Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2005

Open to Public Inspection

		of the Treasury enue Service	► The	organization may have to use a	copy of this return to sati	ısfy s	tate reporting req	uiremen	ts	Inspection	
	For th	ne 2005 calen	dar year, o	ortax year beginning Apr 1	, 2005, a	and e	ending Mar 3	31	,	2006	
_		ıf applicable		C Name of organization				D Empl	oyer Iden	tification Number	
		Idress change	Please use IRS label	AUDUBON NATURALIST SOCIETY	OF THE CENTRAL ATLA	NTIC	STATES, INC.	53.	-0233	715	
	H	ame change	or print or type.	Number and street (or P O box if mail	s not delivered to street addr)	F	Room/suite	E Telep	phone nun	nber	
		tial return	Sée specific	8940 JONES MILL ROAL	5			(3	01) 6	52-9188	
		nal return	instruc- tions.	City, town or country	State	ZIP	code + 4	F Acco	unting od:	Cash X	Accrual
	H	nended return		CHEVY CHASE	MD	20	0815		Other (spe		.
	H	plication pending	- Section	on 501(c)(3) organizations and 4	1947(a)(1) nonexempt		H and I are not applic	• • •			
	^ *	pilocitori poriing	charit	table trusts must attach a comp	leted Schedule A		H (a) Is this a group				X No
			(Form	n 990 or 990-EZ).			H (b) If Yes, enter				٠٠٠ الـــــــا
<u>G</u>	Web	site: - WWW.	AUDUBO	NNATURALIST.ORG			H (C) Are all affiliat			Tyes	X No
J	Orga	nization type			, -		(If 'No,' attacl				<u> </u>
	(chec	k only one) .	<u></u> ►	X 501(c) 3 ◀ (insert no)		527	H (d) Is this a sepa	rate return i	filed by an		
			_	ization's gross receipts are norma	_	:	organization			<u> </u>	X No
	\$25,0)00 The organ ses to file a ref	lization ned turn, be sui	ed not file a return with the IRS bired to file a complete return Some	ut it the organization states require a		I Group Exe	emption	Number		<u> </u>
		olete return.	, 5555		,		M Check	$\overline{}$		tion is not require	
L	Gross	receipts Add	l lines 6b. 8	3b, 9b, and 10b to line 12 ► 2	.986.189.	_	4		J	, 990-EZ, or 990-F	
Pa				ses, and Changes in Net		alar	ices (See Instru	ctions)		•	
				nts, and similar amounts received							
						1 1 2	1,145	.546.	3-		
		•						·	1 '3 - ~ (
		•		ns (grants)							
	_			1,063,738. noncash \$	•				1 d	1,154,	399.
		• , ,		e including government fees and					[189.
		•		assessments	<u>-</u>		•			<u>-</u>	331.
		•		temporary cash investments						<u> </u>	131.
			•	rom securities							357.
						6 6	1	,974.	<u> </u>		
	_				i				-		
			•	ss) (subtract line 6b from line 6a)					6 c	438	974.
	7		•	e (describe · · · ►)	7		
Ë	•			`	(A) Securities	1	(B) Othe	r		· 	
E	8 a			s of assets other	117,079.	8 8	- 		1		
בטר	b	'	•	s and sales expenses	113,356.	81			-		
E				le) Schedule . 1	3,723.	 	- 				
				one line 8c, columns (A) and (B))		'			8 d	3	723.
		•	• •	vities (attach schedule) If any am				 -			
		•		uding \$16,12	_		1				
						9 a	a 84	,483.			
	b	•	•	ther than fundraising\expenses.				,882.			
:			•	m special events (subtract line 9b			<u> </u>	ıle .2	9 c	5	601.
				less retulns and allowances .	· · · · · · · · · · · · · · · · · · ·			,454.			
ക	b	Less cost of	goods sold	C(-)\0\		10k	243	,295.			
<u> </u>	С	Gross profit or	oss) from sal	es of inventory (altabil schedule) (subtra	ct line 10b from line 10a) .		Sched	ule.3	10c	118	,159.
) (<u>(</u>	11	Other revenu	e (from Pa	es of inventory (altabli schedule) (subtractif XIII line 103)					11	15,	
ال				3 1d, 2, 3, 4, 5, 6c, 7,8d, 9c, 10c,						2,550,	,656.
<u> </u>			111 — 11	line 44 pollunn (B)						1,662,	,141.
Į,		-	M. F	al (fipm) line 44, column (C))						173	
⊒} P		_	11	4 eolumn (D))							652.
Ze Se			\\	ttach schedule)					1 1		
LES.		•	•	nes 16 and 44, column (A))						1,979,	,180.
			£1\ £ 41-		LO\			_	10		,476.
⊊ŝ	10	Net assets or	fund balar	e year (subtract line 17 from line 1 nces at beginning of year (from line 1 nces at the first balances (attach exp	e 73, column (A))				19	2,906	
SET	20	Other change	es in net as	sets or fund balances (attach exp	lanation)		Schedule.	4	20		,292.
ハ S				nces at end of year (combine lines					21	3,500	<u> </u>
				work Reduction Act Notice, see				TEEA0101			
		- ,			•	- -			- • ·		- "

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Form **990** (2005)

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

	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 (att sch) Sch 5					TER
	(cash \$ 7,560.					
	non-cash \$)					
	If this amount includes			7 5 6 6		
	foreign grants, check here . $\blacktriangleright X$	22	7,560.	7,560.		
23	Specific assistance to individuals (att sch)	23				
24	Benefits paid to or for members (att sch)	24 25	85,607.	70,683.	6,049.	8,875.
	Compensation of officers, directors, etc	 	974,444.	840,808.		
	Other salaries and wages Pension plan contributions	27	12,858.	10,485.	857.	1,516.
		28	49,433.	42,522.	2,505.	
	Other employee benefits	 	84,701.	72,845.		
	Payroll taxes	 	04,,01	72,013.		
	Professional fundraising fees		15,927.	13,083.	1,153.	1,691.
			13,521.	15,005.	<u> </u>	1,001.
	Legal fees	32	47 052	20 656	16 006	1 100
	Supplies		47,852.	30,656. 3,383.		
	Telephone	1 1	13,591.			†
	Postage and shipping.	35	23,013.	18,710.		}
	Occupancy	36	54,950.	48,297.	 -	
37	Equipment rental and maintenance	37	33,090.	25,624.	 -	
	Printing and publications	38	39,160.	28,852.	1,457.	1
	Travel	39	197,469.	196,505.	552.	412.
	Conferences, conventions, and meetings: : : :	40				
41	Interest	41		<u> </u>	11 016	
	Depreciation, depletion, etc (attach schedule)	42	73,118.	55,349.	11,846.	5,923.
43	Other expenses not covered above (itemize)					
i	a SCHEDULE 7	43 a	266,407.	<u>196,779.</u>	58,823.	10,805.
l	b	43 b				
(C	43 c			<u></u>	
•	d	43 d				
(e	43 e				
1	f 	43 f				
ģ	9	43 g				
44	Total functional expenses. Add lines 22 through 43 (Organizations completing columns (B) - (D), carry these totals to lines 13 - 15)	. 44	1,979,180.	1,662,141.	173,387.	143,652.
Join	t Costs. Check ► If you are following					
	any joint costs from a combined educationa			ation reported in (B) Pr	ogram services?	. ► Yes X No
	es,' enter (i) the aggregate amount of these				mount allocated to Progr	
\$			to Management and gene		_	e amount allocated
to F	undraising \$		<u> </u>			

