ \$					
3 Enter the amount	of tax, if any, on I	ine 2, a	above, reimburs	ed by	the or	ganiza	tion				▶ \$					
	., -															
Part II Loans t	o and/or Fror	n Inte	erested Per	sons	·-											
•	if the organization					', Part \	V, line 38a or I	Forn	n 990, Part IV, Iir	ne 26;	or if th	ne orga	nizatio	on		
<u>.</u>	n amount on For											Vb.\ Ani	orovad			
(a) Name of interested persor	(b) Relation		(c) Purpose of loan	fron	an to or) Original	(f) Balance due) In ault?	(h) App by bo	ard or	(i) W	ritten ment?	
interested persor	1 Willi Organ	IZALIUII	OI IOan	Ť	zation?	princ	ipal amount			dela	auit?	cómm	ittee?	ayıcc	1116111:	
				То	From					Yes	No	Yes	No	Yes	No	
Total		ı					> \$									
Part III Grants	or Assistance	Ben	efitina Inter	este	d Pe	rsons										
	if the organization		•													
(a) Name of interest			b) Relationship				Amount of		(d) Type	of	T	(e) Purp	ose o		
(a) Name of inter-	cotou person	'	interested pers				assistance		assistan				assista		•	
			the organiza													
											-					
											\dashv					
											$\neg \uparrow$					

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

Schedule L (Form 990 or 990-EZ) 2013

SCHEDULE M (Form 990)

Noncash Contributions

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

OMB No. 1545-0047

Open to Public . Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Attach to Form 990.

STEEP ROCK ASSOCIATION INC.

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

Employer identification number **_***

Pai	rt I Types of Property				•			
	•	(a)	(b)	(c)	(d)			
		Check if applicable	Number of contributions or	Noncash contribution amounts reported on	Method of de noncash contribu		•	· S
		арріюцью		Form 990, Part VIII, line		ation a	nount	
1	Art - Works of art							
2	Art - Historical treasures							
3	Art - Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded							
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or							
	trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation contribution -							
	Historic structures							
14	Qualified conservation contribution - Other $_{\dots}$							
15	Real estate - Residential							
16	Real estate - Commercial							
17	Real estate - Other	X	1	843,500	APPRAISAL			
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other • ()							
26	Other ()							
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organ	ization durin	g the tax year for o	contributions				
	for which the organization completed Form 82	283, Part IV,	Donee Acknowled	gement 29			1	
							Yes	No
30a	During the year, did the organization receive b	y contribution	on any property re	oorted in Part I, lines 1 - 2	8, 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 ex	empt purposes for			
	the entire holding period?					30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any non-standard conf	ributions?	31		X
32a	Does the organization hire or use third parties	or related or	rganizations to soli	cit, process, or sell nonca	sh]		
	contributions?					32a		X
b	If "Yes," describe in Part II.							
33	If the organization did not report an amount in	column (c) t	for a type of prope	rty for which column (a) is	checked,			
	describe in Part II.							

Schedule M	(Form 990) (2013)	STEEP	ROCK	ASSOCIATIO	N INC.	**_***	Page 2
Part II	Supplementa is reporting in Par this part for any a	I Informa t I, column (tion. Prov	vide the information render of contributions,	quired by Part I, lines 30 the number of items reco	b, 32b, and 33, and whether the organizatived, or a combination of both. Also com	ation plete

_**

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ complete to provide information for responses to specific questions on

Form 990 or 990-EZ or to provide any additional information.

► Attach to Form 990 or 990-EZ.

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

2013
Open to Public Inspection

Name of the organization

STEEP ROCK ASSOCIATION INC.

Employer identification number ** - * * * * * *

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

CONSERVATION, PUBLIC RECREATION, AND EDUCATION PURPOSES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THE STEEP ROCK ASSOCIATION IS ONE OF THE OLDEST LAND TRUSTS IN THE

STATE OF CONNECTICUT. ITS PRIMARY MISSION IS TO PROTECT THE REGION'S

BIODIVERSITY AND NATURAL HERITAGE FOR ITS INTRINSIC VALUE AND TO

ENHANCE THE RURAL LANDSCAPE OF THE TOWN OF WASHINGTON AND ADJACENT

TOWNS BY ACQUIRING, PRESERVING AND MANAGING OPEN SPACE, SCENIC VISTAS,

NATURAL COMMUNITIES, A DIVERSITY OF WILDLIFE HABITATS, FARMLANDS THAT

CONSERVE THE REGION'S AGRICULTURAL LEGACY AND, WHERE APPROPRIATE, OTHER

LANDS THAT SUPPORT THE PUBLIC'S PURSUIT OF EDUCATIONAL AND PASSIVE

RECREATIONAL EXPERIENCES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

VARIETY OF FOREST, WETLAND AND EARLY SUCCESSIONAL HABITATS TO ENHANCE

WILDLIFE DIVERSITY AND TO ELIMINATE OR CONTROL THE SPREAD OF INVASIVE

PLANT SPECIES, AND MANAGING FARM FIELDS FOR AGRICULTURAL PRODUCTION. A

COMPREHENSIVE NATURAL RESOURCES MANAGEMENT PLAN, ADOPTED IN 2011,

PROVIDES THE VISION AND GUIDANCE FOR MANAGING APPROXIMATELY 2,500 ACRES

OF NATURE PRESERVES OWNED IN FEE. THE PLAN FOCUSES ON MANAGING FOR

BIODIVERSITY BY ESTABLISHING MANAGEMENT UNITS BASED ON HABITAT

CHARACTERISTICS, IDENTIFYING SPECIES OF CONSERVATION CONCERN,

ADDRESSING THREATS TO THESE SPECIES AND THEIR NATURAL COMMUNITIES,

RECOMMENDING CONSERVATION ACTIONS AND MONITORING ONGOING

MAINTENANCE/MANAGEMENT INITIATIVES.

