

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2001

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2001 calendar year, or tax year beginning 04/01, 2001, and ending 03/31/2002

B Check if applicable:
☐ Address change
☐ Name change
☐ Initial return
☐ Final return
☐ Amended return
☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization AUDUBON NATURALIST SOCIETY
OF THE CENTRAL ATLANTIC STATES, INC.D Employer identification number
53-0233715

Number and street (or P.O. box if mail is not delivered to street address)

Room/suite

E Telephone number

8940 JONES MILL ROAD

City or town, state or country, and ZIP + 4

CHEVY CHASE, MD 20815

F Accounting method: ☐ Cash ☒ Accrual
Other (specify) _____

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ)

H and I are not applicable to section 527 organizations

H(a) Is this a group return for affiliates? ☐ Yes ☒ No

H(b) If "Yes" enter number of affiliates _____

H(c) Are all affiliates included? (If No, attach a list. See instructions.) ☐ Yes ☒ NoH(d) Is this a separate return filed by an organization covered by a group ruling? ☐ Yes ☒ No

I Enter 4-digit GEN _____

M Check ☐ if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF)

G Web site WWW.AUDUBONNATURALIST.ORG

J Organization type (check only one) ☒ 501(c) (3) (insert no) _____ 4947(a)(1) or _____ 527K Check here ☐ if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS but if the organization received a Form 990 Package in the mail, it should file a return without financial data. Some states require a complete return.

L Gross receipts Add lines 6b, 8b, 9b, and 10b to line 12 2,217,958

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See Specific Instructions on page 16)

1 Contributions, gifts, grants, and similar amounts received STMT 1			
a Direct public support	1a	400,063	
b Indirect public support	1b		
c Government contributions (grants)	1c		
d Total (add lines 1a through 1c) (cash \$ 400,063 noncash \$ _____)	1d	400,063	
2 Program service revenue including government fees and contracts (from Part VII, line 93)	2	352,415	
3 Membership dues and assessments	3	212,003	
4 Interest on savings and temporary cash investments	4	52,663	
5 Dividends and interest from securities	5	15,603	
6 a Gross rents	6a		
b Less rental expenses	6b		
c Net rental income or (loss) (subtract line 6b from line 6a)	6c	374,253	
7 Other investment income (describe _____)	7		
8 a Gross amount from sales of assets other than inventory	(A) Securities	(B) Other	
b Less cost or other basis and sales expenses	346,083 8a		
c Gain or (loss) (attach schedule)	327,834 8b		
d Net gain or (loss) (combine line 8c, columns (A) and (B))	18,249 8c		
8d	18,249		
9 Special events and activities (attach schedule)			
a Gross revenue (not including \$ _____ of contributions reported on line 1a)	9a	13,328	
b Less direct expenses other than fundraising expenses	9b		
c Net income or (loss) from special events (subtract line 9b from line 9a)	9c	13,328	
10 a Gross sales of inventory, less returns and allowances STMT 3	10a	434,315	
b Less cost of goods sold STMT 4	10b	281,312	
c Gross profit or loss from sales of inventory (attach schedule) (subtract line 10b from line 10a)	10c	153,003	
11 Other revenue (from Part VII, line 103)	11	17,232	
12 Total revenue (add lines 1d, 2, 3, 4, 5, 6c, 7, 8d, 9c, 10c, and 11)	12	1,608,812	
13 Program services (from line 44, column (B))	13	1,496,183	
14 Management and general (from line 44, column (C))	14	131,071	
15 Fundraising (from line 44, column (D))	15	263,924	
16 Payments to affiliates (attach schedule)	16		
17 Total expenses (add lines 16 and 44, column (A))	17	1,891,178	
18 Excess or (deficit) for the year (subtract line 17 from line 12)	18	-282,366	
19 Net assets or fund balances at beginning of year (from line 73, column (A))	19	3,916,610	
20 Other changes in net assets or fund balances (attach explanation) STMT 5	20	-29,512	
21 Net assets or fund balances at end of year (combine lines 18, 19, and 20)	21	3,604,732	

For Paperwork Reduction Act Notice, see the separate instructions

Form 990 (2001)