TEEA0102 11/01/05

Part-III - Statement of Program Service Accomplishments

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.

hat is the organization's primary exempt purpose? SCHEDULE 8 I organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of ents served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organations 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) organizations and 4947(a)(1) trusts, but optional for others)
a EDUCATIONAL PROGRAMS - SCHEDULE 9	
(Grants and allocations \$ 2,060.) If this amount includes foreign grants, check here. ►	745,685.
b NATURE SANCTUARIES - SCHEDULE 10	
(Grants and allocations \$ 0.) If this amount includes foreign grants, check here . ▶	333,152.
c CONSERVATION PROGRAMS - SCHEDULE 11	
(Grants and allocations \$ 1,000.) If this amount includes foreign grants, check here. ▶	245,699.
d MEMBERSHIP PROGRAM - SCHEDULE 12	
(Grants and allocations \$ 0.) If this amount includes foreign grants, check here.	160,776.
e Other program services	100770.
(Grants and allocations $\$$ 4,500.) If this amount includes foreign grants, check here \blacktriangleright X	176,829.
f Total of Program Service Expenses (should equal line 44, column (B), Program services)	
AA	Form 990 (2005)

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• Part IV Balance Sheets (See Instructions)

1 4

		<u> </u>			
Note		ere required, attached schedules and amounts within the description imn should be for end-of-year amounts only.	(A) Beginning of year		(B) End of year
	45	Cash — non-interest-bearing	156,614.	45	109,058.
	46	Savings and temporary cash investments	119,601.	46	801,259.
	47 a	Accounts receivable			
	b	Less allowance for doubtful accounts 47 b	35,520.	47 c	4,498.
				-	
	48 a	Pledges receivable			
	b	Less allowance for doubtful accounts 48 b		48 c	
Ì	49	Grants receivable		49	
A S	50	Receivables from officers, directors, trustees, and key employees (attach schedule)		50	
S E	51 a	Other notes & loans receivable (attach sch)			
T S		Less allowance for doubtful accounts		51 c	
		Inventories for sale or use	77,471.	52	54,535.
		Prepaid expenses and deferred charges	49,962.		38,298.
		Investments – securities (attach schedule) Schedule 14► [Cost X FMV [702,321.
		Investments – land, buildings, & equipment basis 55a		٠,٠	
		Less accumulated depreciation		-	
	56	(attach schedule)		55 c	
		Investments — other (attach schedule)		56	
	5/a	Land, buildings, and equipment basis		-	
	Ь	Less accumulated depreciation (attach schedule)Schedule.6 57b 621,754.	2,534,529.	57 c	2,522,962.
	58	Other assets (describe) .		58	
	59	Total assets (must equal line 74) Add lines 45 through 58	3,513,599.	59	4,232,931.
	60	Accounts payable and accrued expenses	163,282.	60	175,721.
Ļ	61	Grants payable	· ·	61	
Á	62	Deferred revenue	443,819.	62	556,944.
Î	63	Loans from officers, directors, trustees, and key employees (attach schedule)	<u> </u>	63	. <u></u>
1	64 a	Tax-exempt bond liabilities (attach schedule)		64 a	
<u> </u>	b	Mortgages and other notes payable (attach schedule)		64 b	
ร์	65	Other liabilities (describe) .		65	
	66	Total liabilities. Add lines 60 through 65	607,101.	66	732,665.
0	Organi	izations that follow SFAS 117, check here > X and complete lines 67			
E T		through 69 and lines 73 and 74			
Ā	67	Unrestricted	1,135,861.	67	1,666,753.
S	68	Temporarily restricted	572,413.	68	635,289.
T S	69	Permanently restricted	1,198,224.	69	1,198,224.
o (Organi	izations that do not follow SFAS 117, check here 🟲 🔲 and complete lines			
F		70 through 74			
Ü	70	Capital stock, trust principal, or current funds	<u> </u>	70	
D	71	Paid-in or capital surplus, or land, building, and equipment fund		71	
Ā	72	Retained earnings, endowment, accumulated income, or other funds		72	
AZCE	73	Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72, column (A) must equal line 19, column (B) must equal line 21).	2,906,498.	73	3,500,266.
Š	74	Total liabilities and net assets/fund balances. Add lines 66 and 73	3,513,599.		4,232,931.
BAA		i otal napintros ana itel assets/land balances. Add intes of and 70 i i i i i i i		<u> </u>	Form 990 (2005)

Pa	nstructions.)	nue per Audited Financia	1 Statements w	/IIn 	Revenue per Re	tur	n (See
2	Total rayonus, saune, and other support	nor audited financial statements					2 651 020
a b	Total revenue, gains, and other support			• •		ر جَدَ	2,651,828.
ט	Amounts included on line a but not on F 1 Net unrealized gains on investments.	•	ĺ b	. [22,290.	-	
	2 Donated services and use of facilities.				22,290.		
						 	
	3 Recoveries of prior year grants		- D	<u> </u>			
			ſ		70 000		
					<u>78,882.</u>		101 170
	Add lines b1 through b4						101,172.
C				• • •		C	2,550,656.
d	Amounts included on Part I, line 12, but		1.	. 1			
	1 Investment expenses not included on P	art I, line 6b	<u>a</u>	' -			
	2 Other (specify)	-				1-	
			<u>_ d</u> :			 	
	Add lines d1 and d2					 	
e	Total revenue (Part I, line 12) Add line						2,550,656.
P	art IV-B Reconciliation of Expe	nses per Audited Financia	al Statements	with	Expenses per	Ret	urn
а	Total expenses and losses per audited	financial statements.				a	2,058,061.
b	Amounts included on line a but not on F			• •			2,000,001.
	1 Donated services and use of facilities.		h	۱.		٠ ا	
	2 Prior year adjustments reported on Part				<u> </u>		
	3 Losses reported on Part I, line 20		-		···-		
			· · · · · · · · · · · · · · · · · · ·	-		<u>.</u> .]	
	- —		Į.		70 002		
	LINE 9b		<u> b</u>		78,882.	1 1	70 000
_	Add lines b1 through b4						
C	Subtract line b from line a		· · · · · · ·			C	1,979,179.
d	Amounts included on Part I, line 17, but		}	. 1		['~ `]	
	1 Investment expenses not included on P			<u> </u>			
	2 Other (specify) Rounding			_	_		
			<u>_ d</u> :		<u> </u>		_
	Add lines d1 and d2					 	1.
e D	Total expenses (Part I, line 17) Add III	كالمتأسف والمتاري والمتاريخ					
	or key employee at any time d	tors, Trustees, and Key Euring the year even if they were no	imployees (List ot compensated) <i>(</i> 3	each See tl	n person who was an he instructions.)	offic	er, director, trustee,
		(B) Title and average hours	(C) Compensati		(D) Contributions	to	(E) Expense
	(A) Name and address	per week devoted	(if not paid,		employee benefi	_	account and other
		to position	enter -0-)		plans and deferre compensation plan		allowances
Νe	eal Fitzpatrick						
``		- -					
 C}	nevy Chase, Maryland	Executive Director 40	81,5	49	4,05	8	0.
	CHEDULE 15	DACCUCTAC DITCOCCI IO	01/0		1,00	-	
		- -				İ	
		Board Members 5		Λ		^	^
		Board Members		<u> </u>	<u> </u>	" 	
		- -					
- -		- -	1				
					 		