FROM THIS FRAMEWORK, ANNUAL WORK

PLANS ARE ESTABLISHED TO ORGANIZE PROJECTS AND GUIDE MANAGEMENT

ACTIONS. STEWARDSHIP SERVICES ALSO INCLUDE THE ANNUAL MONITORING OF

APPROXIMATELY 2,600 ACRES HELD IN CONSERVATION EASEMENTS.

ENVIRONMENTAL EDUCATION PROGRAMMING, A COMMUNITY OUTREACH INITIATIVE

ESTABLISHED IN 2012, ENHANCES PUBLIC AWARENESS, UNDERSTANDING AND

APPRECIATION OF THE NATURE PRESERVE ENVIRONMENT THROUGH EXPERIENTIAL

LEARNING. PROGRAMS ARE OFFERED ON A VARIETY OF WILDLIFE AND NATURAL

RESOURCE TOPICS THROUGHOUT THE YEAR.

FORM 990, PART VI, SECTION A, LINE 2:

THE BOARD OF TRUSTEES REQUIRES ALL BOARD MEMBERS TO SUBMIT A

CONFLICT OF INTEREST FORM EACH YEAR WHICH IS REVIEWED BY THE EXECUTIVE

COMMITTEE. A NUMBER OF TRUSTEES ARE ENGAGED IN PROFESSIONAL RELATIONSHIPS

AS ATTORNEYS, REAL ESTATE AND INSURANCE BROKERS AND CONTRACTORS WITH

CLIENTS WHO INCLUDE OTHER TRUSTEES AT NORMAL COMMERCIAL RATES AND TERMS. NO

TRUSTEES OR RELATED PARTIES THERETO PERFORMED PAID PROFESSIONAL SERVICES

FOR THE ASSOCIATION IN FISCAL YEAR 2013, OR SUCH WORK WAS PROVIDED WITH

FULL DISCLOSURE TO THE BOARD AND AT NORMAL COMMERCIAL RATES AND TERMS.

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

THE ASSOCIATION'S PROCESS FOR FILING FORM 990 IS TO HAVE THE

EXECUTIVE DIRECTOR AND MEMBERS OF THE AUDIT COMMITTEE REVIEW A DRAFT COPY

FOR FINANCIAL INFORMATION REPORTED AND INFORMATION ON THE ASSOCIATION'S

PROGRAMS AND SERVICES, AND OVERALL MISSION STATEMENT.

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

STEEP ROCK ASSOCIATION REQUIRES AN ANNUAL REVIEW AND

DISCLOSURE OF CONFLICTS OF INTEREST BY AND BETWEEN MEMBERS OF THE BOARD OF

STEEP ROCK ASSOCIATION INC.	** _ * * * * * *
TRUSTEES AND EMPLOYEES.	
FORM 990, PART VI, SECTION C, LINE 18:	
STEEP ROCK'S FORM 990 IS AVAILABLE ON THE ASSOCATION'S	
WEBSITE, AT GUIDESTAR.ORG AND AT THE STEEP ROCK OFFICE UP	ON REQUEST.
FORM 990, PART VI, SECTION C, LINE 19:	
STEEP ROCK ASSOCIATION MAKES ITS GOVERNING DOCUMENTS AVAI	LABLE
BY PROVIDING COPIES ON REQUEST AND INSPECTION AT ITS PRIM	ARY OFFICE.

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	C on v	₋ine No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
	LAND														
27	LAND - 6.83 ACRES DONATED BY SNOW	12/27/13	L				843,500.				843,500.			0.	
1	LAND	01/01/90	L			7	7,974,759.				7,974,759.			0.	
15	LAND	01/01/08	L				537,119.				537,119.			0.	
16	LAND	07/29/10	L				610,000.				610,000.			0.	
17	LAND	01/09/11	L			1	1,328,772.				1,328,772.			0.	
	* 990 PAGE 10 TOTAL LAND						11294150.				11294150.	0.		0.	0.
	* 990 PAGE 10 TOTAL -						11294150.				11294150.	0.		0.	0.
	OTHER														
2	LAND IMPROVEMENTS	01/01/92	SL	30.00	1	.6	64,326.				64,326.	45,866.		2,144.	48,010.
13	REICH BRIDGE	03/27/07	SL	30.00	1	.6	138,000.				138,000.	32,200.		4,600.	36,800.
22	BRONSON PARKING LOT	05/25/13	SL	10.00	1	.6	4,147.				4,147.	138.		415.	553.
23	BRONSON BOARDWALK	09/30/14	SL	10.00	1	.6	5,100.				5,100.			0.	
	* 990 PAGE 10 TOTAL OTHER						211,573.				211,573.	78,204.		7,159.	85,363.
	* 990 PAGE 10 TOTAL -						211,573.				211,573.	78,204.		7,159.	85,363.
	MACHINERY & EQUIPMENT														
3	EQUIPMENT	01/01/95	SL	7.00	1	.6	5,976.				5,976.	5,976.		0.	5,976.
5	BUSH HOG ROTARY CUTTER	08/31/04	SL	10.00	1	.6	2,650.				2,650.	2,650.		0.	2,650.

2013 DEPRECIATION AND AMORTIZATION REPORT

FORM 990 PAGE 10 990

Asset No.	Description	Date Acquired	Method	Life	C o n v	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
6	(D)COMPUTER	03/04/05	SL	10.00	16	2,983.				2,983.	2,682.		25.	
7	BRUSH MOWER	11/26/04	SL	10.00	16	668.				668.	603.		65.	668.
8	TRACTOR	01/27/06	SL	10.00	16	24,882.				24,882.	19,904.		2,488.	22,392.
9	TRAILER	02/24/06	SL	10.00	16	4,495.				4,495.	3,599.		450.	4,049.
10	BACKHOE	03/26/07	SL	10.00	16	8,600.				8,600.	6,020.		860.	6,880.
11	COPIER	04/25/07	SL	10.00	16	2,000.				2,000.	1,400.		200.	1,600.
12	TRACTOR SICKLE BAR	04/30/07	SL	10.00	16	3,312.				3,312.	2,317.		331.	2,648.
14	(D)COMPUTER	09/17/09	SL	5.00	16	1,592.				1,592.	1,272.		27.	
18	POWER EQUIPMENT	12/06/12	SL	5.00	16	770.				770.	128.		154.	282.
19	PORTABLE WINCH	03/12/13	SL	5.00	16	1,462.				1,462.	171.		292.	463.
20	COMPUTER	12/07/12	SL	5.00	16	2,905.				2,905.	484.		581.	1,065.
21	COPIER	11/01/12	SL	5.00	16	5,200.				5,200.	953.		1,040.	1,993.
24	DELL OPTIPLEX 3010 DT PC (SERVER)	11/25/13	SL	5.00	16	775.				775.			129.	129.
25	DELL LATITUDE E6530 (LAPTOP)	11/25/13	SL	5.00	16	1,150.				1,150.			192.	192.
	HUSQVARNA 345FR BRUSH CUTTER 576XP	, 09/29/14	SL	5.00	16	1,800.				1,800.			0.	
	* 990 PAGE 10 TOTAL MACHINERY & EQUIPMENT					71,220.				71,220.	48,159.		6,834.	50,987.
	TRANSPORTATION EQUIPMENT													
4	TRUCK	11/23/05	SL	10.00	16	24,764.				24,764.	19,810.		2,476.	22,286.

FORM 990 PAGE 10 990

Description	Date Acquired	Method	Life	C o n v	Line No.	Unadjusted Cost Or Basis	Bus % Excl	Section 179 Expense	Reduction In Basis	Basis For Depreciation	Beginning Accumulated Depreciation	Current Sec 179 Expense	Current Year Deduction	Ending Accumulated Depreciation
* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT						24,764.				24,764.	19,810.		2,476.	22,286.
* 990 PAGE 10 TOTAL -						95,984.				95,984.	67,969.		9,310.	73,273.
* GRAND TOTAL 990 PAGE 10 DEPR						11601707.				11601707.	146,173.		16,469.	158,636.
					Г									
	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10 95,984.	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10	* 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - * GRAND TOTAL 990 PAGE 10 * GRAND TOTAL 990 PAGE 10	Description Date Acquired Method Life of No. Line Cost Or Basis Section 179 Expense Basis * 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - 95,984. * GRAND TOTAL 990 PAGE 10	Description Date Acquired Method Life of No. Line Cost Or Basis Section 179 Expense Depreciation * 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - 95,984. * GRAND TOTAL 990 PAGE 10	Description Date Acquired Method Life of No. Cost Or Basis Section 179 Expense Reduction In Basis For Depreciation * 990 PAGE 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - 95,984. * GRAND TOTAL 990 PAGE 10	Description Date Acquired Method Life of No. Vision Cost Or Basis Section 179 Expense Reduction In Basis Por Depreciation Sec 179 Expense Expense Section 179 Expense Section 179 Expense Section In Basis Depreciation Sec 179 Expense Section 179 E	Description Date Acquired Method Life of No. Vision Cost Or Basis Section 179 Expense Reduction In Basis Por Depreciation Sec 179 Expense Page 10 TOTAL TRANSPORTATION EQUIPMENT * 990 PAGE 10 TOTAL - 95,984. * GRAND TOTAL 990 PAGE 10 Date Acquired Method Life of No. Vision Cost Or Basis Section 179 Expense Section 179 Ex