# **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

2009

Department of the Treasury

Open to Public Inspection

		nue Service				ppy or this return to sa	tialy attace repor			1-1-1-1	
	For th	e 2009 calen	dar year, o	or tax year beginning		, 200	9, and endir	ng Mar	31		2010
		applicable	Please use	C Name of organization	1				1		ition Number
•	-	dress change	IRS label	AUDUBON NATURALI				ES, INC	<del></del>	23371	.5
6	₽ Nar	me change	or print or type.	Number and street (o	xPO box if mail i	s not delivered to street	addr) Room/s	suite	E Telepho	ne number	
Ĺ	d Init	ial return	See specific	8940 JONES M	IILL ROAD	· · · · · · · · · · · · · · · · · · ·			(301	L) 652	-9188
-	Ter	mination	Instruc- tions.	City, town or country		Sta	te ZIP code +	4			
5	Am	ended return	L	CHEVY CHASE		MI	20815		<b>G</b> Gross re	ceipts \$ 3	3,592,288.
$\subseteq$		olication pending	F Name a	and address of principal off	icer			H(a) Is this	s a group return	for affiliate	es? Yes X No
~	_		Neal T. F	itzpatri 8490 Jones	Mill Road Ch	nevy Chase N	MD 20815		Il affiliates incli		tions) Yes No
1	Tax-	exempt statu			sert no.)	4947(a)(1) or	527	1 " 180	,' attach a list	(see instruc	cuons)
				JBONNATURALIS	T.ORG			H(c) Group	exemption nu	mber ►	
		of organization	X Corpora			her ►	L Year of Forma				I domicile MD
	rt I	Summ									
	1			ganization's mission	or most signific	cant activities:					
Š				aturalist Soc			ents of	the q	reater	Washi	ngton,
Activities & Governancence	•			appreciate,							
Ë	-			or experience							
ě	2	Check this bo	x ►	if the organization d	iscontinued its	operations or disj	posed of moi	re than 25	5% of its as		
o a	3		•	bers of the governing		•				3 16	
8	4		-	it voting members of		body (Part VI, line	e 1b)			4 16	
ŧ	5		•	yees (Part V, line 2a						5 11	
ţ	6			eers (estimate if nec						6 51	
•		•		ousiness revenue from staxable income from						7a 7b	3,100.
	D	ivet unrelatet	Dusiness	taxable income non	11 FOITH 990-1,	11116 34		<del> 1</del>		-/-	
		0		1- (D-4) (III   1 1-)					Prior Year	07	Current Year
9			•	its (Part VIII, line 1h)		PECEN	/CD	┪	1,250,1		1,233,543.
Revenue		-		iue (Part VIII, line 2g art VIII, column (A), I		RECEIV	/tU	<b> </b>	852,3 -17,3		824,516. 51,076.
æ				III, column (A), lines			(	> ├──	625,7		561,405.
				nes 8 through 11 (mi			ina 1(2)	31⊩	2,710,8		2,670,540.
				ounts paid (Part IX,					10,3		7,650.
	14	Renefits nair	to or for	members (Part IX, co	olumo (A) line	4000			10/3	<del>50.</del>	77030.
	15	Salaries oth	er comper	nsation, employee be	anefite (Part-LX	CGDEN	. Lihit		1,625,1	99	1,688,611.
Š	1			ng fees (Part IX, colu			, , ,	J	1,023,1	<del></del>	1,000,011.
Expenses	1			· .	7 7	-		182.1133	1 14 Sec 27 (1)	32 E 66	NEATT A PERSON
짫				nses (Part IX, colum			193,494.				
	i	•	-	IX, column (A), lines		•			1,256,9		990,314.
		-		nes 13-17 (must equ		umn (A), line 25)			2,892, <u>4</u>		<u>2,686,575.</u>
	19	Revenue less	s expense	s Subtract line 18 fr	om line 12				-181,6	23.	-16,035.
5 5								Beg	inning of Y	ear	End of Year
		Total assets							4,551,4		4,913,418.
Net As Fund B	21	Total liabilitie	es (Part X	, line 26)					987,4	78.	1,098,151.
žž	22			ances Subtract line	21 from line 20	)			3,563,9	46.	3,815,267.
Pε	rt II	Signat	ure Blo	ck							
		Under penalti	es of perjury,	I declare that I have exam Declaration of preparer (	ined this return, in	cluding accompanying s	chedules and sta	atements, ar	nd to the best o	f my knowle	edge and belief, it is
		true, correct		Declaration of preparer (	buller trial officery i	is based on all informati	on or writer prep	alei ilas ali	y kilowieuge	ما	
Sig	gn 💮	<b></b>	/ un	<u> </u>	WNICK				11/1	שוןו	
He	re	Signature	of officer	1 6 6 1	- 1	1 _	1		Date		
		<b>&gt;</b>	Nei	4 1 FIT	ZDATVI	K E	xecut	ive "	Direc	ter	
_		Type or p	rint name an	d title	1						
	_						Date		Check if self	Prepa (see	irer's identifying number nstructions)
Pa		Preparer's	. 0						employed >		
Pro		signature	<u> </u>	inton Z Z	h		11/10/	10		100	00840525
Us	rer's e	Firm's name	<u>ک</u> or	quire, Lemks	1 + Comp	any, LLP					
Or		yours if self employed),	<b>▶</b> 11	1 Rackvile	Pike S	uite 475		]	EIN > 5	2- 2	241623
		address, and ZIP + 4	Ro	ekvilly mo	2085	2			Phone no	301-	424-6800
Ма	y the If	RS discuss th	ns return v	with the preparer sho	own above? (se	ee instructions)					Yes X No
BA	A For	Privacy Act	and Paper	rwork Reduction Act	t Notice, see tl	ne separate instru	ctions.		TEEA0101	07/20/09	Form 990 (2009)

Form 990 (2009) AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.

Part IV... Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4_	Х	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If 'Yes,' complete Schedule C, Part III	5_		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If 'Yes,' complete Schedule D, Part II	7		<u>x</u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		<u>x</u>
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9		x
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	х	
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	х	
	<ul> <li>Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI</li> </ul>	. '		:
	<ul> <li>Did the organization report an amount for investments— other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII</li> </ul>	i,	ر اور اور	,
	<ul> <li>Did the organization report an amount for investments— program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII</li> </ul>	A CONTRACTOR		**
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	1		
	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X			A.i.
	<ul> <li>Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X</li> </ul>		18.5	17
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	х	
12	A Was the organization included in consolidated, independent audited financial statement for the tax  Yes No	1, 14	7 7	- <u>.</u> .
	year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional	٠٠,	(° į,	1
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	_14a		<u> </u>
	<b>b</b> Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b		х
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15		X
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16_		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I	17	_	x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,'	19		x
20	complete Schedule G, Part III  Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H	20		X

53-0233715 Page 4 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. Part IV Checklist of Required Schedules (continued) No Yes Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II 21 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2<sup>7</sup> If 'Yes,' complete Schedule I, Parts I and III 22 Х 23 Did the organization answer 'Yes' to Part VII. Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete 23 Schedule J Х 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and 24a Х complete Schedule K, If 'No, go to line 25 24b b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease 240 any tax-exempt bonds? 24d d Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year? 25a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I 25a Х b is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete 25b Х Schedule L. Part I Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II 26 X Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete 27 X Schedule L. Part III Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): Х a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV 282 b A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete 28b Schedule L. Part IV Х c An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV 28c Х Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M 29 Х Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation 30 contributions? If 'Yes,' complete Schedule M 31 Х Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II 32 32 Х Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I 33 X Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, 34 Х 35 35 Х

Is any related organization a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI 37

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 197 38 Note. All Form 990 filers are required to complete Schedule O

Form 990 (2009)

X

Х

36

37

38

Page 5

			Yes	No
1 a	Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U.S.	•	<del></del>	
۲	Information Returns Enter -0- if not applicable  Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  11  0	, ]		
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			•
	(gambling) winnings to prize winners? .	1 c	<u>X</u>	
	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return  2a 117			
2t	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)		,	
3 a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3а	х	
t	olf 'Yes' has it filed a Form 990-T for this year? If 'No,' provide an explanation in Schedule O	3ь	X	
4 a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
t	olf 'Yes,' enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts.			
5 a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х
t	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
C	: If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5 c		
6 a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		x
Ł	o If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6 b		
7	Organizations that may receive deductible contributions under section 170(c).		? t	
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services		:	
	provided to the payor?	7 a		X
	olf 'Yes,' did the organization notify the donor of the value of the goods or services provided?	<u>7b</u>		ļ
•	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		x
	If 'Yes,' indicate the number of Forms 8282 filed during the year 7d			١,
•	e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		<u>x</u>
1	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
•	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	\$ 41	! !
9	Sponsoring organizations maintaining donor advised funds.	7,64	1	$\vdash$
	a Did the organization make any taxable distributions under section 4966?	9a		Ì
	Did the organization make any distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	a Initiation fees and capital contributions included on Part VIII, line 12	1.5		ļ.,
	Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	۱ <b>۰</b>		
	Section 501(c)(12) organizations. Enter	,	٠, ,	
	a Gross income from other members or shareholders	:		ŀ
ı	o Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	•		-
12	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		L
	o If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