		 │				- 1	
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			<u> </u>		<u> </u>		<u> </u>
		_					
		<u></u>	<u> </u>		<u> </u>		
							<u> </u>

r ,

Part V-A Current Officers, Directors, Tru	istees, and Key Er	nployees (continued)			Yes	No	
75 a Enter the total number of officers, directors, and trustees permitted to vote on organization business as board meetings . > 14							
b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If 'Yes,' attach a statement that identifies the individuals and explains the relationship(s)							
c Do any officers, directors, trustees, or key employ listed in Schedule A, Part I, or highest compensation A, Part II-A or II-B, receive compensation from an to this organization through common supervision	yees listed in form 990, lated professional and oth my other organizations, w	Part V-A, or highest comp er independent contracto whether tax exempt or tax	pensated employees ors listed in Schedule able, that are related	75	C	x	
Note. Related organizations include section 509((a)(3) supporting organiz	ations					
If 'Yes,' attach a statement that identifies the indivoted other organization(s), and describes the compensus related organization	viduals, explains the rela sation arrangements, inc	ationship between this org cluding amounts paid to e	ganization and the each individual by each			"-	
d Does the organization have a written conflict of in			·····		<u>'</u>		
Part V-B Former Officers, Directors, Tru Benefits (If any former officer, director, during the year, list that person below and the instructions)	trustee, or key employe	e received compensation	n or other benefits (descr	rbed below	/)		
(A) Name and address	(B) Loans and Advances	(C) Compensation	(D) Contributions to employee benefit plans and deferred compensation plans	accoun	xpense t and oth wances	her	
				•			
Part VI Other Information (See the instruction	ons.)		<u> </u>	· · · · · · · · · · · · · · · · · · ·	Yes	No	
76 Did the organization engage in any activity not be	reviously reported to the	IRS? If 'Yes.'					
attach a detailed description of each activity 77 Were any changes made in the organizing or government of the organizing of government of the organization o						X	
If 'Yes,' attach a conformed copy of the changes							
78 a Did the organization have unrelated business gro				1	1		
b If 'Yes,' has it filed a tax return on Form 990-T fo			· · · · · · · · · · · · · · · · · · ·	· · · 78	Ы X		
79 Was there a liquidation, dissolution, termination, year? If 'Yes,' attach a statement	or substantial contraction	n during the		79		X	
80 a Is the organization related (other than by association membership, governing bodies, trustees, officers	ation with a statewide or s, etc, to any other exem	nationwide organization) pt or nonexempt organiza	through common ation?	80	a	X	
b If 'Yes,' enter the name of the organization >		- <u>-</u>	·				
81 a Enter direct and indirect political expenditures (S			xempt or nonexer	mpt 0.	5 - %	-E	
b Did the organization file Form 1120-POL for this	year?			81	b N/	<u>A</u>	
BAA				For	m 990	(2005)	

53-0233715

Page 6

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Form 990 (2005) AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.

Form	990 (2005) AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.		<u>3-0233715</u>	<u> </u>	Р	age 7
Par	t VI: Other Information (continued)				Yes	No
	Did the organization receive donated services or the use of materials, equipment, or facilities at no substantially less than fair rental value?			82 a	X	
þ	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.)	82 b			= भेड़ी - भेड़ी - भेड़ी - भेड़ी	
	Did the organization comply with the public inspection requirements for returns and exemption app			83 a	_X	
	Did the organization comply with the disclosure requirements relating to quid pro quo contributions		i i			
	84 a Did the organization solicit any contributions or gifts that were not tax deductible?					
	If 'Yes,' did the organization include with every solicitation an express statement that such contribution tax deductible?			84 b		
	501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members?		ľ	85 a	N/	A
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?			85 b	N/	A
	If 'Yes' was answered to either 85a or 85b, do not complete 85c through 85h below unless the or waiver for proxy tax owed for the prior year		ĺ		- * ₁ +	
c	Dues, assessments, and similar amounts from members	85 c	n/a			-
	Section 162(e) lobbying and political expenditures	85 d	N/A		,-	= _
	Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices.	85 e	N/A			
	Taxable amount of lobbying and political expenditures (line 85d less 85e)		N/A		•	_
	Does the organization elect to pay the section 6033(e) tax on the amount on line 85f?			85 a	N/Z	A
h	If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reason dues allocable to nondeductible lobbying and political expenditures for the following tax year?	able estimate of				
	501 (c) (7) organizations. Enter a Initiation fees and capital contributions included on		• • • • • • •	0311		
	line 12	86.2	N/A		-	
	Gross receipts, included on line 12, for public use of club facilities	86 b	N/A		, ,	
	501(c)(12) organizations Enter a Gross income from members or shareholders		N/A		`,, ~,,	
			147 21		# :-	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	87 Ь	N/A		, , , ,	
	At any time during the year, did the organization own a 50% or greater interest in a taxable corpor or an entity disregarded as separate from the organization under Regulations sections 301 7701-2 If 'Yes,' complete Part IX	2 and 301.7701	.37	88		X
89 a	501 (c)(3) organizations Enter: Amount of tax imposed on the organization during the year under			-	•	
	section 4911 ►0., section 4912 ►0., section 4	955 ►	0.			,
	501(c)(3) and 501(c)(4) organizations. Did the organization engage in any section 4958 excess be during the year or did it become aware of an excess benefit transaction from a prior year? If 'Yes,' explaining each transaction	enefit transactio attach a staten	nent	89 b		X
С	Enter Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958		, -		_	0.
d	Enter. Amount of tax on line 89c, above, reimbursed by the organization		-			0.
90 a	List the states with which a copy of this return is filed ► <u>MARYLAND AND VIRGINIA</u>	_ 		-		
b	Number of employees employed in the pay period that includes March 12, 2005 (See instructions)		90 b		<u> 39</u>
	The books are in care of DIRECTOR OF FINANCE Telephone nu Located at 8940 JONES MILL ROAD, CHEVY CHASE, MARYLAND	— ·	301) 652-9 +4 - 20815			
h	At any time during the calendar year, did the organization have an interest in or a signature or oth	er authority ove	er a		Yes	No
	financial account in a foreign country (such as a bank account, securities account, or other financial by the foreign country.	al account)?		91 b	<u> </u>	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreignancial Statements	gn Bank and				
	At any time during the calendar year, did the organization maintain an office outside of the United	States?		91 c		X
	If 'Vec ! enter the name of the foreign country.					
	Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 — Check her					▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year					لـــا
BAA				Forn	1 990	(2005)