914
8

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See Specific Instructions on page 21.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule)				
	(cash \$ _____ noncash \$ _____)	22			
23	Specific assistance to individuals (attach schedule)	23			
24	Benefits paid to or for members (attach schedule)	24			
25	Compensation of officers, directors, etc.	25	110,320	97,544	6,388
26	Other salaries and wages	26	926,405	750,630	57,010
27	Pension plan contributions	27			
28	Other employee benefits	28	49,911	35,705	10,788
29	Payroll taxes	29	75,941	63,647	2,810
30	Professional fundraising fees	30			
31	Accounting fees	31			
32	Legal fees	32			
33	Supplies	33	63,462	46,910	4,649
34	Telephone	34	11,755	8,809	2,241
35	Postage and shipping	35	64,290	48,375	3,997
36	Occupancy	36	45,767	15,714	4,963
37	Equipment rental and maintenance	37			
38	Printing and publications	38	65,187	51,061	1,333
39	Travel	39	156,985	154,150	768
40	Conferences, conventions, and meetings	40			
41	Interest	41			
42	Depreciation, depletion, etc. (attach schedule)	42	61,733	47,091	4,329
43	Other expenses not covered above (itemize) STMT 6	43a	259,422	176,547	31,795
b		43b			
c		43c			
d		43d			
e		43e			
44	Total functional expenses (add lines 22 through 43) Organizations completing columns (B)-(D), carry these totals to lines 13-15	44	1,891,178	1,496,183	131,071
					263,924

Joint Costs. Check ☐ if you are following SOP 98-2Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? ☐ Yes ☒ No

If "Yes," enter (i) the aggregate amount of these joint costs \$ _____, (ii) the amount allocated to Program services \$ _____,

(iii) the amount allocated to Management and general \$ _____, and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See Specific Instructions on page 24)What is the organization's primary exempt purpose? **STMT 7**

All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)

Program Service Expenses
(Required for 501(c)(3) and (4) orgs. and 4947(a)(1) trusts but optional for others.)

a	BUILDING AND GROUNDS OPERATIONS - PROVIDES BIRD AND NATURE OBSERVATION AND EDUCATION	
	(Grants and allocations \$ _____)	123,967
b	ENVIRONMENTAL EDUCATION - EDUCATIONAL PROGRAMS TO INFORM THE GENERAL PUBLIC AND MEMBERS, OF THE NEED TO CONSERVE AND PROTECT NATURAL RESOURCES	
	(Grants and allocations \$ _____)	579,217
c	AUDUBON NATURALIST BOOKSHOP - TO MAKE AVAILABLE NATURE RELATED PUBLICATIONS AND SUPPLIES TO MEMBERS AND THE GENERAL PUBLIC	
	(Grants and allocations \$ _____)	120,586
d	MEMBERSHIP SERVICES	
	(Grants and allocations \$ _____)	186,692
e	Other program services (attach schedule) STMT 8	(Grants and allocations \$ _____)
		485,721
f	Total of Program Service Expenses (should equal line 44, column (B), Program services)	1,496,183

Part IV Balance Sheets (See Specific Instructions on page 24)

Note	Where required, attached schedules and amounts within the description column should be for end-of-year amounts only	(A) Beginning of year		(B) End of year
45	Cash - non-interest-bearing	41,629	45	223,167
46	Savings and temporary cash investments	521,273	46	254,480
47a	Accounts receivable	12,496		
b	Less allowance for doubtful accounts		47c	12,496
48a	Pledges receivable	81,560		
b	Less allowance for doubtful accounts		48c	81,560
49	Grants receivable		49	
50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
51a	Other notes and loans receivable (attach schedule)			
b	Less allowance for doubtful accounts		51c	
52	Inventories for sale or use	92,876	52	85,487
53	Prepaid expenses and deferred charges	68,516	53	27,572
54	Investments - securities (attach schedule) <input checked="" type="checkbox"/> STMT 9 <input type="checkbox"/> Cost <input checked="" type="checkbox"/> FMV	1,216,421	54	1,193,929
55a	Investments - land, buildings, and equipment basis			
b	Less accumulated depreciation (attach schedule)		55c	
56	Investments - other (attach schedule)		56	
57a	Land, buildings, and equipment basis	2,601,294		
b	Less accumulated depreciation (attach schedule)	423,286	57c	2,178,008
58	Other assets (describe <input type="checkbox"/> STMT 10)	137,306	58	93,747
59	Total assets (add lines 45 through 58) (must equal line 74)	4,382,906	59	4,150,446
60	Accounts payable and accrued expenses	55,749	60	84,384
61	Grants payable		61	
62	Deferred revenue	375,267	62	419,414
63	Loans from officers, directors, trustees, and key employees (attach schedule)		63	
64a	Tax-exempt bond liabilities (attach schedule)		64a	
b	Mortgages and other notes payable (attach schedule)		64b	
65	Other liabilities (describe <input type="checkbox"/> STMT 11)	35,280	65	41,916
66	Total liabilities (add lines 60 through 65)	466,296	66	545,714
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74				
67	Unrestricted	2,071,206	67	1,832,240
68	Temporarily restricted	948,782	68	875,870
69	Permanently restricted	896,622	69	896,622
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74				
70	Capital stock, trust principal, or current funds		70	
71	Paid-in or capital surplus, or land, building, and equipment fund		71	
72	Retained earnings, endowment, accumulated income, or other funds		72	
73	Total net assets or fund balances (add lines 67 through 69 OR lines 70 through 72, column (A) must equal line 19, and column (B) must equal line 21)	3,916,610	73	3,604,732
74	Total liabilities and net assets / fund balances (add lines 66 and 73)	4,382,906	74	4,150,446