Part VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Sec	tion A.	Governing Body and Management				
					Yes	No
		number of voting members of the governing body	1a 16			
		number of voting members that are independent	16 16	-		
2	Did any of officer, di	fficer, director, trustee, or key employee have a family relationship or a business rela rector, trustee or key employee?	ationship with any other	2		х
3	Did the o	rganization delegate control over management duties customarily performed by or un s, directors or trustees, or key employees to a management company or other persor	nder the direct supervision	3		х
4		rganization make any significant changes to its organizational documents		4		Х
	since the	prior Form 990 was filed?				
5	Did the o	rganization become aware during the year of a material diversion of the organization	's assets?	5		X
6	Does the	organization have members or stockholders?		6	Х	
7a	Does the	organization have members, stockholders, or other persons who may elect one or m pody?	ore members of the	7a	x	
b	Are any	fecisions of the governing body subject to approval by members, stockholders, or oth	er persons?	7b		Х
8	Did the o	rganization contemporaneously document the meetings held or written actions underlying:	taken during the year by			
а	The gove	rning body?		8a	Х	
b	Each con	nmittee with authority to act on behalf of the governing body?		86	Х	
9	Is there a	iny officer, director or trustee, or key employee listed in Part VII, Section A, who cani ion's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be reached at the	9		х
Sec	tion B.	Policies (This Section B requests information about policies not	required by the Interna	ì		
Reve	nue Code	)				
					Yes	No
		organization have local chapters, branches, or affiliates?		10 a		X
b	If 'Yes,' o and bran	loes the organization have written policies and procedures governing the activities of ches to ensure their operations are consistent with those of the organization?	such chapters, affiliates,	10b		
		organization provided a copy of this Form 990 to all members of its governing body be	efore filing the form?	11	X	L
		in Schedule O the process, if any, used by the organization to review this Form 990				<u> </u>
		organization have a written conflict of interest policy? If 'No,' go to line 13	h-4 11	12a	Х	
	to conflic			12b	х	
c	Does the Schedule	organization regularly and consistently monitor and enforce compliance with the polic $O$ how this is done	cy? If 'Yes,' describe in	12c	Х	
13		organization have a written whistleblower policy?		13	X	
14	Does the	organization have a written document retention and destruction policy?		14	X	
15	Did the p persons,	rocess for determining compensation of the following persons include a review and a comparability data, and contemporaneous substantiation of the deliberation and deci	ipproval by independent ision?	2005 2.45		\$,
а	The orga	nization's CEO, Executive Director, or top management official		15a		<u> </u>
b		cers of key employees of the organization		15b		X
	If 'Yes' to	line 15a or 15b, describe the process in Schedule O. (See instructions.)		, 1		,
16 a		rganization invest in, contribute assets to, or participate in a joint venture or similar a ring the year?	arrangement with a taxable	16a		X
b	in joint v	has the organization adopted a written policy or procedure requiring the organization that the control of the c	to evaluate its participation the organization's exempt	16b	,	•
Sec	tion C.	Disclosures	····			
17	List the s	tates with which a copy of this Form 990 is required to be filed See States Form	990 Filed In			
18		5104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, ar n. Indicate how you make these available Check all that apply.	nd 990-T (501(c)(3)s only) ava	ailable	for pu	blic
	X Own	website Another's website X Upon request				
	statemer	in Schedule O whether (and if so, how) the organization makes its governing documents available to the public	•			ıal
		name, physical address, and telephone number of the person who possesses the bo			_	
•	FRED BAI	LEY, DIRECTOR OF FINANCE 8940 JONES MILL ROAD Chevy Chase	<u>1D _ 20815 (3</u>	01)_6	552-	9188

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## Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated **Employees, and Independent Contractors**

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

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

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

Check this box if the organization did no	t compens	ate an	y Çı	urrer	nt of	ficer, o	direc	ctor, or trustee		
(A)	(B)			(	c)			(D)	(E)	(F)
Name and Title	Average hours					hat appl		Reportable compensation from	Reportable compensation from	Estimated amount of other
	per week	advid a laster or director	institutional foist <del>er</del>	Office	Key employee	Highest compensated employee	FORTHER	the organization (W 2/1099 MISC)	related organizations (W 2/1099-MISC)	compensation from the organization and related organizations
NEAL T FITZPATRICK										
EXECUTIVE DIRECTOR	40.00			X		X		89,974.	0.	1,437.
FREDERICK L BAILEY						l I		ı		
CHIEF FINANCIAL OFFICER	40.00			Х				72,486.	0.	709.
Anne Cottingham					ļ					
BOARD PRESIDENT	5.00	<u> </u>		Х				0.	0.	0.
KATHY RUSHING										
VICE PRESIDENT	5.00	X	L	Х				0.	0.	0.
Lois Schiffer									]	
SECRETARY	5.00	_X		X				0.	0.	0.
PATTY O'MALLEY			ŀ							
TREASURER	5.00	X	L.	X		ļ		0.	0.	0.
PHIL DALEY										
DIRECTOR	5.00	_X	<u> </u>		<u> </u>			0.	0.	0.
CRIS_FLEMING	.[					1				
DIRECTOR	5.00	_ X			<u> </u>	<u> </u>		0.	0.	0.
JENNI_FORD	.		1							
DIRECTOR	5.00	_ X		<u> </u>	1_	ļ	_	0.	0.	0.
JAMES_GRANDFIELD									_	_
DIRECTOR	5.00	_X	<u> </u>	_	<u> </u>	ļ		0.	0.	0.
BARBARA GREGG	.									_
DIRECTOR	5.00	X	_	<b>├</b>	1		_	0.	0.	0.
LEE BABCOCK				ŀ		]				•
DIRECTOR	5.00	<u> X</u>		├	$\vdash$	<del> </del>		0.	0.	0.
CAROL GREGORY				1						•
DIRECTOR	5.00	<u> </u>		├	╁	<del>├</del>	-	0.	0.	0.
MIKE RUBIN		,,	ļ	l		l				^
DIRECTOR	5.00	<u> </u>	-		╁	<del>├</del> —		0.	0.	0.
MICHAEL TRISTER		.,	1	ł	1	ł			0	0
DIRECTOR	5.00	. <u>.x</u>	<del> </del>	├-	╁	<del> </del>	$\vdash$	0.	0.	0.
MARK VAN PUTTEN		Ų.						0.	0.	•
DIRECTOR BLLL WILKINGON	5.00		$\vdash$	$\vdash$	-		-	U.		0.
BILL WILKINSON	5.00	l .	1					o.	0.	^
DIRECTOR	1 3.00	<u> </u>	1			<u> </u>	<u> </u>	<u> </u>		0.

BAA Form 990 (2009) TEEA0107 11/10/09

Part VII   Section A. Officers, Directors, Trust		ey	EII			es,	and			1
(A)	(B)	Posi	tion (	)) check	C) Call t	hat a	noly)	(D)	(E)	(F) Estimated
Name and Title	Average hours per week	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	ormer	Reportable compensation from the organization (W-2/1099 MISC)	Reportable compensation from related organizations (W 2/1099-MISC)	amount of other compensation from the organization and related organizations
CHRIS_WRIGHT DIRECTOR	5.00	х						0.	0.	0.
	-									
	-									
	-									
	-									
1 b Total							•	162,460.	0	2,146.
Total number of individuals (including but not limited from the organization	to thos	e lis	ted	abo	ve)	who	rece	eived more than \$	100,000 in reportat	ole compensation
										Yes No
<ul> <li>3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such in</li> <li>4 For any individual listed on line 1a, is the sum of related organization and related organizations greater the director.</li> </ul>	i <i>dividual</i> portable	com	nper	nsatı	on a	and	othe	r compensation fr	om	3 X
<ul> <li>Individual</li> <li>Did any person listed on line 1a receive or accrue contact and accrue contact and accrue contact accrue.</li> </ul>	ompens	ation	fro	m a	ny u	ınre	lated	d organization for	services	
rendered to the organization? If 'Yes,' complete Sch.  Section B. Independent Contractors	edule J	101 3	SUCI	per	5011					5 X
Complete this table for your five highest compensation from the organization	ed indep	end	ent	cont	ract	ors	that	received more that	an \$100,000 of	
(A) Name and business address	ss							(E Description	of Services	(C) Compensation
										· · · · · · · · · · · · · · · · · · ·
2 Total number of independent contractors (including \$100,000 in compensation from the organization ▶		limit	ed t	o th	ose	liste	ed at	pove) who receive	d more than	,