Part VII. Analysis of Income-Producing Activities (See the instructions.) Excluded by section 512, 513, or 514 Unrelated business income Note: Enter gross amounts unless Related or exempt (C) (A) (B) otherwise indicated Exclusion code Amount function income Amount Business code Program service revenue 558,189. a EDUCATION PROGRAMS b f Medicare/Medicaid payments. g Fees & contracts from government agencies 230,331. Membership dues and assessments 2,131. 14 Interest on savings & temporary cash invmnts. 23,357. 14 Dividends & interest from securities. . Net rental income or (loss) from real estate 438,974. 16 **b** not debt-financed property Net rental income or (loss) from pers prop . . . Other investment income Gain or (loss) from sales of assets 3,723. 18 5,601. Net income or (loss) from special events . . . 118,159. Gross profit or (loss) from sales of inventory . . . Other revenue a 1,673. 7310 **b** ADVERTISING 1,801. 15 c ROYALTIES 12,318. d OTHER 906,679. Subtotal (add columns (B), (D), and (E)) 1,673. 487,905. 1,396,257. 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 the instructions.) 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) All Schedule 16 Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions) N/A(E) (D) (B) (A) (C) End-of-year Total Name, address, and EIN of corporation, Percentage of Nature of activities partnership, or disregarded entity assets ownership interest income Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions) X No a Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?...... X No Note: If 'Yes' to (b), file Form 8870 and Form 4720 (see instructions). Under penalties of penury, 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. Please Sign Signature of officer Date Here Neal T. Fitzpatrick, Executive Director Type or print name and title Preparer's SSN or PTIN (See Date Check if General Instruction W) Paid Preparer's selfsignature P0030<u>8177</u> employed Pre-Lemkin U+ O'Brien, LLP Squire parer's Firm's name (or **52-2041603** yours if self-Rockville Pike Suite 475 Use EIN employed), address, and Only 424-6800 20850 Rockville MD (301) Phone no ZIP + 4

SCHEDULE A (Form 990 or 990-EZ)

Organization Exempt Under Section 501(c)(3)

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

Supplementary Information — (See separate instructions.)

Department of the Treasury Internal Revenue Service

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

2005

OMB No 1545-0047

Name of the organization			Employer identification	number
AUDUBON NATURALIST SOCIETY OF T	HE CENTRAL ATLANTIC STA	ATES, INC.	53-0233715	
Part I Compensation of the Five (See Instructions List each one If the		er Than Officers	s, Directors, and	d Trustees
(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 and deferred compensation	(e) Expense account and other allowances
Carol Shaw				
Chevy Chase, Maryland	Dir of Development 40	64,296.	4,331.	0.
Frederick Bailey				
Chevy Chase, Maryland	Dir of Finance 40	51,250.	516.	0.
Rebecca Robinson				
Chevy Chase, Maryland	Dir of Rental Events 32	52,085.	1,715.	0 -
Total number of other employees paid over \$50,000				*_
Part II — A: Compensation of the Five (See instructions List each one (wh	Highest Paid Independent Contest the second settles and settles and settles and settles are	none, enter 'None ')	rofessional Ser	vices
(a) Name and address of each independent co	entractor paid more than \$50,000	(b) Type	of service	(c) Compensation
NONE		•		
		-	_	
				<u></u>
Total number of others receiving over \$50,000 for professional services	None			
Part II — B Compensation of the Five	Highest Paid Independent Co	ontractors for O	ther Services	
(List each contractor who performed enter 'None ' See instructions)	d services other than professional serv	ices, whether individi	als or firms If there	are none,
(a) Name and address of each independent co	ontractor paid more than \$50,000	(b) Type	of service	(c) Compensation
None				
		- -		
		-		
		_		
		<u>-</u>		<u> </u>
Total number of other contractors receiving over \$50,000 for other services ►	None		- -	

<u>P</u> â	rt III	Statements About Activities (See instructions)		Yes	No
1		ring the year, has the organization attempted to influence national, state, or local legislation, including any attempt influence public opinion on a legislative matter or referendum? If 'Yes,' enter the total expenses paid		_	
		ncurred in connection with the lobbying activities ► \$			
	(Mu	equal amounts on line 38, Part VI-A, or line i of Part VI-B)	1	X	
	Org	anizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other	11-11-12	1	72
	org	anizations checking 'Yes' must complete Part VI-B AND attach a statement giving a detailed description of the bying activities	, -;		
2	sub taxa	ring the year, has the organization, either directly or indirectly, engaged in any of the following acts with any estantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any able organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal neficiary? (If the answer to any question is 'Yes,' attach a detailed statement explaining the transactions)	- 1		**
	a Sal	e, exchange, or leasing of property?	2 a		X
		nding of money or other extension of credit?			X
	¢ Fur	nishing of goods, services, or facilities?	2 c		X
	d Pav	ment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	2 d	Х	
	- ·,				
		nsfer of any part of its income or assets?	2 e		X
	exp	you make grants for scholarships, fellowships, student loans, etc? (If 'Yes,' attach an loans) schedule 17 lanation of how you determine that recipients qualify to receive payments)		X	
		you have a section 403(b) annuity plan for your employees?			
		ring the year, did the organization receive a contribution of qualified real property interest under section 170(h)? you maintain any separate account for participating donors where donors have the right to provide advice	3 C		X
7	on t	the use or distribution of funds?	4 a		<u>x</u> _
	b Do	you provide credit counseling, debt management, credit repair, or debt negotiation services?	4 b		X
Pã	rt ÍV	Reason for Non-Private Foundation Status (See Instructions)			
Γhe	orgai	nization 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 and state >	e, city	•	
10		An organization operated for the benefit of a college or university owned or operated by a governmental unit Section 170(b) (Also complete the Support Schedule in Part IV-A)	(1)(A)(ıv)	
11	a 🗌	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)			
11	ь 🗌	A community trust Section 170(b)(1)(A)(vi) (Also complete the Support Schedule in Part IV-A)			
12	X	An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gros from activities related to its charitable, etc, functions — subject to certain exceptions, and (2) no more than 33-1/3% of its sufrom gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by thorganization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)	pport	pts	
13		An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organization 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). Checkbox that describes the type of supporting organization Type 1 Type 2 Type 3			
		Provide the following information about the supported organizations (See instructions)		_	
		(a) Name(s) of supported organization(s)	` ' _	ne nur n abov	
			-, -, - ,		
			<u> </u>		
14		An organization organized and operated to test for public safety Section 509(a)(4) (See instructions)			