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

Part IV-A Reconciliation of Revenue per Audited Financial Statements with Revenue per Return (See Specific Instructions, page 26)

a Total revenue, gains, and other support per audited financial statements	a 1,579,300
b Amounts included on line a but not on line 12, Form 990 (1) Net unrealized gains on investments \$ -29,512 (2) Donated services and use of facilities \$ (3) Recoveries of prior year grants \$ (4) Other (specify) \$ Add amounts on lines (1) through (4)	b -29,512
c Line a minus line b	c 1,608,812
d Amounts included on line 12, Form 990 but not on line a (1) Investment expenses not included on line 6b, Form 990 \$ (2) Other (specify) \$ Add amounts on lines (1) and (2)	d
e Total revenue per line 12, Form 990 (line c plus line d)	e 1,608,812

Part IV-B	Reconciliation of Expenses per Audited Financial Statements with Expenses per Return
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a	Total expenses and losses per audited financial statements	a	1,891,178
b	Amounts included on line a but not on line 17, Form 990		
	(1) Donated services and use of facilities \$ _____		
	(2) Prior year adjustments reported on line 20, Form 990 . . \$ _____		
	(3) Losses reported on line 20, Form 990 \$ _____		
	(4) Other (specify) _____ \$ _____		
	Add amounts on lines (1) through (4)	b	
c	Line a minus line b	c	1,891,178
d	Amounts included on line 17, Form 990 but not on line a		
	(1) Investment expenses not included on line 6b, Form 990 . \$ _____		
	(2) Other (specify) _____ \$ _____		
	Add amounts on lines (1) and (2)	d	
e	Total expenses per line 17, Form 990 (line c plus line d)	e	1,891,178

Part V List of Officers, Directors, Trustees, and Key Employees (List each one even if not compensated, see Specific Instructions on page 26)

[illegible]

75 Did any officer, director, trustee, or key employee receive aggregate compensation of more than \$100,000 from your organization and all related organizations, of which more than \$10,000 was provided by the related organizations? ☐ Yes ☒ No
If "Yes," attach schedule - see Specific Instructions on page 27

Part VI Other Information (See Specific Instructions on page 27)

	Yes	No
76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	76	X
77 Were any changes made in the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	77	X
78 a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	78a	X
b If "Yes," has it filed a tax return on Form 990-T for this year?	78b	X
79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement	79	X
80 a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?	80a	X
b If "Yes," enter the name of the organization _____ and check whether it is <input type="checkbox"/> exempt OR <input type="checkbox"/> nonexempt		
81 a Enter direct or indirect political expenditure. See line 81 instructions	81a	
b Did the organization file Form 1120-POL for this year?	81b	X
82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value?	82a	X
b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.)	82b	
83 a Did the organization comply with the public inspection requirements for returns and exemption applications?	83a	X
b Did the organization comply with the disclosure requirements relating to quid pro quo contributions?	83b	X
84 a Did the organization solicit any contributions or gifts that were not tax deductible?	84a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	84b	X
85 501(c)(4), (5), or (6) organizations a Were substantially all dues nondeductible by members?	85a	N/A
b Did the organization make only in-house lobbying expenditures of \$2,000 or less? If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year	85b	N/A
c Dues, assessments, and similar amounts from members	85c	N/A
d Section 162(e) lobbying and political expenditures	85d	N/A
e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices	85e	N/A
f Taxable amount of lobbying and political expenditures (line 85d less 85e)	85f	N/A
g Does the organization elect to pay the section 6033(e) tax on the amount in 85f?	85g	N/A
h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount in 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year?	85h	N/A
86 501(c)(7) orgs Enter a Initiation fees and capital contributions included on line 12	86a	N/A
b Gross receipts, included on line 12, for public use of club facilities	86b	N/A
87 501(c)(12) orgs Enter a Gross income from members or shareholders	87a	N/A
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87b	N/A
88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX	88	N/A
89 a 501(c)(3) organizations Enter Amount of tax imposed on the organization during the year under section 4911 <u>N/A</u> , section 4912 <u>N/A</u> , section 4955 <u>N/A</u>		
b 501(c)(3) and 501(c)(4) orgs Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction	89b	X
c Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		N/A
d Enter Amount of tax on line 89c, above, reimbursed by the organization		N/A
90 a List the states with which a copy of this return is filed <u>MARYLAND</u>		
b Number of employees employed in the pay period that includes March 12, 2001 (See instructions)	90b	46
91 The books are in care of <u>THE SOCIETY</u> Telephone no <u>301-652-9188</u> Located at <u>CHEVY CHASE, MD</u> ZIP + 4 <u>20815</u>		
92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the tax year	92	N/A

Part VII Analysis of Income-Producing Activities (See Specific Instructions on page 32)