Par	<u>t VII</u>	II Statement of Re	venue			(A) Total revenue	(B) Related or exempt function	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS		Federated campaigns Membership dues		1 a	11,237. 224,103.	,	revenue		512, 513, or 514
8.5	-	Fundraising events		1 c	26,073.				
R A		Related organizations		1 d		,			
S.G	е	Government grants (contribution	ns)	1 e	75,000.	, , ,			
S &	,	All other contributions gifts a	rants and				- Ju		
題	•	All other contributions, gifts, g similar amounts not included a	bove	1 <u>f</u>	897,130.	A STATE OF		14	
Ĕδ	g	Noncash contribns included in	Ins 1a-1f.	\$	141,960.			4.7	
	h	Total. Add lines 1a-1f			<u> </u>	1,233,543.	to the same of the	4	
뵕					Business Code		2		_
품		EDUCATION PROG			611600	821,416.	821,416.	0.	0.
#		NATURALIST_NEWS			511120	3,100.	0.	3,100.	
Ž	C								
M SE	a		- <b></b>						
3RAI	•	All other program service	e revenue						-
PROGRAM SERVICE REVENUE		Total. Add lines 2a-2f	C TOVETIGE		▶	824,516.	,	,	
		Investment income (incl	udino divid	lends	Interest and	121/121			
i	3	other similar amounts)	duling divid	Cilus	>, interest and	38,521.	0.	0.	38,521.
	4	Income from investment	of tax-exe	empt	bond proceeds				
	5	Royalties			<b>&gt;</b>	1,411.	0.	0.	1,411.
			(ı) Rea		(II) Personal	, , , , , , , , , , , , , , , , , , ,			
ł	6a	Gross Rents	592,						
- 1		Less: rental expenses	214,				100		,
		Rental income or (loss)	377,	455	· ·	2.22.22.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.2.	'.'.'		077 455
	d	Net rental income or (lo	SS) (ı) Secur		(ii) Other	377,455.	0.	0.	377,455.
	7a	Gross amount from sales of	292,		<del>-   </del>	· ·			
1		assets other than inventory	232,	191		· ., ·			
	b	Less cost or other basis and sales expenses	280,	236					
	r	Gain or (loss)	12,			1. 3.36.00		' '	
		Net gain or (loss)			<b>▶</b>	12,555.	, i.	0.	12,555.
Ā		Gross income from function including \$	Iraising eve 26,0						1
REVENUE		of contributions reported			•			$\tilde{i}$ . $\tilde{i}$ $\tilde{i}$ $\tilde{i}$	
Ë		See Part IV. line 18	2 011 11110 11	٠,٠	a 58,824.				,
ОТНЕВ	b	Less direct expenses			b 36,700.		1 1 1 1 1 1 1 1 1		
٥		Net income or (loss) fro	m fundrais	ing 6		22,124.	0.	Ò.	22,124.
		Gross income from gam See Part IV, line 19			а	· 1 die - c c c c c c		, ,	
	b	Less direct expenses			Ь		<u>.                                      </u>		
	С	Net income or (loss) fro	m gaming	activ	rities ►				
	10a	Gross sales of inventory	/. less retu	rns					
		and allowances	,,		a 545,713.		1		
	b	Less cost of goods sold	t		<b>b</b> 390,239.	_	Ì		
	С	Net income or (loss) fro		inve		155,474.	155,474.	0.	0.
	-	Miscellaneous Reven	ue		Business Code	1			1
	11 a		<del>-</del>	<del>-</del> -	<u> </u>				<del> </del>
	b					-	<del> </del>		<del>                                     </del>
	C د	All other revenue			<del></del>	4 041	4 041	0.	
		All other revenue  Total. Add lines 11a-11	ď		<u> </u>	4,941.	4,941.	1	0.
		Total revenue. See inst			•	2,670,540.	981,831.	3,100.	452,066.
	- 44	. Utal inteller occ 11131				1 2, <u>0, 0,</u> 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0,	1 221,031.		

'Form 990 (2009) AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.

Part IX | Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required	to complete columns (B), (C), and (D).
---	--

	All other organizations must com	piete column (x) bat are	- Hot required to compile	(2), (2), (3),	
Do r 6b,	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	( <b>B)</b> Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,000.	4,000.	forten erry	
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22			in the state of th	
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	3,650.	3,650.	agita are	
	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	172,303.	86,152.	51,690.	34,461.
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,319,544.	1,152,265.	95,005.	72,274.
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	2,243.	2,169.	40.	34.
9	Other employee benefits	93,351.	78,729.	8,638.	5,984.
10	Payroll taxes	101,170.	88,987.	7,148.	5,035.
	Fees for services (non-employees)			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	-,,,,,,,,
	Management				
	) Legal	1,071.	0.	1,071.	0.
	: Accounting	14,710.	12,367.	1,214.	1,129.
	Lobbying	11,1201	22,0011	2,02.11	
	e Prof fundraising svcs. See Part IV, In 17		The property of the property o	, , , , ,	
	Investment management fees	9,448.	439.	9,009.	0.
	a Other	236,868.	189,958.	15,283.	31,627.
	Advertising and promotion	21,891.	21,358.	0.	533.
13	Office expenses	125,784.	101,332.	15,146.	9,306.
14	Information technology	17,106.	12,285.	3,214.	1,607.
15	Royalties	2,7,200.		3,2210	
16	Occupancy	126,903.	100,324.	23,324.	3,255.
	Travel	181,616.	179,550.	665.	1,401.
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	202,020			
19	Conferences, conventions, and meetings	5,474.	5,354.	120.	0.
20	Interest	503.	503.	0.	0.
21	Payments to affiliates				<del> </del>
22	Depreciation, depletion, and amortization	169,088.	126,398.	28,460.	14,230.
23	Insurance	25,590.	21,435.	2,770.	1,385.
24	Other expenses. Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below.)		The work of the state of the st	7,3	
;	Printing and Publications	54,262.	40,013.	3,016.	11,233.
1	b				
(	·				
(	d				
(	e				
1	All other expenses				<del></del> _
25	Total functional expenses. Add lines 1 through 24f	2,686,575.	2,227,268.	265,813.	193,494.
26	Joint costs. Check here ► if following SOP 98-2. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA					Form <b>990</b> (2009)

53-0233715 Form 990 (2009) AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC Page 11 Part X **Balance Sheet** (A) Beginning of year End of year 1 290,024. 191,444 Cash - non-interest-bearing 214,109 2 78,891. 2 Savings and temporary cash investments 115,000. 3 85,000. 3 Pledges and grants receivable, net 15,109. 4 11,555. 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L  $\,$  . 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L 6 7 7 Notes and loans receivable net 175,491 8 216,629. 8 Inventories for sale or use 39,170 9 33,049. 9 Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other basis 10a 4,118,919. Complete Part VI of Schedule D 10 c 2,964,475. 10b ,038,725 b Less accumulated depreciation 1,154,444 762,376. 1,233,795. 11 11 Investments - publicly-traded securities 12 12 Investments - other securities. See Part IV, line 11 Investments - program-related. See Part IV, line 11 13 13 14 14 Intangible assets Other assets. See Part IV, line 11 15 15 4,551,424. 16 4,913,418. Total assets Add lines 1 through 15 (must equal line 34) 16 232,879. 17 240,239. Accounts payable and accrued expenses 18 18 Grants payable 820,133. 698,572. 19 Deferred revenue 19 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II 22 of Schedule L 23 Secured mortgages and notes payable to unrelated third parties 16,208. 24 24 Unsecured notes and loans payable to unrelated third parties 37,779. 39,819. 25 25 Other liabilities Complete Part X of Schedule D 1,098,151. 987,478. 26 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here X and complete lines 27 through 29 and lines 33 and 34. 1,306,567. 27 1,516,329. 27 Unrestricted net assets 1,059,155. 28 1,100,714. 28 Temporarily restricted net assets 1,198,224.