Page 2

Schedule A (Form 990 or 990-EZ) 2005

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53-0233715 Schedule A (Form 990 or 990-EZ) 2005 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. 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.

	ndar year (or fiscal year nning in)	(a) 2004	(b) 2003	(c) 2002	(d) 2001	(e) Total
15	Gifts, grants, and contributions				<u> </u>	
	received (Do not include unusual grants See line 28)	534,831.	529,562.	754,624.	494,06	4. 2,313,081.
16	Membership fees received	223,651.	186,892.	204,109.	212,00	
17	Gross receipts from admissions, merchandise sold or services performed, or furnishing of facilities in any activity that is related to the organization's	814,985.	540,210.	481,420.	505,41	
18	Gross income from interest, dividends,	014,903.	J40,210.	401,420.	JUJ, 41	2,342,033.
	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	419,070.	431,757.	450,609.	445,69	8. 1,747,134.
19	Net income from unrelated business	7,632.	7,780.	4,069.	3,17	
	Tax revenues levied for the	7,032.	1,700.	4,005.	J, 17	22,000.
20	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	2,000,169.	1,696,201.	1,894,831.	1,660,36	2. 7,251,563.
24	Line 23 minus line 17	1,185,184.	1,155,991.	1,413,411.	1,154,94	4. 4,909,530.
_25	Enter 1% of line 23	20,002.	16,962.	18,948.	16,60	4.
26	Organizations described on lines			umn (e), line 24	<u> </u>	6a
t	Prepare a list for your records to show the supported organization) whose total gifts for return. Enter the total of all these excess a	r 2001 through 2004 excee	ded the amount shown in li	me 26a Do not file this list	with your	6b
c	: Total support for section 509(a)(1) t	est Enter line 24, colu	ımn (e)		▶ 2	6c
C	Add Amounts from column (e) for it	nes 18		19		
		22		26 b		26d
	Public support (line 26c minus line 2	•				
	Public support percentage (line 2		ed by line 26c (denoi	minator))	2	<u>61 </u>
	Organizations described on line in For amounts included in lines 15, 10 name of, and total amounts receive such amounts for each year	6, and 17 that were re-	ceived from a 'disquali ach 'disqualified perso	fied person,' prepare a n ' Do not file this list	list for your record with your return.	s to show the Enter the sum of
	$(2004) \underline{27,410}.$	(2003)	2 <u>8,770.</u> (2002) _	<u>26,9</u> 27.	_ (2001)	22,154.
	For any amount included in line 17 to show the name of, and amount re \$5,000 (Include in the list organization of the computing the difference between differences (the excess amounts) for (2004)	eceived for each year, tions described in lines teen the amount receiver each year	that was more than the 5 through 11b, as we well and the larger amo	e larger of (1) the amount as individuals.) Do not bunt described in (1) or	ot file this list wit (2), enter the sum	the year or (2) th your return. the of these
-		(2003)				
C	Add Amounts from column (e) for li		2,313,081.	16 <u>826,</u> 21	<u>655.</u> ► 2	5,481,769.
	I Add: Line 27a total		d line 27h total			
	Public support (line 27c total minus					
	Total support for section 509(a)(2) t					
	Public support percentage (line 2					1 _
_	Investment income percentage (I	•	•			
	Unusual Grants: For an organizati		•		 -	

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

Par	Telegraphy of the second restablished (See Instructions) (To be completed ONLY by schools that checked the box on line 6 in Part IV)	/-		
	(16 be completed ONLY by schools that checked the box on the only art 14)	N/A	Vac	T NI=
			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	<u> </u>	
21	Has the organization publicized its racially nondiscriminatory policy through newspaper or broadcast media during	7	-	, ,
31	the period of solicitation for students, or during the registration period if it has no solicitation program, in a way that	24		
	makes the policy known to all parts of the general community it serves?	31		
	If 'Yes,' please describe, if 'No,' please explain. (If you need more space, attach a separate statement)	ļ. <u>.</u>	, ,,	
		- " "	1	, , ,
		1 (4 m)		
		7-~		(
32	Does the organization maintain the following			μ -
	a Records indicating the racial composition of the student body, faculty, and administrative staff?	32 a		
	b Records documenting that scholarships and other financial assistance are awarded on a racially nondiscriminatory basis?	32 b		
	c Copies of all catalogues, brochures, announcements, and other written communications to the public dealing			
	with student admissions, programs, and scholarships?	32 c		
	d Copies of all material used by the organization or on its behalf to solicit contributions?	32 d		<u> </u>
		- 3-		
	If you answered 'No' to any of the above, please explain (If you need more space, attach a separate statement)		1 5	\$.
		_ + * * * * * * * * * * * * * * * * * *	- X -	
		ئىسى ئىرىرى رى		·
	Describe accompation discriminate by rook in any way with respect to	7,		,
33	Does the organization discriminate by race in any way with respect to	`	- "-	
	a Students' rights or privileges?	33 a		
	b Admissions policies?	33 b		<u> </u>
	c Employment of faculty or administrative staff?	33 c		
	d Scholarships or other financial assistance?	33 d	<u> </u>	
	e Educational policies?	33 e		<u> </u>
	f Use of facilities?	33 f		-
	g Athletic programs?	33 g		<u> </u>
	h Other extracurricular activities?	33 h		
	If you answered 'Yes' to any of the above, please explain (If you need more space, attach a separate statement)			
		-		
		_	 -	
34	a Does the organization receive any financial aid or assistance from a governmental agency?	34 a		
	b Has the organization's right to such aid ever been revoked or suspended?	l l	1	
	If you answered 'Yes' to either 34a or b, please explain using an attached statement	,		•
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		

ı.