Note Enter gross amounts unless otherwise indicated

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue					
a EDUCATIONAL TUITION					
b TOURS, AND TRIPS					352,282
c ROYALTIES &					
d COMMISSIONS			15	133	
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					212,003
95 Interest on savings and temporary cash investments			14	52,663	
96 Dividends and interest from securities			14	15,603	
97 Net rental income or (loss) from real estate					
a debt-financed property					
b not debt-financed property			16	374,253	
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory			18	18,249	
101 Net income or (loss) from special events			01	13,328	
102 Gross profit or (loss) from sales of inventory			03	153,003	
103 Other revenue a					
b ADVERTISING INCOME	7310	6,942			
c MISCELLANEOUS			01	10,290	
d					
e					
104 Subtotal (add columns (B), (D), and (E))		6,942		637,522	564,285
105 Total (add line 104, columns (B), (D), and (E))					1,208,749

Note Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See Specific Instructions on page 32)

Line No	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes)
▼	STMT 14

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See Specific Instructions on page 33)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
	%			
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See Specific Instructions on page 33)

(a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? ☐ Yes ☒ No

(b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? ☐ Yes ☒ No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions)

Please Neal T. Inertick 8/8/2002

Director Date

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.

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k),
501(n) or Section 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

OMB No 1545 0047

2001

► **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

Name of the organization

**AUDUBON NATURALIST SOCIETY
OF THE CENTRAL ATLANTIC STATES, INC**

Employer identification number

53-0233715

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions List each one If there are none, enter "None ")

(a) Name and address of each employee paid more than \$50 000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
NONE				
Total number of other employees paid over \$50,000	► NONE			

Part II Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions List each one (whether individuals or firms) If there are none, enter "None ")

(a) Name and address of each independent contractor paid more than \$50 000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services	► NONE	

Part III Statements About Activities (See page 2 of the instructions)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ <u>10,582</u> (Must equal amount on line 38, Part VI-A, or line 1 or Part VI-B) Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes," must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.	1 X	
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?	2a	X
b Lending of money or other extension of credit?	2b	X
c Furnishing of goods, services, or facilities?	2c	X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2d X	
e Transfer of any part of its income or assets?	2e	X
3 Does the organization make grants for scholarships, fellowships, student loans, etc.? (See Note below.)	3 X	
4 Do you have a section 403(b) annuity plan for your employees?	4 X	
Note: Attach a statement to explain how the organization determines that individuals or organizations receiving grants or loans from it in furtherance of its charitable programs "qualify" to receive payments. STMT 15		

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 ☐ A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 ☐ A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 ☐ A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 ☐ A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 ☐ A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: _____
- 10 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11a ☐ An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11b ☐ A community trust. Section 170(b)(1)(A)(v). (Also complete the Support Schedule in Part IV-A.)
- 12 ☒ An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 ☐ An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in (1) lines 5 through 12 above, or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). (See section 509(a)(3).)

Provide the following information about the supported organizations. (See page 5 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 ☐ An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete only if you checked a box on line 10, 11 or 12) *Use cash method of accounting***Note** You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting

Calendar year (or fiscal year beginning in)	(a) 2000	(b) 1999	(c) 1998	(d) 1997	(e) Total
15 Gifts, grants, and contributions received (Do not include unusual grants. See line 28.)	1,135,082	348,431	492,505	1,029,042	3,005,060
16 Membership fees received	221,200	197,239	212,223	216,305	846,967
17 Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's charitable, etc., purpose	567,635	605,822	468,930	1,132,492	2,774,879
18 Gross income from interest, dividends, amounts received from payments on securities loans (section 512(a)(5)), rents, royalties, and unrelated business taxable income (less section 511 taxes) from businesses acquired by the organization after June 30, 1975	411,236	356,227	314,596	316,765	1,398,824
19 Net income from unrelated business activities not included in line 18	1,625	-1,170	-19,053	-5,282	-23,880
20 Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf					
21 The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.					
22 Other income. Attach a schedule. Do not include gain or (loss) from sale of capital assets.					
23 Total of lines 15 through 22	2,336,778	1,506,549	1,469,201	2,689,322	8,001,850
24 Line 23 minus line 17	1,769,143	900,727	1,000,271	1,556,830	5,226,971
25 Enter 1% of line 23	23,368	15,065	14,692	26,893	

26 Organizations described on lines 10 or 11	a Enter 2% of amount in column (e), line 24	NOT APPLICABLE	26a
b Prepare a list for your records to show the name of and amount contributed by each person (other than a governmental unit or publicly supported organization) whose total gifts for 1997 through 2000 exceeded the amount shown in line 26a. Do not file this list with your return. Enter the total of all these excess amounts.			26b
c Total support for section 509(a)(1) test. Enter line 24, column (e).			26c
d Add Amounts from column (e) for lines 18 _____ 19 _____			26d
22 _____ 26b _____			26e
e Public support (line 26c minus line 26d total)			26f
f Public support percentage (line 26e (numerator) divided by line 26c (denominator))			%