1,198,224. 29 29 Permanently restricted net assets and complete Organizations that do not follow SFAS 117, check here 1 4 lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31

31 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, endowment, accumulated income, or other funds

Total net assets or fund balances 34

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3,563,946. 33 3,815,267. 4,913,418. Total liabilities and net assets/fund balances 4,551,424. Form 990 (2009)

32

Part XI: Financial Statements and Reporting			
		Yes	No
1 Accounting method used to prepare the Form 990 Cash X Accrual Other	15.2	, 1	
If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O	الم	215	·
2a Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		<u> x</u>
<b>b</b> Were the organization's financial statements audited by an independent accountant?	2b	Х	
c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of review, or compilation of its financial statements and selection of an independent accountant?	f the audit, 2c	х	
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were is consolidated basis, separate basis, or both	sued on a		
X Separate basis Consolidated basis Both consolidated and separate basis			
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Audit Act and OMB Circular A-133?	e Single		х
b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the re- or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	quired audit 3b		

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Form **990** (2009)

#### SCHEDULE A (Form 990 or 990-EZ)

# **Public Charity Status and Public Support**

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

**Open to Public** 

Yes

11 g (i)

11 g (ii)

No

Department of the Treasury Internal Revenue Service

Inspection ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. Name of the organization Employer identification number 53-0233715 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES,

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(509(a)(2)  If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization.	.tions
A school described in section 170(b)(1)(A)(ii). (Attach Schedule E.)  A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit described 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(v). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(v). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its survestment income and unrelated business taxable income (less section 51) tax) from businesses acquired by the only June 30, 1975. See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (In an interpretation of the section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (In an interpretation of the section 509(a)(3). (In an interpretation	
A hospital or cooperative hospital service organization described in section 170(b)(1)(A)(iii).  A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit describ 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III — Functionally integrated d Type III — Functionally integrated and operated exclusively to the proper organizations described in section 509(a)(2). (Integrated organization described in section 509(a)(3) (Integrated organization describe	
A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit describ 170(b)(1)(A)(Vi). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(Vi).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(Vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(Vi). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the purple of supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III — Functionally integrated d Function of the foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)  If the organization received a written determination from the IRS that is a Type II, Type II or Type III supporting organization organizat	
name, city, and state:  An organization operated for the benefit of a college or university owned or operated by a governmental unit describ 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III — Functionally integrated d Type III — Functionally integrated d Type III — Functionally integrated d Type III organization managers and other than one or more publicly supported organizations described in section 509(a)(2)  If the organization received a written determination from the IRS that is a Type II or Type III supporting organization organization from the IRS that is a Type II or Type III supporting organization organiz	
An organization operated for the benefit of a college or university owned or operated by a governmental unit describ 170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III — Functionally integrated d II.  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)  If the organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization from the IRS that is a Type I, Type III or Type III supporting organization from the IRS that is a Type I, Type III or Type III supporting organization from the IRS that is a Type II or Type III supporting organization from the IRS that is a Type II.	ter the hospital's
170(b)(1)(A)(iv). (Complete Part II.)  A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).  An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(vi). (Complete Part II.)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the olume 30, 1975. See section 509(a)(2). (Complete Part III.)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the principle of supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). (describes the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III – Functionally integrated d Supporting organization managers and other than one or more publicly supported organizations described in section 509(a)(2). If the organization received a written determination from the IRS that is a Type II, Type III or Type III supporting organization organizat	
An organization that normally receives a substantial part of its support from a governmental unit or from the general in section 170(b)(1)(A)(vi). (Complete Part II)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the olume 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Consider the supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III – Functionally integrated d Supporting organization managers and other than one or more publicly supported organizations described in section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization	cribed in section
In section 170(b)(1)(A)(vi). (Complete Part II)  A community trust described in section 170(b)(1)(A)(vi). (Complete Part II)  An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its sinvestment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the olume 30, 1975. See section 509(a)(2). (Complete Part III)  An organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the pin more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Considering the section of the section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Considering this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2). If the organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization organization or the IRS that is a Type I, Type III or Type III supporting organization organization or Type III supporting organization or	
<ul> <li>9 X An organization that normally receives: (1) more than 33-1/3 % of its support from contributions, membership fees, from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its support income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).</li> <li>10 An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the principle of supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Considering the type of supporting organization and complete lines 11e through 11h</li> <li>a Type I</li> <li>b Type II</li> <li>c Type III — Functionally integrated</li> <li>d Type III — By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)</li> <li>f the organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization organization of the IRS that is a Type I, Type III or Type III supporting organization.</li> </ul>	eral public described
from activities related to its exempt functions — subject to certain exceptions, and (2) no more than 33-1/3 % of its s investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization organized and operated exclusively to test for public safety. See section 509(a)(4).  An organization organized and operated exclusively for the benefit of, to perform the functions of, or carry out the primore publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Consider type of supporting organization and complete lines 11e through 11h  a Type I  b Type II  c Type III — Functionally integrated  d Supporting organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2).  f the organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization or the IRS that is a Type I, Type III or Type III supporting organization or the IRS that is a Type II or Type III supporting organization or the IRS that is a Type II or Type III supporting organization or the IRS that is a Type II or Type III supporting organization or the IRS that is a Type II or Type III supporting organization or the IRS that is a Type II or Type III supporting organization organiza	
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more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Consider the type of supporting organization and complete lines 11e through 11h  a Type I b Type II c Type III — Functionally integrated d E By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(2)  If the organization received a written determination from the IRS that is a Type II, Type III or Type III supporting organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III o	
<ul> <li>By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified than foundation managers and other than one or more publicly supported organizations described in section 509(a)(509(a)(2)</li> <li>If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization.</li> </ul>	
than foundation managers and other than one or more publicly supported organizations described in section 509(a)(509(a)(2)  If the organization received a written determination from the IRS that is a Type I, Type II or Type III supporting organization received a written determination from the IRS that is a Type I, Type III or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III supporting organization received a written determination from the IRS that is a Type II or Type III or Type I	Type III – Other
	ied persons other (a)(1) or section
check this box	ganization,

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons? a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? a family member of a person described in (i) above?

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed	is the tion in col d in your erning ment?	(v) Did y the organ col your su	ou notify ization in (i) of ipport?	(vi) is the organization in col (i) organized in the US?		(vii) Amount of Support	
			Yes	No	Yes	No	Yes	No		
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BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ

Schedule A (Form 990 or 990-EZ) 2009

che	edule <b>A</b> (Form 990 or 990-EZ) 2009	annunga c	20115# COCTE#V OF	THE CENTRAL ATLAN	UTIC STATES INC	53-0233715	, Page <b>2</b>
	t II Support Schedule for						
	(Complete only if you checke	ed the box on line	5, 7, or 8 of Part	l)			<u> </u>
ec	tion A. Public Support						
	ndar year (or fiscal year nning in) ▶	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')						
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	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.						
4	Total. Add lines 1-through 3						
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)	a State					
6	Public support. Subtract line 5 from line 4		The state of the	1000000	19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Sec	tion B. Total Support						
ale	ndar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
egi	nning in)	(a) 2005	(0) 2000	(0) 2007	(u) 2008	(e) 2003	(i) Iotai
7	Amounts from line 4	·					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10			1. 3. 5. 5. T		, ,	
12	Gross receipts from related activ	rities, etc (see ins	tructions)			12	
13	First five years. If the Form 990 organization, check this box and	is for the organiza	ation's first, secon	d, third, fourth, o	r fifth tax year as a	section 501(c)(3)	▶ □
Sec	ction C. Computation of Pu	blic Support F	Percentage				
14	Public support percentage for 20	009 (line 6, column	(f) divided by lin	e 11, column (f)		14	%
15	Public support percentage from	2008 Schedule A,	Part II, line 14			15	%
16	a 33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the boo	k on line 13, and ganization	the line 14 is 33-1/	/3 % or more, chec	k this box
	<b>b 33-1/3 support test</b> – <b>2008.</b> If the and <b>stop here.</b> The organization	e organization did qualifies as a pub	not check a box of licly supported or	on line 13, or 16a, ganization.	and line 15 is 33-	1/3% or more, che	eck this box
17	a 10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this b	oox and stop here.	Explain in Part IV	how
	b 10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-an	meets the 'facts-a	nd-circumstances	' test, check this b	ox and stop here.	Explain in Part IV	

Part III - Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I)

<u>Sec</u>	tion A. Public Support						···
	ndar year (or fiscal yr beginning in)	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants.')	1,384,730.	902,973.	1,381,574.	1,250,197.	1,233,543.	6,153,017.
	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose	1,004,126.	829.897.	1,009,006.	1.040.070.	999,014.	4,882,113.
3	Gross receipts from activities that are not an unrelated trade or business under section 513						
	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	2,388,856.	1,732,870.	2,390,580.	2,290,267.	2,232,557.	11,035,130.
7a	Amounts included on lines 1, 2, 3 received from disqualified persons	23,055.	41,006.	67,506.	45,044.	80,370.	256,981.
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the amount on line 13 for the year						
С	Add lines 7a and 7b	23,055.	41,006.	67,506.	45,044.	80,370.	256,981.
8	Public support (Subtract line	A Parish Carlotte		1 × 4 1 1 1 1	34,867, 1979		_
	7c from line 6 )	15,571.7	はついは代	£ "	fact by	. ,	10,778,149.
Sec	tion B. Total Support						<b></b>
Cale	ndar year (or fiscal yr beginning in) 🟲	(a) 2005	<b>(b)</b> 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	464,462.	1,732,870. 534,478.	2,390,580. 592,213.	473,418.		
b		404,402.	334,470.	392,213.	4/5,410.	417,307.	2,401,330.
	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	464,462.	534,478.	592,213.	473,418.	417,387.	2,481,958.
	income (less section 511 taxes) from businesses acquired after June 30, 1975	464,462. 6,795.	534,478.	592,213. 7,175.	473,418. 6,103.	417,387. 3,100.	2,481,958.
11	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is						29,917.
11 12 13	income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).	6,795. 4,918.	6,744. 2,051.	7,175. 2,363.	6,103.	3,100. 4,942.	29,917. 14,474. 13,561,479.
11 12 13	Income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lns 9, 10c, 11, and 12)  First five years. If the Form 990	6,795. 4,918.	6,744. 2,051.	7,175. 2,363.	6,103.	3,100. 4,942.	29,917. 14,474. 13,561,479.
11 12 13 14	Income (less section 511 taxes) from businesses acquired after June 30, 1975  Add lines 10a and 10b  Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lns 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and	6,795. 4,918. Is for the organiza stop here	6,744. 2,051.	7,175. 2,363.	6,103.	3,100. 4,942.	29,917. 14,474. 13,561,479.
11 12 13 14 Sec	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pu	6,795.  4,918.  Is for the organiza stop here  blic Support F	6,744. 2,051. tion's first, secon	7,175. 2,363. d, third, fourth, or	6,103.	3,100. 4,942. a section 501(c)(3	29,917. 14,474. 13,561,479.
11 12 13 14 Sec 15	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add ins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20.	6,795.  4,918.  Is for the organizatop here  blic Support F	6,744. 2,051. tion's first, secon Percentage (f) divided by line	7,175. 2,363. d, third, fourth, or	6,103.	3,100. 4,942. a section 501(c)(3	29,917. 14,474. 13,561,479. 3)
11 12 13 14 Sec 15 16	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pupublic support percentage from 20.	6,795.  4,918.  Is for the organiza stop here  blic Support F 09 (line 8, column 2008 Schedule A,	2,051.  2,051.  ction's first, secon  Percentage  (f) divided by line  Part III, line 15	7,175. 2,363. d, third, fourth, or	6,103.	3,100. 4,942. a section 501(c)(3	29,917. 14,474. 13,561,479.
11 12 13 14 Sec 15 16 Sec	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add ins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Public support percentage for 20.	6,795.  4,918.  Is for the organizatop here  blic Support F 09 (line 8, column 2008 Schedule A, /estment Inco	2,051.  2,051.  Percentage (f) divided by line Part III, line 15 me Percentage	7,175. 2,363. d, third, fourth, one 13, column (f))	6,103. 200. fifth tax year as	3,100. 4,942. a section 501(c)(3	29,917. 14,474. 13,561,479. 3)
11 12 13 14 Sec 15 16 Sec 17	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on. Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage for 20. Public support percentage from 2 tion D. Computation of Investment income percentage for 1.	4,918.  4,918.  Is for the organizatop here  blic Support F  09 (line 8, column 2008 Schedule A, /estment Incor	2,051.  2,051.  Percentage (f) divided by line Part III, line 15 me Percentag column (f) divided	7,175.  2,363.  d, third, fourth, one e 13, column (f)) e t by line 13, column	6,103. 200. fifth tax year as	3,100. 4,942. a section 501(c)(3	29,917.  14,474.  13,561,479.  79.48%  78.75%
11 12 13 14 Sec 15 16 Sec 17 18	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV).  Total support. (add lins 9, 10c, 11, and 12). First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage from 20. Public support percentage from 20. Tomputation of Inv.	4,918.  4,918.  Is for the organiza stop here  blic Support F  09 (line 8, column 2008 Schedule A, restment Incorer 2009 (line 10c, rom 2008 Schedule he organization diese organization diese schedule he organization d	2,051.  2,051.  Percentage (f) divided by line Part III, line 15 me Percentag column (f) divided e A, Part III, line d not check the bo	7,175.  2,363.  d, third, fourth, one e 13, column (f))  e t by line 13, column 17 ox on line 14, and	6,103.  200.  r fifth tax year as  on (f))	3,100.  4,942.  a section 501(c)(3)  15 16  17 18 han 33-1/3%, and	29,917.  14,474.  13,561,479.  79.48%  78.75%  18.30%  19.22%
11 12 13 14 Sec 15 16 Sec 17 18 19a	Income (less section 511 taxes) from businesses acquired after June 30, 1975. Add lines 10a and 10b. Net income from unrelated business activities not included inline 10b, whether or not the business is regularly carried on.  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV)  Total support. (add lins 9, 10c, 11, and 12)  First five years. If the Form 990 organization, check this box and tion C. Computation of Pupulic support percentage from 2 tion D. Computation of Investment income percentage fill investment income percentage fill investment income percentage fill more than 33-1/3%, check this bot is not more than 33-1/3%, check	6,795.  4,918.  Is for the organiza stop here  blic Support F  109 (line 8, column 2008 Schedule A, restment Incore 2009 (line 10c, rom 2008 Schedule the organization die organization die this box and stop here.	2,051.  2,051.  ction's first, secon  Percentage  (f) divided by line  Part III, line 15  me Percentag  column (f) divided  e A, Part III, line d not check the both  The organization d not check a box  here. The organi	7,175.  2,363.  d, third, fourth, or  e 13, column (f))  e  d by line 13, column  17  ox on line 14, and  qualifies as a put  on line 14 or 19a  zation qualifies as	fifth tax year as  on (f))  I line 15 is more to blicky supported or, and line 16 is more a publicky support	3,100.  4,942. a section 501(c)(3  15  16  17  18 han 33-1/3%, and ganization ore than 33-1/3%, ted organization	29,917.  14,474.  13,561,479.  79.48% 78.75%  18.30% 19.22%  Inne 17 is not

Schedule	A (Form 990 or 990-EZ) 2009	AUDUBON NATURALIS	ST SOCIETY OF T	THE CENTRA	L ATLANTIC	STATES, INC.	53-0233715	Page 4
Part IV	Supplemental Informa Part II, line 17a or 17b	<b>tion.</b> Complete t ; and Part III, lin	his part to perfect to perfect to the perfect to th	provide de any o	the explai	nations req tional infor	uired by Part II, mation. See ins	line 10; tructions.
Other	Income Part III, L	ine_12	·		. <b></b> -			. <b>-</b>
Descri	<u>ption: Refunds, re</u>	imbursements	and othe	:	. <b>-</b>			
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2006:_	2051		· <b>-</b>		<b>-</b>	<b>-</b>	<b></b>	
2007:_	2363		<b></b> -		. <b></b>			
2008:	200				- <b></b>			
2009:	4942		<b>-</b>					
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#### **SCHEDULE C** (Form 990 or 990-EZ)

# **Political Campaign and Lobbying Activities**

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

2009

► Complete if the organization is described below. Open to Public 4. Inspection ► Attach to Form 990 or Form 990-EZ. ► See separate instructions.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

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

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

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

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

	<ul> <li>Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A</li> </ul>									
If the	e organization answered Yes,	to Form 990, Part IV, line 5 (Proxy Tax), th	en							
		ganizations Complete Part III		Employer identific						
	of organization	oremy on mun grumpa. Amya.	.m.r.a om.am.n.a .	1 ' 1						
AUI	OUBON NATURALIST SC	CIETY OF THE CENTRAL ATLAN  rganization is exempt under section	on FOI(c) or is a s							
		organization's direct and indirect political ca			2411011.					
	Political expenditures	irganization's direct and indirect political ca	impaign activities in r	sit iv ► \$	<b>!</b>					
2	Volunteer hours			¥	·					
		rganization is exempt under section	on 501(cV3)							
		se tax incurred by the organization under se		<b>▶</b> \$						
		se tax incurred by the organization managers u		► Š						
		section 4955 tax, did it file Form 4720 for t		<b>"</b>	Yes No					
-	Was a correction made?	Social Pool tax, and it may evil the control	. no your t		Yes					
	If 'Yes,' describe in Part IV									
		rganization is exempt under section	on 501(c) . except	section 501(c)(3)						
1		pended by the filing organization for section								
•										
2	function activities	organization's funds contributed to other o	rganizations for section	n 527 exempt ► Ş	S					
3	Total of exempt function expo line 17b	enditures. Add lines 1 and 2. Enter here and	d on Form 1120-POL,	<b>►</b> \$	S					
4	Did the filing organization file	Form 1120-POL for this year?			Yes No					
5	made For each organization contributions received that w	and employer identification number (EIN) o listed, enter the amount paid from the filing ere promptly and directly delivered to a sep e (PAC) If additional space is needed, pro-	g organization's funds arate political organiza	Also enter the amount ation, such as a separa	t of political					
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter 0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter 0					
				-						

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990-EZ) 2009 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. 53-0233715 Page 2  Part II-A   Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under										
section 5016	section 501(h)).									
<del></del>		are to an affiliated group		<del></del>						
A Check ► If the filing organization belongs to an affiliated group  B Check ► If the filing organization checked box A and 'limited control' provisions apply										
Limits on Lobbying Expenditures — (a) Filing (b) Affiliated group totals (The term 'expenditures' means amounts paid or incurred.)										
1a Total lobbying expenditures to influence public opinion (grass roots lobbying) 12,751.										
	•	gislative body (direct lobby	• •	1,618.						
c Total lobbying expenditu		• • • •	,	14,369.						
d Other exempt purpose e	•	·		2,672,206.						
e Total exempt purpose e	•	s 1c and 1d)		2,686,575.						
f Lobbying nontaxable am both columns	nount Enter the amo	unt from the following table	e in	284,329.						
If the amount on line 1e, col	umn (a) or (b) is:	he lobbying nontaxable a	mount is:							
Not over \$500,000	` ' ' '	20% of the amount on line 1e		. , .	,,,					
Over \$500,000 but not over \$1		\$100,000 plus 15% of the excess	over \$500,000	, ,	:					
Over \$1,000,000 but not over \$	· · · · · · · · · · · · · · · · · · ·	\$175,000 plus 10% of the excess		-1. f						
Over \$1,500,000 but not over \$	· · · · · · · · · · · · · · · · · · ·	\$225,000 plus 5% of the excess of			,					
Over \$17,000,000		\$1,000,000			. '					
g Grassroots nontaxable a	amount (enter 25% o	f line 1f)		71,082.						
h Subtract line 1g from lin	ne 1a If zero or less,	enter -0-		0.						
i Subtract line 1f from line	e 1c. If zero or less,	enter -0-		0.						
j If there is an amount off section 4911 tax for this		er line 1h or line 1i, did the	e organization file Form	4720 reporting	☐ Yes ☐ No					
		4-Year Averaging Period L t made a section 501(h) el	Jnder Section 501(h)	omplete all of the five						
(3011	column	s below. See the instruction	ons for lines 2a through	1 2f.)						
	Lobb	ying Expenditures During	4-Year Averaging Perio	od						
Calendar year (or fiscal year beginning in)	(a) 2006	<b>(b)</b> 2007	<b>(c)</b> 2008	<b>(d)</b> 2009	<b>(e)</b> Total					
2a Lobbying non-taxable amount	258,98	279,242.	259,029.	284,329.	1,081,588.					
<b>b</b> Lobbying ceiling amount (150% of line										
2a, column (e))			• • •		1,622,382.					
c Total lobbying expenditures	6,00	1. 10,573.	13,534.	14,369.	44,477.					
d Grassroots nontaxable amount	64,74	7. 69,811.	64,757.	71,082.	270,397.					
e Grassroots ceiling amount (150% of line 2d, column (e))					405,596.					

6,084.

7,987.

(election under section 501(h)).	Τ-,	<u>,                                     </u>			_
	Yes	No		ount	
	+		······································		
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of.					
a Volunteers?			,	•	
<ul> <li>b Paid staff or management (include compensation in expenses reported on lines 1c through 1)?</li> <li>c Media advertisements?</li> </ul>				`	-
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 similar means?	<u> </u>				
i Other activities? If 'Yes,' describe in Part IV		ļ.,			
j Total Add lines 1c through 1i					
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		ļ			
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912		i			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912		·	<u>-</u>		
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			•		
Part III-A: Complete if the organization is exempt under section 501(c)(4), section 50	1(c)(5)	, or s	ection 5	01(c)	(6).
				Yes	No
1. Were exhatestable all (90% or more) dues received pendeductible by members?			1	162	INO
<ul><li>1 Were substantially all (90% or more) dues received nondeductible by members?</li><li>2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?</li></ul>			2	<del>                                     </del>	<del> </del>
3 Did the organization make only in-house lobbying expenditures of \$2,000 or less:  3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	<del> </del>	<del> </del>
Part III-B* Complete if the organization is exempt under section 501(c)(4), section 50	1/cY5)	ors		<u> </u>	(6)
if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line	3 is a	nswe	red 'Yes	.'	,(0)
1 Dues, assessments and similar amounts from members		1			
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2a		•	
<b>b</b> Carryover from last year		2ь			
c Total		2c			
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and politic expenditure next year?	cal	4			
5 Taxable amount of lobbying and political expenditures (see instructions)		5			
Part IV: Supplemental Information		<del>'</del>			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, an Also, complete this part for any additional information	d Part I	I-B, lın	e 1ı.		
			- <b></b> -	<b>-</b>	- <b>-</b> -
			<del>-</del> -	:	
		<b></b> -	- <b>-</b>		
					- <b>-</b> -
			·	<b></b> -	

Schedule C	(Form 990 or 990 EZ) 2009 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. Supplemental Information (continued)	53-0233715 Page <b>4</b>
Part IV	Supplemental Information (continued)	
		·
	. <b></b>	
		·
		·

### SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

## **Supplemental Financial Statements**

 Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12.
 Attach to Form 990.
 See separate instructions OMB No 1545 0047

2009

Open to Public Inspection

Employer Identification number

AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. 53-0233715 Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts Complete if the organization answered 'Yes' to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts 1 Total number at end of year 2 Aggregate contributions to (during year) Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or for any other purpose conferring impermissible private benefit? Part II | Conservation Easements Complete if the organization answered 'Yes' to Form 990, Part IV. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of an historically important land area Preservation of land for public use (e.g., recreation or pleasure) Preservation of certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year a Total number of conservation easements 2a b Total acreage restricted by conservation easements 2b 2c c Number of conservation easements on a certified historic structure included in (a) d Number of conservation easements included in (c) acquired after 8/17/06 2d 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year > Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easement it holds? Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets Complete if the organization answered 'Yes' to Form 990, Part IV, line 8. 1a if the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items. b if the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

	NATURALIST SOCIETY				53-023			Page 2
Part III Organizations Maintai	ning Collections	of Art, Histo	rical	Treasures, or C	Other Similar Ass	ets (co	<u>ontınu</u>	ed)
3 Using the organization's acquisition items (check all that apply):	n accession and oth	er records, check	any	of the following that	are a significant use o	of its col	lection	
a 🔲 Public exhibition		d Loan o	or exc	hange programs				
<b>b</b> Scholarly research		e Other						
c Preservation for future genera								
4 Provide a description of the organ Part XIV						ın		
5 During the year, did the organizati assets to be sold to raise funds ra	on solicit or receive	donations of art, tained as part of	histor	rical treasures, or ot roanization's collect	her sımılar ıon?	Yes	٢	No
Part IV Escrow and Custodial 9, or reported an amount	Arrangements	Complete if o	rgan				rt IV, I	
1 a Is the organization an agent, trust included on Form 990, Part X?	ee, custodian, or oth	er intermediary f	or cor	ntributions or other a	assets not	Yes		No
<b>b</b> If 'Yes,' explain the arrangement i	n Part XIV and comp	lete the following	g table	е				
						Amount		
c Beginning balance					1c			
<b>d</b> Additions during the year					1d			
e Distributions during the year					1 e			
f Ending balance					1f]	1	<del></del>	٦
2a Did the organization include an ar	•	Part X, line 217				Yes	L	No
b If 'Yes,' explain the arrangement			1	(aa) ta Farm 000	Dort IV June 10			
Part V Endowment Funds Cor						7 (5)		
	(a) Current year	(b) Prior year		(c) Two years back	(d) Three years back	(e) I	our years	s Dack
1 a Beginning of year balance	333,767.	356,5	_	4.77	<del>\</del>	<del>                                     </del>		<del></del>
<b>b</b> Contributions	200.	66,3	99.		14. 82	+		
c Net Investment earnings, gains, and losses	30,969.	-82,6	26.	A MENT OF STREET	, ,	2.1		
d Grants or scholarships	3,650.	6,5	30.	是15	1			
<ul> <li>Other expenditures for facilities and programs</li> </ul>	13,624.		0.		10000000000000000000000000000000000000		9 a3r .	``*
f Administrative expenses				學問 "智慧"	here where we want			
<b>g</b> End of year balance	347,662.	333,7	<u>67.</u>	et in the same	4	1	<del> </del>	·
<ol><li>Provide the estimated percentage</li></ol>	of the year end bala	ince held as						
a Board designated or quasi-endow	ment 🟲	0.00 %						
<b>b</b> Permanent endowment ►	82.00%							
c Term endowment ►18	<u>.00</u> %							
3a Are there endowment funds not in	the possession of the	ne organization th	hat ar	e held and administe	ered for the	г		<del></del>
organization by							Yes	No
(i) unrelated organizations	• •	•				3a(i)		X
(ii) related organizations						3a(ii)		<u>X</u>
<b>b</b> If 'Yes' to 3a(II), are the related of	•	•				3b		<u> </u>
4 Describe in Part XIV the intended					line 10			<del></del>
Part VI Investments-Land, B						(4) [	2001/1/4	-1
Description of investment	( <b>a)</b> Co:	st or other basis nvestment)	(0	) Cost or other basis (other)	(c) Accumulated Depreciation	(0)	Book Va	aiue
1a Land				1,741,683.	,	1	,741	,683.
<b>b</b> Buildings				567,800.	226,445.		341	,355.
c Leasehold improvements	,	-		939,592.	425,909.		513	,683.
<b>d</b> Equipment				792,699.	502,090.		290	,609.
e Other				77,145.			77,	,145.
Total. Add lines 1a through 1e (Column	(d) must equal Forr	n 990, Part X, co	lumn	(B), line 10(c))	•	2	,964	,475.
BAA					Sched	dule <b>D</b> (F	orm 99	90) 2009

53-0233715

Page 3

Schedule D (Form 990) 2009 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC S		3-023371	5 Page <b>4</b>
Part XI   Reconciliation of Change in Net Assets from Form 990 to I	Financial Statements	· <del></del>	
1 Total revenue (Form 990, Part VIII, column (A), line 12)			2,670,540.
2 Total expenses (Form 990, Part IX, column (A), line 25)		ļ	2,686,575.
3 Excess or (deficit) for the year Subtract line 2 from line 1			<del>-16,035.</del>
4 Net unrealized gains (losses) on investments			267,357.
5 Donated services and use of facilities		L	
6 Investment expenses			
7 Prior period adjustments			
8 Other (Describe in Part XIV)			-1.
9 Total adjustments (net). Add lines 4 through 8			267,356.
10 Excess or (deficit) for the year per audited financial statements. Combine lines 3		<u>l</u>	251,321.
Part XII Reconciliation of Revenue per Audited Financial Statemen	its With Revenue per F	Return	
1 Total revenue, gains, and other support per audited financial statements		1	3,189,170.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1 1	`	
a Net unrealized gains on investments	2a 267,357	<u>.</u>	
<b>b</b> Donated services and use of facilities	2b	_  -	
c Recoveries of prior year grants	2c	_ .	
d Other (Describe in Part XIV)	2d 251,273	<u>.</u>	
e Add lines 2a through 2d		2 e	518,630.
3 Subtract line 2e from line 1	1 1	3	2,670,540.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	_	
<b>b</b> Other (Describe in Part XIV)	4b	_	
c Add lines 4a and 4b		4c	
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5	2,670,540.
Part XIII   Reconciliation of Expenses per Audited Financial Stateme	ents With Expenses pe	r Return	
1 Total expenses and losses per audited financial statements		1	2,937,849.
2 Amounts included on line 1 but not on Form 990, Part IX, line 25			
a Donated services and use of facilities .	2 a	_ `	
<b>b</b> Prior year adjustments	2 b		
c Other losses	2c	7 1	
d Other (Describe in Part XIV)	2d 251,273	.1 1	
e Add lines 2a through 2d		2 e	251,273.
3 Subtract line 2e from line 1		3	2,686,576.
4 Amounts included on Form 990, Part IX, line 25, but not on line 1:			
a Investments expenses not included on Form 990, Part VIII, line 7b	4a	1.00	
<b>b</b> Other (Describe in Part XIV)	4b -1	<u>.</u> ].	
c Add lines 4a and 4b		4c	-1.
5 Total expenses. Add lines 3 and 4c (This must equal Form 990, Part I, line 18)		5	2,686,575.
Part XIVA Supplemental Information		· · · · · · · · · · · · · · · · · · ·	
Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Parl line 4, Part X, line 2; Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d an information	rt III, lines 1a and 4, Part IV, nd 4b Also complete this par	lines 1b and 2 rt to provide a	2b; Part V, ny additional
Pt XII Line 2d Fundraising Event and Rental Expens	ses		
Pt XIII Line 2d Fundraising Event and Rental Expens	ses		
Pt XI Line 8 Rounding	<b> </b>		
Pt XIII Line 4b Rounding			

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Schedule **D** (Form 990) 2009

Schedule D (Form 990) 2009 AUDUBON	NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.	53-0233715	Page 5
Part XIV   Supplemental Inform	naturalist society of the central atlantic states, inc.  ation (continued)		
			<b></b>
			- <b>- -</b>
			<b></b>
	- <b></b>		
		· <b></b>	

## SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# Supplemental Information Regarding Fundraising or Gaming Activities

2009

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

Attach to Form990 or Form 990-EZ. See separate instructions.

Open to Public Inspection

Name o	of the organization				· <u> </u>		Employer identifica	ition number
AUD	UBON NATURALIST_SOCIE	TY OF THE	CENTRA	L ATL	ANTIC STATES,	INC.	53-023371	5
	Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17 Form 990EZ filers are not required to complete this part							
	indicate whether the organization r				wing activities. Check a	all that ag	oply.	
-	Mail solicitations		• •		Solicitation of non			
	Internet and email solicitations				Solicitation of gove	-	•	
	Phone solicitations				Special fundraising		granto	
					Special fundraising	g cvciits		
2.	In-person solicitations	r oral agreemer	nt with any	individua	l (including officers, dir	ectors to	rustees or kev	
2.0	Did the organization have written o employees listed in Form 990, Part	VII) or entity in	connection	on with pro	ofessional fundraising	services?	balces of hey	Yes No
b	If 'Yes,' list the ten highest paid incompensated at least \$5,000 by the		ties (fundra	aisers) pu	rsuant to agreements (	ınder wh	ich the fundraise	er is to be
		1					mount paid to	
	(i) Name of individual or entity (fundraiser)	(ii) Activity	have custoo	fundraiser ly or control ibutions?	(iv) Gross receipts from activity		retained by) raiser listed in col (i)	(vi) Amount paid to (or retained by) organization
			Yes	No		<del>                                     </del>	50. (7	0.90
		1	163	110	1		,	
			ļ	_		<u> </u>		
			1					
			<del>                                     </del>			-		
								!
							<del></del>	
		<u> </u>	<u>L</u>					
	Total			•				
3	List all states in which the organization licensing.	ation is register	ed or licen	sed to sol	icit funds or has been i	notified it	is exempt from	registration
								<b></b>
							<b></b>	
								·
		<b></b>		<b>-</b>				
		<b></b>			<b></b>		_ <b> </b>	
								. <b>-</b>
							<b></b>	

		G (Form 990 or 990-EZ) 2009 AUDUBON N Fundraising Events. Complete if	the organization a	nswered 'Yes' to Fo	orm 990. Part IV. Ju	ne 18. or
		reported more than \$15,000 on F	orm 990-EZ, line 6	a. List events with	gross receipts grea	ter than \$5,000.
			(a) Event #1 Auction	(b) Event #2 Birdathon	(c) Other Events CAPE MAY TRIP	(d) Total Events (Add col (a) through
R E			(event type)	(event type)	(total number)	col <b>(c)</b> )
REVERUE	1	Gross receipts	42,534.	24,362.	18,000.	84,896.
Ē	2	Less: Charitable contributions	1,710.	24,362.		26,072.
	3	Gross income (line 1 minus line 2)	40,824.	0.	18,000.	58,824.
	4	Cash prizes				
D	5	Noncash prizes				
DIRECT	6	Rent/facility costs				
	7	Food and beverages		!	· · · · · · · · · · · · · · · · · ·	
EXPENSES	8	Entertainment				· · · · · · · · · · · · · · · · · · ·
Ñ S E	9	Other direct expenses	21,762.	2,765.	12,173.	36,700.
S	10	Direct expense summary. Add lines 4- ti			<b>-</b>	36,700.
	11	Net income summary Combine lines 3, of			<u> </u>	22,124.
Pai	t III	<b>Gaming.</b> Complete if the organiz \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye a.	s' to Form 990, Pa	rt IV, line 19, or rep	ported more than
REVENUE			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
N U E		Gross revenue		-		
	<del>  '</del>	di ossi revenue				
D X	2	Cash prizes				
D P E N S E S	3	Non-cash prizes				
Š	4	Rent/facility costs				
	5	Other direct expenses				
	6	Volunteer labor	Yes %	Yes % No	Yes %	
	,	Direct expense summary Add lines 2 thi	ough 5 in column (d)		<b>•</b>	
		Net gaming income summary. Combine		ine 7	•	
		Net gaining income summary. Combine	ines i, column (d) and i	ine /		YES NO
		er the state(s) in which the organization of				_ / /
		ne organization licensed to operate gamino lo,' explain:	activities in each of the	sse states?		9a
		e any of the organization's gaming license es,' explain	es revoked, suspended o	r terminated during the	tax year?	10a
						4
11		s the organization operate gaming activities			<del></del>	

Schedule G (Form 990 or 990-EZ) 2009 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. 53-02337	15	P	age 3
		YES	NO
13 Indicate the percentage of gaming activity operated in.			
a The organization's facility	_	- 1	
b An outside facility 13b %		1	
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records.		l	
Name. •	1,		
Address· ►	`.		
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	15a	-	
<b>b</b> If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount	192		: :
of gaming revenue retained by the third party \$	100	亳引	2
c If 'Yes,' enter name and address of the third party:	# Big		
Name: •			71 i
Address -			•
16 Gaming manager information			
Name· •			
Gaming manager compensation ► \$		i	٠,
Description of services provided.	: <u>\</u>	4 45	<b>,</b> ( )
☐ Director/officer ☐ Employee ☐ Independent contractor		e ity	
17 Mandatory distributions		36.	
a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?	17a		<del></del>
<b>b</b> Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the		: , ]	•
organization's own exempt activities during the tax year 🕒 \$			
BAA TEEA3703 02/05/10 Schedule <b>G</b> (Form 9	90 or 99	0-EZ)	2009

#### SCHEDULE M (Form 990)

## **Noncash Contributions**

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

OMB No 1545-0047

2009

**Open To Public** Inspection

Department of the Treasury Internal Revenue Service Name of the organization

AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.

Employer identification number

53-0233715

Part I⊊ Types of Property (a) (b) (c) (d) Check if Number of Revenues reported Method of determining Contributions on Form 990, revenues applicable Part VIII, line 1g 1 Art-Works of art 2 Art-Historical treasures 3 Art-Fractional interests Books and publications Clothing and household goods Cars and other vehicles 6 Boats and planes Intellectual property 118,118. Fair Value X 9 Securities-Publicly traded Securities-Closely held stock 10 Securities-Partnership, LLC, or trust interests 12 Securities-Miscellaneous Qualified conservation contribution-Historic structures 14 Qualified conservation contribution-Other Real estate-Residential 15 Real estate-Commercial Real estate-Other 17 Collectibles 18 19 Food inventory 20 Drugs and medical supplies 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 124 23,842. Sales Price Other ► (Silent Auction Contributions) 25 26 27 28 Other ► ( Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30 a purposes for the entire holding period? b If 'Yes,' describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32 a noncash contributions? b If 'Yes,' describe in Part II 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,

describe in Part II

Part II	Supplemental Informand 33. Also complete	<b>nation.</b> Complete the this part for any	nis part to provide t additional informat	the information require	ed by Part I, lines 30b, 32b,
<del>-</del>			<b>-</b>		
<del>-</del> -					
<b></b>		<b></b>			
				·	
				· <b></b>	
<b>-</b> -					
				. <b></b>	
<del>-</del>					
<b>-</b>					

Schedule M (Form 990) 2009 AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC. 53-0233715

Page 2

## SCHEDULE O (Form 990)

A 1 1 1 1

# **Supplemental Information to Form 990**

OMB No 1545 0047

Department of the Treasury Internal Revenue Service Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.

► Attach to Form 990.

Open to Public Inspection

Name of the organization	Employer identification number
AUDUBON NATURALIST SOCIETY OF THE CENTRAL ATLANTIC STATES, INC.	53-0233715
Pt VI-A, Line 7a Board members are nominated by the nominating c	ommittee and
elected by the ANS membership at the annual mee	ting for
staggered three year terms.	
Pt VI-B, Line 11A The Form 990 is reviewed by the auditor, Treasu	rer, President,
Finance Committee and Executive Director and is	_provided
to all the members of the Board of Directors.	
Pt VI-B, Line 12c Upon joining the Board of Directors or its comm	ittees_and
annually_thereafter,_members_read,_sign_and_dat	e_a
Disclosure Statement; they give this statement	to the
President of the Board if they are Board member	s or to the
Committee Chairperson if they are not Board Mem	bers. Salaried
staff_also sign and date the Disclosure Stateme	nt
upon employment and annually. The completed Sta	tement_will
be filed in their personnel folder. Disclosure	of actual,
potential and perceived conflicts of interest w	rill be a normal,
routine practice at Board, Committee and staff	meetings.
If a member or staff makes a disclosure, it is	documented
in the meeting's minutes.	
Pt VI-C, Line 19 The organization's governing documents, conflic	t of interest policy,
and financial statements are available upon req	west.
Pt_VI-A, Line 6 The members of the organization elect new board	l_members
each_year_at_the_annual_meeting	

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)

Briefly describe the organization's mission:

DC, region to appreciate, understand, and protect their natural environment through outdoor experiences, education, and advocacy.

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)

**4d** Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

Code <sup>.</sup>	Description:	MEMBERSHIP PROGRAM - ANS has the support of a membership of 4,500
Expenses	144,767.	households (10,000 people.) Members participate in the Society's
Grants Of	0.	environmental education programs, and volunteer in various
Revenue	0.	capacities including serving on the Board of Directors. Annually,
		over 1,000 members volunteer for the Society, monitoring
		streams, improving sanctuaries, testifying at public hearings,
		leading programs, and advocating on behalf of environmental policy.
Code:	Description:	PUBLICATIONS - Naturalist News is mailed quarterly to our
Expenses	76,342.	members and distributed free at local libraries and selected
Grants Of	0.	retail outlets. This 16-page journal, printed on 30% post-consumer
Revenue	_0.	waste paper with soy inks, contains feature articles and columns,
		community and conservation campaign news, and a calendar section.
		The state of the s
Code:	Description:	SANCUTUARY SHOP - The Sanctuary Shop sells birdseed,
Code: Expenses	Description 112,260.	SANCUTUARY SHOP - The Sanctuary Shop sells birdseed, birdhouses and feeders and an assortment of
	·	
Expenses	112,260.	birdhouses and feeders and an assortment of
Expenses Grants Of	112,260.	birdhouses and feeders and an assortment of nature-related books, clothing, games and gifts.
Expenses Grants Of	112,260.	birdhouses and feeders and an assortment of nature-related books, clothing, games and gifts.  These items assist the purchaser in attracting,
Expenses Grants Of	112,260.	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
Expenses Grants Of	112,260.	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,
Expenses Grants Of Revenue	112,260. 0. 155,474.	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.
Expenses Grants Of Revenue Code:	112,260. 0. 155,474. Description:	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.  CROWDER MESSERSMITH FUND - Helps small, mostly local,
Expenses Grants Of Revenue  Code: Expenses	112,260. 0. 155,474. Description: 4,351.	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.  CROWDER MESSERSMITH FUND - Helps small, mostly local, conservation and/or education projects in underdeveloped countries. Its small grants give a leg up to communities and individuals whose projects have not attracted
Expenses Grants Of Revenue  Code: Expenses Grants Of	112,260. 0. 155,474. Description: 4,351. 3,650.	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.  CROWDER MESSERSMITH FUND - Helps small, mostly local, conservation and/or education projects in underdeveloped countries. Its small grants give a leg up to communities
Expenses Grants Of Revenue  Code: Expenses Grants Of	112,260. 0. 155,474. Description: 4,351. 3,650.	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.  CROWDER MESSERSMITH FUND - Helps small, mostly local, conservation and/or education projects in underdeveloped countries. Its small grants give a leg up to communities and individuals whose projects have not attracted

Form 990, Page 6, Line 17 States Form 990 Filed In

Maryland
Virginia
District of Columbia