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

		(10 be completed offer by an engine organization that med 1 cm of co,			
Chec	k ► a	If the organization belongs to an affiliated group Check b If you	checke	ed '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 lo	bbying expenditures to influence public opinion (grassroots lobbying)	36		2,478.
37	Total lo	bbying expenditures to influence a legislative body (direct lobbying)	37		2,589.
38	Total lo	bbying expenditures (add lines 36 and 37)	38	<u> </u>	5,067.
39	Other e	xempt purpose expenditures	39		1,974,113.
40	Total e	cempt purpose expenditures (add lines 38 and 39)	40	<u></u>	1,979,180.
41	Lobbyir	ig nontaxable amount. Enter the amount from the following table —	1 - c		
	If the a	mount on line 40 is — The lobbying nontaxable amount is —	- 1-2	_ , 3	, ,
		er \$500,000			•
	Over \$50	0,000 but not over \$1,000,000 \$100,000 plus 15% of the excess over \$500,000		1-1	
	Over \$1,	000,000 but not over \$1,500,000 \$175,000 plus 10% of the excess over \$1,000,000	41		248,959.
	Over \$1,	500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000		,	
	Over \$	7,000,000	<u></u>		<u>. </u>
42	Grassr	oots nontaxable amount (enter 25% of line 41)	42		62,240.
43	Subtrac	t line 42 from line 36 Enter -0- if line 42 is more than line 36	43		
44	Subtrac	t line 41 from line 38 Enter -0- if line 41 is more than line 38	44		0.
<u> </u>	Cautio	n: If there is an amount on either line 43 or line 44, you must file Form 4720	<u> </u>		<u> </u>

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)

		Lobbying Expenditures During 4 -Year Averaging Period					
_	Calendar year (or fiscal year beginning in) >	(a) 2005	(b) 2004	(c) 2003	(d) 2002	(e) Total	
45	Lobbying nontaxable amount	248,959.	254,508.	245,146.	245,199.	993,812	
46	Lobbying ceiling amount (150% of line 45(e))				•	1,490,718	
47	Total lobbying expenditures	5,067.	37,819.	35,018.	10,168.	88,072	
48	Grassroots non- taxable amount	62,240.	63,645.	61,287.	61,300.	248,472	
49	Grassroots ceiling amount (150% of line 48(e))		-	-	-	372,708	
50	Grassroots lobbying expenditures	2,589.	24,346.	22,366.	7,368.	56,669	

Part VI-B Lobbying Activity by Nonelecting Public Charities

(For reporting only by organizations that did not complete Part VI-A) (See instructions)			N/A
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	Yes	No	Amount
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	1 1		
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any other means			
i Total lobbying expenditures (add lines c through h.)			
If 'Yes' to any of the above, also attach a statement giving a detailed description of the lobbying activities			

Schedule A (Form 990 or 990-EZ) 2005

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

51 Did the	e reporting organization dii Code (other than section 5	rectly or main 501(c)(3) orga	ectly engage i anizations) or	n any of the following wi in section 527, relating t	o political organizations?	CHOH SUTTE	?)	
	ers from the reporting orga	• • • • •	_	_			Yes	No
(i) C	ash					51 a (i)		X
``					<i></i>			X
b Other	transactions							
(i) Sa	ales or exchanges of asset	ts with a none	charitable exe	mpt organization		b (i)_		Х
• • • • • • • • • • • • • • • • • • • •	_			•			_	X
` '								X
` '	• •							X
` '								X
` '	_							X
` '		-	•			· · · · · · · · · · · · · · · · · · ·		X
d If the a the go any tra	O	_		· · · · · · · · · · · · · · · · · · ·	(b) should always show the fair market valuation received less than fair market valuation assets, or services received			
(a) ⊔ne no	(b) Amount involved	Name of	(c) noncharitable	exempt organization	Description of transfers, transactions, and s	sharing arran	gement	s
		. <u>-</u>	_			<u>.</u>		
					<u> </u>			
			-			<u>-</u>		·
			· · · · · · · · · · · · · · · · · · ·					
			•					
						-		
	organization directly or included in section 501(c) of the state of the following section section sections:	-	ed with, or relater than section	ated to, one or more tax 501(c)(3)) or in section	-exempt organizations 527?	► ☐ Ye	s X	No
	(a) Name of organization			(b)	(c)	•		
	Name of organization		Туре	of organization	Description of relation	ship		
	<u> </u>				 			
<u>-</u>								
	<u> </u>			•				
								_
•								
		 	-		Sahadula A /Fam	000 00	30 EZ	0005

SCHEDULE 1

GAIN (LOSS) ON SALES OF ASSETS OTHER THAN INVENTORY FORM 990, LINE 8

ASSETS SOLD	PRICE	VALUE	(LOSS)
Publicly Traded Securities	117,079	113,356	3,723

SCHEDULE 2

SPECIAL EVENTS AND ACTIVITIES FORM 990, LINE 9

EVENT	GROSS RECEIPTS	LESS CONTRIB.	GROSS REVENUE	DIRECT EXPENSES	NET INCOME (LOSS)
Holiday Fair	84,483	-	84,483	76,958	7,525
Bırdathon	16,122	16,122	-	1,924	(1,924)
Total	100,605	16,122	84,483	78,882	5,601

SCHEDULE 3

SALES OF INVENTORY FORM 990, LINE 10

	GROSS	COST OF	GROSS
<u>ITEMS</u>	SALES	GOODS SOLD	PROFIT
Birdseed	120,233	76,386	43,847
Books, calendars and posters	78,149	55,341	22,808
Birdfeeders and houses	42,115	25,149	16,966
Gifts and jewelry	34,826	19,806	15,020
Optics	31,937	29,779	2,158
Children's items	15,231	8,524	6,707
Cards and stationary	11,332	6,932	4,400
Recordings and videos	11,139	6,140	4,999
Other items	16,492	15,238	1,254
Total	361,454	243,295	118,159

SCHEDULE 4

OTHER CHANGES IN NET ASSETS FORM 990, LINE 20

Unrealized losses on investments	22,290
Rounding	2
Total	22,292

SCHEDULE 5

GRANTS AND ALLOCATIONS FORM 990, LINE 22

4, 4, 4, 4,

Scholarships:

Scholarships:		
2	Maine Audubon Society 20 Gilsland Farm Road Falmouth, ME 04105 Workshop for Educators Scholarship	1,060
2	Grace Manubary c/o Annacostia Watershed Society 4302 Baltimore Avenue Bladensburg, MD 20710 Workshop for Educators Scholarship	500
-	Ric Zeller 7809 Cole Avenue Takoma Park, MD 20912 Workshop for Educators Scholarship	500
Conservation G	Grants:	_
]	Environmental Conservation and Organic Gardening PO Box 27 Kesogon, Kenya Kenya Training workshops on conservation issues and organic practices for local farmers.	1,500
	Dr Graeme Patterson Assistant Director Africa Program, Wildlife Conservation Society 2300 Southern Boulevard Bronx, New York 10460 Rwanda: Seed Dispersal Ecology in the Nyungwe National Park	2,000
	Eugene Skorobogata 24, Geroev Truda str., 33 "d" Kharkov, Ukraine 61136 Ukraine: Raising public awareness of the plight of the desman, an aquatic mammal found only in the Ukraine.	1,000
-	Maryland Ornithological Society 5812 Harness Court Columbia, MD 21044 General support grant	1,000

Total grants and allocations

7,560

SCHEDULE 6
LAND, BUILDINGS, EQUIPMENT AND DEPRECIATION

FORM 990, LINES 42 and 57

ASSETS	COST	ACCUM. DEPR	BOOK VALUE	DEPR EXPENSE
				<u> </u>
Land	1,741,683	-	1,741,683	-
Buildings and Improvements	1,150,536	427,841	722,695	40,314
Furniture and Equipment	252,498	193,914	58,584	32,804
Total	3,144,717	621,754	2,522,963	73,118