27 Organizations described on line 12	a For amounts included in lines 15, 16, and 17 that were received from a "disqualified person," prepare a list for your records to show the name of, and total amounts received in each year from, each "disqualified person." Do not file this list with your return. Enter the sum of such amounts for each year.	
(2000) _____ (1999) _____ (1998) _____ (1997) _____	24,991 39,882 60,396 558,889	

b For any amount included in line 17 that was received from each person (other than "disqualified persons"), prepare a list for your records to show the name of, and amount received for each year, that was more than the larger of (1) the amount on line 25 for the year or (2) \$5,000. (Include in the list organizations described in lines 5 through 11, as well as individuals.) Do not file this list with your return. After computing the difference between the amount received and the larger amount described in (1) or (2), enter the sum of these differences (the excess amounts) for each year.	(2000) _____ (1999) _____ (1998) _____ (1997) _____	
c Add Amounts from column (e) for lines 15 _____ 16 _____	3,005,060 846,967	
17 _____ 21 _____	2,774,879 20	27c 6,626,906
d Add Line 27a total _____ and line 27b total _____	684,158	27d 684,158
e Public support (line 27c total minus line 27d total)		27e 5,942,748
f Total support for section 509(a)(2) test. Enter amount on line 23, column (e).		27f 8,001,850
g Public support percentage (line 27e (numerator) divided by line 27f (denominator))		27g 74.2672 %
h Investment income percentage (line 18, column (e) (numerator) divided by line 27f (denominator))		27h 17.4813 %

28 Unusual Grants For an organization described in line 10, 11, or 12 that received any unusual grants during 1997 through 2000, prepare a list for your records to show, for each year, the name of the contributor, the date and amount of the grant, and a brief description of the nature of the grant. Do not file this list with your return. Do not include these grants in line 15.

Part V Private School Questionnaire (See page 7 of the instructions)
(To be completed ONLY by schools that checked the box on line 6 in Part IV)

	Yes	No
29 Does the organization have a racially nondiscriminatory policy toward students by statement in its charter, bylaws, other governing instrument, or in a resolution of its governing body?	29	
30 Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures, catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	30	
31 Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general community it serves? If "Yes," please describe, if "No," please explain (If you need more space, attach a separate statement)	31	

32 Does the organization maintain the following	32a	
a Records indicating the racial composition of the student body, faculty, and administrative staff?	32a	
b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32b	
c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing with student admissions, programs, and scholarships?	32c	
d Copies of all material used by the organization or on its behalf to solicit contributions?	32d	
If you answered "No" to any of the above, please explain (If you need more space, attach a separate statement)		

33 Does the organization discriminate by race in any way with respect to		
a Students' rights or privileges?	33a	
b Admissions policies?	33b	
c Employment of faculty or administrative staff?	33c	
d Scholarships or other financial assistance?	33d	
e Educational policies?	33e	
f Use of facilities?	33f	
g Athletic programs?	33g	
h Other extracurricular activities?	33h	
If you answered "Yes" to any of the above, please explain (If you need more space, attach a separate statement)		

34a Does the organization receive any financial aid or assistance from a governmental agency?	34a	
b Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" to either 34a or b, please explain using an attached statement	34b	
35 Does the organization certify that it has complied with the applicable requirements of sections 4 01 through 4 05 of Rev. Proc. 75-50, 1975-2 C.B. 587, covering racial nondiscrimination? If "No," attach an explanation	35	

Part VI-A Lobbying Expenditures by Electing Public Charities (See page 9 of the instructions)(To be completed **ONLY** by an eligible organization that filed Form 5768)

Check ☐ **a** if the organization belongs to an affiliated group
 Check ☐ **b** if you checked "a" and "limited control" provisions apply

Limits on Lobbying Expenditures

(The term "expenditures" means amounts paid or incurred)

	(a) Affiliated group totals	(b) To be completed for ALL electing organizations
36 Total lobbying expenditures to influence public opinion (grassroots lobbying)	36	1,564
37 Total lobbying expenditures to influence a legislative body (direct lobbying)	37	10,582
38 Total lobbying expenditures (add lines 36 and 37)	38	12,146
39 Other exempt purpose expenditures	39	1,879,032
40 Total exempt purpose expenditures (add lines 38 and 39)	40	1,891,178
41 Lobbying nontaxable amount Enter the amount from the following table -		
If the amount on line 40 is -		
Not over \$500,000		
Over \$500,000 but not over \$1,000,000		
Over \$1,000,000 but not over \$1,500,000		
Over \$1,500,000 but not over \$17,000,000		
Over \$17,000,000		
The lobbying nontaxable amount is -		
20% of the amount on line 40		
\$100,000 plus 15% of the excess over \$500,000		
\$175,000 plus 10% of the excess over \$1,000,000		
\$225,000 plus 5% of the excess over \$1,500,000		
\$1,000,000		
42 Grassroots nontaxable amount (enter 25% of line 41)	42	61,140
43 Subtract line 42 from line 36 Enter -0- if line 42 is more than line 36	43	
44 Subtract line 41 from line 38 Enter -0- if line 41 is more than line 38	44	

