efile GRAPHIC print - DO NOT PROCESS As Filed Data -

For Paperwork Reduction Act Notice, see the separate instructions.

Department of the

Treasury

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

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

▶ Do not enter social security numbers on this form as it may be made public.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493066013182 OMB No. 1545-0047

> Open to Public Inspection

Internal Revenue Service For the 2020 calendar year, or tax year beginning 07-01-2020 , and ending 06-30-2021 D Employer identification number B Check if applicable: NATIONAL AUDUBON SOCIETY INC ☐ Address change 13-1624102 ☐ Name change Doing business as ☐ Initial return ☐ Final return/terminated E Telephone number Number and street (or P.O. box if mail is not delivered to street address) Room/suite 225 VARICK STREET 7TH FLOOR ☐ Amended return ☐ Application pending (212) 979-3000 City or town, state or province, country, and ZIP or foreign postal code NEW YORK, NY  $\,$  10014 G Gross receipts \$ 194,505,835 Name and address of principal officer: H(a) Is this a group return for **ELIZABETH GRAY** □Yes ☑No subordinates? 1200 18TH ST NW STE 500 H(b) Are all subordinates WASHINGTON, DC 20036 ☐ Yes ☐No included? 4947(a)(1) or If "No," attach a list. (see instructions) Website: ► WWW.AUDUBON.ORG **H(c)** Group exemption number ▶ L Year of formation: 1905 M State of legal domicile: NY **K** Form of organization: lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other lacktriangleSummary 1 Briefly describe the organization's mission or most significant activities: AUDUBON'S MISSION IS TO PROTECT BIRDS AND THE PLACES THEY NEED, TODAY AND TOMORROW Activities & Governance 2 Check this box ► ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 29 29 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 Total number of individuals employed in calendar year 2020 (Part V, line 2a) 5 963 **6** Total number of volunteers (estimate if necessary) . . . . 6 7,500 Total unrelated business revenue from Part VIII, column (C), line 12 **7**a 76,368 **b** Net unrelated business taxable income from Form 990-T, line 39 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 117,166,575 117,977,588 Ravenue 6,456,893 9 Program service revenue (Part VIII, line 2g) . 3,533,880 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,162,810 41,596,607 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 26,572,711 8,047,329 157,358,989 171,155,404 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 4,773,037 5,441,305 0 **14** Benefits paid to or for members (Part IX, column (A), line 4) . . . . . 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 67,731,234 68,420,481 Expenses 2,854,608 2,464,633 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) ▶18,940,165 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 51,041,611 47,106,302 126,400,490 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25) 123,432,721 47,722,683 Revenue less expenses. Subtract line 18 from line 12 . 30,958,499 Net Assets or Fund Balances **Beginning of Current Year** End of Year 619,794,059 544,574,835 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 30,927,207 34,643,795 22 Net assets or fund balances. Subtract line 21 from line 20 . 513,647,628 585,150,264 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Signature of officer Sign Here ELIZABETH GRAY CEO Type or print name and title Print/Type preparer's name Preparer's signature Check  $\square$  if P00741490 Paid self-employed Firm's name FRANT THORNTON LLP Firm's EIN > 36-6055558 Preparer Use Only Firm's address ► 757 THIRD AVENUE 3RD FLOOR Phone no. (212) 599-0100 NEW YORK, NY 100172013 ☑ Yes ☐ No May the IRS discuss this return with the preparer shown above? (see instructions)

Cat. No. 11282Y

Form 990 (2020)

Form	990 (2020)					Page <b>2</b>					
Pa	rt III Statement o	of Program Servi	ce Accomplis	hments							
	Check if Sched	ule O contains a resp	onse or note to	any line in this Part III .		🗹					
1	Briefly describe the or	ganization's mission:									
THE- 23 S/ AUTH CHAF CONS	GROUND CONSERVATION ANCTUARIES, 452 INDE IENTICITY TO CARE FO PTERS AT MORE THAN 1	ON. AUDUBON IS A P PENDENT CHAPTERS R BIRDS, AND THE PL 50 COLLEGE CAMPUS	OWERFUL DISTR , AND INTERNAT ACES THEY NEE SES ACROSS THI	IBUTED NETWORK OF: IONAL PARTNERS THRO D, IN COMMUNITIES AC E U.S. OUR WORK IS A	IENCE, ADVOCACY, COMMUNITY I L8 STATE AND REGIONAL OFFICES DUGHOUT THE HEMISPHERE, WITH CROSS THE COUNTRY. AUDUBON FORMIDABLE COMBINATION OF S GE TO TACKLE SOME OF THE MOS	S, 32 NATURE CENTERS, H THE KNOWLEDGE AND HAS ALSO ESTABLISHED CIENCE, ON THE GROUND					
2	Did the organization u	ındertake any signific	ant program ser	vices during the year wi	nich were not listed on						
	the prior Form 990 or	990-EZ?				🗌 Yes 🗹 No					
	If "Yes," describe thes	se new services on Sc	hedule O.								
3	Did the organization o	ease conducting, or r	nake significant	changes in how it condu	ıcts, any program						
	services?										
	If "Yes," describe thes	se changes on Schedu	ile O.								
4		l 501(c)(4) organizati	ons are required	to report the amount of	largest program services, as meas f grants and allocations to others,						
4a	(Code:	) (Expenses \$	68,391,647	including grants of \$	3,786,704 ) (Revenue \$	3,084,170 )					
	See Additional Data										
4b	(Code: See Additional Data	) (Expenses \$	29,396,132	including grants of \$	1,660,179 ) (Revenue \$	449,710 )					
4c	(Code:	) (Expenses \$		including grants of \$	) (Revenue \$	)					
4d	Other program service (Expenses \$	•	ule O.) luding grants of	\$	) (Revenue \$	)					
4e	Total program servi	ice expenses 🟲	97,787,7	79							

	990 (2020)			Page 3
Par	tiv Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	No
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
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 2	4	Yes	
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		No
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? <i>If "Yes," complete Schedule D,</i> Part   91	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D,</i> Part III	8	Yes	
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	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X as applicable.			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Yes	
	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		No
	in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
		11e	Yes	
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year?  If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
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	Yes	
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		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
202	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
		20a		No
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?  Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b 21	Yes	
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		orm 00	0 (2020)

orm	990 (2020)			Page <b>4</b>
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
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, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🔧	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30	Yes	
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Yes	
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	Yes	
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	Yes	_
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	Yes	_
Pa	Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V	<u></u>		
	Enter the growth of growth of the Day 2 of Form 1006. Enter 0. If you to continue the continue to the continue		Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 365  Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
٠	(gambling) winnings to prize winners?	1c	Yes	

Pai	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3				
	Enter the number of employees reported on Form W-3, Transmittal of Wage and	I						
	Tax Statements, filed for the calendar year ending with or within the year covered by this return							
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Yes					
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)							
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes					
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes					
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	Yes					
b	If "Yes," enter the name of the foreign country: ►CO							
5a	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No				
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No				
	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	6a		No No				
	solicit any contributions that were not tax deductible as charitable contributions?							
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b						
7	Organizations that may receive deductible contributions under section 170(c).							
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Yes					
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes					
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No				
d	If "Yes," indicate the number of Forms 8282 filed during the year							
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No				
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?							
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?							
8	<b>Sponsoring organizations maintaining donor advised funds.</b> 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	Section 501(c)(12) organizations. Enter:  Gross income from members or shareholders							
	Gross income from other sources (Do not net amounts due or paid to other sources							
	against amounts due or received from them.)							
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a						
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.							
13	Section 501(c)(29) qualified nonprofit health insurance issuers.							
а	Is the organization licensed to issue qualified health plans in more than one state?	13a						
b	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							
c	Enter the amount of reserves on hand							
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No				
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b						
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No				

	t VI	<b>Governance, Management, and Disclosure</b> For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI	" respo	onse to i	ines			
Se	ction	A. Governing Body and Management		1				
1.5	Enter	the number of voting members of the governing body at the end of the tax year   1a   29		Yes	No			
Ia	If the body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or						
b		ar committee, explain in Schedule O.  the number of voting members included in line 1a, above, who are independent						
	<b>1b</b> 29							
2		ny officer, director, trustee, or key employee have a family relationship or a business relationship with any other r, director, trustee, or key employee?	2		No			
3		ne organization delegate control over management duties customarily performed by or under the direct supervision icers, directors or trustees, or key employees to a management company or other person?    .	3		No			
4	4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .							
5	Did th	ne organization become aware during the year of a significant diversion of the organization's assets?	5		No			
6		ne organization have members or stockholders?	6	Yes				
7a		ne organization have members, stockholders, or other persons who had the power to elect or appoint one or more bers of the governing body?	7a	Yes				
b		ny governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or one other than the governing body?	<b>7</b> b		No			
8		ne organization contemporaneously document the meetings held or written actions undertaken during the year by bllowing:						
а	The g	poverning body?	8a	Yes				
b	Each	committee with authority to act on behalf of the governing body?	8b	Yes				
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the nization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No			
Se	ction	B. Policies (This Section B requests information about policies not required by the Internal Revenue	e Code	2.)				
				Yes	No			
		ne organization have local chapters, branches, or affiliates?	10a	Yes				
b		es," did the organization have written policies and procedures governing the activities of such chapters, affiliates, oranches to ensure their operations are consistent with the organization's exempt purposes?	10b	Yes				
11a	Has t form?	he organization provided a complete copy of this Form 990 to all members of its governing body before filing the	11a	Yes				
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form 990						
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were confli	officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to	12b	Yes				
С		ne organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in</i>	120	165				
	Sched	dule O how this was done	12c	Yes				
13		ne organization have a written whistleblower policy?	13	Yes				
14		ne organization have a written document retention and destruction policy?	14	Yes				
15	perso	ne process for determining compensation of the following persons include a review and approval by independent ones, comparability data, and contemporaneous substantiation of the deliberation and decision?						
		organization's CEO, Executive Director, or top management official	15a	Yes				
b		officers or key employees of the organization	15b		No			
16a	Did th	es" to line 15a or 15b, describe the process in Schedule O (see instructions).  The organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a little of the contribute assets.	16a		Na			
h		ole entity during the year? s.," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	104		No_			
	in joir	nt venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt s with respect to such arrangements?	16b					
Se	ction	C. Disclosure						
17		he states with which a copy of this Form 990 is required to be filed▶			- 101			
		AL , AK , AR , CA , CO , CT , DC , FL , GA , , LA , ME , MD , MA , MI , MN , MS , MO , N , NC , ND , OH , OK , OR , PA , RI , SC , TN , WI	NV , NH	I, NJ, N	IM , NY			
18		on 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s available for public inspection. Indicate how you made these available. Check all that apply.						
		Own website $\ \square$ Another's website $\  ot \!$						
19	Descr policy	ribe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest , and financial statements available to the public during the tax year.						
20		the name, address, and telephone number of the person who possesses the organization's books and records: ETA HATLEY 225 VARICK STREET NEW YORK, NY 10014 (212) 979-3000						

Part VII

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

• 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.

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

• List all of the organization's former officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the

organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

(A) (C) (D) (F) (B) (E) Name and title Estimated Average Position (do not check more Reportable Reportable than one box, unless person amount of other hours per compensation compensation is both an officer and a week (list from the from related compensation any hours director/trustee) organization organizations from the

	for related						(1)/-2/1000-	(1) 2/1000	organization and	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W-2/1099- MISC)	(W-2/1099- MISC)	organization and related organizations
See Additional Data Table										
-										
										Form <b>990</b> (2020)

Form 990 (2020)					<u> </u>								Page <b>8</b>
Part VII Section A. Officers, Direct (A) Name and title	(B) Average hours per week (list any hours	Position than of is b	ion (do	(C) lo not sox, u	c) ot che unles	neck mo ess pers	ore son	( <b>E</b> Repoi compei from organi	D) rtable nsation n the ization	(E) Reportable compensation from related organizations	(E) Reportable Impensation Impensation Impensations		) ated of other sation the
	for related organizations below dotted line)		Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		/1099- SC)	(W-2/1099- MISC)		organization ar related organizations	
See Additional Data Table													
			$oxedsymbol{oxedsymbol{oxedsymbol{\square}}}$										
		<u> </u>	$\downarrow$	<u>_</u>	$\downarrow$	<u> </u>	$\bigsqcup$	<u> </u>			$\perp$		
		—	igspace	<u> </u> -	$\downarrow$	_	$\square$	<u> </u>			+		
	-	<del> </del>	$\vdash$	+	$\vdash$	_	+	<del>                                     </del>			+		
	-	<del> </del>	+	+-	$\vdash$	_	++	<del>                                     </del>			$\perp$		
	-	<del>                                     </del>	+	+	+	+	+				+		
			+	$\vdash$	$\vdash$						$\top$		
			<u> </u>										
c Total from continuation sheets to P d Total (add lines 1b and 1c)  Total number of individuals (including of reportable compensation from the	g but not limited	· ·				re) who	 o rece	· · · · · ·	89,643 re than \$	100,000	0		372,247
3 Did the organization list any former	officer director	or trust		~~·		lovee.	or hi	aheet com	nensate	d amployee on		Yes	No
line 1a? If "Yes," complete Schedule.			tee, K	<b>≘</b> y ⊂.	ille.	Jyec, .	)I III5			a employee 5	3	Yes	
4 For any individual listed on line 1a, is organization and related organization individual	the sum of reports greater than \$	ortable ( \$150,00 • •	comp 0? <i>If</i>	ensa "Yes	ation s," c	1 and c complet	other te Sc	compensa hedule J f	ation fro <i>or such</i>	m the	4	Yes	
5 Did any person listed on line 1a recei services rendered to the organization									ion or inc	dividual for	5		No
Section B. Independent Contract  Complete this table for your five high		ad inder	rende	nt c	ontr	actors	that	received	more tha	in \$100,000 of co	mnens	ation	
from the organization. Report compe											IIP-	((	·\
Name :	and business addre	ess					—		Des	scription of services		Compe	
8932 ORANGE HUNT LANE													,
ANNANDALE, VA 22003 ALLEGIANCE FUNDRAISING GROUP LLC									DIGITAL M	ARKETING SUPPORT		1	,161,369
3064 49TH STREET S FARGO, ND 58104													
STAGECOACH DIGITAL PO BOX 8806			_	_	_	_	_	F	UNDRAIS	ING SERVICES	_	1	,048,800
BURLINGTON, VT 05402 O'BRIEN GARRETT								F	UNDRAIS	ING SERVICES			567,779
1133 19TH ST NW SUITE 300									···_	11.0 02			J.,
POSTLIGHT LLC				_	_				DIGITAL T	ECHNOLOGY SVCS			491,750
101 5TH AVENUE 10TH FLOOR NEW YORK, NY 10003													
2 Total number of independent contractor compensation from the organization ▶		: not lim	iited t	:o th	ıose	listed	abov	re) who re	ceived n	nore than \$100,00			
												Form 90	<b>0</b> (2020)

		(2020)								Page <b>9</b>
Part	VII				resno	nse or note to any	line in this Part VIII			🗹
		CHECK II SCHE	<u>uuie</u>	O contains a	respo	inse of flote to any	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
:0	<b>1</b> a	Federated campaig	gns	1	а			revenue		312 - 314
s, Grants Amounts	b	Membership dues		. 1	b					
Contributions, Gifts, Grants and Other Similar Amounts	С	Fundraising events	s .	. 1	c	972,591				
ifts, ar A		Related organization		<u> </u>	d					
3° G ⊞:E		Government grants (			e	10,423,810				
iom r Si	f	and similar amounts	s, gif not ir	ts, grants, ncluded	.f	106,581,187				
but	g		s incl			· · ·				
Contributions, Gift and Other Similar		lines 1a - 1f:\$			g	5,448,908				
<u>ة ت</u>	h	Total. Add lines 1a	a-1f		•	•	117,977,588			
	3.	CONTRACTUAL REVE	NHF			Business Code	1,109,748	1,109,748		
<u>9</u>	~	- COMMINICATION ENCEVE				900099				
Ven	Ŀ	ADMISSIONS				900099	814,720	814,720		
⊕ 02		CONSERVE/MITIG. FE	EES			900099	797,519	797,519		
r vic		• DECICEDATION FEE	,			300033	329,716	329,716		
Program Service Revenue	C	REGISTRATION FEES				900099	323,713	323,716		
grar	€	TUITION INCOME				900099	312,380	312,380		
Æ							169,797	169,797		
		All other program					·	·		
		Total. Add lines 2 Investment income				3,533,880 aterest and other	1	1	Ι	1
	:	similar amounts) .				•	4,653,169		76,368	4,576,801
		Income from invest			ipt bo	_	1 670 000	3		1,679,083
	3	Royalties	ı.	(i) Real	•	(ii) Personal	1,073,000	1		1,073,003
	_		_				1			
	l	a Gross rents Less: rental	6a	70	06,019		-			
	"	expenses	6b		0					
	С	Rental income or (loss)	6c	70	06,019					
	,	d Net rental income	e or	(loss)		· · · <b>&gt;</b>	706,019	9		706,019
				(i) Securit	ies	(ii) Other				
	7 <i>a</i>	Gross amount from sales of assets other than inventory	7a	59,70	06,793	3,65	0			
	b	Less: cost or other basis and sales expenses 7b 22,767,005					0			
	С	Gain or (loss)	7c	36,93	39,788	3,65	0			
	١	d Net gain or (loss)	•				36,943,438	3		36,943,438
Other Revenue	88	8a Gross income from fundraising events (not including \$ 972,591 of contributions reported on line 1c). See Part IV, line 18			8a	65,245				
Re	ı	<b>b</b> Less: direct expen	ses		8b	241,742	_			
her	، ا	c Net income or (los	ss) fr	om fundraisir	ig eve	ents 🕨	-176,497	7		-176,497
	9a	Gross income from See <b>Part</b> IV, line 19			9a	500				
	ı	<b>b</b> Less: direct expen			9b	0				
	١ (	c Net income or (los	ss) fr	om gaming a	ctiviti.	es <b>&gt;</b>	500			500
	10	aGross sales of inve	ento	ry, less						
		returns and allowa			10a	817,617 341,684	_			
		<b>b</b> Less: cost of good • Net income or (los			10b	· · · · · · · · · · · · · · · · · · ·	475,933	3		475,933
		Miscellaneo			TVCTIC	Business Code				
	11aLITITATION RECOVERIES					90009	9 4,740,405	5		4,740,405
	ı	LIST RENTAL				90009	9 144,298		144,298	
	,	INSURANCE RECO	OVER	IES		90009	9 106,811	L		106,811
	l	d All other revenue					370,777	7		370,777
		e <b>Total.</b> Add lines 1				•	5,362,291			
	12	<b>2 Total revenue.</b> S	ee ir	nstructions .	•	• • • •	171,155,404	3,533,880	76,368	
										Form <b>990</b> (2020)

Part IV, line 22 . . .

kev employees .

section 4958(c)(3)(B) .

7 Other salaries and wages .

9 Other employee benefits .

a Management . . .

. 11 Fees for services (non-employees):

> . . . . .

f Investment management fees .

**12** Advertising and promotion .

10 Payroll taxes .

c Accounting .

**d** Lobbying . .

13 Office expenses .

15 Royalties .

**17** Travel .

20 Interest

d

23 Insurance .

16 Occupancy .

14 Information technology

**b** Legal .

and 16. . . . . . . . . . 4 Benefits paid to or for members .

1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 .

2 Grants and other assistance to domestic individuals. See

3 Grants and other assistance to foreign organizations, foreign

governments, and foreign individuals. See Part IV, lines 15

Compensation of current officers, directors, trustees, and

6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in

Pension plan accruals and contributions (include section 401

(k) and 403(b) employer contributions) . . .

e Professional fundraising services. See Part IV, line 17

(A) amount, list line 11g expenses on Schedule O)

18 Payments of travel or entertainment expenses for any federal, state, or local public officials .

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

25 Total functional expenses. Add lines 1 through 24e

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).

**19** Conferences, conventions, and meetings

22 Depreciation, depletion, and amortization

21 Payments to affiliates . . .

expenses on Schedule O.)

**b** MEMBERSHIP FULLFILLMENT

c SUBSCRIPTIONS & DUES

a SERVICE BUREAUS

e All other expenses

g Other (If line 11g amount exceeds 10% of line 25, column

199,252

7,820,522

1,049,716

571,884

1,448

2,464,633

744,965

656,133

36,350

541,565

8,630

18,805

88,445

26,457

208,084

611,666

53,395

2,015

18,940,165

4,450,000

Form 990 (2020)

3,629,326

206,874

expenses

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).	
	Charles & Caladada O contains a management to any line in this Boot IV	

Section 501(c)(3) and 501(c)(4) organizations must	complete all columns	. All other organization	ons must complete co	olumn (A).
Check if Schedule O contains a response or note to a	ny line in this Part IX			🗹
Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service	(C) Management and	( <b>D)</b> Fundraising

4,978,857

141,551

320,897

2,715,839

672,188

52,329,172

1,437,250

7,292,878

3,973,154

545,938

186,735

223,121

733,290

785,992

638,484

368,094

337,950

118,735

3,219,644

1,436,687

1,615,238

1,082,134

907,360

23,054

123,432,721

10,529,000

4,225,026

2,464,633

16,774,849

13,883,971

expenses

4,978,857

141,551

320,897

2,192,759

495,149

42,508,696

1,165,866

5,915,827

3,222,938

119,937

223,121

15,576,103

10,134,421

128,190

282,796

368,094

322,676

88,388

2,940,826

1,115,449

1,299,103

470,468

832,933

18,420

97,787,779

6,079,000

2,924,314

general expenses

323,828

177,039

1,999,954

64,510

327,335

178,332

424,553

186,735

733,290

453,781

1,669

120,224

319,338

759,147

6,644

11,542

190,373

294,781

108,051

21,032

2.619

6,704,777

Form 990 (2020)

3

Assets

11

12

13

14

15

16

17

18

19

20

21

23

24

25

26

27

28

31

32

33

Liabilities 22

Fund Balances

ō 29

Assets 30 95,258,913

42,136,642

20,294,188

9,599,558

299.310

2,264,981

146,615,171

174,329,999

127.551.654

1,240,491

619,794,059

15,932,741

5.489.158

4,512,432

8,709,464

34.643.795

269.853,640

315,296,624

585,150,264

619,794,059

Form 990 (2020)

0

0

0

203,152

(B) End of year

Page **11** 

1	Cash_non_inter

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

Intangible assets .

Grants payable .

Deferred revenue . . .

Complete Part X of Schedule D

complete lines 27, 28, 32, and 33.

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Cash-non-interest-bearing . . . . . .

Savings and temporary cash investments . . . Pledges and grants receivable, net . . .

Accounts receivable, net

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B).

Investments—other securities. See Part IV, line 11 . . .

**Total assets.** Add lines 1 through 15 (must equal line 33) .

Escrow or custodial account liability. Complete Part IV of Schedule D

Secured mortgages and notes payable to unrelated third parties . . .

Organizations that follow FASB ASC 958, check here <a> \square</a> and

Unsecured notes and loans payable to unrelated third parties .

and other liabilities not included on lines 17 - 24).

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity 

Other liabilities (including federal income tax, payables to related third parties,

Organizations that do not follow FASB ASC 958, check here ightharpoonup and

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Inventories for sale or use . . . . . Prepaid expenses and deferred charges . 10a Land, buildings, and equipment: cost or other 10a basis. Complete Part VI of Schedule D 10b b Less: accumulated depreciation Investments—publicly traded securities .

Investments—program-related. See Part IV, line 11 .

Other assets. See Part IV, line 11 . . .

Accounts payable and accrued expenses .

Tax-exempt bond liabilities . . .

Notes and loans receivable, net . . . .

196,093,280 49,478,109

Beginning of year

72,327,944

50,349,656

24,155,498

8,603,326

0 5

0 6 0

389.066

1,945,596

1

2

3

4

7

8

9

17

19

21

25

26

27

28

29

30

31

32

33

0 18

0 20

0 22

0 23

0 24

146,580,275 10c 143,741,256 11 96.213.318 12 13 25,500 14 243,400 15 544,574,835 16

11,879,026

5,095,782

2,889,475

11,062,924

30.927.207

246,926,860

266,720,768

513,647,628

544,574,835

2b

2c

3a

3b

Yes

Yes

Yes

Yes (2020)

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

Consolidated basis

consolidated basis, or both:

Audit Act and OMB Circular A-133?

☐ Separate basis

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

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

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

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

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

☐ Both consolidated and separate basis

## **Additional Data**

## Software ID: Software Version:

**EIN:** 13-1624102

Name: NATIONAL AUDUBON SOCIETY INC.

Form 990 (2020)

SEE SCHEDULE O

Form 990, Part III, Line 4a:

Form 990, Part III, Line 4b: SEE SCHEDULE O

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Estimated Average Reportable than one box, unless hours per compensation compensation amount of other person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
DAVID M YARNOLD PRESIDENT (THRU 01/21) AND CEO	40.00			х				821,779	0	32,348
STEPHEN E MEYER CHIEF OPERATING OFFICER	40.00			х				387,840	0	38,447
SEAN M O'CONNOR CHIEF DEVELOPMENT OFFICER	40.00					Х		366,154	0	26,275
SUSAN J LUNDEN CHIEF OF STAFF (THRU 06/20)	0.00						х	354,079	0	18,311
MARY BETH HENSON THRU 0521	40.00									

Χ

Χ

Х

Х

2.00 40.00

0.00 40.00

0.00 40.00

2.00 40.00

2.00 40.00

0.00

......

......

334,344

323,430

314,338

290,417

288,541

284,060

0

0

0

0

0

0

23,575

21,429

30,745

23,209

23,447

23,299

SUSAN J LUNDEN
CHIEF OF STAFF (THRU 06/20)
MARY BETH HENSON THRU 0521
VP AND CHIEF FINANCIAL OFFICER

......

JOSE M CARBONELL THRU 0421

VP/ED, AUDUBON NY & CT (THRU 12/20)

CHIEF MARKETING OFFICER

CHIEF TECHNOLOGY OFFICER

VP AND GENERAL COUNSEL

CHIEF FIELD & STRATEGY OFFICER

ANA PAULA D TAVARES

MARCO S CARBONE

LORRAINE A SCIARRA

REBECCAH SANDERS

and Independent Contractors

(A) (B) (C) (D) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) any hours organization organizations from the

	for related	o	l		-x-	la T	_	(W- 2/1099-	(W- 2/1099-	organization and
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated	Former	MISC)	MISC)	related organizations
DAVID J RINGER THRU 0421	40.00									
					Х			275,845	0	25,811
CHIEF NETWORK OFFICER	0.00									
AURELIO RAMOS	40.00									
						X		259,172	0	31,101
SENIOR VP, AUDUBON AMERICAS	0.00									
SARAH D GREENBERGER	40.00									
						Х		271,535	0	18,348
SENIOR VP, CONSERVATION POLICY	0.00									
KENNETH BRIAN TRUSTY	40.00									
							Х	172,094	0	24,728
SENIOR DIRECTOR	0.00				1			1		

Χ

146,015

0

0

0

0

0

0

11,174

0.00

0.00 8.00

0.00 8.00

0.00 8.00

2.00 8.00

0.00 8.00

0.00

.......

......

Χ

Х

Χ

Χ

Χ

Х

Х

Χ

Χ

SARAH D GREENBERGER
SENIOR VP, CONSERVATION POLICY
KENNETH BRIAN TRUSTY
SENIOR DIRECTOR
DAVID J O'NEILL THRU 0520

CHIEF CONSERVATION OFFICER

VICE CHAIR/CHAIR (AS OF 06/21)

SUSAN BELL

MARGARET WALKER

CHAIR (THRU 06/21)

DAVID HARTWELL

KARIM AL-KHAFAJI

.......

VICE CHAIR (THRU 02/21)

GEORGE S GOLUMBESKI

ASSISTANT SECRETARY

TREASURER/V. CHAIR (AS OF 06/21)

and Independent Contractors

(A) (E) (B) (C) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless hours per compensation compensation amount of other person is both an officer week (list from related from the compensation

and Independent Contractors

DIRECTOR (THRU 02/21)

DIRECTOR (AS OF 02/21)

DIRECTOR (THRU 11/20)

DIRECTOR (THRU 02/21)

......

RODNEY BROWN

COLEMAN BURKE

DOUG CHANG

MIKE CONNOR

MICHELE CRIST

DIRECTOR

DIRECTOR

	any hours	and	a dir	ecto	r/tr	ustee)	)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
PHIL SWAN ASSISTANT SECRETARY	8.00	Х		х				0	0	0	
AJAY SHAH ASSISTANT TREASURER	0.00 8.00 0.00	х		x				0	0	0	
JOSEPH ELLIS SECRETARY	8.00	х		×				0	0	0	
JANE ALEXANDER	8.00										

0

0

0

0

0

0

	0.00					
JOSEPH ELLIS	8.00					
		Х	Х		0	
SECRETARY	0.00					
JANE ALEXANDER	8.00					
STATE FREEZO AND EIX		Х			0	
DIRECTOR	0.00				Ū	
PETER ALPERT	8.00					
TETER METERS		x			٥ ا	

0.00 8.00

0.00 8.00

0.00 8.00

0.00 8.00

2.00 8.00

0.00

.......

......

Χ

Х

Χ

Χ

Χ

(A) (E) (B) (C) (D) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average amount of other than one box, unless hours per compensation compensation person is both an officer week (list from the from related compensation and a director/trustee) organizations any hours organization from the

and Independent Contractors

ASSISTANT SECRETARY

JAMES C GREENWOOD

DIRECTOR (THRU 02/21)

DIRECTOR

DIRECTOR

KATE JAMES

DIRECTOR

DIRECTOR

SALLY JEFFORDS

WILLIAM HECK

JESSICA HELLMAN

	any nours	and	a dir	ecto	or/tr	ustee	,	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
MARY DAUGHERTY	8.00									
		X						0	0	0
DIRECTOR	0.00									
DEAN FISCHER	8.00									
		X						0	0	0
DIRECTOR (THRU 05/21)	0.00									
SARA FUENTES	8.00									
		Х						0	0	0
DIRECTOR	0.00									
	8 00							, and the second		

		l X	l		1 ()	l (II	
DIRECTOR (THRU 05/21)	0.00					_	
SARA FUENTES	8.00						
		X			0	0	
DIRECTOR	0.00						
ERIN GIESE	8.00						
		Y			۵	n	
DIRECTOR (AS OF 02/21)	0.00	^			9	ŭ	
JEFFREY GOODBY	8.00						
JEH KET GOODDT		X	Ιx		n	n	

Χ

Х

Χ

Χ

Χ

0

0

0

0

0.00 8.00

0.00 8.00

0.00 8.00

0.00 8.00

0.00 8.00

0.00

.......

......

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless amount of other hours per compensation compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) organization organizations from the

and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LILI TAYLOR

DIRECTOR

STEPHEN TAN

ANNA RIGGS

HEATHER SINGH

KATHY SULLIVAN

DIRECTOR (THRU 11/20)

......

	formulated	d d	u un	CCCC	21 / CI	ascec,	'	(14/ 2/1000	(14, 2/1000	overnientien and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
RICHARD H LAWRENCE	8.00	Х						0	0	0	
DIRECTOR	0.00							Ţ	,		
HECTOR E MORALES JR DIRECTOR	8.00	Х						0	0	0	
	0.00 8.00										
STEFFANIE MUNGUIA DIRECTOR	0.00	Х						0	0	0	

DIRECTOR	0.00	Α.				
STEFFANIE MUNGUIA	8.00					
		Х			0	
DIRECTOR	0.00					
SUSAN ORR	8.00					
		Χ			0	
DIRECTOR	2.00					
R CYNTHIA PRUETT	8.00					

0.00

0.00

0.00

0.00

2.00 8.00

0.00

.......

......

Χ

Χ

Х

Χ

Χ

Χ

0

0

0

0

0

0

(A) (B) (E) (F) Name and Title Position (do not check more Reportable Reportable Average Estimated than one box, unless compensation compensation amount of other person is both an officer from the from related compensation

and Independent Contractors

JOSEPH WATTS
DIRECTOR

	any hours	and	l a dir	ecto	r/tr	ustee)	)	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	1 () (	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
ART WANG	8.00	х						0	0	0
DIRECTOR (THRU 02/21)	0.00								0	
IOSEPH WATTS	8.00									

0.00

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493066013182					
SCI	HED	ULE A	Public	Charity Statu	e and Dul	hlic Sunn	ort	OMB No. 1545-0047					
	m 99		Complete if the o	rganization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) e empt charitable 990 or Form 99	organization or trust. 00-EZ.	· a section	2020					
		the Treasury	► Go to <u>www.ir</u>	s.gov/Form990 for i	nstructions and	I the latest info	ormation.	Open to Public Inspection					
Nam	e of th	nie Service ne organiza JDUBON SOCIE					Employer identific	ation number					
NATIC	NAL AC	JOBON SOCI	ITT INC				13-1624102						
	rt I		for Public Charity Stat				See instructions.						
1 ne c	rganiz		a private foundation becaus onvention of churches, or a	`			(A)(:)						
		,	•				. , . ,						
2			scribed in section 170(b)		,								
3		·	or a cooperative hospital ser	-			-						
4		A medical r name, city,	esearch organization operat and state:	ed in conjunction with	a hospital descri	ibed in <b>section</b> :	170(b)(1)(A)(iii). E	nter the hospital's					
5		An organization operated for the benefit of a college or university owned or operated by a governmental unit described in <b>section 170</b> (b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in <b>section 170</b> (b)(1)(A)(v).											
6		A federal, s	tate, or local government o	r governmental unit de	scribed in <b>sectio</b>	on 170(b)(1)(A	()(v).						
7	<b>✓</b>	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.)											
8		A communi	ty trust described in <b>sectio</b>	n 170(b)(1)(A)(vi).	(Complete Part I	I.)							
9		An agricultural research organization described in 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land grant college of agriculture. See instructions. Enter the name, city, and state of the college or university:											
10		An organization that normally receives: (1) more than 331/3% 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 331/3% 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.)											
11		An organiza	ation organized and operate	d exclusively to test fo	r public safety. S	See section 509	(a)(4).						
12		more public	ation organized and operate cly supported organizations othrough 12d that describes	described in <b>section 5</b>	<b>09(a)(1)</b> or <b>se</b>	ction 509(a)(2	). See <b>section 509(</b> a						
а		organizatio	supporting organization ope n(s) the power to regularly Part IV, Sections A and B	appoint or elect a majo									
b		Type II. A manageme	supporting organization sup nt of the supporting organiz plete Part IV, Sections A	pervised or controlled i ation vested in the sar									
С		Type III f	unctionally integrated. A organization(s) (see instruct	supporting organizatio				ted with, its					
d		Type III n	on-functionally integrated integrated integrated. The organization in You must complete Pa	ed. A supporting organion generally must satis	ization operated fy a distribution	in connection wi requirement and	th its supported orgar						
е			box if the organization receit or Type III non-functionally			RS that it is a Ty	pe I, Type II, Type II	I functionally					
f	Enter	the number	of supported organizations				<u> </u>						
g			ing information about the s	T'	т'		Γ	T					
	(i) N	Name of supported of the second of the secon		(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)					
					Yes	No							
Tota			tion Act Notice, see the I	<u> </u>	Cat. No. 11285		 Schedule A (Form 9	<u> </u>					

P	(Complete only if you ch						
	If the organization failed	d to qualify unde	r the tests listed	below, please of	complete Part III	aned to quality d	illuer Part III.
S	ection A. Public Support	a to quality arras		, pero ir, predoc c	ompiece rait 111	,	
	Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in)	(a) 2010	(B) 2017	(0) 2010	(4) 2015	(e) 2020	(I) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grant.")	90,545,587	92,035,185	115,962,965	117,166,575	117,977,588	533,687,900
2	Tax revenues levied for the organization'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						
	Total. Add lines 1 through 3	90,545,587	92,035,185	115,962,965	117,166,575	117,977,588	533,687,900
	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						28,771,512
6	(f) <b>Public support.</b> Subtract line 5						504,916,388
	from line 4. ection B. Total Support						
_	Calendar year	(p) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ▶	(a) 2016	` ,	. ,	` '		(f) Total
7	Amounts from line 4.	90,545,587	92,035,185	115,962,965	117,166,575	117,977,588	533,687,900
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	6,521,961	7,559,855	9,835,395	9,140,050	7,038,271	40,095,532
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 VI.).	1,453,438	3,669,808	1,477,847	24,109,677	5,428,036	36,138,806
11	<b>Total support.</b> Add lines 7 through 10						609,922,238
12	Gross receipts from related activities,	etc. (see instruction	ons)			12	30,485,869
13	First 5 years. If the Form 990 is for	the organization's i	first, second, third	, fourth, or fifth ta	x year as a section	501(c)(3) organiz	ation, check
	this box and <b>stop here</b>					▶□	
S	ection C. Computation of Publi	ic Support Perc	entage				_
14	Public support percentage for 2020 (I	ine 6, column (f) d	ivided by line 11, o	column (f))		14	82.780 %
15	Public support percentage for 2019 Se	chedule A, Part II,	line 14			15	83.090 %
16a	33 1/3% support test-2020. If the	e organization did r	not check the box	on line 13, and line	e 14 is 33 1/3% or	more, check this b	юх
ь	and <b>stop here.</b> The organization qua <b>33 1/3% support test—2019.</b> If the	lifies as a publicly s he organization did	supported organiza not check a box o	ation In line 13 or 16a, a			, <b>▶ ☑</b> c this
17a	box and <b>stop here.</b> The organization <b>10%-facts-and-circumstances test</b> is 10% or more, and if the organization Part VI how the organization meets	st— <b>2020.</b> If the orgon meets the "facts	ganization did not s-and-circumstance	check a box on line es" test, check this	e 13, 16a, or 16b, box and <b>stop her</b>	and line 14 <b>·e.</b> Explain	▶□
b	organization .  10%-facts-and-circumstances te 15 is 10% or more, and if the organi Explain in Part VI how the organizati	st—2019. If the o	rganization did not facts-and-circumst	check a box on lir ances" test, check	ne 13, 16a, 16b, or this box and <b>stop</b>	r 17a, and line here.	▶□
18	supported organization Private foundation. If the organizat						▶□
	instructions				<u> </u>		▶□

Р	Support Schedule for						
	(Complete only if you c						er Part II. If
	the organization fails to	quality under	the tests listed	pelow, please co	omplete Part II.	)	
Se	ection A. Public Support						1
	Calendar year	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
	(or fiscal year beginning in) ► 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						
5	to or expended on its behalf The value of services or facilities						
3	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	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.						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6.)						
	ection B. Total Support		1	1	Γ	Π	1
	Calendar year (or fiscal year beginning in) ▶	(a) 2016	<b>(b)</b> 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on	I					
	securities loans, rents, royalties and	I					
	income from similar sources.						
b	Unrelated business taxable income	I					
	(less section 511 taxes) from businesses acquired after June 30,	I					
	1975.	I					
С	Add lines 10a and 10b.						
11	Net income from unrelated business						
	activities not included in line 10b,	I					
	whether or not the business is	I					
12	regularly carried on.		-				1
12	Other income. Do not include gain or loss from the sale of capital assets	1					
	(Explain in Part VI.)	1					
13							
	11, and 12.).		<u> </u>	1.6 11 601 1		F04( )(2)	<u> </u>
14	First 5 years. If the Form 990 is for the	-			•	. , , ,	· —
	check this box and <b>stop here</b>					<u></u>	<u>▶⊔</u>
	ection C. Computation of Public S			(6)			
15	Public support percentage for 2020 (lin					15	
16	Public support percentage from 2019 S					16	
	ection D. Computation of Investi				.,		
17	Investment income percentage for 202	•	.,	•	• •	17	
18	Investment income percentage from 2	<b>019</b> Schedule A,	Part III, line 17 .			18	
19a	331/3% support tests—2020. If the	organization did r	not check the box	on line 14, and lin	ne 15 is more thar	33 1/3%, and lin	e 17 is not
	more than 33 1/3%, check this box and s	stop here. The o	rganization qualifi	es as a publicly su	ipported organiza	tion	. ▶□
	33 1/3% support tests—2019. If the						
	not more than 33 1/3%, check this box	and <b>stop here.</b>	The organization	qualifies as a publ	icly supported org	anization	. ▶ □
20	Private foundation. If the organization	on did not check a	a box on line 14, 1	l9a, or 19b, check	this box and see	instructions	▶ 🗆

Page 4

7

8

9a

9b

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2020

Schedule A (Form 990 or 990-EZ) 2020

7

8

10a

box 12b, of Part I, complete Sections A and C. If you checked box 12c, of Part I, complete Sections A, D, and E. If you checked box 12d, of Part I, complete Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose,		
	describe the designation. If historic and continuing relationship, explain.	1	
2	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 <b>Part VI</b> 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 lines 3b and		
	3c 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 <b>Part VI</b> 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?		

	III Section 303(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 lines 3b and			
	3c 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 <b>Part VI</b> when and how the organization made the			
	determination.			
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?			
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			

	the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> 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 <b>Part VI</b> what controls the organization put in place to ensure such use.			
	If tes, explain in <b>Part v1</b> what controls the organization put in place to ensure such use.	3с		
4a	ny supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.			
С	d the organization support any foreign supported organization that does not have an IRS determination under sections $\Omega(c)(3)$ and $\Omega(a)(1)$ or (2)? If "Yes," explain in <b>Part VI</b> 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		
5а	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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			

C					
	If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3с			
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked box 12a or 12b in Part I, answer lines 4b and 4c below.				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or				
	supervised by or in connection with its supported organizations.				
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 <b>Part VI</b> 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.				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in <b>Part VI</b> , 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).				

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 5c 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 6 than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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. 6

Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a

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,"

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ) .

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

complete Part I of Schedule L (Form 990 or 990-EZ).

the organization had excess business holdings).

organization had an interest? If "Yes," provide detail in Part VI.

provide detail in Part VI.

answer line 10b below.

Pa	rt IV	Supporting Organizations (continued)			
				Yes	No
		e organization accepted a gift or contribution from any of the following persons?			
а		on who directly or indirectly controls, either alone or together with persons described in lines 11b and 11c below, the hing body of a supported organization?	11a		
b	A fami	ily member of a person described in 11a above?	11b		
		o controlled entity of a person described in line 11a or 11b above? If "Yes" to 11a, 11b, or 11c, provide detail in <b>Part</b>	11c		
_	VI.	B. Type I Supporting Organizations			
	ection	b. Type I Supporting Organizations		Yes	No
1	appoir descrit activit remov	e officers, directors, trustees, or membership of one or more supported organizations have the power to regularly be or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," be in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's ies. If the organization had more than one supported organization, describe how the powers to appoint and/or be directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, and to such powers during the tax year.	1		
2	Did the	e 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization.				
_					
5	ection	C. Type II Supporting Organizations		Yes	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		163	110
-	each d	of the organization's supported organization(s)? If "No," describe in <b>Part VI</b> how control or management of the rting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
S	ection	D. All Type III Supporting Organizations			
				Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?				
			1		
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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).					
_			2		
3	voice i	ison of the relationship described in line 2 above, did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at all times the tax year? If "Yes," describe in <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
S	ection	E. Type III Functionally-Integrated Supporting Organizations			
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructi	ons):		
	a 🗌	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.			
	c 🗌	The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a government entity (see	instru	ctions)	
2	Activit	ies Test. <b>Answer lines 2a and 2b below.</b>		Yes	No
	suppor o <b>rgan</b> respor	bstantially all of the organization's activities during the tax year directly further the exempt purposes of the rted organization(s) to which the organization was responsive? If "Yes," then in <b>Part VI identify those supported lizations and explain</b> how these activities directly furthered their exempt purposes, how the organization was sive to those supported organizations, and how the organization determined that these activities constituted	2-		
		entially all of its activities.  e activities described in line 2a constitute activities that, but for the organization's involvement, one or more of the	2a		
	organi <i>organi</i>	zation's supported organization(s) would have been engaged in? If "Yes," explain in <b>Part VI</b> the reasons for the zation's position that its supported organization(s) would have engaged in these activities but for the organization's ement.	2b		
3		of Supported Organizations. Answer lines 3a and 3b below.	20		
	a Did the	e organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of pported organizations? If "Yes" or "No" provide details in <b>Part VI</b> .	3a		
		e organization exercise a substantial degree of direction over the policies, programs and activities of each of its red organizations? <i>If "Yes," describe in <b>Part VI.</b> the role played by the organization in this regard.</i>	3b		
			30		

Schedule A (Form 990 or 990-EZ) 2020 Page 6 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional) Net short-term capital gain 1 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 Add lines 1 through 3 4 4 5 Depreciation and depletion 5 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) 7 Other expenses (see instructions) Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year): a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) **1**d e Discount claimed for blockage or other factors

(explain in detail in Part VI): 2

Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).

Net value of non-exempt-use assets (subtract line 4 from line 3) Multiply line 5 by 0.035 6 7 Recoveries of prior-year distributions

8

Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount

Adjusted net income for prior year (from Section A, line 8, Column A) Enter 85% of line 1

2

Income tax imposed in prior year

instructions)

temporary reduction (see instructions)

5

7

Enter greater of line 2 or line 3 4

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency

Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see

1 2 3

3

4

5

6

7

8

4

5

6

Schedule A (Form 990 or 990-F7) 2020

Current Year

_1	L Amounts paid to supported organizations to accomplish exempt purposes		
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3	
4	Amounts paid to acquire exempt-use assets	4	
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5	
6	Other distributions (describe in <b>Part VI</b> ). See instructions	6	
7	Total annual distributions. Add lines 1 through 6.	7	
8	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions	8	
9	Distributable amount for 2020 from Section C, line 6	9	

7 Total annual distributions. Add lines 1 through 6.				
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions				
9 Distributable amount for 2020 from Section C, line 6				
10 Line 8 amount divided by Line 9 amount	10			
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6				
2 Underdistributions if any for years prior to 2020				

8 Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions				8	
9 Distributable amount for 2020 from Section C, line 6				9	
10 Line 8 amount divided by Line 9 amount				10	
Section E - Distribution (see instruction		(i) Excess Distributions	(ii) Underdistributio Pre-2020	ons	(iii) Distributable Amount for 2020
1 Distributable amount for 2020 from	om Section C, line 6				
2 Underdistributions, if any, for yea (reasonable cause required <i>exp</i> See instructions.					
3 Excess distributions carryover, if	any, to 2020:				
a From 2015			·		
<b>b</b> From 2016					

(see instructions)	Excess Distributions	Underdistributions Pre-2020	Distributable Amount for 2020
1 Distributable amount for 2020 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2020 (reasonable cause required explain in Part VI). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020:			
a From 2015			
<b>b</b> From 2016			
c From 2017			
<b>d</b> From 2018			
e From 2019			
f Total of lines 3a through e			
<b>g</b> Applied to underdistributions of prior years			
h Applied to 2020 distributable amount			
i Carryover from 2015 not applied (see			

See instructions.		
3 Excess distributions carryover, if any, to 2020:		
a From 2015		
<b>b</b> From 2016		
c From 2017		
<b>d</b> From 2018		
e From 2019		
f Total of lines 3a through e		
g Applied to underdistributions of prior years		
<b>h</b> Applied to 2020 distributable amount		
<ul> <li>Carryover from 2015 not applied (see instructions)</li> </ul>		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
<b>b</b> Applied to 2020 distributable amount		

f Total of lines 3a through e		
<b>g</b> Applied to underdistributions of prior years		
<b>h</b> Applied to 2020 distributable amount		
<ul> <li>Carryover from 2015 not applied (see instructions)</li> </ul>		
j Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4 Distributions for 2020 from Section D, line 7:		
<b>\$</b>		
<ul> <li>a Applied to underdistributions of prior years</li> </ul>		
<b>b</b> Applied to 2020 distributable amount		
c Remainder. Subtract lines 4a and 4b from line 4.		
5 Remaining underdistributions for years prior to		

Schedule A (Form 990 or 990-EZ) (2020)

2020, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI.

6 Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions. 7 Excess distributions carryover to 2021. Add lines

See instructions.

d Excess from 2019.

a Excess from 2016. . . . . **b** Excess from 2017. . . . . c Excess from 2018. . . . .

e Excess from 2020. . . . .

3j and 4c. 8 Breakdown of line 7:

Schedule A (Form 990 or 990-EZ) 2020 Page 8 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D. lines 5, 6, and 8; and Part V. Section E. lines 2, 5, and 6. Also complete this part for any additional information. (See instructions). Facts And Circumstances Test 990 Schedule A, Supplemental Information Return Reference Explanation SCHEDULE A, PART II, LINE 10. LITIGATION RECOVERIES - 2016 AMOUNT: \$ 171.816. 2017 AMOUNT: \$ 2,766,160. 2018 AMOUNT: \$ 1 EXPLANATION OF OTHER 07,409. 2019 AMOUNT: \$ 23,080,728. 2020 AMOUNT: \$ 4,740,405. SPECIAL EVENTS - 2016 AMOUNT: \$ 431,709. 2017 AMOUNT: \$ 314,335. 2018 AMOUNT: \$ 385,170. 2019 AMOUNT: \$ 70,350. 2020 AM INCOME: OUNT: \$ 65.245, LIST RENTAL - 2016 AMOUNT: \$ 459.635, 2017 AMOUNT: \$ 206,376, 2018 AMOUNT: \$ 151,371. 2019 AMOUNT: \$ 166,240. 2020 AMOUNT: \$ 144,298. INSURANCE RECOVERIES - 2016 AM OUNT: \$ 172,550, 2017 AMOUNT: \$ 115,426, 2018 AMOUNT: \$ 595,893, 2019 AMOUNT: \$ 118,396, 2 020 AMOUNT: \$ 106,811. MISCELLANEOUS - 2016 AMOUNT: \$ 201,593. 2017 AMOUNT: \$ 253,661. 201 8 AMOUNT: \$ 226.254, 2019 AMOUNT: \$ 624.933, 2020 AMOUNT: \$ 340.694, SPONSORSHIP - 2016 AM

AMOUNT: \$ 30,583.

OUNT: \$ 16,135. 2017 AMOUNT: \$ 13,850. 2018 AMOUNT: \$ 11,750. 2019 AMOUNT: \$ 49,030. 2020

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Political Campaign and Lobbying Activities

OMB No. 1545-0047

Schedule C (Form 990 or 990-EZ) 2020

Cat. No. 50084S

DLN: 93493066013182

Inspection

Department of the Treasury Internal Revenue Service

EZ)

5

SCHEDULE C (Form 990 or 990-

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.

▶Go to www.irs.gov/Form990 for instructions and the latest information. If the organization answered "Yes" on 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" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then • Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B. Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A. If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then • Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of the organization **Employer identification number** NATIONAL AUDUBON SOCIETY INC 13-1624102 Complete if the organization is exempt under section 501(c) or is a section 527 organization. Part I-A Provide a description of the organization's direct and indirect political campaign activities in Part IV (see instructions for definition of "political campaign activities") Political campaign activity expenditures (see instructions) 2 3 Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 ...... 1 Enter the amount of any excise tax incurred by organization managers under section 4955 ...... If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ..... 3 ☐ Yes □ No Was a correction made? ☐ Yes ☐ No If "Yes," describe in Part IV. Complete if the organization is exempt under section 501(c), except section 501(c)(3).

Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b........ 3 Did the filing organization file Form 1120-POL for this year? 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received funds. If none, enter and promptly and -0-. directly delivered to a separate political organization. If none, enter -0-. 2

Enter the amount directly expended by the filing organization for section 527 exempt function activities ..... Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities .....

Sch	nedule C (Form 990 or 990-EZ) 2020							Page <b>2</b>	
Р	art II-A Complete if the organization section 501(h)).	is exem <sub>l</sub>	ot under secti	on 501(c)(3)	and filed	Form 5768 (el	ection	under	
A	Check   if the filing organization belongs to expenses, and share of excess lobb			t in Part IV each a	affiliated gro	up member's nam	ne, addre	ess, EIN,	
В	Check ▶ ☐ if the filing organization checked be	ox A and "	limited control" p	rovisions apply.					
	Limits on Lobby (The term "expenditures" me			ırred.)		(a) Filing organization's totals	(b) Af	(b) Affiliated group totals	
1a	Total lobbying expenditures to influence public op	oinion (gra	ss roots lobbying	)					
b	Total lobbying expenditures to influence a legislat	ive body (	direct lobbying) .						
C	Total lobbying expenditures (add lines 1a and 1b)	)							
d	Other exempt purpose expenditures								
e	Total exempt purpose expenditures (add lines 1c	and 1d)			.				
f	columns.								
	If the amount on line 1e, column (a) or (b) i	is: The lo	bbying nontax	able amount is:					
	Not over \$500,000	20% of	the amount on line	1e.					
	Over \$500,000 but not over \$1,000,000	\$100,0	00 plus 15% of the	excess over \$500,00	00.				
	Over \$1,000,000 but not over \$1,500,000	\$175,0	00 plus 10% of the	excess over \$1,000,	000.				
	Over \$1,500,000 but not over \$17,000,000	\$225,0	00 plus 5% of the ex	xcess over \$1,500,0	00.				
	Over \$17,000,000	\$1,000	,000.						
	Subtract line 1f from line 1c. If zero or less, enter If there is an amount other than zero on either lin section 4911 tax for this year?	Averagi	ne 1i, did the organic ng Period Und on 501(h) elec	anization file Form der Section 50 ction do not h	)1(h) ave to cor	mplete all of th		es 🗌 No	
				Year Averagi					
	Lobbying L.	хренине	les During 4						
	Calendar year (or fiscal year beginning in)		(a) 2017	<b>(b)</b> 2018	(c) 201	9 <b>(d)</b> 2020	0	(e) Total	
<u>2a</u>	Lobbying nontaxable amount								
ь —	Lobbying ceiling amount (150% of line 2a, column(e))								
_c	Total lobbying expenditures								
d	Grassroots nontaxable amount								
е —	Grassroots ceiling amount (150% of line 2d, column (e))								
f	Grassroots lobbying expenditures								

	Form 5768 (election under section 501(h)).	1	a)	$\overline{}$	(b)	
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying ity.		<b>N</b> o	<u> </u>	Amount	
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?	Yes				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	Yes		1		
С	Media advertisements?	Yes		1		40,000
d	Mailings to members, legislators, or the public?	Yes				10,000
е	Publications, or published or broadcast statements?	Yes				2,500
f	Grants to other organizations for lobbying purposes?		No			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	Yes			7	57,635
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		No			
i	Other activities?	Yes		$\perp$		90,075
j	Total. Add lines 1c through 1i				9	00,210
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		No	_		
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)	(5), o	r sect	ion		
	501(c)(6).				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		Г	1		<del>                                     </del>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		-			
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?		H	3		_
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)			ion !	501(0	:)(6)
	and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."	III-A	, line 3	3, is		-,(-,
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
С	Total	2c				
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues .	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
5	Taxable amount of lobbying and political expenditures (see instructions)	5				
P	art IV Supplemental Information					
	vide the descriptions required for Part l-A, line 1; Part l-B, line 4; Part l-C, line 5; Part II-A (affiliated group list);	Dart II.	- A lines	1 20	d 2 (c	
	tructions), and Part II-B, line 1. Also, complete this part for any additional information.	-ait II-	-A, illies	, I all	u 2 (S	<del></del>
	Return Reference Explanation					
PART	IT II-B, LINE 1:  AUDUBON'S LOBBYING ACTIVITIES INCLUDE MEETING WITH FEDERAL, STATE OFFICIALS, DISTRIBUTING MATERIAL THROUGH VARIOUS MEDIA INCLUDING E-MAIL, TEXT MESSAGING, AND SOCIAL MEDIA CHANNELS TO THE GENERAL ISSUES, AND WORKING WITH OUTSIDE CONSULTANTS TO DEVELOP STRATE LEGISLATION.	AUDU PUBLI	JBON'S C ON E	WEBS NVIRO	SITE, DNMEN	

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493066013182

OMB No. 1545-0047

## **SCHEDULE D** (Form 990)

Department of the Treasury

Internal Revenue Service

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

► Attach to Form 990. ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Open to Public Inspection

	ne of the organization IONAL AUDUBON SOCIETY INC				Emplo	yer identificatio	n number
					13-162		
Pa	rt I Organizations Maintaining Donor Advi				or Accou	ınts.	
	Complete if the organization answered "Ye					> = 1 1 11	
	Takal number at and af year	(a) Done	or advis	ed funds	(0	) Funds and othe	raccounts
1	Total number at end of year						
2	Aggregate value of contributions to (during year)						
3	Aggregate value of grants from (during year)						
4	Aggregate value at end of year						
5	Did the organization inform all donors and donor advisor organization's property, subject to the organization's ex						☐ Yes ☐ No
5	Did the organization inform all grantees, donors, and donoritable purposes and not for the benefit of the donor private benefit?	r or donor advisor,	or for a	ny other purpose			] Yes □ No
Pai	<b>Conservation Easements.</b> Complete if the organization answered "Ye	es" on Form 990.	Part 1	V, line 7.			
1	Purpose(s) of conservation easements held by the orga						
	Preservation of land for public use (e.g., recreatio	•	П	Preservation of ar	historica	Ilv important land	area
	✓ Protection of natural habitat	ir or cadeation,	$\Box$	Preservation of a			ar ca
			Ч	rieservation of a	cerunea F	natoric structure	
	✓ Preservation of open space						
2	Complete lines 2a through 2d if the organization held a easement on the last day of the tax year.	qualified conserva	tion co	ntribution in the fo		onservation  Held at the End	of the Vest
а	Total number of conservation easements				<u>                                     </u>	Helu at the Lilu	26
b	Total acreage restricted by conservation easements				2b		6,053.00
c	Number of conservation easements on a certified histor				2c		3,000,00
d	Number of conservation easements included in (c) acqu structure listed in the National Register				2d		
3	Number of conservation easements modified, transferre tax year ▶ 1	ed, released, exting	guished	, or terminated by	the orgar	nization during the	•
4	Number of states where property subject to conservation	on easement is loca	ated ►_		8		
5	Does the organization have a written policy regarding t and enforcement of the conservation easements it hold				of violatio	ons,  Ves	□ No
6	Staff and volunteer hours devoted to monitoring, inspection 58.00	cting, handling of v	riolation	s, and enforcing c	onservatio	on easements dur	ing the year
7	Amount of expenses incurred in monitoring, inspecting,  \$\blacktriangleright* \$\\$ 39	handling of violati	ons, an	d enforcing conser	vation ea	sements during th	ne year
8	Does each conservation easement reported on line 2(d)	) above satisfy the	require	ments of section 1	70(h)(4)(	B)(i)	
	and section 170(h)(4)(B)(ii)?				. , , ,	✓ Yes	□ No
9	In Part XIII, describe how the organization reports consbalance sheet, and include, if applicable, the text of the the organization's accounting for conservation easemen	footnote to the or					
Par	Complete if the organization answered "Yes	of Art, Historic			er Simi	lar Assets.	
1a	If the organization elected, as permitted under FASB AS historical treasures, or other similar assets held for pub Part XIII. the text of the footnote to its financial statem	lic exhibition, educ	ation, d	or research in furth			
b	If the organization elected, as permitted under FASB As historical treasures, or other similar assets held for pub following amounts relating to these items:	SC 958, to report in	its rev	enue statement a			
(	i) Revenue included on Form 990, Part VIII, line 1					<b>▶</b> \$	3,690
	i)Assets included in Form 990, Part X						425,753
2	If the organization received or held works of art, historic following amounts required to be reported under FASB	ical treasures, or o	ther sin	nilar assets for fina			
а	Revenue included on Form 990, Part VIII, line 1	-				<b>&gt;</b> \$	
b	Assets included in Form 990, Part X					<b>&gt;</b> \$	
or F	Paperwork Reduction Act Notice, see the Instructio	ns for Form 990.		Cat. No.	52283D	Schedule D (F	orm 990) 202

**b** Buildings . . . .

 ${f c}$  Leasehold improvements  ${f d}$  Equipment . . . .

e Other . .

		(Form 990) 2020										Page <b>2</b>
	3111	Organizations Ma										
3		the organization's acq (check all that apply):		and other	records, ch	,	f the fo	ollowing tl	hat are a	significant ı	use of its	collection
а	✓	Public exhibition				d 🗆	Loar	or excha	inge prog	rams		
b		Scholarly research				e 🗌	Othe	er				
С		Preservation for future	e generations									
4	Provi Part )	de a description of the XIII.	organization's collec	ctions and	explain ho	w they fur	ther th	e organiz	ation's ex	empt purpo	se in	
5		g the year, did the organists to be sold to raise fur									☐ Yes	s ☑ No
Pai	t IV	Escrow and Cust Complete if the ord X, line 21.			' on Form	990, Par	t IV, I	ine 9, or	reporte	d an amoi		
1a		e organization an agent ded on Form 990, Part )								not 	☐ Yes	s 🗹 No
b	TE "Ve	es," explain the arrange	ment in Part VIII ar	ad comple	te the follo	wing table		Г		Δ	mount	
c		nning balance		·		-		<u> </u>	1c		inounc	
d	-	ions during the year .						ŀ	1d			
е		butions during the year						F	1e			
f		ng balance						F	1f			
2a	Did tl	he organization include	an amount on Form	n 990, Parl	t X, line 21	, for escro	w or cu	- ustodial a	ccount lia	bility?	✓ Yes	s 🗆 No
b		es," explain the arrange									_	
Pa	rt V	Endowment Fund			-							
		Complete if the org	ganization answer									
1-	Rogina	ing of year balance .	$\vdash$	(a) Curren	952,355	( <b>b</b> ) Prior ye	ear 57,571	(c) Two ye	ears back 2,859,931	(d) Three ye	ars back ( ,569,105	(e) Four years back 142,129,260
	-	outions	· · · · ⊢	<u> </u>	018,035	•	04,389		5,220,299		,570,134	5,352,689
		/estment earnings, gair	ns and losses	<u> </u>	052,992	· .	96,019		2,739,237		,541,813	19,589,476
		or scholarships			22,824		22,620		24,264		32,148	30,804
	Other	expenditures for facilitie	es	5,	564,520	9,2	90,966		7,937,632	8,	,788,973	-28,528,484
f	Admini	istrative expenses .										_
g	End of	year balance	🗀	232,	436,038	191,9	52,355	20	2,857,571	202,	,859,931	195,569,105
2	Provi	de the estimated perce	ntage of the current	year end	balance (li	ne 1g, col	umn (a	i)) held as	s:			
а	Board	d designated or quasi-e	ndowment ► 15	5.300 %								
b	Perm	anent endowment ►	50.320 %									
c	Term	endowment ► 34.3	380 %									
	The p	percentages on lines 2a	, 2b, and 2c should	equal 100	%.							
3a	orgar	here endowment funds nization by:	·	on of the o	organization	n that are	held ar	nd admini	stered for	the		Yes No
	<b>(i)</b> ∪	nrelated organizations									3a	• • • • • • • • • • • • • • • • • • • •
h		Related organizations are the rel							_	_	3a(	(ii) No <b>b</b>
4		ribe in Part XIII the inte						•				
Pai	t VI	Land, Buildings,	and Equipment.									
		Complete if the or										
	Descri	iption of property	(a) Cost or other (investment)		(b) Cost or	otner basis	(otner)	(c) Acci	umulated d	epreciation	(c	i) Book value
1a	Land					103,	553,468	:				103,653,468

51,661,380

23,127,736

12,805,193

4,845,503

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

25,453,051

10,653,566

2,009,583

4,845,503

26,208,329

12,474,170

10,795,610

Com	plete if the organization answered "Yes" on F  Description of security or category	orm 990, Part IV, line :		art X, line 12.
	(including name of security)	(5) Book value	Cost or end-of-	year market value
<ul><li>(1) Financial deriv</li><li>(2) Closely-held e</li></ul>				
(3) Other	ITEREST IN TRUSTS	45,016,022		F
(B) EQUITIES		10,710,687		F
(C) FIXED INCOME	:	42,478,868		F
(D) COMMON TRUS		9,569,919		F
(E) PRIVATE EQUI		14,584,220		F
(F) REAL ASSETS		5,191,938		<u>.                                      </u>
(G)		3,131,333		<u>·</u>
(H)				
(I)				
	nust equal Form 990, Part X, col. (B) line 12.)	127,551,654		
	estments—Program Related.  pplete if the organization answered 'Yes' on F	orm 990, Part IV, line :	11c. See Form 990, F	Part X, line 13.
	(a) Description of investment		(b) Book value	(c) Method of valuation: Cost or end-of-year market
(4)				value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				_
	er Assets.		•	
	plete if the organization answered 'Yes' on Fo		1d. See Form 990, Part	
(1)	(a) Description	<u> </u>		(b) Book value
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)				
	) must equal Form 990, Part X, col.(B) line 15.)			<u> </u>
Part X Other	er Liabilities.			
Com	plete if the organization answered 'Yes' on Fo (a) Description of li		1e or 11t.See Form 9	(b) Book
(1) Federal income				value
	UNDER CHARITABLE TRUSTS			8,253,340
(3) PENSION AND	POSTRETIREMENT BENEFITS			456,124
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
	nust equal Form 990, Part X, col.(B) line 25.)			8,709,464
	ertain tax positions. In Part XIII, provide the text of	the footnote to the organ		

2

а

b

1

2

C

d

е 3

b

5

Part XIII

See Additional Data Table

4

Schedule D (Form 990) 2020

Page 4

23,411,859

170,663,856

491,548

122,573,079

-368,094

491,548

123.432.721

Schedule D (Form 990) 2020

122,941,173

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

Amounts included on Form 990, Part VIII, line 12, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part VIII, line 12:

Net unrealized gains (losses) on investments . . . .

Donated services and use of facilities . . . . .

b

4 Add lines **4a** and **4b** . . . . . . . . C

5

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Subtract line 2e from line 1 . . . . . . . . . . .

Add lines **4a** and **4b** . . . . . . . . . . . .

Supplemental Information

Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

Donated services and use of facilities . .

Prior year adjustments . . . . . .

Other (Describe in Part XIII.) . . .

Add lines 2a through 2d .

Return Reference

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) . . . . . .

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses and losses per audited financial statements . . . . . .

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part

4a 4b

2a 2b

2c

2d

4a

4b

Explanation

2a

2b

2c

733,290 -241,742

-368,094

733,290 -241.742

13,758,098

4c

2e

3

4c

5

171,155,404

Page <b>5</b>	hedule D (Form 990) 2020				
	ormation (continued)	Part XIII Supplemental Info			
	Explanation	Return Reference			

Schedule D (Form 990) 2020

### Additional Data

Software ID: Software Version:

**EIN:** 13-1624102

Name: NATIONAL AUDUBON SOCIETY INC.

# **Supplemental Information**

PART II, LINE 5:

NIFICANT ITEMS.

Explanation HOW THE ORGANIZATION REPORTS CONSERVATION EASEMENTS AUDUBON HAS WRITTEN POLICIES AND PROCE DURES FOR ACQUISITION, MONITORING AND ENFORCING CONSERVATION EASEMENTS, THESE POLICIES INC.

LUDED MEETING WITH THE LANDOWNERS, SITE REVIEWS, COMPLETION OF QUESTIONNAIRES TO ENSURE TH E LANDOWNER COMPLIANCE, ANNUAL INSPECTIONS, ASSIGNMENT OF STAFF, AND BOARD APPROVAL OF SIG

Return Reference

Supplemental Information	
Return Reference	Explanation
PART II, LINE 9:	AUDUBON RECORDS THE ACQUISITION OF EASEMENTS AND SANCTUARIES AT COST WHEN PURCHASED AND FAIR MARKET VALUE WHEN DONATED.

Supplemental Informatio	n				
Return Reference	Explanation				
PART III, LINE 4:	ARTWORK FROM TIME TO TIME AUDUBON RECEIVES ARTWORK RELEVANT TO OUR MISSION, SUCH AS DRAWIN				
	GS AND ILLUSTRATIONS OF BIRDS, AND DISPLAYS SUCH ART IN VARIOUS AUDUBON CENTERS AND SANCTU ARIES. IN THE YEAR ENDING JUNE 30, 2021, AUDUBON RECEIVED \$3,690 IN DONATED ARTWORK. THE A				
	RTWORK WAS NOT CAPITALIZED AS IT WAS LESS THAN \$5,000.				

Supplemental Information	-
Return Reference	Explanation
PART IV, LINE 2B:	FUNDS HELD FOR OTHERS AUDUBON HOLDS APPROXIMATELY \$4,512,000 IN AGENCY FUNDS FOR OTHER ORG ANIZATIONS. THESE AMOUNTS HAVE BEEN RECORDED IN PART X ON THE BALANCE SHEET.

Supplemental Information						
Return Reference	Explanation					
PART V, LINE 4:	INTENDED USE OF ENDOWMENT FUNDS THE ENDOWMENT FUNDS ARE FUNDS RESTRICTED BY DONORS OR DESI GNATED BY THE BOARD TO BE HELD IN PERPETUITY OR TO BE USED WITH ONLY BOARD APPROVAL. THE B OARD HAS ESTABLISHED BUDGETED SPENDING LIMITS FOR SPECIFIC ENDOWMENT FUNDS; 2%, 3% OR 4.5% OF THE AVERAGE OF THE ROLLING FIVE YEAR MARKET VALUES, SUBJECT TO LIMITATIONS WHERE APPLI CABLE UNDER DONOR RESTRICTIONS OR REGULATORY REQUIREMENTS. THESE FUNDS ARE USED TO FURTHER AUDUBON'S MISSION. THE AMOUNTS REPORTED IN SCHEDULE D, PART V, LINE 4 ALSO INCLUDE THE VALUE OF LAND HELD BY THE ENDOWMENT WORTH \$10,295,373.					

Supplemental Information

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	AUDUBON IS EXEMPT FROM INCOME TAX UNDER IRC SECTION 501(C)(3), THOUGH IT IS SUBJECT TO TAX ON INCOME UNRELATED TO ITS EXEMPT PURPOSE, UNLESS THAT INCOME IS OTHERWISE EXCLUDED BY THE IRC. AUDUBON FOLLOWS GUIDANCE THAT CLARIFIES THE ACCOUNTING FOR UNCERTAINTY IN TAX POSIT IONS TAKEN OR EXPECTED TO BE TAKEN IN A TAX RETURN, INCLUDING ISSUES RELATING TO FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT. THIS GUIDANCE PROVIDES THAT THE TAX EFFECTS FROM A NUNCERTAIN TAX POSITION CAN ONLY BE RECOGNIZED IN THE CONSOLIDATED FINANCIAL STATEMENTS IF THE POSITION IS MORE LIKELY THAN NOT TO BE SUSTAINED IF THE POSITION WERE TO BE CHALLENG ED BY A TAXING AUTHORITY. THE ASSESSMENT OF THE TAX POSITION IS BASED SOLELY ON THE TECHNICAL MERITS OF THE POSITION, WITHOUT REGARD TO THE LIKELIHOOD THAT THE TAX POSITION MAY BE CHALLENGED. AUDUBON HAS CALCULATED AN INCOME TAX PROVISION THAT IS IMMATERIAL FOR CONSOLID ATED FINANCIAL STATEMENT PURPOSES. AUDUBON HAS PROCESSES PRESENTLY IN PLACE TO ENSURE THE MAINTENANCE OF ITS TAX-EXEMPT STATUS; TO IDENTIFY AND REPORT UNRELATED INCOME; TO DETERMIN E ITS FILING AND TAX OBLIGATIONS IN JURISDICTIONS FOR WHICH IT HAS NEXUS; AND TO IDENTIFY AND EVALUATE OTHER MATTERS THAT MAY BE CONSIDERED TAX POSITIONS. AUDUBON HAS DETERMINED THAT THERE ARE NO MATERIAL UNCERTAIN TAX POSITIONS THAT REQUIRE RECOGNITION OR DISCLOSURE IN THE CONSOLIDATED FINANCIAL STATEMENTS.

Supplemental Information	
Return Reference	Explanation
	CHANGE IN VALUE OF CHARITABLE TRUSTS 11,463,959. PENSION AND POSTRETIREMENT RELATED CHANGE S -1,781,401. CHARITABLE TRUST ADDITIONS 339,297. RECLASSIFICATION OF ROYALTY EXPENSES -36 8,094.

Supplemental Information		
Return Reference	Explanation	
PART XI, LINE 4B - OTHER ADJUSTMENTS:	RECLASSIFICATION OF SPECIAL EVENTS EXPENSES -241,742.	

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS:	RECLASSIFICATION OF ROYALTY EXPENSES -368,094.

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 4B - OTHER ADJUSTMENTS:	RECLASSIFICATION OF SPECIAL EVENTS EXPENSES -241,742.

Supplemental Information	
Return Reference	Explanation
FORM 990, SCHEDULE D, PARTS XI AND XII	AUDUBON DOES NOT RECEIVE STANDALONE FINANCIAL STATEMENTS; ITS OPERATIONS ARE CONSOLIDATED WITH ITS AFFILIATED ORGANIZATION, NATIONAL AUDUBON SOCIETY ACTION FUND. THE PARTS XI AND X II RECONCILIATION ON SCHEDULE D TIE BACK TO AUDUBON'S FINANCIAL INFORMATION WITHIN THE AUD ITED FINANCIAL STATEMENTS AND NOT TO THE CONSOLIDATED NUMBERS.

Constituted To Constitute

SCHEDULE F	State	ment of	Activities (	Outside the Un	ited States	OMB No. 1545-0047
Form 990)	► Comple	te if the organi	zation answered "  Attach t	ine 14b, 15, or 16.	2020	
repartment of the Treasury	<b>&gt;</b> 1	Go to <i>www.irs.</i>		nstructions and the latest in	nformation.	Open to Public Inspection
ame of the organization					Employer ide	ntification number
IATIONAL AUDUBON SOCI	ETY INC				13-1624102	
	formation of		Outside the l	Jnited States. Comple	te if the organization a	answered "Yes" on
1 For grantmakers.	Does the org	anization mai	intain records to	substantiate the amoun	of its grants and	
other assistance, th	ne grantees' e	ligibility for th	ne grants or assis	stance, and the selection	criteria used	
to award the grants	s or assistance	e?				☑ Yes 🗌 No
2 For grantmakers outside the United		art V the org	anization's proce	dures for monitoring the	use of its grants and of	ther assistance
3 Activites per Region.	(The following	Part I, line 3	table can be dupli	cated if additional space is	needed.)	
(a) Region		<b>(b)</b> Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
See Add'l Data						
<b>3a</b> Sub-total			1 7			3,769,014
<b>b</b> Total from continuation						, ,
		(	0			3,769,014
Part I .  c Totals (add lines 3a	and 3h) $\Box$					

and EIN (if

annlicable)

(book, FMV,

annraical other)

assistance

assistance

Page 2

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name of (b) IRS code (c) Region (d) Purpose of (e) Amount of (f) Manner of (q) Amount (h) Description (i) Method of organization section cash grant cash of noncash of noncash valuation grant

	applicable)				appraisal, other)
See Add'l Data					

disbursement

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-

exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . . . . . 10 

				eu States. Complete il	the organization and	swered "Yes" on Form 9	190, Part IV, line It
Part III can be d	luplicated if addi	<u>tional space is ne</u>	eeded.		T		т
e of grant or assistance	( <b>b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other

Sche	dule F (Form 990) 2020		Page <b>4</b>
Par	t IV 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)	<b>☑</b> Yes	□No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately 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; don't file with Form 990)		
	Instructions for Forms 3320 and 3320-A, don't life with Form 3307	☐Yes	<b>✓</b> 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)	<b>✓</b> Yes	□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) .	<b>✓</b> Yes	□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)		
		<b>✓</b> Yes	∐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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713: don't file with Form 990).	□Yes	<b>√</b> No

Schedule F (	· · · · · · · · · · · · · · · · · · ·
Part V	Supplemental Information  Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.
OO Schoo	lule F, Supplemental Information
Return Reference	Explanation

DEVELOPMENT BANK FOR WORK IN PANAMA. IN ADDITION, AUDUBON ESTABLISHED AN OFFICE IN COLOMBIA IN 2017 TO BETTER

SUPPORT OUR IN-COUNTRY AND REGIONAL CONSERVATION WORK.

990 Schedule F, Supplemental Information Return Reference Explanation

PART III ACCOUNTING METHOD:

990 Schedule F, Supplemental Information

D - 4- ----

Reference	Explanation
FORM 990,	AUDUBON INVESTS IN DOMESTIC AND FOREIGN INVESTMENT VEHICLES THAT MAY OWN AN INTEREST IN A FOREIGN
SCHEDULE F,	CORPORATION, PASSIVE FOREIGN INVESTMENT COMPANY, OR FOREIGN PARTNERSHIP. NEVERTHELESS, AUDUBON'S
PART IV	INVESTMENT ACTIVITIES MAY NOT REACH THE THRESHOLDS REQUIRED FOR FILING THE FORMS 926, 5471, 8621 OR 8865, TO THE

EXTENT SUCH A FORM WAS COMPLETED. IT HAS BEEN FILED WITH THE ORGANIZATION'S FORM 990-T.

Francisco esta es

#### **Additional Data**

CENTRAL AMERICA AND THE

CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,

#### Software ID: Software Version:

**EIN:** 13-1624102

Name: NATIONAL AUDUBON SOCIETY INC

(b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures

285,387

#### Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	offices in the region	employees or agents in region	in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	is a program service, describe specific type of service(s) in region	for region
CENTRAL AMERICA AND THE CARIBBEAN - ANTIGUA & BARBUDA, ARUBA, BAHAMAS,	0	0	INVESTMENTS		3,448,117

0 GRANTMAKING

Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (d) Activities conducted (e) If activity listed in (d) (f) Total expenditures offices in the employees or in region (by type) (i.e., is a program service, for region agents in fundraising, program describe specific type of region service(s) in region region services, grants to recipients located in the reaion) 7 GRANTMAKING 35,322 SOUTH AMERICA EAST ASIA AND THE PACIFIC -0 IGRANTMAKING 188 AUSTRALIA, BRUNEI, BURMA, CAMBODIA.

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH AMERICA GENERAL 10.000 WIRE TRANSFER ISUPPORT CENTRAL GENERAL 50.000 WIRE TRANSFER IAMERICA & THE ISUPPORT ICARIBBEAN .

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS codel (q) Amount of (f) Manner of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ISOUTH AMERICA GENERAL 25.322 WIRE TRANSFER ISUPPORT CENTRAL GENERAL 40.000 WIRE TRANSFER IAMERICA & THE ISUPPORT ICARIBBEAN .

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL IGENERAL 12,500 WIRE TRANSFER AMERICA & THE ISUPPORT ICARIBBEAN . ICENTRAL. IGENERAL 27.000 WIRE TRANSFER IAMERICA & THE ISUPPORT

CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL IGENERAL 12,000 WIRE TRANSFER AMERICA & THE ISUPPORT ICARIBBEAN . ICENTRAL. IGENERAL 8.000 WIRE TRANSFER IAMERICA & THE ISUPPORT

CARIBBEAN

Form 990 Schedule F Part II - Grants or Entities Outside The United States (i) Method of (h) Description l(b) IRS code (f) Manner of (g) Amount of valuation (d) Purpose of (e) Amount of (a) Name of section (c) Region (book, FMV, non-cash cash organization and EIN(if cash grant grant non-cash disbursement assistance appraisal, applicable) assistance other) ICENTRAL IGENERAL 97,467 WIRE TRANSFER AMERICA & THE ISUPPORT ICARIBBEAN . ICENTRAL. IGENERAL 35.920 WIRE TRANSFER IAMERICA & THE ISUPPORT CARIBBEAN

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493066013182

**2020** 

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

PS314 INC

SUITE 808

OAKTON, VA 22124

NEW YORK, NY 10023

28351 AGOURA RD STE C

AGOURA HILLS, CA 91301

THE COMPASS GROUP INC 2961-A- HUNTER MILL ROAD

HELLER FUNDRAISING GROUP

150 WEST END AVENUE 19F

(Form 990 or 990-EZ)

Name of the organization

NATIONAL AUDUBON SOCIETY INC

**SCHEDULE G** 

# Supplemental Information Regarding **Fundraising or Gaming Activities**

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a. ►Attach to Form 990 or Form 990-EZ.

►Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

**Employer identification number** 

					13-1624102			
	vities. Complete if are not required to	_			orm 990, Part IV, line :	17.		
1 Indicate whether the organi	zation raised funds th	rough any	of the fo	llowing activities. Check	all that apply.			
a 🗹 Mail solicitations		e 🗹 Solicitation of non-government grants						
<b>b</b> Internet and email solic	tations		f	ernment grants				
c  Phone solicitations			g	g events				
d 🗹 In-person solicitations								
2a Did the organization have a or key employees listed in F					· · · · · · · · · · · · · · · · · · ·	es 🗆 No		
b If "Yes," list the 10 highest to be compensated at least			draisers)	pursuant to agreements				
(i) Name and address of individuous or entity (fundraiser)	al (ii) Activity	fundrai custo cont	Did ser have ody or rol of outions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization		
	COLINCEL	Yes	No					
STAGECOACH DIGITAL 44 BOOTH ST	COUNSEL		No	0	997,981	-997,981		
BURLINGTON, VT 05401								
O'BRIEN GARRETT 1133 19TH ST NW SUITE 300	COUNSEL		No	0	584,934	-584,934		
WASHINGTON, DC 20036								
INTEGRAL PO BOX 33091	COUNSEL		No	0	216,000	-216,000		
WASHINGTON, DC 20033								
ALLEGIANCE FUNDRAISING GROUP LLC 2300 CLARENDON BLVDSUIT 925	COUNSEL		No	0	150,000	-150,000		
ARLINGTON, VA 22201								
CAUSEWORX INC 2 MCNAMARA COURT AJAX	SOLICITOR		No	0	138,215	-138,215		
ONTARIO, CA L1T 4W6								
THE STEIER GROUP INC 10844 OLD MILL RD	COUNSEL		No	0	135,303	-135,303		
OMAHA, NE 68154	COUNSEL					_		
	COUNSEL	1						

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

No

Nο

0

0

0

Cat. No. 50083H

105,000

80,000

57,200

-105,000

-80,000

-57,200

-2,464,633

AL, AK, AR, CA, CO, CT, DC, FL, GA, HI, IL, IN, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, NV, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

COUNSEL

COUNSEL

				n 990, Part IV, line 18	
	than \$15,000 of fundraising e gross receipts greater than \$5		gross income on Form	990-EZ, lines 1 and 6	b. List events with
	groot receipte ground and qu	(a)Event #1	<b>(b)</b> Event #2	(c)Other events	(d) Total events (add col. (a) through
		<u>LEADERSHIP</u>	CONSERVATION	<b>15</b>	col. <b>(c)</b> )
		(event type)	(event type)	(total number)	
Reversie					
		272.274	27/22		4 222 224
	1 Gross receipts	372,371	271,295	394,170	
	<ul><li>2 Less: Contributions</li><li>3 Gross income (line 1 minus</li></ul>	353,171	246,995	372,425	972,591
$\dashv$	line 2)	19,200	24,300	21,745	65,245
	4 Cash prizes	1 420	2 720	71.4	4.001
ses	6 Rent/facility costs	1,429 3,459	2,738 36,750	714	4,881 40,209
Direct Expenses	7 Food and beverages	21,482	11,829	6,026	39,337
<u>a</u>	8 Entertainment	85,985	18,107	12,100	·
ğ.	9 Other direct expenses	6,068	230	34,825	41,123
_	10 Direct expense summary. Add lines 4 t	:hrough 9 in column (d)			241,742
- 1	,	<b>-</b> ( )			271,/72
	11 Net income summary. Subtract line 10	• ( )			
Par	11 Net income summary. Subtract line 10  Gaming. Complete if the organizations.	from line 3, column (d)		► V, line 19, or reported	-176,497
	<b>11</b> Net income summary. Subtract line 10	from line 3, column (d)	cs" on Form 990, Part I  (b) Pull tabs/Instant bingo/progressive bingo	► V, line 19, or reported  (c) Other gaming	-176,497
	11 Net income summary. Subtract line 10  Gaming. Complete if the organizations.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	11 Net income summary. Subtract line 10  Caming. Complete if the organism on Form 990-EZ, line 6a.	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	11 Net income summary. Subtract line 10 Gaming. Complete if the organism on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
Direct Expenses Reversie a	Gaming. Complete if the organism on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	11 Net income summary. Subtract line 10 Gaming. Complete if the organ on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Ye	(b) Pull tabs/Instant		-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	Gaming. Complete if the organism on Form 990-EZ, line 6a.  1 Gross revenue	from line 3, column (d) anization answered "Ye  (a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	Gaming. Complete if the organ on Form 990-EZ, line 6a.  Gross revenue	from line 3, column (d) anization answered "Ye  (a) Bingo  Yes	(b) Pull tabs/Instant bingo/progressive bingo  Tyes %	(c) Other gaming	-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	Gaming. Complete if the organ on Form 990-EZ, line 6a.  Gross revenue	from line 3, column (d) anization answered "Ye  (a) Bingo  Yes %  No	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No	(c) Other gaming  Yes % No	-176,497 more than \$15,000 (d) Total gaming (add
Direct Expenses Reversie	Gaming. Complete if the organ on Form 990-EZ, line 6a.  Gross revenue	from line 3, column (d) anization answered "Ye  (a) Bingo  Yes %  No  Chrough 5 in column (d) t line 7 from line 1, column	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No	(c) Other gaming  Yes % No	-176,497 more than \$15,000 (d) Total gaming (add
s Revenue	Gaming. Complete if the organization form 990-EZ, line 6a.  Gash prizes  Noncash prizes  Noncash prizes  Nother direct expenses  Net gaming income summary. Subtract  Enter the state(s) in which the organization licensed to conduct gas If "No," explain:	from line 3, column (d) anization answered "Ye  (a) Bingo  Yes %  No  Chrough 5 in column (d) t line 7 from line 1, column on conducts gaming activities in each of	(b) Pull tabs/Instant bingo/progressive bingo  Yes % No  n (d)	(c) Other gaming  Yes %  No	-176,497 more than \$15,000  (d) Total gaming (add col.(a) through col.(c))

Sche	dule G (Form 990 or 990-EZ) 2020	Pag	je <b>3</b>
11	Does the organization conduct gaming	g activities with nonmembers?	
12		ary or trustee of a trust or a member of a partnership or other entity	
13	Indicate the percentage of gaming acti		
а	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the per	rson who prepares the organization's gaming/special events books and records:	_
	Name		
	Address		
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming	
b		revenue received by the organization > \$ and the y the third party > \$	
c	If "Yes," enter name and address of th		
	Name		
	Address •		
16	Gaming manager information:  Name ►  Gaming manager compensation ► \$		
	Description of services provided ▶		
	☐ Director/officer	☐ Employee ☐ Independent contractor	
17	Mandatory distributions:		
a	Is the organization required under stat	te law to make charitable distributions from the gaming proceeds to	
b		ired under state law distributed to other exempt organizations or spent	
	in the organization's own exempt activ		
Par	Supplemental Information III, lines 9, 9b, 10b, 15b, 1	<b>on.</b> Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part .5c, 16, and 17b, as applicable. Also provide any additional information. See instructions.	
	Return Reference	Explanation	_
FORM	1 990, SCHEDULE G, PART I	AUDUBON ENGAGES FUNDRAISING CONSULTANTS TO ADVISE THE SOCIETY ON ASPECTS OF VARIOUS METHODS OF SOLICITING DONORS, BUT NOT TO SOLICIT FUNDS DIRECTLY. AS A RESULT, IT IS NOT POSSIBLE TO DETERMINE HOW MUCH EACH SPECIFIC FUNDRAISER RAISED ON ITS BEHALF; ACCORDINGLY, IN SCHEDULE G, THE SOCIETY IS LEAVING PART I, COLUMN (IV) BLANK.	
FORM	1 990, SCHEDULE G, PART I, LINE 3	AUDUBON SOLICITS CONTRIBUTIONS IN ALL 50 STATES. THE STATES LISTED ON SCHEDULE G, PAFI, SECTION 3, REPRESENT THOSE STATES THAT REQUIRE REGISTRATION.	RT

Schedule G (Form 990 or 990-EZ) 2020

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

**Grants and Other Assistance to Organizations, Governments and Individuals in the United States** Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

Open to Public Inspection

DLN: 93493066013182

OMB No. 1545-0047

Internal Revenue Service

Department of the

Treasury

(Form 990)

▶ Attach to Form 990. ▶ Go to www.irs.gov/Form990 for the latest information.

ame of the organization						Employer identific	ation number
ATIONAL AUDUBON SOCIETY IN	IC					13-1624102	
Part I General Informa	ation on Grants	and Assistance					
Does the organization main the selection criteria used t	o award the grants	or assistance?				ce, and	☑ Yes ☐ No
Describe in Part IV the organical Part II Grants and Other A					rappization answered "Vec	" on Form 990, Part IV, line	21 for any recipient
that received more t	than \$5,000. Part II	I can be duplicated if ad	ditional space is needed.	ents. Complete in the o	rgamzation answered res	on Form 990, Part IV, me	21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
2 Enter total number of sections 3 Enter total number of other	. , . ,	-					119
		and the line I table.	<del></del>	C-+ N- F00F			- dul- T (F 200) 2020

Page 2

Schedule I (Form 990) 2020

(2) GRANTS/SCHOLARSHIPS 122,943 (3) BIRD HOUSE AWARDS 1.095

(3)

IEVALUATION PROCESS.

Schedule I (Form 990) 2020

(4)

PART I, LINE 2:

PART III. BIRD HOUSE AWARDS

(5) (6) (7)

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

MONITORING OF THE AWARDS TO THESE INDIVIDUALS WAS REQUIRED AS EACH RECEIVED THE AWARD IN RECOGNITION OF THEIR DESIGN.

THE PROGRAM DEPARTMENT IS RESPONSIBLE FOR SELECTING THE RECIPIENTS OF GRANTS, CREATING A GRANT AGREEMENT AND TRAINING GRANTEES WITH RESPECT TO PROGRAM REOUIREMENTS. GRANTEES ARE REOUIRED TO SUBMIT FINANCIAL AND PROGRAM REPORTS ON A TIMELY BASIS TO PARTICIPATE IN AN

AUDUBON HELD A CREATIVE BIRDHOUSE COMPETITION EVENT IN FISCAL YEAR 2021; VARIOUS INDIVIDUALS RECEIVED AWARDS FOR THEIR DESIGNS. NO FURTHER

Return Reference Explanation

## **Additional Data**

(a) Name and address of

organization

ARIZONA DEPARTMENT OF

WATER RESOURCES 1110 W WASHINGTON ST STE

PHOENIX, AZ 85007

310

**(b)** EIN

86-6004791

Software ID: Software Version:

(c) IRC section

if applicable

**EIN:** 13-1624102

Name: NATIONAL AUDUBON SOCIETY INC

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GOV'T

or government		 <b>3</b>	assistance	other)	
HOLT RANCH 17680 358TH AVENUE ORIENT. SD 57467	46-0456563	402,575			

(d) Amount of cash

arant

400,000

(e) Amount of non-

cash

(f) Method of valuation

(book, FMV, appraisal,

(q) Description of

non-cash assistance

(h) Purpose of grant

or assistance

GENERAL SUPPORT

GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 81-0362989 501(C)(3) 100.000 THE UNIVERSITY OF MONTANA IGENERAL SUPPORT FOUNDATION 950 ARTHUR AVENUE

GENERAL SUPPORT

81.937

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

GOV'T

MISSOULA, MN 59812

VIRGINIA POLYTECHNIC
INSTITUTE AND STATE
UNIVERSITY
1880 PRATT DRIVE SUITE

BLACKSBURG, VA 24060

2006

54-6001805

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 501(C)(3) 80.0001 PROSPECT PARK ALLIANCE 11-2843763 IGENERAL SUPPORT 7246 MANSE STREET FOREST HILLS, NY 11375 NORTH COUNTRY REAL 20-4336891 62.982 IGENERAL SUPPORT ESTATE II P

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3008 MORGAN CIRCLE BISMARCK, ND 58503

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 72-0947533 501(C)(3) 61.000 IGENERAL SUPPORT XAVIER UNIVERSITY EMPLOYEES' FEDERAL CREDIT UNTON

1 DREXEL DRIVE BOX 57 NEW ORLEANS, LA 70125

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

150 RUST AVENUE HOLLY SPRINGS, MS 38635

501(C)(3) RUST COLLEGE 64-0303805 56,000 IGENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1647018 501(C)(3) 51.447 IGENERAL SUPPORT CENTER FOR AQUATIC SCIENCES INC 1 RIVERSIDE DRIVE

1 RIVERSIDE DRIVE
CAMDEN, NJ 08103

US CLIMATE ACTION 20-4597308 501(C)(3) 50,000

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

50 F STREET NW 8TH FLOOR WASHINGTON, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 83-0870389 501(C)(3) 45.000 IGENERAL SUPPORT THE COASTAL EXPEDITIONS FOUNDATION 514-B MILL STREET

IGENERAL SUPPORT

44.988

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

514-B MILL STREET
MOUNT PLEASANT, SC 29464

THE NATURE CONSERVANCY 53-0242652
4245 N FAIRFAX DRIVE STE

100

ARLINGTON, VA 222031606

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 93-6026088 501(C)(3) 41.129 IGENERAL SUPPORT AUDUBON SOCIETY OF PORTLAND 5151 NW CORNELL RD

37.500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

PORTLAND, OR 97210
HEALTHY COMMUNITY

SERVICES C/O 1855 DUELS ST NEW ORLEANS, LA 70119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government ALLIANCE FOR AFFORDABLE 72-1057834 501(C)(3) 35.000l IGENERAL SUPPORT

4505 S CLAIBORNE AVE NEW ORLEANS, LA 70125				,				
--	--	--	--	---	--	--	--	--

30.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

ALASKA WILDERNESS LEAGUE

122 C STREET NW STE 240 WASHINGTON, DC 20001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 83-2072085 501(C)(3) 30.000 IGENERAL SUPPORT NATIVE PEOPLES ACTION COMMUNITY FUND

WASHINGTON, DC 20005

P O BOX 210914 ANCHORAGE, AK 99521					
THE GREEN DIVERSITY INITIATIVE 1341 G STREET NW 5TH FLOOR	46-5220283	501(C)(3)	30,000		GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) FAIRMOUNT WATER WORKS-91-1882472 501(C)(3) 27.946 IGENERAL SUPPORT INTERPRETIVE CENTER 640 WATERWORKS DRIVE

PHILADELPHIA, PA 19130 INDEPENDENCE SEAPORT 23-1584971 501(C)(3) 27.946

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILADELPHIA, PA 19106

IGENERAL SUPPORT MUSEUM 211 SOUTH COLUMBUS BLVD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government LEHIGH GAP NATURE CENTER 22-2741693 501(C)(3) 27.946 IGENERAL SUPPORT

844 PAINT MILL ROAD SLATINGTON, PA 18080		, , , ,	·		
POCONO ENVIRONMENTAL EDUCATION CENTER	23-2424742	501(C)(3)	27,946		GENERAL SUPPORT

538 EMERY ROAD

DINGMANS FERRY, PA 18328

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government WATERCHED INCTITUTE INC 24 2642747 E01/C1/21 27 046 IGENERAL SUPPORT

31 TITUS MILL RD PENNINGTON, NJ 08534	21-0649717	301(C)(3)	27,946	

8050 35TH AVE NE SEATTLE, WA 98115

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

IGENERAL SUPPORT SEATTLE AUDUBON SOCIETY 91-6009716 501(C)(3) 25.9321

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 95-6100273 501(C)(3) 25.262 IGENERAL SUPPORT SAN DIEGO AUDUBON SOCIETY

25,000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

59-0245495

	4010 MORENA BLVD SUIT
	100
	SAN DIEGO, CA 92117
_	

FLORIDA AUDUBON SOCIETY

4500 BISCAYNE BLVD 350 MIAMI, FL 33137

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 22-3051362 501(C)(3) 25.000 MANOMET INC IGENERAL SUPPORT PO BOX 1770

25.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

MANOMET, MA 023451770

VERMONT YOUTH

CONSERVATION CORPS INC.

1949 E MAIN STREET RICHMOND, VT 05477

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government MONTANA AUDUBON SOCIETY 81-0412530 501(C)(3) 23.628 IGENERAL SUPPORT PO BOX 595 HELENA, MT 59624

23.501

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

FRIENDS OF HEINZ REFUGE

FOLCROFT, PA 19032

PO BOX 333

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

CENEDAL CLIDDODT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

E01(C)(3)

BARTRAMS GARDEN 54TH ST LINDENBERG BLVD PHILADELPHIA, PA 19143	23-7393771	301(C)(3)	23,301		GENERAL SUFFORT
ALABAMA AUDUBON	51-0198925	501(C)(3)	23,439		GENERAL SUPPORT

22 501

3720 FOURTH AVE SOUTH 2ND FI R

BIRMINGHAM, AL 35222

TOUN BADTDAM ACCOCIATION

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) THE PARTNERSHIP PROJECT 52-2192070 501(C)(3) 22.000 GENERAL SUPPORT INC WASHINGTON, DC 20035

PO BOX 65826 TRAVIS AUDUBON 74-6046937 501(C)(3) 20.000 IGENERAL SUPPORT BIRDABILITY PROJECT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

3710 CEDAR STREET BOX 5 AUSTIN, TX 78705

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 94-3255070 501(C)(3) 20.000 COMMUNITY INITIATIVES IGENERAL SUPPORT LATINO OUTDOORS

1000 BROADWAY SUITE 480 OAKLAND, CA 94607

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

DOYLESTOWN, PA 18901

HERITAGE CONSERVANCY INC. 23-6296515 501(C)(3) 18.737 IGENERAL SUPPORT 85 OLD DUBLIN PIKE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other)

NEW JERSEY CONSERVATION FOUNDATION PARK 800 COOPER ST SUITE 201C CAMDEN, NJ 08102	22-6065456	501(C)(3)	18,737		GENERAL SUPPORT
CCHUVLETH BIVED NATIONAL	22 2040152	E01(C)(2)	10 727		CENERAL CURRORT

SCHUYLKILL RIVER NATIONAL 23-2048152 501(C)(3) 18,737 IGENERAL SUPPORT AND STATE HERITAGE AREA 140 COLLEGE D

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

POTTSTOWN, PA 19464

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 13-3057954 501(C)(3) 18.627 NEW YORK CITY AUDUBON IGENERAL SUPPORT SOCIETY INC 71 WEST 23RD ST STE 1523

NEW YORK, NY 10010

17.613

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

DETROIT AUDUBON SOCIETY

4605 CASS AVENUE DETROIT, MI 48201

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government DEEP SOUTH CENTER FOR 56-2466977 501(C)(3) 15,000 IGENERAL SUPPORT

EARTH ECONOMICS	20-1843411	501(C)(3)	15,000		GENERAL SUPPORT
9801 LAKE FOREST BLVD NEW ORLEANS, LA 70127					
■ ENVIRONMENTAL JUSTICE I					

107 N TACOMA AVE TACOMA, WA 98403

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 31-1491910 501(C)(3) 15.000l IGENERAL SUPPORT SOUTHEASTERN WILDLIFE EXPOSITION INC CHARLESTON, SC 29413

15.000l

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

PO BOX 20635 CHARLESTON, SC 2941: VERMONT CENTER FOR ECOSTUDIES INC

PO BOX 420 NORWICH, VT 05055

(f) Method of valuation (b) EIN (e) Amount of non-(h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) WE ACT FOR ENVIRONMENTAL 13-3800068 501(C)(3) 15.000 IGENERAL SUPPORT

(a) Description of

(d) Amount of cash

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(c) IRC section

(a) Name and address of

**JUSTICE** 

PO BOX 16172 LAS CRUCES, NM 88004

1854 AMSTERDAM AVE 2ND FLR NEW YORK, NY 10031					
NUESTRA TIERRA CONSERVATION PROJECT	84-2294981	501(C)(3)	15,000		GENERAL SUPPORT

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 94-1615830 501(C)(3) 14,401 IGENERAL SUPPORT SACRAMENTO AUDUBON

STE 100

RESTON, VA 20190

SOCIETY PO BOX 160694 SACRAMENTO, CA 95816					
AUDUBON SOCIETY OF NORTHERN VIRGINIA 11100 WILDLIFE CENTER DR	51-0248323	501(C)(3)	14,318		GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-1966295 501(C)(3) 13.973 BERKS NATURE IGENERAL SUPPORT 575 ST BERNADINE ST READING, PA 19607

13.973

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

CAMDEN CHILDREN'S GARDEN

3 RIVERSIDE DRIVE CAMDEN, NJ 08103

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) COBBS CREEK COMMUNITY 23-2705536 501(C)(3) 13.973 IGENERAL SUPPORT

		(-/(-/)			
ENVIRONMENTAL EDUCATION					
CTR					
700 COBBS CREEK PARKWAY					
PHILADELPHIA, PA 19143					
D&R GREENWAY LAND TRUST	22-3035836	501(C)(3)	13,973		GENERAL SUPPORT

INC ONE PRESERVATION PLACE

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PRINCETON, NJ 08540

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government DELAWARE NATURE SOCIETY 51-6018321 501(C)(3) 13,973 IGENERAL SUPPORT

PO BOX 700 HOCKESSIN, DE 19707					
SCHUYLKILL CENTER OF ENVIRONMENTAL EDUCATION	23-1654975	501(C)(3)	13,973		GENERAL SUPPORT

8480 HAGYS MILL ROAD

PHILADELPHIA, PA 19128

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance or government assistance other) TOOKANYTACONY-FRANKFORD 75-3203091 501(C)(3) 13.973 IGENERAL SUPPORT

BRIAR ST

MISSOULA, MT 59802

WATERSHED PARTNERSHIP INC 4500 WORTH STREET PHILADELPHIA, PA 19124		===(=)(=)	,		
WILD CONFLUENCE MEDIA LLC COLIN ARISMAN 1020 1/2	82-4292632		13,000		GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 56-2087360 501(C)(3) 12.551 IGENERAL SUPPORT SC TREE FARMS COMMITTEE 4901 BROAD RIVER ROAD COLUMBIA, SC 29212 EAST CENTRAL FLORIDA 59-0993342 501(C)(3) 12.000 IGENERAL SUPPORT REGIONAL PLANNING COUNCIL

455 N GARLAND AVE STE 414 ORLANDO, FL 32801

(e) Amount of non-(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other)

GOLDEN GATE AUDUBON SOCIETY INC 2530 SAN PABLO AVE SUITE G BERKELEY, CA 94702	94-6086896	501(C)(3)	11,906		GENERAL SUPPORT
UNITED WAY OF COASTAL	06-0864341	501(C)(3)	11,500		GENERAL SUPPORT

FAIRFIELD COUNTY INC 855 MAIN ST 10TH FL BRIDGEPORT, CT 06604

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 01-0535494 501(C)(3) 11.146 IGENERAL SUPPORT GULF OF MAINE LOBSTER FOUNDATION SEA AND SAGE AUDUBON 23-7003681 501(C)(3) 11.030 IGENERAL SUPPORT

PO BOX 523 KENNEBUNK, ME 04043 SOCIETY PO BOX 5447

IRVINE, CA 92616

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 58-1834323 501(C)(3) 11,020 IGENERAL SUPPORT GEORGIA AUDUBON INC

OF MINNESOTA NW 5957 PO BOX 1450 MINNEAPOLIS, MN 554855957

REGENTS OF THE UNIVERSITY	41-6007513	501(C)(3)	11,000		GENERAL SUPPORT
ATLANTA AUDUBON STY 4055 ROSWELL RD RD ATLANTA, GA 30342					

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government

LAHONTAN AUDUBON SOCIETY	23-7181150	501(C)(3)	10,813		GENERAL SUPPORT
PO BOX 2304					
SPARKS, NV 89505					

10.575

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

CHICAGO AUDUBON SOCIETY

5801-C NORTH PULASKI RD CHICAGO, IL 60646

(f) Method of valuation (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) BIRD CONSERVANCY OF THE 84-1079882 501(C)(3) 10.500 IGENERAL SUPPORT ROCKIES

14500 LARK BUNTING LANE BRIGHTON, CO 80603					
NORTH DAKOTA GRAZING LANDS COALITION 1605 EAST CAPITOL AVE PO BOX 1091	45-0455411	501(C)(3)	10,364		GENERAL SUPPORT

BISMARCK, ND 58502

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) 26-1587829 501(C)(3) 10.000 IGENERAL SUPPORT AMERICAN WIND WILDLIFE INSTITUTE 1000 K CEREET NIM CHITE COO.

WASHINGTON, DC 20006					
CONSERVATION SCIENCE PARTNERS INC 11050 PIONEER TRAIL SUITE 202	45-2504981	501(C)(3)	10,000		GENERAL SUPPORT

TRUCKEE, CA 96161

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) DEEP 86-1154163 GOV'T 10.000 IGENERAL SUPPORT WILDLIFE DIVISION 79 ELM STREET

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

STREET
HARTFORD, CT 061065127

LORD BERKELEY 57-6140810
CONSERVATION TRUST

139 E RAILROAD AVE MONCKS CORNER, SC 29461

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 85-1177061 501(C)(3) 10.000 MAGNOLIA GROVE AUDUBON IGENERAL SUPPORT

CAMPUS CHAPTER C/O PETER ZEE 328 SHOEMAKER HALL

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

43-1951262

UNIVERSITY, MS 38677 NEW ORLEANS FILM SOCIETY

1215 PRYTANIA ST NEW ORLEANS, LA 70130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 84-0747227 GOV'T 10.000 IGENERAL SUPPORT WESTERN GOVERNOR'S ASSOCIATION 1600 BROADWAY SUITE 1700

10.000

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(5)

1600 BROADWAY SUITE 1700 DENVER, CO 80202 WYOMING STOCK GROWERS ASSOCIATION

113 EAST 20TH STREET CHEYENNE, WY 82001

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 14-1368361 501(C)(3) 9.979 THE RESEARCH FOUNDATION IGENERAL SUPPORT FOR THE STATE UNIVERSITY OF NY ATTN CASH RECEIPT DEPT PO

ATTN CASH RECEIPT DEPT PO BOX 9
ALBANY, NY 122010009

TUCSON AUDUBON SOCIETY 86-6053779 501(C)(3) 9,847

GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

300 E UNIVERSITY BLVD

SUITE 120 TUCSON, AZ 85705

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 56-1791849 501(C)(3) 9.700 IGENERAL SUPPORT NORTH CAROLINA COASTAL LAND TRUST 3 PINE VALLEY DRIVE WILLMINGTON, NC 28412 WILDLANDS RESTORATION 46-0505155 501(C)(3) 9.500 IGENERAL SUPPORT

VOLUNTEERS 2100 COLLYER ST LONGMONT, CO 80501

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 23-7011870 501(C)(3) 9.468 IGENERAL SUPPORT HOUSTON AUDUBON SOCIETY INC 440 WILCHESTER BOULEVARD

HOUSTON, TX 77079

HUMBOLDT STATE UNI SPONS 94-6050071 501(C)(3) 9,380

PRO FOUNDATION

1 HARPST ST ARCATA, CA 95521

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 23-7063701 501(C)(3) 8.440 IGENERAL SUPPORT AUDUBON SOCIETY OF GREATER DENVER 9308 S WADSWORTH BLVD LITTLETON, CO 801286901 SANTA CLARA VALLEY 94-6081420 501(C)(3) 8.145 IGENERAL SUPPORT AUDUBON SOCIETY

22221 MCCLELLAN ROAD CUPERTINO, CA 95014

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) MADISON AUDUBON SOCIETY 39-1393389 501(C)(3) 7,878 IGENERAL SUPPORT

614 DORSEYVILLE ROAD PITTSBURGH, PA 15238

1400 E WASHINGTON AVE STE 170 MADISON, WI 53703						
AUDUBON SOCIETY OF WESTERN PENNSYLVANIA	25-1324559	501(C)(3)	7,857		_	GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 23-7067359 501(C)(3) 7.849 IGENERAL SUPPORT VALLEY FORGE AUDUBON SOCIETY 1201 PAWLINGS RD

AUDUBON, PA 19403 COLUMBUS AUDUBON 23-7455976 501(C)(3) 7.841 IGENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

SOCIETY 505 W WHITTIER STREET

COLUMBUS, OH 43215

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance or government assistance other) 41-6029296 501(C)(3) 7.776 AUDUBON CHAPTER OF IGENERAL SUPPORT

MINNEAPOLIS		
PO BOX 3801		
MINNEAPOLIS, MN 55403		

NORTH JAVA, NY 14113

 MINNEAPOLIS, MN 55403
 16-6088768
 501(C)(3)
 7,673
 GENERAL SUPPORT

 1610 WELCH ROAD
 16-6088768
 501(C)(3)
 7,673
 GENERAL SUPPORT

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 87-0489875 501(C)(3) 7.371 IGENERAL SUPPORT BRIDGERLAND AUDUBON SOCIETY

IGENERAL SUPPORT

7.315

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

PO BOX 3501 LOGAN, UT 84321 NORTHWEST ILLINOIS AUDUBON SOCIETY

PO BOX 771 FREEPORT, IL 61032 36-3215242

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 51-0174934 501(C)(3) 7.135 IGENERAL SUPPORT NEW HOPE AUDUBON SOCIETY 504 RED BUD ROAD CHAPEL HILL, NC 27514 LOWER 9TH WARD CENTER 27-0185863 501(C)(3) 7.000 IGENERAL SUPPORT

FOR SUSTAINABLE

ENGAGEMENT & DEVELOPME 5227 CHARTRES STREET NEW ORLEANS, LA 70117

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 52-1038833 501(C)(3) 6.931 IGENERAL SUPPORT CHESAPEAKE AUDUBON SOCIETY

PO BOX 3173
BALTIMORE, MD 21228

GREAT SALT LAKE AUDUBON 23-7102723 501(C)(3) 6,743

GENERAL SUPPORT SOCIETY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PO BOX 520867

SALT LAKE CITY, UT 84152

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance organization grant cash or assistance assistance other) or government SUPPORT

TRAVIS AUDUBON SOCIETY PO BOX 40787 AUSTIN, TX 78704	74-6046937	501(C)(3)	6,724		GENERAL SUPPORT
ST PAUL AUDUBON SOCIETY	23-7024404	501(C)(3)	6,622		GENERAL SUPPORT

PO BOX 7275

ST PAUL, MN 551077275

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant if applicable organization grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government

IGENERAL SUPPORT

SONORAN AUDUBON SOCIETY PO BOX 8068 GLENDALE, AZ 853128068	86-0963437	501(C)(3)	6,498		GENERAL SUPPO
,					

6.497

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

BEXAR AUDUBON SOCIETY

SAN ANTONIO, TX 78209

PO BOX 6084

74-2287736

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-7437037 501(C)(3) 6.461 NORTHEASTERN WISCONSIN IGENERAL SUPPORT AUDUBON SOCIETY

PO BOX 1 GREEN BAY, WI 54305

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

ST LOUIS, MO 631220227

ST LOUIS AUDUBON SOCIETY 43-6052063 501(C)(3) 6.362 IGENERAL SUPPORT PO BOX 220227

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 86-6040458 501(C)(3) 6.258 MARICOPA AUDUBON SOCIETY IGENERAL SUPPORT 13585 N 92ND PLACE IGENERAL SUPPORT

SCOTTSDALE, AZ 85260 ORLEANS AUDUBON SOCIETY 23-7169988 501(C)(3) 6.113 INC 801 RUE DAUPHINE APT 304

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

METAIRIE, LA 70005

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 57-0887278 501(C)(3) 6.000 SOUTH CAROLINA COASTAL IGENERAL SUPPORT CONSERVATION LEAGUE INC 131 SPRING STREET STE A CHARLESTON, SC 29403 SOUTH DAKOTA GRASSLAND 46-0449860 501(C)(3) 6.000 IGENERAL SUPPORT

COALITION

PO BOX 401 221 N MAIN PRESHO, SD 57568

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 06-6002126 GOV'T 5.874 IGENERAL SUPPORT CITY OF WEST HAVEN 190 KELSEY AVENUE WEST HAVEN, CT 06516 BURROUGHS AUDUBON 23-7211916 501(C)(3) 5.800 IGENERAL SUPPORT

SOCIETY OF GREATER KANSAS CITY 7300 WEST PARK ROAD

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

BLUE SPRINGS, MO 64015

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) AMOS W BUTLER AUDUBON 23-7253434 501(C)(3) 5,709 IGENERAL SUPPORT SOCIETY

PO BOX 80024 INDIANAPOLIS, IN 46280					
AUDUBON SOCIETY OF THE EVERGLADES PO BOX 16914	59-6019854	501(C)(3)	5,612		GENERAL SUPPORT

WEST PALM BEACH, FL 334166914

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 57-0635207 501(C)(3) 5.602 IGENERAL SUPPORT CHARLESTON NATURAL HISTORY SOCIETY PO BOX 504 IGENERAL SUPPORT

CHARLESTON, SC 29402 SOUTH FLORIDA AUDUBON 59-6196137 501(C)(3) 5.514 SOCIETY

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

10871 W CLAIRMONT CIRCLE TAMARAC, FL 333215806

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government

IGENERAL SUPPORT

PEE DEE LAND TRUST P O BOX 2134 FLORENCE, SC 29503	57-1075947	501(C)(3)	5,482		GENERAL SUPPORT
TEORENCE, 3C 29303					

5.461

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

MADRONE AUDUBON SOCIETY

SANTA ROSA, CA 95402

PO BOX 1911

94-6172986

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 75-2876262 501(C)(3) 5,452 IGENERAL SUPPORT AUDUBON DALLAS

DALLAS, TX 75225					
SAN FERNANDO VALLEY AUDUBON SOCIETY	95-1856339	501(C)(3)	5,364		GENERAL SUPPORT

PO BOX 7769

VAN NUYS, CA 914097769

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 59-6182031 501(C)(3) 5.350 ORANGE AUDUBON SOCIETY IGENERAL SUPPORT

PO BOX 941142 MAITLAND, FL 327941142 WYNCOTE AUDUBON SOCIETY 23-2082803 501(C)(3) 5.346

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

PHILADELPHIA, PA 19127

IGENERAL SUPPORT 4461 STI VERWOOD ST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) AUDUBON SOCIETY OF THE 52-1776220 501(C)(3) 5.268 IGENERAL SUPPORT DISTRICT OF COLUMBIA PO BOX 15726 WASHINGTON, DC 20003

IGENERAL SUPPORT

5.245

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

WASHINGTON, DC 20003

PELICAN ISLAND AUDUBON 59-6197617
SOCIETY

PO BOX 1833

VERO BEACH, FL 32961

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 31-6037851 501(C)(3) 5.190 AUDUBON SOCIETY OF OHIO IGENERAL SUPPORT 3398 W GALBRAITH ROAD CINCINNATI, OH 45239

IGENERAL SUPPORT

5.181

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

501(C)(3)

SAN BERNARDING VALLEY

SAN BERNARDINO, CA 92423

AUDUBON SOCIETY PO BOX 10973 95-2593738

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 95-6093704 501(C)(3) 5,121 IGENERAL SUPPORT LOS ANGELES AUDUBON

SOCIETY PO BOX 931057 LOS ANGELES, CA 90093				

RALEIGH, NC 27608

J & M RANCH MITCHELL LLC 86-2557891 5.010 IGENERAL SUPPORT 2902 FAIRVIEW RD

efil	e GRAPHIC pr	rint - DO NOT PROCESS	As Filed Data	a -	DLN: 93	49306	6013	182
Sch	edule J	Co	mpensati	ion Information	OI	ИВ No.	1545-0	0047
(For	n 990)	For certain Officer		rustees, Key Employees, and Hig	hest			
		► Complete if the orga		ated Employees vered "Yes" on Form 990, Part IV,	, line 23.	<b>20</b>	)2(	)
D			➤ Attach	to Form 990. instructions and the latest inforn		) Dpen (		
•	tment of the Treasury al Revenue Service	P do to <u>www.ms.gov</u>	<u>/10/11/990</u> 10/	mistractions and the latest miori		Insp	ectio	n
	me of the organiza TONAL AUDUBON SO				Employer identifica	tion nu	ımber	
					13-1624102			
Pa	rt I Questi	ons Regarding Compensati	ion				l	
1a				the following to or for a person lister			Yes	No
		,	II to provide an	y relevant information regarding thes				
		s or charter travel	님	Housing allowance or residence for	•			
	_	companions nification and gross-up payments	H	Payments for business use of person Health or social club dues or initiation				
		nary spending account		Personal services (e.g., maid, chauf				
b				follow a written policy regarding pays ve? If "No," complete Part III to expla		1b	Yes	
2				or allowing expenses incurred by all		2	Yes	
	directors, truste	es, officers, including the CEO/Ex	ecutive Director	r, regarding the items checked on Lir	ne 1a? .     .			
3				d to establish the compensation of th	ne			
		CEO/Executive Director. Check all t ed organization to establish compe		not check any boxes for methods CEO/Executive Director, but explain i	n Part III.			
	<b>✓</b> Compensa	ation committee	П	Written employment contract				
		ent compensation consultant	<b>_</b>	Compensation survey or study				
	<b>✓</b> Form 990	of other organizations	$\checkmark$	Approval by the board or compensa	tion committee			
4	During the year related organiza		90, Part VII, Sed	ction A, line 1a, with respect to the fi	ling organization or a			
а	Receive a sever	ance payment or change-of-contr	ol payment? .			4a	Yes	
b	Participate in, o	r receive payment from, a supple	mental nonquali	ified retirement plan?		4b		No
С			•	nsation arrangement?		4c		No
	If "Yes" to any o	of lines 4a-c, list the persons and	provide the app	olicable amounts for each item in Part	: 111.			
	Only 501(c)(3	), 501(c)(4), and 501(c)(29) o	organizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section ontingent on the revenues of:		the organization pay or accrue any				
а	The organization	n?				5a		No
b	Any related orga	anization?				5b		No
	•	5a or 5b, describe in Part III.						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of:	A, line 1a, did t	the organization pay or accrue any				
а	-	n?				6a		No
b		anization?				6b		No
7	•	•	A line 1a did t	the organization provide any nonfixed	4			
•	payments not d	escribed in lines 5 and 6? If "Yes,"	" describe in Pa	rt III		7	Yes	
8	subject to the ir	nitial contract exception described	in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de 				
9	If "Yes" on line	8, did the organization also follow	the rebuttable	presumption procedure described in	Regulations section	9		No
For F		uction Act Notice, see the Instr			 30053T <b>Schedule</b> J		1 990)	2020

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.  Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.									
(A) Name and Title		( <b>B)</b> Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	columns	(F) Compensation in	
	co	(i) Base ompensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation		(B)(i)-(D)	column (B) reported as deferred on prior Form 990	
See Additional Data Table									

Schedule J (Form 990) 2020	Page <b>3</b>						
Part III Supplemental Info	mation						
rovide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.							
Return Reference	Explanation						
PART I, LINE 1A	BUSINESS CLASS TRAVEL IS AUTHORIZED FOR THE PRESIDENT & CEO DUE TO THE FREQUENCY AND LENGTH OF TRAVEL; FIRST CLASS IS PERMITTED IF BUSINESS CLASS IS NOT AVAILABLE OR THE COST OF A REFUNDABLE TICKET IS EQUIVALENT TO FIRST CLASS.						
PART I, LINE 4A	FORMER CHIEF OF STAFF, SUSAN J LUNDEN, RECEIVED A SEVERANCE PAYMENT IN CALENDAR YEAR 2020 IN THE AMOUNT OF \$132,209 WHICH IS REPORTED IN SCHEDULE J, PART II, COLUMN B(III).						
PART I, LINE 7	AUDUBON BUDGETS AN ANNUAL BONUS POOL FOR ALL EMPLOYEES (NOT JUST THOSE INDIVIDUALS REPORTED ON THE 990). BONUSES ARE AWARDED BASED						

Schedule J (Form 990) 2020

ON MERIT AND ARE AWARDED AT THE DISCRETION OF MANAGEMENT OR THE BOARD. AT THE END OF 2016, AUDUBON DRAFTED A 3-YEAR RETENTION AGREEMENT FOR THE PRESIDENT/CEO, DAVID YARNOLD, WITH INPUT FROM AN OUTSIDE COMPENSATION CONSULTANT AND BASED ON A MARKET SURVEY. THIS AGREEMENT WAS EXTENDED TO 2020-2021 AND THE PRESIDENT/CEO WAS PROVIDED A RETENTION BONUS OF \$100,000. HE WAS ALSO AWARDED \$100,000

FOR PERFORMANCE. THE BONUS WAS AUTHORIZED AND APPROVED BY THE COMPENSATION COMMITTEE. ANNUALLY, THE COMPENSATION COMMITTEE OF AUDUBON'S BOARD OF DIRECTORS REVIEWS THE PERFORMANCE AND COMPENSATION OF AUDUBON'S PRESIDENT/CEO. THEIR DELIBERATIONS AND DECISIONS ARE MEMORIALIZED IN WRITING WHEN MADE. ELIZABETH GRAY JOINED AUDUBON AS PRESIDENT AND CHIEF CONSERVATION OFFICER IN MARCH 2021 AND

WAS APPOINTED ACTING CEO IN MAY 2021, BEFORE BEING ELEVATED TO THE FULL-TIME CEO IN NOVEMBER 2021. SINCE ELIZABETH GRAY'S TENURE WITH THE ORGANIZATION COMMENCED IN CALENDAR YEAR 2021, HER COMPENSATION IS NOT REPORTED IN PART VII AND SCHEDULE J OF THIS 990.

Schedule 1 (Form 990) 2020

Software ID:

**Software Version:** 

**EIN:** 13-1624102

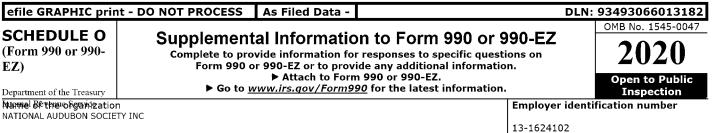
Name: NATIONAL AUDUBON SOCIETY INC

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

	-,	Full II - Officers, D						
(A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and other deferred	( <b>D)</b> Nontaxable benefits	(E) Total of columns (B)(i)-(D)	<b>(F)</b> Compensation in column (B)
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation	benefits	(B)(I)-(D)	reported as deferred on prior Form 990
PRESIDENT (THRU 01/21)	(i)	591,697	200,000	30,082	22,800	9,548	854,127	0
AND CEO	(ii)	0	0	0	0	0	0	0
1STEPHEN E MEYER CHIEF OPERATING OFFICER	(i)	351,246	25,000	11,594	22,800	15,647	426,287	0
CHE OF ENTING OF FIGER	(ii)	0	0	0	0	0	0	0
2SEAN M O'CONNOR CHIEF DEVELOPMENT	(i)	345,185	20,000	969	22,800	3,475	392,429	0
OFFICER	(ii)	0	0	0	0	0	0	0
CHIEF OF STAFF (THRU	(i)	204,127	5,000	144,952	13,221	5,090	372,390	0
06/20)	(ii)	0	0	0	0	0	0	0
<b>4</b> MARY BETH HENSON THRU	(i)	292,064	20,000	22,280	22,800	775	357,919	0
0521 VP AND CHIEF FINANCIAL OFFICER	(ii)	0	0	0	0	0	0	0
<b>5</b> JOSE M CARBONELL THRU	(i)	312,798	10,000	632	9,535	11,894	344,859	0
0421 CHIEF MARKETING OFFICER	(ii)	0	0	0	0	0	0	0
<b>6</b> ANA PAULA D TAVARES VP/ED, AUDUBON NY & CT	(i)	311,659	0	2,679	22,800	7,945	345,083	0
(THRU 12/20)	(ii)	0	0	0	0	0	0	0
7MARCO S CARBONE CHIEF TECHNOLOGY	(i)	284,815	5,000	602	21,381	1,828	313,626	0
OFFICER	(ii)	0	0	0	0	0	0	0
<b>8</b> LORRAINE A SCIARRA VP AND GENERAL COUNSEL	(i)	276,865	3,000	8,676	21,672	1,775	311,988	0
	(ii)	0	0	0	0	0	0	0
<b>9</b> REBECCAH SANDERS CHIEF FIELD & STRATEGY	(i)	273,639	10,000	421	22,019	1,280	307,359	0
OFFICER	(ii)	0	0	0	0	0	0	0
DAVID J RINGER THRU	(i)	245,894	10,000	19,951	21,128	4,683	301,656	0
0421 CHIEF NETWORK OFFICER	(ii)	0	0	0	0	0	0	0
11AURELIO RAMOS SENIOR VP, AUDUBON	(i)	256,540	2,000	632	20,769	10,332	290,273	0
AMERICAS	(ii)	0	0	0	0	0	0	0
SENIOR VP,	(i)	228,872	30,000	12,663	17,446	902	289,883	0
CONSERVATION POLICY	(ii)	0	0	0	0	0	0	0
13KENNETH BRIAN TRUSTY SENIOR DIRECTOR	(i)	170,062	1,500	532	14,229	10,499	196,822	0
	(ii)	0	0	0	0	0	0	0
DAVID J O'NEILL THRU	(i)	145,420	0	595	10,662	512	157,189	0
CHIEF CONSERVATION OFFICER	(ii)	0	0	0	0	0	0	0

DLN: 93493066013182 SCHEDULE M OMB No. 1545-0047 **Noncash Contributions** (Form 990) 2020 ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection **Employer identification number** Name of the organization NATIONAL AUDUBON SOCIETY INC 13-1624102 Part I Types of Property (a) (b) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Χ 12 3,690 FAIR MARKET VALUE Art-Historical treasures Art—Fractional interests 4 Books and publications 1,074 FAIR MARKET VALUE 5 Clothing and household Χ goods . . . . . Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 135 4,035,649 FAIR MARKET VALUE 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests . . . . 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Χ Real estate—Other . . 1,364,440 FAIR MARKET VALUE 18 Collectibles . . . . 19 Food inventory . . 20 Drugs and medical supplies . 21 Taxidermy . . . . . 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ► ( ALL OTHER ) 44,055 FAIR MARKET VALUE 26 Other ▶ ( \_\_\_\_\_\_) 27 Other ▶ ( \_\_\_\_\_\_) 28 Number of Forms 8283 received by the organization during the tax year for contributions 29 for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 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 isn't required to be used for exempt 30a Nο **b** If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Yes **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2020) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 51227J

Schedule M (Form 990) (2020)	Page 2
is reporting in Part I, col	ation. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization umn (b), the number of contributions, the number of items received, or a combination of both. Also by additional information.
Return Reference	Explanation
PART I, COLUMN (B):	CONTRIBUTIONS MUST BE ACCEPTABLE TO AUDUBON, WHICH RESERVES THE RIGHT TO DECLINE ANY CONTRIBUTIONS, VERIFY THE SOURCE OF ANY FUNDS, AND IN THE CASE OF NONMARKETABLE ASSETS REQUIRE AN INDEPENDENT APPRAISAL OF VALUE.
PART I, LINE 32B:	TO THE EXTENT THAT THE ORGANIZATION RECEIVES DONATIONS OF SECURITIES, ITS INVESTMENT BROKER/MANAGER IS TASKED WITH SELLING THOSE SECURITIES.
	Schedule M (Form 990) (2020)



990	Schedule	Ο,	Supplemental	Information

	†
Return	Explanation
Reference	
Reference FORM 990, PART III, LINE 4A	CONSERVATION: AUDUBON'S GOAL IS TO PROTECT BIRDS DURING EVERY POINT OF THEIR LIFECYCLES TH ROUGHOUT THE AMERICAS. FIELD CONSERVATION PROGRAMS OPERATE AUDUBON'S 18 REGIONAL AND STATE OFFICES AND COMBINE LOCAL POLICY, SCIENCE AND ON THE GROUND CONSERVATION EFFORTS TO ADVAN CE AUDUBON'S MISSION AND MEET TODAY'S UNPRECEDENTED ENVIRONMENTAL CHALLENGES. THE FIELD CO NSERVATION PROGRAMS ALSO CONNECT THE WORK OF AUDUBON CHAPTERS, NATURE CENTERS, VOLUNTEERS, PARTNERS, AND OTHER SUPPORTERS ALONG EACH OF THE FOUR MIGRATORY FLYWAYS. INTEGRATED, SHAR ED FLYWAY CONSERVATION GOALS ENHANCE OUR IMPACT, AND COORDINATED RESOURCES AND EXPERTISE I NCREASES EFFICIENCY ACROSS THE NETWORK. AUDUBON'S BRING BIRDS BACK POLICY AGENDA IS FOCUSE D ON THREE MAIN OBJECTIVES: (1) REINSTATE AND STRENGTHEN THE MIGRATORY BIRD TREATY ACT THR OUGH ADMINISTRATION AND LEGISLATIVE ACTION; (2) INCREASE FUNDING AND COORDINATION FOR FEDE RAL AND STATE FISH AND WILDLIFE AGENCIES TO ADDRESS THE NEEDS OF DECLINING AND VULNERABLE SPECIES AND LANDSCAPES THE AGENCIES TO ADDRESS THE NEED OF DECLINING AND VULNERABLE SPECIES AND INTERNATIONAL CONSERVATION OF MIGRATORY BIRDS THROUGH A SUITE OF ADMINISTRA TIVE AND LEGISLATIVE ACTIONS. IN FY21, AUDUBON CONTINUED TO STRONGLY SUPPORT CLIMATE AND CONSERVATION POLICIES. AUDUBON AND OUR PARTNERS HELPED SECURE THE BIPARTISAN PASSAGE OF THE GREAT AMERICAN OUTDOORS ACT, WHICH WAS SIGNED IN LAW IN AUGUST 2020. THIS PROVIDES PERMA NENT FUNDING FOR THE LAND AND WATER CONSERVATION FUND AND \$1.9 BILLION ANNUALLY OVER FIVE YEARS TO ADDRESS DEFERRED MAINTENANCE PROJECTS FOR THE NATIONAL PARK SERVICE, FOREST SERVI CE, FISH AND WILDLIFE SERVICE, BUREAU OF LAND MANAGEMENT, AND BUREAU OF INDIAN EDUCATION S CHOOLS. IN DECEMBER 2020, CONGRESS PASSED THE LANDMARK, BIPARTISAN ENERGY ACT OF 2020 - EN COMPASSING THE BETTER ENERGY STORAGE TECHNOLOGY (BEST) ACT, THE CLEAN INDUSTRIAL TECHNOLOGY (BEST) ACT, THE CLEAN INDUSTRIAL TECHNOLOGY FOR FIVE YEARS TO ADDRESS DEFERRED MAINTENANCE PROJECTS AGENCY-ENERGY. THESE INCLUDED PROVISIONS ACROSS A B
	LEVELS. AT THE END OF 2019, AUDUBON PUBLISHED A STUDY 'SURVIVAL BY DEGREES' ON THE EFFECT OF CLIMATE CHAN GE ON BIRDS AND PEOPLE. THE CO
	OTIAN GE ON BINDS AND FLOFLE. THE CO

Return Reference	Explanation
FORM 990, PART III, LINE 4A	NCLUSION OF THAT WORK, SHOWS THAT TWO-THIRDS OF BIRD SPECIES IN NORTH AMERICA ARE AT RISK OF EXTINCTION FROM CLIMATE CHANGE IF WE DO NOT ACT QUICKLY. WITH CLIMATE BEING THE SINGLE BIGGEST THREAT CONFRONTING OUR BIRDS AND OUR PLANET, AUDUBON IS WORKING ON SOLUTIONS TO CO UNTERACT THE EFFECTS OF CLIMATE CHANGE AND ACHIEVE NET-ZERO EMISSIONS BY 2050 - BY DRAMATI CALLY REDUCING EMISSIONS OF GREENHOUSE GASES LIKE CARBON DIOXIDE, REMOVE EXCESS BUILT UP OF BURNING FOSSIL FUELS, AND OTHER INITIATIVES, INCLUDING MAINTAINING HEALTHY FORESTS OR SU PPORTING SUSTAINABLE AGRICULTURAL PRACTICES. 2. COASTS: AUDUBON AND ITS PARTNERS BUILD RES LIENT COASTLINES ACROSS THE HEMISPHERE TO STRENGTHEN POPULATIONS OF SEABIRDS, SHOREBIRDS AND COASTAL COMMUNITIES WHILE PRESERVING CRITICAL BREEDING, STOPOVER AND WINTERING HABITAT IN THE PLACES THAT BIRDS NEED. AUDUBON STEWARDS MORE THAN 1,090 COASTAL HABITAT SITES ACR OSS 100,000 MILES, LEADS PROJECTS TO RESTORE KEY HABITAT AND ADVOCATES FOR POLICIES THAT I NCREASE COASTAL RESILIENCE TO THE IMPACTS OF CLIMATE CHANGE AND BENEFIT RESOURCES LIKE FOR AGE FISH THAT ARE CRITICAL TO BIRDS' SURVIVAL, IN FY21, THE 10TH ANNIVERSARY OF THE MOST D EVASTATING OIL SPILL EVER TO OCCUR IN AMERICAN WATERS, AUDUBON HELPED COORDINATE THE IMMED IATE EMERGENCY RESPONSE TO THE DEEPWATER HORIZON CATASTROPHE, AND SINCE THEN HAS DEVELOPED A COMPREHENSIVE ROADMAP FOR NEARLY \$2 BILLION OF CONSERVATION PROJECTS TO REPAIR AND REST ORE THE GULF OF MEXICO. IN THE BAY OF PANAMA'S MANGROVES, AUDUBON IS CREATING A MODEL FOR GREEN COASTAL INFRASTRUCTURE AND CARBON STORAGE. BY ENHANCING ECONOMIC INCENTIVES FOR CARB ON SEQUESTRATION IN THE MANGROVES-KNOWN AS "BLUE CARBON"-AND SECURING GOVERNMENT RECOGNITION AS A NATIONAL CLIMATE SOLUTION, AUDUBON WILL CHART A SUSTAINABLE AND RESILIENT COURSE FORWARD. 3. WATER: AUDUBON ADVOCATES FOR WATER POLICIES AND PROJECTS THAT MAKE WATER RESOUR CES MORE RESILIENT FOR BIRDS AND PEOPLE. BY COORDINATING OUR SCIENCE, POLICY EXPERTISE, ON -THE GROUND CONSERVATION, AND NETWORK ENGAGEMENT, AUDU

Return Reference	Explanation
FORM 990, PART III, LINE 4A	FARMS, IN JUNE 2021, AUDUBON RELEASED A NATURAL CLIMATE SOLUTIONS REPORT THAT FOUND THAT C ONSERVATION AND RESTORATION OF PRIORITY AREAS COULD DELIVER UP TO 23 PERCENT OF THE US COM MITMENT IN THE 2016 PARIS AGREEMENT. AUDUBON WORKS WITH LAND OWNERS, LAND MANAGERS, PUBLIC AND PRIVATE STAKEHOLDERS, AND GOVERNMENT AGENCIES TO SUPPORT THE ADOPTION OF LAND MANAGEM ENT PRACTICES TO SUPPORT BIRDS AND THE HABITAT THEY NEED, TODAY AND TOMORROW. AUDUBON'S CO NSERVATION RANCHING PROGRAM CURRENTLY SUPPORTS BIRD FRIENDLY GRAZING ON MORE THAN 2 MILLIO N ACRES IN THE UNITED STATES, 5. BIRD-FRIENDLY COMMUNITIES: AUDUBON'S BIRD-FRIENDLY COMMUNITIES STRATEGY PROVIDES FOOD, SHELTER AND SAFE PASSAGE TO BIRDS ACROSS THE LANDSCAPE, BUT ESPECIALLY IN AMERICA'S CITIES AND TOWNS WHERE BIRDS AND PEOPLE LIVE TOGETHER. BY THE END OF FY21, MORE THAN 600,000 PEOPLE USED AUDUBON'S PLANTS FOR BIRDS ONLINE NATIVE PLANTS DAT BASES AND AUDUBON'S NATIVE-PLANTS PROGRAM HAS ENGAGED MORE THAN 750,000 PEOPLE TO CREATE S UITABLE HABITAT IN BACKYARDS, LOCAL PARKS AND COMMERCIAL PROPERTY TO ATTRACT AND PROTECT B IRDS AND OTHER HABITAT. PROGRAM PARTICIPANTS, CHAPTERS, CENTERS AND VOLUNTEERS HAVE PLANTE D MORE THAN 800,000 PLANTS AND LOGGED MORE THAN 450,000 VOLUNTEER HOURS TO CREATE HABITAT FEATURING NATIVE PLANTS. BUILDING THE NEXT GENERATION OF CONSERVATION LEADERS: AUDUBON'S C AREER PIPELINE INITIATIVES ARE PROOF OF OUR COMMITMENT TO THE FUTURE OF A DIVERSE CONSERVA TION MOVEMENT. AUDUBON WALKER FELLOWS ARE LEADERS-IN-TRAINING IN ENVIRONMENTAL COMMUNICATI ONS, AND OUR DANGERMOND FELLOWS WORK IN CONSERVATION EDUCATION, FIELD ORGANIZING, FIELD BI OLOGY, PUBLIC POLICY, GEOSPATIAL INFORMATION SYSTEMS, AND MUCH MORE. THE SCHNEIDER FELLOWS HIP HELPS AUDUBON WALKER FELLOWS WORK IN CONSERVATION EDUCATION, FIELD ORGANIZING, FIELD BI OLOGY, PUBLIC POLICY, GEOSPATIAL INFORMATION SYSTEMS, AND MUCH MORE. THE SCHNEIDER FELLOWS HIP HELPS AUDUBON CARRY OUT ITS CLIMATE CHANGE POLICY AND ADVOCACY WORK AT THE FEDERAL AND STATE LEVELS. DURING THEIR TRUNGE AT AUDUBON, TH

990 Schedule O, Supplemental Information

Return Explanation

JOY OF BIRDS AND NATURE THAT UNITES AUDUBON'S 1.9 MILLION MEMBERS.

Reference

FORM 990,	IN THE FACE OF THE CONTINUING GLOBAL PANDEMIC, POLITICAL TURMOIL, AND RACIAL RECKONING, AUDUBON
PART III,	RESPONDED NIMBLY, CREATIVELY, AND WITH HUMILITY. WORKING WITH OUR MANY PARTNERS, AUDUBON LEADERS
LINE 4A	AND STAFF ACROSS THE NETWORK CONTINUED TO OFFER CREATIVE AND ADAPTIVE SOLUTIONS TO PEOPLE AND
	COMMUNITIES THROUGHOUT AMERICA. FROM VIRTUAL BIRD WALKS ATTENDED BY THOUSANDS TO DIGITAL
	CONTENT LIKE OUR WEEKLY TV-STYLE SERIES, I SAW A BIRD, WE BROUGHT PEOPLE TOGETHER. WE SHARED THE

990	Schedule	Ο,	Supp	lemental	Information

Return Reference	Explanation
FORM 990, PART III, LINE 4B	FORM 990, PART III, LINE 4B - HEMISPHERIC STRATEGY WORKS IS MANAGED FROM OUR WASHINGTON DC OFFICE AND THROUGH AUDUBON'S OFFICE IN COLOMBIA, INDEPENDENT CONTRACTORS AND PARTNER ORGA NIZATIONS IN LATIN AMERICA ARE ENGAGED TO DELIVER CONCRETE, ON THE GROUND ACTIONS THAT ADD RESS CRITICAL THREATS TO AUDUBON'S PRIORITY BIRD SPECIES. AUDUBON PROVIDES SCIENCE, TECHNI CAL EXPERTISE, POLICY SUPPORT AND CAPACITY DEVELOPMENT TOOLS TO BUILD EFFECTIVE CONSERVATI ON PROGRAMS TO REVERSE DECLINES IN BIRD POPULATIONS, PROTECT AND MANAGE HABITAT AND ENGAGE LOCAL COMMUNITIES. IN ADDITION TO COLOMBIA, AUDUBON WORKS IN CANADA, THE BAHAMAS, BELIZE, CHILE, MEXICO AND PANAMA. IN FY22, AUDUBON AMERICAS LAUNCHED CONSERVA AVES, A COALITION T HAT USES MBI DATA AND OTHER ANALYSIS TO IDENTIFY AREAS OF VITAL IMPORTANCE TO MIGRATORY AND ENDEMIC AND ENDANAGERED BIRDS IN LATIN AMERICA AND THE CARIBBEAN. IN PARTNERSHIP WITH BIR DLIFE INTERNATIONAL, AMERICAN BIRD CONSERVANCY, AND THE NETWORK OF LATIN. AMERICAN AND CARI BBEAN ENVIRONMENTAL FUNDS (REDLAC), AUDUBON WILL HELP SUPPORT LOCAL MUNICIPALITIES, COMMUN ITY GROUPS AND CONSERVATION ORGANIZATIONS TO CREATE NEW NATIONAL PROTECTIONS AND IMPROVE M ANAGEMENT OF EXISTING PROTECTED AREAS THAT ARE OF CRITICAL IMPORTANCE TO BIRDS. CONSERVA A VES AIMS TO PROTECT TEARLY 4 MILLION ACRES OF IMPORTANT BIRD AND BIODIVERSITY AREAS BY EST ABLISHING ROUGHLY 100 NEW SUBNATIONAL PROTECTED AREAS BETWEEN 2022 AND 2027 ACROSS 5-7 COU NTRIES EQUITY, DIVERSITY, INCLUSION AND BELONGING (EDIB): AUDUBON SEEKS TO EMBODY EDIB THROUGHOUT OUR ORGANIZATION TO GNSURE ALIGNMENT BETWEEN INTERNAL CULTURE, POLICIES AND PRO GRAMS AND OUR CONSERVATION GOALS. AS A STRATEGIC IMPERATIVE, WE RECOGNIZE THAT THE CORE OF THIS ALIGNMENT IS AN ENGAGED AND DIVERSE STAFF WHO CAN SET AND WORK TOWARDS CONSERVATION GOALS. AND PROPELE AUDUBON'S EQUITY, INCLUSION AND B ELONGING FEFORTS SEEK TO MEANINGFULLY ENGAGEMENT PROGRAM, SEEKS TO BUILD LASTING RELAT IONSHIPS BETWEEN URBAN COMMUNITYE ENGAGEMENT, LEAGREMENT PROGRAM, SEEKS TO BUILD LASTING RE

990 Schedule O, Supplemental Information Return Explanation Reference FORM 990, N STATUS. PART III, LINE 4B

Return Explanation

FORM 990, PART VI, SECTION A, LINE 4

Return Explanation

FORM 990, UNDER THE BYLAWS, ANY INDIVIDUAL OR ORGANIZATION APPROVING THE PURPOSES AND OBJECTIVES OF AUDUBON IS ELIGIBLE FOR MEMBERSHIP. THE MEMBERS ELECT THE BOARD OF DIRECTORS AT THE ANNUAL SECTION A, LINE 6

Return Explanation
Reference

FORM 990,	AUDUBON'S BYLAWS AUTHORIZE ITS MEMBERS TO ELECT THE INDIVIDUALS THAT SHALL SERVE ON THE BOARD OF
PART VI,	DIRECTORS.
SECTION A,	
LINE 7A	

Return

Reference	·
FORM 990,	THE FORM 990 IS PREPARED BY STAFF AND A NATIONALLY RECOGNIZED ACCOUNTING FIRM. AFTER THE FORM 990
PART VI,	HAS BEEN REVIEWED BY MANAGEMENT AND THE BOARD AUDIT & ETHICS COMMITTEE, IT IS MADE AVAILABLE
SECTION B,	ELECTRONICALLY TO THE FULL BOARD OF DIRECTORS. DIRECTORS ARE GIVEN A WEEK TO PROVIDE FEEDBACK,
LINE 11B	AND ANY COMMENTS OR QUESTIONS ARE REVIEWED WITH THE AUDIT & ETHICS COMMITTEE. COMMENTS ARE

 $\mid$  INCORPORATED, AND THE FORM 990 IS FILED WITH THE INTERNAL REVENUE SERVICE.

**Explanation** 

Return

## Reference FORM 990, PART VI, SECTION B. QUESTIONNAIRE WHICH ELICITS INFORMATION WITH RESPECT TO POTENTIAL CONFLICTS. THE OFFICE OF GENERAL

Explanation

LINE 12C COUNSEL REVIEWS ANY POTENTIAL CONFLICTS IDENTIFIED ON THE QUESTIONNAIRE. IN THE EVENT OF CONFLICT, THE INDIVIDUAL WHO HAS A CONFLICT MUST RECUSE THEMSELVES FROM ANY PART OF ANY DISCUSSION OR DECISION THAT PERTAINS TO THE CONFLICT. THE AUDIT & ETHICS COMMITTEE, WITH THE ASSISTANCE OF AUDUBON'S GENERAL COUNSEL, MONITORS ADHERENCE TO AND COMPLIANCE WITH AUDUBON'S CONFLICT OF INTEREST POLICY.

Return Explanation

FORM 990,	FOR THE PROCESS OF DETERMINING COMPENSATION OF THE PRESIDENT/CEO, REFER TO SCHEDULE J, PART I,
PART VI,	LINE 7 NARRATIVES.
SECTION B,	
LINE 15A	

Return Explanation
Reference

LINE 19

FORM 990, ON AUDUBON'S WEBSITE, AUDUBON'S FORM 990, AUDITED FINANCIAL STATEMENTS AND ANNUAL REPORT ARE PART VI, AVAILABLE TO THE PUBLIC. THE CONFLICT OF INTEREST POLICY AND OTHER GOVERNING DOCUMENTS ARE MADE SECTION C. AVAILABLE TO THE PUBLIC UPON REQUEST AND AT MANAGEMENT'S DISCRETION.

Return Explanation

Reference

FORM 990,
PART VIII,
LINE 11A

LINE

Return

l	Reference	Explanation
I	FORM 990,	ENGINEERING & RESTORATION: PROGRAM SERVICE EXPENSES 3,511,133. MANAGEMENT AND GENERAL EXPENSES
ı	PART IX,	0. FUNDRAISING EXPENSES 3,043. TOTAL EXPENSES 3,514,176. TECHNOLOGY: PROGRAM SERVICE EXPENSES
ı	LINE 11G	628,837. MANAGEMENT AND GENERAL EXPENSES 443,524. FUNDRAISING EXPENSES 0. TOTAL EXPENSES 1,072,361.
I		OTHER FEES: PROGRAM SERVICE EXPENSES 11,436,133. MANAGEMENT AND GENERAL EXPENSES 10,257.
1		FUNDRAISING EXPENSES 741 922 TOTAL EXPENSES 12 188 312

Explanation

990 Schedule O, Supplemental Information

Reference	
· '	CHANGE IN VALUE OF CHARITABLE TRUSTS 11,463,959. CHARITABLE TRUST ADDITIONS 339,297. PENSION AND POSTRETIREMENT RELATED CHANGES -1.781.401.
FARTAI,	FOSTRETIREMENT RELATED CHANGES -1,701,401.

Explanation

LINE 9:

Return

Return Explanation

AND REVIEW OF THE AUDITOR ENGAGEMENT.

Reference

FORM 990,	AUDUBON'S AUDIT & ETHICS COMMITTEE OF THE BOARD OF DIRECTORS ASSUMES RESPONSIBILITY FOR
DARTYII	OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT

PART XII, OVERSIGHT OF THE AUDIT OF ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT.

LINE 2C THE AUDIT & ETHICS COMMITTEE HAS A POLICY THAT REQUIRES PERIODIC ROTATION OF ENGAGEMENT PARTNERS.

**SCHEDULE R** 

(Form 990)

Department of the Treasury

NATIONAL AUDUBON SOCIETY INC

Internal Revenue Service Name of the organization

**Related Organizations and Unrelated Partnerships** 

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

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

DLN: 93493066013182 OMB No. 1545-0047

**Open to Public** Inspection

**Employer identification number** 

							13-1	.624102				
Part I Identification of Disregarded Entities. Co	mplete if the orgar	nization answei	red "Yes	s" on Form 9	990, Part	IV, line 3	3.					
(a) Name, address, and EIN (if applicable) of disregarded entity	(a) Name, address, and EIN (if applicable) of disregarded entity		<b>(b)</b> Primary activity		(c) Legal domicile (state or foreign country)		(d) Total income		ssets	Direct co	<b>(f)</b> Direct controlling entity	
Part II Identification of Related Tax-Exempt Orga	· ·	ete if the orgar	nization	answered "	Yes" on F	orm 990,	Part I	V, line 34 be	ecause	it had one or	more	
related tax-exempt organizations during the tax  (a)  Name, address, and EIN of related organization		<b>(b)</b> ary activity		(c) omicile (state eign country)		d) ode section	Public (if sect	(e) charity status tion 501(c)(3))	Dii	(f) rect controlling entity	Section (13) co	g) 512(b introlled
(1)NATIONAL AUDUBON SOCIETY OF COASTAL CT 225 VARICK STREET 7TH FLOOR	LAND HOLDI	NG		СТ	501(C)(3)	1(C)(3)			NAS INC		Yes Yes	No
NEW YORK, NY 10014 23-7263861												
(2)NATIONAL AUDUBON SOCIETY OF SHARON INC 225 VARICK STREET 7TH FLOOR	LAND HOLDI	NG	СТ		501(C)(3)		LINE 7		NAS INC		Yes	
NEW YORK, NY 10014 23-7245359												
(3)LINCOLN AUDUBON SOCIETY 225 VARICK STREET 7TH FLOOR	LAND HOLDI	NG	ME		501(C)(3)		LINE 7		NAS INC		Yes	
NEW YORK, NY 10014 51-0196442							LINE 7					
(4)NATIONAL AUDUBON SOCIETY OF GREENWICH 225 VARICK STREET 7TH FLOOR	LAND HOLDI	NG		СТ	501(C)(3)	501(C)(3)			NAS IN	С	Yes	
NEW YORK, NY 10014 23-7245358												
(5)EAST PARK LEADERSHIP & CONSERVATION CNTR 3250 WEST SEDGLY DRIVE	SUPPORT OR	RG		PA	501(C)(3)	LINE 1		1	NASOT	WD BD		No
PHILADELPHIA, PA 19130 46-2907677												
(6)NATIONAL AUDUBON SOCIETY ACTION FUND 1200 18TH STREET NW STE 500	ENVIRONME	NTAL		DC	501(C)(4)		N/A		NAS IN	С	Yes	
WASHINGTON, DC 20036 83-1280515												
For Paperwork Reduction Act Notice, see the Instructions for	r Form 990.		Ca	t. No. 50135\	<u> </u>				Sche	dule R (Form	990) 2	020

		(b)	1		1	1	1			1			
(a) Name, address, and EIN of related organization			Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related unrelated, excluded from tax under sections 512- 514)		(g) Share of end-of-year assets	(I Disprop alloca		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	partr	al or Pe ging ov	(k) ercenta wnersl
					314)			Yes	No		Yes	No	
<b>Identification of Related Orga</b> because it had one or more relate						l ization ans	L wered "Ye:	l s" on F	orm 9	I 990, Part IV	, line	34	
(a) Name, address, and EIN of related organization	and EIN of Primary activity				entity (C c	(e) pe of entity orp, S corp, or trust)	<b>(f)</b> Share of total income		(g) e of end- year assets	of-Perce	ntage	Section (13)	(i) on 5 cont entity
		со	untry)									Yes	s
													+
													+
													+
													$\downarrow$
		1											

Schedule R (Form 990) 2020												
Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.												
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	No									
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?												
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		No									
<b>b</b> Gift, grant, or capital contribution to related organization(s)	<b>1</b> b		No									
c Gift, grant, or capital contribution from related organization(s)	1c		No									
d Loans or loan guarantees to or for related organization(s)	1d		No									
e Loans or loan guarantees by related organization(s)	1e		No									
f Dividends from related organization(s)	<b>1</b> f		No									
g Sale of assets to related organization(s)	<b>1</b> g		No									
h Purchase of assets from related organization(s)	1h		No									
i Exchange of assets with related organization(s)	<b>1</b> i		No									
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No									
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No									
l Performance of services or membership or fundraising solicitations for related organization(s)	11	Yes										
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No									
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Yes										
o Sharing of paid employees with related organization(s)	10	Yes										
p Reimbursement paid to related organization(s) for expenses	<b>1</b> p		No									
q Reimbursement paid by related organization(s) for expenses	<b>1</b> q	Yes										
r Other transfer of cash or property to related organization(s)	1r		No									
s Other transfer of cash or property from related organization(s)	<b>1</b> s	Yes										

k	Lease of facilities, equipment, or other assets from related organization(s)				1k	No	
- 1	Performance of services or membership or fundraising solicitations for related organization(s)				1l Ye	s	
m	Performance of services or membership or fundraising solicitations by related organization(s)				1m	No	
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n Ye	s	
o	Sharing of paid employees with related organization(s)				1o Ye	s	
р	Reimbursement paid to related organization(s) for expenses				<b>1</b> p	No	
q	Reimbursement paid by related organization(s) for expenses				1q Ye	:s	
r	Other transfer of cash or property to related organization(s)				1r	No	
s	Other transfer of cash or property from related organization(s)				1s Ye	s	
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered re	elationships and tra	nsaction thresholds.			
	(a) Name of related organization	<b>(b)</b> Transaction type (a-s)	Transaction Amount involved Method of determining amount in				
<b>(1)</b> NA	ITIONAL AUDUBON SOCIETY ACTION FUND	0	408,656	FMV			
						-	

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

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

(a) Name, address, and EIN of entity	<b>(b)</b> Primary activity	(d) Predominant income (related, unrelated, excluded from tax under sections 512-	Ar oı	(e) e all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?	te	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General d managin partneri	or g ?	<b>(k)</b> Percentage ownership
			Yes	No			Yes	No		Yes	No	
									Schedul	e R (Form	1 990	0) 2020

chedule R (For	m 990) 2020	Page 5	5						
Part VII	Supplemental Info	ental Information							
Provide additional information for responses to questions on Schedule R. (see instructions).									
Return Reference		Explanation							