SCHEDULE 7

OTHER EXPENSES FORM 990, LINE 43

	TOTAL	PROGRAM SERVICE	MGT & GEN	FUND- RAISING
Advertising	16,464	14,915	1,124	425
Computer Expense	34,507	25,051	5,750	3,706
Consultants	20,254	704	19,550	_
Contract Services	95,460	89,142	6,025	293
Dues & Subscriptions	4,604	2,918	1,190	496
Insurance	67,791	51,458	10,889	5,444
Other	27,327	12,591	14,295	441
Total _	266,407	196,779	58,823	10,805

SCHEDULE 8

PRIMARY EXEMPT PURPOSE FORM 990, PART II

The Audubon Naturalist Society fosters stewardship of the region's environment by educating citizens about the natural world, promoting conservation of biodiversity, and protecting wildlife habitat

SCHEDULE 9

PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART II, LINE a

EDUCATION PROGRAMS

The educational mission of the Audubon Naturalist Society (ANS) is to increase the appreciation and understanding of nature and ecology in the Central Atlantic states, foster a community of action in support of conservation throughout the region, and involve people of all ages and levels of knowledge in a wide range of experiential activities. To carry out this mission, ANS conducts a variety of programs for children and adults

School and Scout Programs

ANS school and scout programs reached 4,553 students and 918 adults in Montgomery County, Maryland, the District of Columbia, and Loudoun and Fairfax Counties, Virginia. Each fall and spring, staff members conduct field trips for school groups at ANS sanctuaries. In the winter months, ANS naturalists go into the schools with programs for individual classes and assemblies. ANS offered scholarships totaling \$ 1,725 to schools unable to afford the modest cost of field trips and inschool programs. Scout groups participate in programs at the sanctuaries specifically designed to help them complete nature and wildlife-related badges. During FY'06 ANS launched the "GreenKids" environmental education program in three schools where naturalists work with teachers and students on hands-on environmental activities on school grounds and nearby habitats.

Summer Nature Camp

ANS enrolled 843 children and youth in summer camps at its sanctuaries and on overnight camp programs. Among the most popular of the 42 camps are *Reptile Mania*, where young children satisfy their natural curiosity about snakes and other reptiles, and BayQuest, where pre-teens and teens learn first hand about the Chesapeake Bay.

Children & Family Programs

These programs served 890 children as young as three and their families. After school programs for elementary school children were popular options for families wanting more for their children than TV, video games, and sports. Fifty five nature-themed birthday parties brought 825 children to ANS sanctuaries last year, many of whom subsequently return for other nature programs. Another growing program serves the needs of home schooled children. Audubon Storytime performances were held at 15 schools and 6 libraries, reaching approximately 5,000 children.

Teacher Training

ANS has run GreenLabs Environmental Education workshops for Montgomery County public school teachers for many years with generous funding from the Howard Hughes Medical Institute In FY06, 75 teachers participated in workshops designed to help them learn about the local environment and how to use it effectively in teaching math, english, reading, art and science

Adult Programs

In FY06, ANS's 127 Adult Programs attracted 1,385 nature lovers to hikes, walks, and other explorations where they learned first hand about the natural history of the area.

Natural History Field Studies

ANS conducts the Natural History Field Studies program in partnership with the USDA Graduate School. Twenty one courses in natural history at the college level, enrolling a total of 254 students, were conducted in FY06. Topics included geology, insects, ferns, butterflies, ecology, and birds of prey. The principle focus of these courses of study was the natural history of the central Atlantic states. Certificates in Natural History were awarded to six students in recognition of their completion of a required curriculum of 26 credits.

Nature Travel

For individuals with the time and inclination to explore abroad, the ANS offers natural history trips to a variety of destinations. Led by experienced naturalists, participants gain a first-hand understanding of local wildlife and habitat in areas outside the mid-Atlantic region. In FY06, these destinations included southwestern Idaho, Brazil, Nova Scotia, the Florida Everglades, Texas, and Costa Rica, with a total of 72 participants

SCHEDULE 10

PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART II, LINE b

NATURE SANCTUARIES

Woodend Sanctuary

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Located in Chevy Chase, Maryland, these historic grounds dates back to a 1699 land grant and is the site of many educational programs for children and adults. The Woodend mansion, which is on the National Historical Register, is one of the few remaining grand old estates in Chevy Chase. Visitors can enjoy the serenity of our wildflower meadow, hike our meanderings trails, and explore the aquatic life of our pond at this 40-acre nature sanctuary located just a few minutes from

Rust Sanctuary

Located in Loudoun County Virginia, the Rust Sanctuary property includes a manor house and 68 acres of land. Visitors are invited to walk the nature trails, either on their own or on guided nature explorations. The Rust Sanctuary is committed to protecting the integrity of its wildlife habitats while providing opportunities to the people of Loudoun County and the region to discover and appreciate the natural world, serving as a meeting place for other organizations working to preserve the environmental quality of northern Virginia, and educating children about the importance of environmental conservation. The sanctuary contains seven different kinds of habitats—a perched wetland, wildlife habitat gardens, meadows, hedge rows, mixed hardwood forest, pine plantation, and a pond.

Webb Sanctuary

The Webb Sanctuary's 20 acres are on the edge of Clifton, Virginia, a restored 19th century railroad village in southern Fairfax County. The features of this small enclave include a small stream flowing by a meadow, native orchids, several amphibian species, and a good variety of birds. A self-guided trail winds through the property.

SCHEDULE 11

PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART II, LINE c

CONSERVATION PROGRAMS

The Audubon Naturalist Society advocates for the protection and conservation of our region's environment. From wildlife habitat and parkland, to farms and forests, to our wetlands, streams and coasts, Audubon Naturalist Society's advocacy staff speaks up for our most treasured natural places. Accomplishments of our conservation programs include

- •Facilitated the Fairfax Watershed Network and helped organize the annual stream clean-ups.
- •Chaired the Environmental Quality Advisory Council in Fairfax County, an advisory group to the chairman of the Board of Supervisors.
- •Participated in the Tyson's Comer Task Force, guiding the redesign of this urban area.
- •Organized the Montgomery County Stormwater Partners, a coalition of 21 watershed and stream advocacy groups throughout the county.
- •Continued to lead the battle against the Intercounty Connector (ICC) by organizing numerous intersection events; distributing thousands of flyers; producing a 30 second TV commercial that aired in prime time, holding press conferences and a citizen rallies, and sponsoring an opinion poll showing dramatic loss of support for the road project when the facts are known.
- •Testified at countless Montgomery County Planning Board and County Council hearings, Fairfax County Planning Commission and Board of Supervisors hearings, and Loudoun County Board of Supervisors hearings on behalf of waterways, wetlands, land use, and transportation issues.
- •Participated in Reality Check, the Urban Land Institute's annual one-day planning exercise to address growth in our region.