Caution If there is an amount on either line 43 or line 44, you must file Form 4720**4-Year Averaging Period Under Section 501(h)**

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below)

See the instructions for lines 45 through 50 on page 11 of the instructions

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in) ▶	(a) 2001	(b) 2000	(c) 1999	(d) 1998	(e) Total
45 Lobbying nontaxable amount	244,559	240,264	237,533		722,356
46 Lobbying ceiling amount (150% of line 45(e))					1,083,534
47 Total lobbying expenditures	10,582	10,090	5,500		26,172
48 Grassroots nontaxable amount	61,140	60,066	59,383		180,589
49 Grassroots ceiling amount (150% of line 48(e))					270,884
50 Grassroots lobbying expenditures	1,564	1,215	900		3,679

Part VI-B Lobbying Activity by Nonelecting Public Charities**NOT APPLICABLE**

(For reporting only by organizations that did not complete Part VI-A) (See page 12 of the instructions)

During the year, did the organization attempt to influence national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of

- a** Volunteers
- b** Paid staff or management (Include compensation in expenses reported on lines c through h)
- c** Media advertisements
- d** Mailings to members, legislators, or the public
- e** Publications, or published or broadcast statements
- f** Grants to other organizations for lobbying purposes
- g** Direct contact with legislators, their staffs, government officials, or a legislative body
- h** Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means
- i** Total lobbying expenditures (add lines c through h)

Yes	No	Amount

If "Yes" to any of the above, also attach a statement giving a detailed description of the lobbying activities

Part VII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations (See page 12 of the instructions)

51 Did the reporting organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?

a Transfers from the reporting organization to a noncharitable exempt organization of

(1) Cash

	Yes	No
51a(i)		X
a(ii)		X
b(i)		X
b(ii)		X
b(iii)		X
b(iv)		X
b(v)		X
b(vi)		X
c		X

(II) Other assets

b Other transactions

(l) Sales or exchanges of assets with a noncharitable exempt organization

(ii) Purchases of assets from a noncharitable exempt organization.

(iii) Rental of facilities, equipment, or other assets

(iv) Reimbursement arrangements

(v) Loans or loan guarantees

(vi) Performance of services or membership or fundraising solicitations

c Sharing of facilities, equipment, mailing lists, other assets, or paid employees

d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting organization. If the organization received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received.

[illegible]

52a Is the organization directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?

► ☐ Yes ☒ No

b If "Yes," complete the following schedule

[illegible]

Schedule B(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service**Schedule of Contributors**Supplementary Information for
line 1 of Form 990, 990-EZ and 990-PF (see instructions)

OMB No 1545-0047

2001

Name of organization

Employer identification number

AUDUBON NATURALIST SOCIETY53-0233715

Organization type (check one)

Filers of**Section**

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization☐ 4947(a)(1) nonexempt charitable trust not treated as a private foundation☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General rule** or a **Special rule** (Note Only a section 501(c)(7), (8), or (10) organization can check box(es) for both the General rule and a Special rule - see instructions)

General Rule -

- ☒ For organizations filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor (Complete Parts I and II)

Special Rules -

- ☐ For a section 501(c)(3) organization filing Form 990, or Form 990-EZ, that met the 33 1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of \$5,000 or 2% of the amount on line 1 of these forms (Complete Parts I and II)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals (Complete Parts I, II, and III)
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, some contributions for use *exclusively* for religious, charitable, etc , purposes, but these contributions did not aggregate to more than \$1,000 (If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the Parts unless the General rule applies to this organization because it received nonexclusively religious, charitable, etc , contributions of \$5,000 or more during the year) ► \$ _____

Caution Organizations that are not covered by the General rule and/or the Special rules do not file Schedule B (Form 990, 990-EZ, or 990-PF) but they **must** check the box in the heading of their Form 990, Form 990-EZ or on line 1 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Schedule B (Form 990, 990-EZ, or 990-PF) (2001)

Name of organization

Employer identification number

AUDUBON NATURALIST SOCIETY

53-0233715

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
<u>1</u>	—	<u>5,089</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>2</u>	—	<u>5,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>3</u>	—	<u>5,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>4</u>	—	<u>14,996</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>5</u>	—	<u>5,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
<u>6</u>	—	<u>15,000</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

AUDUBON NATURALIST SOCIETY

53-0233715

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
7		5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
8		30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
9		7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
10		8,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
11		256,478	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
12		20,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

Name of organization

Employer identification number

AUDUBON NATURALIST SOCIETY

53-0233715

Part I Contributors (See Specific Instructions)

(a) No	(b) Name, address and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
13		23,000	Person <input checked="checked" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution)

FORM 990, PART I - LIST OF CONTRIBUTORS
 (NOT OPEN TO PUBLIC INSPECTION)

NAME AND ADDRESS

DATE _____

**DIRECT
PUBLIC
SUPPORT**

ANONYMOUS

11/08/2001

5,089.

12/26/2001

5,000.

12/31/2001

5,000.

12/06/2001

14,996.

11/19/2001

5,000.

VAR

15,000.

03/19/2002

5,000.

VAR

30,000.

FORM 990, PART I - LIST OF CONTRIBUTORS
=====

(NOT OPEN TO PUBLIC INSPECTION)

NAME AND ADDRESS -----	DATE ----	DIRECT PUBLIC SUPPORT -----
	VAR	7,500.
	VAR	8,000.
	VAR	256,478.
	VAR	20,000.
	VAR	23,000.
TOTAL CONTRIBUTION AMOUNTS		----- 400,063. =====

FORM 990, PART I - GROSS SALES LESS RETURNS AND ALLOWANCES
=====DESCRIPTION
-----AMOUNT

SEE FEDERAL FOOTNOTE #1

434,315.

TOTAL

434,315.
=====

FORM 990, PART I - COST OF GOODS SOLD

=====

INVENTORY AT BEGINNING OF YEAR	92,876.
PURCHASES	273,923.
SALARIES AND WAGES	
OTHER COSTS	

SUBTOTAL	366,799.
MINUS ENDING INVENTORY	85,487.

COST OF GOODS SOLD	281,312.
	=====

FORM 990, PART I - OTHER INCREASES IN FUND BALANCES

DESCRIPTION

AMOUNT

UNREALIZED GAINS/LOSS

-29,512.

TOTAL

-29,512.

FORM 990, PART II - OTHER EXPENSES

DESCRIPTION	TOTAL	PROGRAM SERVICES	MANAGEMENT AND GENERAL	FUNDRAISING
PROFESSIONAL FEES	144,908.	86,782.	17,404.	40,722.
UTILITIES	21,515.	17,254.	2,344.	1,917.
WATER, SEWERAGE AND TRASH	11,237.	7,402.	3,298.	537.
INSURANCE	26,508.	22,499.	2,167.	1,842.
COMPUTER SERVICES	5,104.	3,209.	1,895.	
ADVERTISING AND PUBLICITY	7,864.	3,429.		4,435.
SCHOLARSHIPS AND CONTRIBUTIONS	980.	980.		
DUES, SUBSCRIPTIONS AND REGIST	5,634.	3,734.	1,400.	500.
BUILDING AND GROUND MAINTENANC	19,909.	19,909.		
MATERIALS AND BOOK PURCHASES	204.	204.		
MISCELLANEOUS	15,559.	11,145.	3,287.	1,127.
TOTALS	259,422.	176,547.	31,795.	51,080.

FORM 990, PART III - ORGANIZATION'S PRIMARY EXEMPT PURPOSE
=====

THE AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. IS
A NOT-FOR-PROFIT ENVIRONMENTAL, EDUCATIONAL AND CONSERVATION
ORGANIZATION SERVING RESIDENTS OF THE MARYLAND, VIRGINIA, AND THE
GREATER WASHINGTON METROPOLITAN REGION.

FORM 990, PART III - OTHER PROGRAM SERVICES
=====

DESCRIPTION -----	EXPENSES -----
CONSERVATION	195,435.
PUBLICATIONS	163,243.
WEBB SANTUARY	33,691.
CROWDER/MESSERSMITH	885.
RUST SANTUARY	92,467.

TOTALS	485,721. =====

FORM 990, PART IV - INVESTMENTS - SECURITIES
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
CORPORATE STOCKS	608,574.
U.S. GOVERNMENT AND GOVERNMENT OBLIGATIONS	160,958.
CORPORATE BONDS	398,427.
MUTUAL FUNDS	25,970.

TOTALS	1,193,929.
	=====

FORM 990, PART IV - OTHER ASSETS
=====

DESCRIPTION -----	ENDING BOOK VALUE -----
ACCRUED INTEREST RECEIVABLE	7,266.
UNCONDITIONAL PROMISE TO GIVE	86,481.

TOTALS	93,747.
	=====

FORM 990, PART IV - OTHER LIABILITIES

=====

DESCRIPTION	ENDING BOOK VALUE
-----	-----
OTHER LIABILITIES	41,916.
TOTALS	----- 41,916. =====

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
DREW KLEIBRINK MCLEAN, VA	DIRECTOR PART TIME	NONE	NONE	NONE
KATHLEEN MALLOY CHEVY CHASE, MD	TREASURER PART TIME	NONE	NONE	NONE
JOHN ULFELDER MCLEAN, VA	DIRECTOR PART TIME	NONE	NONE	NONE
SHARON BUCHANAN POTOMAC, MD	DIRECTOR PART TIME	NONE	NONE	NONE
JEFF SMITH CHEVY CHASE, MD	DIRECTOR PART TIME	NONE	NONE	NONE
WILLIAM BUTLER CHEVY CHASE, MD	PRESIDENT PART TIME	NONE	NONE	NONE
JOHN BJERKE ROCKVILLE, MD	DIRECTOR PART TIME	NONE	NONE	NONE
W. JOSEPH COLEMAN ROUND HILL, VA	VICE PRESIDENT PART TIME	NONE	NONE	NONE
NEAL FITZPATRICK CHEVY CHASE, MARYLAND	EXEC DIRECTOR FULL TIME	63,880.	3,194.	NONE
JOHANNAH BARRY FALLS CHURCH, VA	DIRECTOR PART TIME	NONE	NONE	NONE
JANE HILL	DIRECTOR PART TIME	NONE	NONE	NONE

FORM 990, PART V - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT. AND OTHER ALLOWANCES
BETHESDA, MD				
STEPHEN SYPHAX WASHINGTON, DC	SECRETARY PART TIME	NONE	NONE	NONE
MARGARET MILLER WASHINGTON, DC	DIRECTOR PART TIME	NONE	NONE	NONE
JAMES MOOREHEAD COLUMBIA, MD	DIRECTOR PART TIME	NONE	NONE	NONE
NICHOLAS LAPHAM WASHINGTON, DC	DIRECTOR PART TIME	NONE	NONE	NONE
PEARL MARKS POTOMAC, MD	DIRECTOR PART TIME	NONE	NONE	NONE
FRANK O'DONNELL KENSINGTON, MD	DIRECTOR PART TIME	NONE	NONE	NONE
MIKE NELSON CHEVY CHASE, MD	FORMER EXE DIRECTOR FULL TIME	46,440.	446.	NONE
GRAND TOTALS		110,320.	3,640.	NONE

FORM 990, PART VIII - ACCOMPLISHMENT OF EXEMPT PURPOSES

LINE NO. ---	EXPLANATION OF HOW EACH ACTIVITY FOR WHICH INCOME IS REPORTED IN COLUMN (E) OF PART VII CONTRIBUTED IMPORTANTLY TO THE ACCOMPLISHMENT OF EXEMPT PURPOSES -----
93B	AMOUNTS RECEIVED FROM FEES CHARGED FOR EDUCATIONAL SEMINAR, TOURS, AND FIELD TRIPS
93C	AMOUNTS RECEIVED FROM FEES CHARGED FOR VARIOUS LECTURES
94	AMOUNTS PAID BY MEMBERS AS CONSIDERATION FOR PROVIDING GOODS SERVICES, OR FACILITIES IN FURTHERANCE OF THE PURPOSE CONSTITUTING THE BASIS FOR THE EXEMPTION OF THE ORGANIZATION
103C	AMOUNTS RECEIVED FROM MISCELLANEOUS SOURCES AS CONSIDERATION PROVIDING GOODS, SERVICES, OR FACILITIES IN FURTHERANCE OF PURPOSE CONSTITUTING THE BASIS FOR THE EXEMPTION OF THE ORGANIZATION.

SCHEDULE A, PART III - EXPLANATION FOR LINE 4
=====

ENVIRONMENTAL EDUCATION SCHOLARSHIPS ARE AWARDED BY THE AUDUBON NATURALISTS SOCIETY TO APPLICANTS ON THE BASIS OF NEED AND MERIT. APPLICATIONS ARE SOLICITED THROUGH MEMBERSHIPS AND NEWSLETTER ANNOUNCEMENTS.

FEDERAL FOOTNOTES

FORM 990, PART I, LINE 10: BREAKDOWN OF ITEMS SOLD:

BIRDSEED
BOOKS
CALENDARS
MAGAZINES
BIRDFEEDERS
GIFTS
RECORDS
OPTICALS
CARDS
JEWELERY
CHILDREN'S ITEMS
GARMENTS & MISC.

FEDERAL FOOTNOTES
=====

FORM 990, PART II, LINE 42 AND PART IV, LINE 57:

DESCRIPTION	METHOD	LIFE	COST	DEPR. EXP.	A/D	NET BOOK VALUE
LAND	N/A	N/A	\$1,440,080	N/A	N/A	N/A
BUILDING,	SL	40	573,116	N/A	N/A	N/A
BLDG. & GROUND						
IMPR.,	SL	10	373,589	N/A	N/A	N/A
FURN. & EQUIP.	SL	5-10	214,509	N/A	N/A	N/A
TOTAL			2,601,294	61,733	423,286	2,178,008