SCHEDULE 12

PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART II, LINE d

MEMBERSHIP

ANS has the support of a membership of 4,500 households (10,000 people.) Members participate in the Society's environmental education programs, enjoy its three nature sanctuaries, and volunteer in various capacities including serving on the Board of Directors. Annually, 1,000 members volunteer for the Society, monitoring streams, improving sanctuaries, testifying at public hearings, leading programs and trips, and advocating on behalf of environmental policy.

SCHEDULE 13

PROGRAM SERVICE ACCOMPLISHMENTS FORM 990, PART II, LINE e

OTHER PROGRAMS	Program Service Expenses	Grants and Allocations
Publication of Periodicals	82,219	_
Audubon Sanctuary Shop	89,160	_
Crowder Messersmith Scholarship Fund.	5,450	4,500
Total	176,829	4,500

SCHEDULE 14

INVESTMENTS - SECURITIES FORM 990, PART IV, LINE 54

	Beginning of Year	End of Year
Mutual Funds	3,008	25,425
US and Corporate Bonds	212,278	151,660
Stock - Publicly Traded	324,616	525,236
Total	539,902	702,321

SCHEDULE 15

LIST OF OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES FORM 990, PART V

4

(B) Title Avg Hours	(C) Compensation	(D) Benefits	(E) Expenses
President As Needed	0	0	0
Vice President As Needed	0	0	0
Secretary As Needed	0	0	0
Treasurer As Needed	0	0	0
Director As Needed	0	0	0
Director As Needed	0	0	0
Director			
As Needed	0	0	0
Director As Needed	0	0	0
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Director			
	President As Needed Vice President As Needed Secretary As Needed Treasurer As Needed Director As Needed	Title Avg Hours Compensation President As Needed 0 Vice President As Needed 0 Secretary As Needed 0 Treasurer As Needed 0 Director As Needed 0	Title Avg Hours Compensation Benefits President As Needed 0 0 0 Vice President As Needed 0 0 0 Secretary As Needed 0 0 0 Treasurer As Needed 0 0 0 Director As Needed 0 0 0

SCHEDULE 16

RELATIONSHIP OF ACTIVITIES TO THE ACCOMPLISHMENT OF EXEMPT PURPOSE FORM 990, PART VIII

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Line no.	Explanation of Relationship of Activities to the Accomplishment of Exempt Purpose				
93	Education programs increase an appreciation and understanding of nature and ecology in the Central Atlantic states, fosters a community of action in support of conservation throughout the region, and involves people of all ages and levels of knowledge in a wide range of experiential activities. ANS conducts a variety of programs for both children and adults				
94	Members are a key component of the strategy to accomplish the mission of ANS. Members receive regular information concerning the natural world, biodiversity, and protecting wildlife and habitat. Annually, 1,000 members volunteer for ANS by monitoring streams, improving sanctuaries, testifying at public hearings, leading programs and trips, and advocating on behalf of environmental policy.				
102	The Sanctuary Shop sells birdseed, birdhouses and feeders and an assortment of nature-related books, clothing, games and gifts. These items assist the purchaser in attracting, viewing and gaining a better understanding and appreciation of the natural world, biodiversity, wildlife and their habitats.				

SCHEDULE 17

EXPLANATION OF HOW SCHOLARSHIP RECIPIENTS QUALIFY FORM 990 SCHEDULE A, PART III, LINE 3a

ANS awards several types education scholarships for both educators and children on the basis of both need and ment Educator scholarship winners attend a week-long education workshop each summer, and qualify on the basis of how the workshop's content will be incorporated into their school, classroom or educational setting. School program scholarships reduce the per child program fee and are offered to schools where 50% of the students qualify for the free or reduced lunch program. Summer camp scholarships are provided to families who would otherwise not be able afford a summer camp for their children. For each type of scholarship, a committee of board members and/or staff review the applications and award the scholarships

Form 8868 (Rev December 2004)

Application for Extension of Time to File an Exempt Organization Return

OMB No 1545-1709

Form 8868 (Rev 12-2004)

Department of the Treasury Internal Revenue Service

GFile a separate application for each return

If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box			G[X]
? If you are	filing for an Additional (not automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)		
Do not comp	lete Part II unless you have already been granted an automatic 3-month extension on a previously f	led Form 8	868	
Part I	Automatic 3-Month Extension of Time 'Only submit original (no copies needed)		
Form 990-T c	corporations requesting an automatic 6-month extension 'check this box and complete Part I only			G 🗌
All other corp Partnerships,	orations (including Form 990-C filers) must use Form 7004 to request an extension of time to file in REMICs and trusts must use Form 8736 to request an extension of time to file Form 1065, 1066, or	come tax re	eturns	
below (6-more extension, ins	ling (e-file) Form 8868 can be filed electronically if you want a 3-month automatic extension of time of the solution of the standard comporate Form 990-T filers). However, you cannot file it electronically if you want the addition stead you must submit the fully completed signed page 2 (Part II) of Form 8868. For more details of you want the fully completed signed page 2 (Part II) of Form 8868. For more details of you want the fully completed signed page 2 (Part II) of Form 8868. For more details of you want the fully completed signed page 2 (Part II) of Form 8868. For more details of you want the fully completed signed page 2 (Part II) of Form 8868. For more details of you want the addition of the file	onal (not au	itomatic) 3-mo	onth
	Name of Exempt Organization	Employer	identification num	ber
Туре ог				
print File by the	AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC	<u>. 53-02</u>	53-0233715	
due date for	Number, street, and room or suite number If a P O box, see instructions			
filing your return See	8940 JONES MILL ROAD			
instructions	City, town or post office. For a foreign address, see instructions	state	ZIP code	
	CHEVY CHASE	MD	20815	
<u> </u>	of return to be filed (file a separate application for each return)			
X Form 990		720		
Form 990				
Form 990				
Form 990)-PF Form 1041-A Form 8	<u>370 </u>		
っ The book	s are in the care of G_DIRECTOR_OF_FINANCE	•		
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•	anization does not have an office or place of business in the United States, check this box			G 📙
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•	st an automatic 3-month (6-months for a Form 990-T corporation) extension of time until Nov			
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G	calendar year 20 or			
	tax year beginning Apr 1 , 20 05 , and ending Mar 31 , 20 06	Change in	accounting D	ariad
2 If this ta	ax year is for less than 12 months, check reason	Change in	accounting pe	31 10 0
3a If this a nonrefu	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any indable credits. See instructions	\$_		0.
	pplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments m any prior year overpayment allowed as a credit	ade \$_		0.
c Balance coupon	e Due Subtract line 3b from line 3a Include your payment with this form, or, if required, deposit wit or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	h FTD \$_		0.
Caution If you	ou are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and For ructions	m 8879-EC	for	

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions