AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE
02-6005322
ph:603-224-9909
Platform Version: 19.3.7
Federal Version: 19.3.5

Federal Diagnostics

2019

Prepared by: David C. Plante CPA
03/19/2021 03:19 PM
Debbie

Critical Messages

None

Electronic Filing

None

Informational Messages

- [x] Force field entered with data "3,287,672" on Screen Bal-2
- [x] Force field entered with data "153,501" on Screen Exp-2
- [x] Data accepted via Datasharing review and verify
- [x] One or more contributor name and address are suppressed on Schedule B
- [x] Enter lobbying expenses by electing public charity on Screen SchC
- [x] 990, Part III total program service revenue does not match 990, Part VIII, line 2g total program service revenue
- [x] Return does not qualify for electronic signature for the following reasons:
- [x] Officer social security number is missing
- [x] Preparer 'David C. Plante CPA'

Overrides

- [ ] Overridden field with data "X" on Form / Schedule Sch D

Tick Data

Form	Current Value	Prior (Ticked) Value	Difference
☐ ✓Sch Sch C	(none)	X	
☐ ✓Sch Sch C	(none)	X	

Forms 990 / 990-EZ Return Summary

For calendar year 2019, or tax year beginning **04/01/19** , and ending **03/31/20**

02-6005322

AUDUBON SOCIETY OF NEW HAMPSHIRE

Net Asset / Fund Balance at Beginning of Year			17,699,068
Revenue			
Contributions	1,082,453		
Program service revenue	676,804		
Investment income	120,846		
Capital gain / loss	87,447		
Fundraising / Gaming:			
Gross revenue			
Direct expenses			
Net income			
Other income	154,306		
Total revenue		2,121,856	
Expenses			
Program services	1,539,739		
Management and general	260,993		
Fundraising	277,001		
Total expenses		2,077,733	
Excess / (deficit)			44,123
Changes			-234,853
Net Asset / Fund Balance at End of Year			17,508,338

Reconciliation of Revenue

Total revenue per financial statements	1,887,003
Less:	
Unrealized gains	-234,853
Donated services	
Recoveries	
Other	
Plus:	
Investment expenses	
Other	
Total revenue per return	2,121,856

Reconciliation of Expenses

Total expenses per financial statements	2,077,733
Less:	
Donated services	
Prior year adjustments	
Losses	
Other	
Plus:	
Investment expenses	
Other	
Total expenses per return	2,077,733

Balance Sheet

	Beginning	Ending	Differences
Assets	18,682,441	18,308,769	
Liabilities	983,373	800,431	
Net assets	17,699,068	17,508,338	-190,730

Miscellaneous Information

Amended return	
Return / extended due date	11/16/20
Failure to file penalty	

PENCHANSKY & CO.II, PLLC
70 STARK ST
MANCHESTER, NH 03101
603-647-2400

March 19, 2021

CONFIDENTIAL

AUDUBON SOCIETY OF NEW HAMPSHIRE
84 SILK FARM ROAD
CONCORD, NH 03301

Dear :

We have prepared the following returns from information provided by you without verification or audit.

Return of Organization Exempt From Income Tax (Form 990)

We suggest that you examine these returns carefully to fully acquaint yourself with all items contained therein to ensure that there are no omissions or misstatements. Attached are instructions for signing and filing each return. Please follow those instructions carefully.

Enclosed is any material you furnished for use in preparing the returns. If the returns are examined, requests may be made for supporting documentation. Therefore, we recommend that you retain all pertinent records for at least seven years.

In order that we may properly advise you of tax considerations, please keep us informed of any significant changes in your financial affairs or of any correspondence received from taxing authorities.

If you have any questions, or if we can be of assistance in any way, please call.

Sincerely,

PENCHANSKY & CO.II, PLLC

PENCHANSKY & CO.II, PLLC
70 STARK ST
MANCHESTER, NH 03101
603-647-2400

March 19, 2021

CONFIDENTIAL

AUDUBON SOCIETY OF NEW HAMPSHIRE
84 SILK FARM ROAD
CONCORD, NH 03301

For professional services rendered in connection with the preparation of the following tax forms for year ending 3/31/20.

Amount due	$ 0.00

Filing Instructions

AUDUBON SOCIETY OF NEW HAMPSHIRE

Exempt Organization Tax Return

Taxable Year Ended March 31, 2020

Date Due: AS SOON AS POSSIBLE

Remittance: None is required. Your Form 990 for the tax year ended 3/31/20 shows no balance due.

Signature: You are using a Personal Identification Number (PIN) for signing your return electronically. Form 8879-EO, IRS *e-file* Signature Authorization for an Exempt Organization should be signed and dated by an authorized officer of the organization and returned to:

PENCHANSKY & CO.II, PLLC
70 STARK ST
MANCHESTER, NH 03101

Important: **Your return will not be filed with the IRS until the signed Form 8879-EO has been received by this office.**

Other: Your return is being filed electronically with the IRS and is not required to be mailed. If you Mail a paper copy of your return to the IRS it will delay the processing of your return.

Form **8879-EO**

Department of the Treasury
Internal Revenue Service

IRS *e-file* Signature Authorization for an Exempt Organization

For calendar year 2019, or fiscal year beginning 4/01, 2019, and ending 3/31, 20 20

u **Do not send to the IRS. Keep for your records.**
u **Go to *www.irs.gov/Form8879EO* for the latest information.**

OMB No. 1545-1878

2019

Name of exempt organization: AUDUBON SOCIETY OF NEW HAMPSHIRE

Employer identification number: 02-6005322

Name and title of officer: DOUGLAS BECHTEL
PRESIDENT

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line **1a, 2a, 3a, 4a,** or **5a,** below, and the amount on that line for the return being filed with this form was blank, then leave line **1b, 2b, 3b, 4b,** or **5b,** whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than one line in Part I.

1a Form 990 check here ▶	X	**b Total revenue,** if any (Form 990, Part VIII, column (A), line 12)	**1b**	2,121,856
2a Form 990-EZ check here ▶	☐	**b Total revenue,** if any (Form 990-EZ, line 9)	**2b**	
3a Form 1120-POL check here ▶	☐	**b Total tax** (Form 1120-POL, line 22)	**3b**	
4a Form 990-PF check here ▶	☐	**b Tax based on investment income** (Form 990-PF, Part VI, line 5)	**4b**	
5a Form 8868 check here ▶	☐	**b Balance Due** (Form 8868, line 3c)	**5b**	

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2019 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS **(a)** an acknowledgement of receipt or reason for rejection of the transmission, **(b)** the reason for any delay in processing the return or refund, and **(c)** the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only

X I authorize PENCHANSKY & CO.II, PLLC (**ERO firm name**) to enter my PIN 15257 as my signature (**Enter five numbers, but do not enter all zeros**)

on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2019 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature } Date } 02/12/21

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

02110312315
Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2019 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of **Pub. 4163,** Modernized e-File (MeF) Information for Authorized IRS *e-file* Providers for Business Returns.

ERO's signature } David C. Plante CPA Date } 02/12/21

ERO Must Retain This Form — See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

Form **990** (Rev. January 2020) Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

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

OMB No. 1545-0047 **2019** **Open to Public Inspection**

A For the 2019 calendar year, or tax year beginning 04/01/19 **, and ending** 03/31/20

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return/terminated [ ] Amended return [ ] Application pending

C Name of organization: AUDUBON SOCIETY OF NEW HAMPSHIRE

Doing business as

Number and street (or P.O. box if mail is not delivered to street address): 84 SILK FARM ROAD — Room/suite

City or town, state or province, country, and ZIP or foreign postal code: CONCORD NH 03301

D Employer identification number: 02-6005322

E Telephone number: 603-224-9909

G Gross receipts $ 2,441,253

F Name and address of principal officer: DOUGLAS BECHTEL, 84 SILK FARM ROAD, CONCORD NH 03301

H(a) Is this a group return for subordinates? [ ] Yes [X] No

H(b) Are all subordinates included? [ ] Yes [ ] No — If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [ ] 501(c) ( ) t (insert no.) [ ] 4947(a)(1) or [ ] 527

J Website: u WWW.NHAUDUBON.ORG

H(c) Group exemption number u

K Form of organization: [ ] Corporation [ ] Trust [X] Association [ ] Other u

L Year of formation: 1914

M State of legal domicile:

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities:
See Schedule O

2 Check this box u [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

3	Number of voting members of the governing body (Part VI, line 1a)	3	13
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	13
5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	44
6	Total number of volunteers (estimate if necessary)	6	2027
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b	Net unrelated business taxable income from Form 990-T, line 39	7b	0

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	1,360,920	1,082,453
	9	Program service revenue (Part VIII, line 2g)	866,733	676,804
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	92,346	208,293
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	76,648	154,306
	12	Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,396,647	2,121,856
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	1,374,116	1,134,246
	16a	Professional fundraising fees (Part IX, column (A), line 11e)		0
	b	Total fundraising expenses (Part IX, column (D), line 25) u 277,001		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	728,517	943,487
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	2,102,633	2,077,733
	19	Revenue less expenses. Subtract line 18 from line 12	294,014	44,123
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	18,682,441	18,308,769
	21	Total liabilities (Part X, line 26)	983,373	800,431
	22	Net assets or fund balances. Subtract line 21 from line 20	17,699,068	17,508,338

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here

Signature of officer — Date

DOUGLAS BECHTEL — PRESIDENT

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check [X] if self-employed	PTIN
David C. Plante CPA	David C. Plante CPA	03/19/21		P00643348

Firm's name } PENCHANSKY & CO.II, PLLC — Firm's EIN } 84-2138208

Firm's address } 70 STARK ST, MANCHESTER, NH 03101 — Phone no. 603-647-2400

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [ ] No

Part III **Statement of Program Service Accomplishments**

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:

See Schedule O

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [ ] Yes [X] No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [ ] Yes [X] No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses $ 1,029,993 including grants of $) (Revenue $)

See Schedule O

4b (Code:) (Expenses $ 509,746 including grants of $) (Revenue $)

See Schedule O

4c (Code:) (Expenses $ including grants of $) (Revenue $)

See Schedule O

4d Other program services (Describe on Schedule O.)

(Expenses $ including grants of $) (Revenue $)

4e Total program service expenses u 1,539,739

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

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a*	24a		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part II*	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
a	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? *If "Yes," complete Schedule L, Part IV*	28a		X
b	A family member of any individual described in line 28a? *If "Yes," complete Schedule L, Part IV*	28b		X
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? *If "Yes," complete Schedule L, Part IV*	28c		X
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? *If "Yes," complete Schedule R, Part I*	33		X
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	35b		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	37		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note:** All Form 990 filers are required to complete Schedule O.	38		X

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	14			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		

Part V Statements Regarding Other IRS Filings and Tax Compliance *(continued)*

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 44			
b	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* (see instructions)				
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?		3a		X
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation on Schedule O*		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		4a		X
b	If "Yes," enter the name of the foreign country u				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c		
6a	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 as charitable contributions?		6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		6b		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		7a		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		7c		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		8		
9	**Sponsoring organizations maintaining donor advised funds.**				
a	Did the sponsoring organization make any taxable distributions under section 4966?		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		9b		
10	**Section 501(c)(7) organizations.** Enter:				
a	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	**Section 501(c)(12) organizations.** Enter:				
a	Gross income from members or shareholders	11a			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state?		13a		
	Note: See the instructions for additional information the organization must report on Schedule O.				
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b			
c	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation on Schedule O*		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $1,000,000 in remuneration or excess parachute payment(s) during the year?		15		X
	If "Yes," see instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?		16		X
	If "Yes," complete Form 4720, Schedule O.				

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 on Schedule O. See instructions.*

Check if Schedule O contains a response or note to any line in this Part VI ... [X]

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	13		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b	13		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3			X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			X
6	Did the organization have members or stockholders?	6		X	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b			X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a	The governing body?	8a		X	
b	Each committee with authority to act on behalf of the governing body?	8b		X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses on Schedule O*	9			X

Section B. Policies *(This Section B requests information about policies not required by the Internal Revenue Code.)*

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	X	
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	X	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	X	
13	Did the organization have a written whistleblower policy?	13	X	
14	Did the organization have a written document retention and destruction policy?	14	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	X	
b	Other officers or key employees of the organization	15b	X	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed u NH

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

[ ] Own website [ ] Another's website [X] Upon request [ ] Other *(explain on Schedule O)*

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records u

ORGANIZATION 84 SILK FRAM ROAD
CONCORD NH 03301 603-224-9909

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(1) DOUGLAS BECHTEL PRESIDENT	40.00 0.00	X		X				92,499	0	6,774
(2) MICHAEL AMARAL VICE CHAIRMAN	3.50 0.00	X		X				0	0	0
(3) MAVIS BRITTELLI BOARD MEMBER	2.00 0.00	X						0	0	0
(4) DAVID DONSKER BOARD MEMBER	2.00 0.00	X						0	0	0
(5) PAUL DOSCHER BOARD MEMBER	2.50 0.00	X						0	0	0
(6) DAVID HOWE SECRETARY	2.00 0.00	X		X				0	0	0
(7) TOM LEE BOARD MEMBER	2.50 0.00	X						0	0	0
(8) SUSAN MARTIN BOARD MEMBER	1.50 0.00	X						0	0	0
(9) PAUL NICKERSON BOARD MEMBER	3.00 0.00	X						0	0	0
(10) CHARLIE NIMS BOARD MEMBER	2.50 0.00	X						0	0	0
(11) CHRISTOPHER PICOTTE BOARD MEMBER	2.50 0.00	X						0	0	0

Part VII **Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees** *(continued)*

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
(12) BRIAN REILLY BOARD MEMBER	2.00 0.00	X						0	0	0
(13) MELISSA SMART BOARD MEMBER	14.00 0.00	X						0	0	0

		(D)	(E)	(F)
1b	Subtotal	92,499		6,774
c	Total from continuation sheets to Part VII, Section A			
d	Total (add lines 1b and 1c)	92,499		6,774

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization u 0

			Yes	No
3	Did the organization list any **former** officer, director, trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	3		X
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	4		X
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	5		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization u 0

Part VIII Statement of Revenue

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

					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b	99,984				
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	982,469				
	g	Noncash contributions included in lines 1a-1f	1g	$				
	h	**Total.** Add lines 1a–1f			1,082,453			
Program Service Revenue			Business Code					
	2a	ENVIROMENTAL PROGRAMS			371,691	371,691		
	b	GRANTS			211,167	211,167		
	c	SERVICE CONTRACTS			93,946	93,946		
	d							
	e							
	f	All other program service revenue						
	g	**Total.** Add lines 2a–2f			676,804			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts)			120,846			120,846
	4	Income from investment of tax-exempt bond proceeds						
	5	Royalties						
				(i) Real / (ii) Personal				
	6a	Gross rents	6a					
	b	Less: rental expenses	6b					
	c	Rental inc. or (loss)	6c					
	d	Net rental income or (loss)						
				(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	7a	363,525				
	b	Less: cost or other basis and sales exps.	7b	276,078				
	c	Gain or (loss)	7c	87,447				
	d	Net gain or (loss)			87,447			87,447
	8a	Gross income from fundraising events (not including $ of contributions reported on line 1c). See Part IV, line 18	8a					
	b	Less: direct expenses	8b					
	c	Net income or (loss) from fundraising events						
	9a	Gross income from gaming activities. See Part IV, line 19	9a					
	b	Less: direct expenses	9b					
	c	Net income or (loss) from gaming activities						
	10a	Gross sales of inventory, less returns and allowances	10a	75,326				
	b	Less: cost of goods sold	10b	43,319				
	c	Net income or (loss) from sales of inventory			32,007	32,007		
Miscellaneous Revenue			Business Code					
	11a	OTHER INCOME			122,299	122,299		
	b							
	c							
	d	All other revenue						
	e	**Total.** Add lines 11a–11d			122,299			
	12	**Total revenue.** See instructions			2,121,856	831,110	0	208,293

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).

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	92,499	78,624	13,875	
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	867,002	672,844	25,934	168,224
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	94,965	73,879	3,940	17,146
10 Payroll taxes	79,780	62,483	3,310	13,987
11 Fees for services (nonemployees):				
a Management				
b Legal				
c Accounting				
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	181,832	128,520	40,129	13,183
12 Advertising and promotion	7,003	6,509	80	414
13 Office expenses	92,435	24,304	12,067	56,064
14 Information technology				
15 Royalties				
16 Occupancy	150,984	150,984		
17 Travel	58,923	55,285	2,941	697
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	7,231	982	2,480	3,769
20 Interest	28,980	26,425	2,555	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	153,501	114,135	39,366	
23 Insurance	77,496	58,907	17,808	781
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a POGRAM EXPENSE	112,217		112,217	
b PROGRAM EXPENSES	69,234	69,234		
c PROGRAM EXPENSE	2,736			2,736
d PROPERTY TAXES	915	915		
e All other expenses		15,709	-15,709	
25 Total functional expenses. Add lines 1 through 24e	2,077,733	1,539,739	260,993	277,001
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here u ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

					(A) Beginning of year		(B) End of year
Assets	1	Cash—non-interest-bearing			836,251	1	1,107,349
	2	Savings and temporary cash investments			489,605	2	
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			70,796	4	65,274
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use			33,538	8	39,134
	9	Prepaid expenses and deferred charges			25,056	9	6,188
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a	14,175,650			
	b	Less: accumulated depreciation	10b	3,033,552	11,220,933	10c	11,142,098
	11	Investments—publicly traded securities			2,805,886	11	2,940,043
	12	Investments—other securities. See Part IV, line 11			1,000	12	1,000
	13	Investments—program-related. See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			3,199,376	15	3,007,683
	16	**Total assets.** Add lines 1 through 15 (must equal line 33)			18,682,441	16	18,308,769
Liabilities	17	Accounts payable and accrued expenses			170,523	17	91,928
	18	Grants payable				18	
	19	Deferred revenue			77,495	19	60,611
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D				21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons				22	
	23	Secured mortgages and notes payable to unrelated third parties			592,229	23	574,822
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D			143,126	25	73,070
	26	**Total liabilities.** Add lines 17 through 25			983,373	26	800,431
Net Assets or Fund Balances		**Organizations that follow FASB ASC 958, check here u** ☒ **and complete lines 27, 28, 32, and 33.**					
	27	Net assets without donor restrictions			3,599,255	27	3,287,672
	28	Net assets with donor restrictions			14,099,813	28	14,220,666
		Organizations that do not follow FASB ASC 958, check here u ☐ **and complete lines 29 through 33.**					
	29	Capital stock or trust principal, or current funds				29	
	30	Paid-in or capital surplus, or land, building, or equipment fund				30	
	31	Retained earnings, endowment, accumulated income, or other funds				31	
	32	Total net assets or fund balances			17,699,068	32	17,508,338
	33	Total liabilities and net assets/fund balances			18,682,441	33	18,308,769

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	2,121,856
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,077,733
3	Revenue less expenses. Subtract line 2 from line 1	3	44,123
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	17,699,068
5	Net unrealized gains (losses) on investments	5	-234,853
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	17,508,338

Part XII Financial Statements and Reporting

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

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

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

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.

u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization
AUDUBON SOCIETY OF NEW HAMPSHIRE

Employer identification number
02-6005322

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

1 [ ] A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 [ ] A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990 or 990-EZ).)

3 [ ] A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 [ ] A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: ....

5 [ ] An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)

6 [ ] A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 [ ] An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

8 [ ] A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)

9 [ ] An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: ....

10 [X] An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

11 [ ] An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**

12 [ ] An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.

a [ ] **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**

b [ ] **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**

c [ ] **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**

d [ ] **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**

e [ ] Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.

f Enter the number of supported organizations ....

g Provide the following information about the supported organization(s).

(i) Name of supported organization	**(ii)** EIN	**(iii)** Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	**(v)** Amount of monetary support (see instructions)	**(vi)** Amount of other support (see instructions)
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)**
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
11 **Total support.** Add lines 7 through 10						

12 Gross receipts from related activities, etc. (see instructions) 12

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2019 (line 6, column (f) divided by line 11, column (f)) 14 %

15 Public support percentage from 2018 Schedule A, Part II, line 14 15 %

16a **33 1/3% support test—2019.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support test—2018.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2019.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2018.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ ☐

18 **Private foundation.** If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ ☐

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")				1,360,920	1,082,453	2,443,373
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose				910,796	874,429	1,785,225
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid 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				2,271,716	1,956,882	4,228,598
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6.)						4,228,598

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6				2,271,716	1,956,882	4,228,598
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources				92,346	120,846	213,192
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b				92,346	120,846	213,192
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)				32,585		32,585
13 **Total support.** (Add lines 9, 10c, 11, and 12.)				2,396,647	2,077,728	4,474,375

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	94.51 %
16	Public support percentage from 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2019** (line 10c, column (f), divided by line 13, column (f))	17	5 %
18	Investment income percentage from **2018** Schedule A, Part III, line 17	18	%

19a **33 1/3% support tests—2019.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☒

b **33 1/3% support tests—2018.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.*	**1**		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).*	**2**		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below.*	**3a**		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in Part VI when and how the organization made the determination.*	**3b**		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in Part VI what controls the organization put in place to ensure such use.*	**3c**		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.*	**4a**		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*	**4b**		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*	**4c**		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).*	**5a**		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	**5b**		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	**5c**		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in Part VI.*	**6**		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	**7**		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).*	**8**		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? *If "Yes," provide detail in Part VI.*	**9a**		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in Part VI.*	**9b**		
c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in Part VI.*	**9c**		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer 10b below.*	**10a**		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)*	**10b**		

Part IV Supporting Organizations *(continued)*

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	**11a**		
b	A family member of a person described in (a) above?	**11b**		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*	**11c**		

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 *Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).*

a ☐ The organization satisfied the Activities Test. *Complete line 2 below.*

b ☐ The organization is the parent of each of its supported organizations. *Complete line 3 below.*

c ☐ The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

			Yes	No
2	Activities Test. *Answer (a) and (b) below.*			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*	**2b**		
3	Parent of Supported Organizations. *Answer (a) and (b) below.*			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI.*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	**1**		
2 Recoveries of prior-year distributions	**2**		
3 Other gross income (see instructions)	**3**		
4 Add lines 1 through 3.	**4**		
5 Depreciation and depletion	**5**		
6 Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	**6**		
7 Other expenses (see instructions)	**7**		
8 **Adjusted Net Income** (subtract lines 5, 6, and 7 from line 4)	**8**		

Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	**1a**		
b Average monthly cash balances	**1b**		
c Fair market value of other non-exempt-use assets	**1c**		
d **Total** (add lines 1a, 1b, and 1c)	**1d**		
e **Discount** claimed for blockage or other factors (explain in detail in **Part VI**):			
2 Acquisition indebtedness applicable to non-exempt-use assets	**2**		
3 Subtract line 2 from line 1d.	**3**		
4 Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	**4**		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	**5**		
6 Multiply line 5 by .035.	**6**		
7 Recoveries of prior-year distributions	**7**		
8 **Minimum Asset Amount** (add line 7 to line 6)	**8**		

Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, Column A)	**1**		
2 Enter 85% of line 1.	**2**		
3 Minimum asset amount for prior year (from Section B, line 8, Column A)	**3**		
4 Enter greater of line 2 or line 3.	**4**		
5 Income tax imposed in prior year	**5**		
6 **Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	**6**		

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

Part V **Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** *(continued)*

	Section D - Distributions	**Current Year**
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in **Part VI**). See instructions.	
7	**Total annual distributions.** Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in **Part VI**). See instructions.	
9	Distributable amount for 2019 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

	Section E - Distribution Allocations (see instructions)	**(i)** **Excess Distributions**	**(ii)** **Underdistributions Pre-2019**	**(iii)** **Distributable Amount for 2019**
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in **Part VI**). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	**Total** of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: $			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in **Part VI**. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in **Part VI**. See instructions.			
7	**Excess distributions carryover to 2020.** Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Part VI **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

Part III, Line 12 - Other Income Detail

RENTAL	$	29,192
FUNDRASING EVENTS	$	3,393

Schedule B
(Form 990, 990-EZ, or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.
u Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047

2019

Name of the organization	Employer identification number
AUDUBON SOCIETY OF NEW HAMPSHIRE	02-6005322

Organization type (check one):

Filers of:	Section:
Form 990 or 990-EZ	[X] 501(c)(3) (enter number) organization
	[ ] 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
	[ ] 527 political organization
Form 990-PF	[ ] 501(c)(3) exempt private foundation
	[ ] 4947(a)(1) nonexempt charitable trust treated as a private foundation
	[ ] 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule.**
Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

[X] For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling $5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

[ ] For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the $33^{1}/_{3}$% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** $5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than $1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

[ ] For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than $1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling $5,000 or more during the year . . . . ▶ $ . . . .

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization: AUDUBON SOCIETY OF NEW HAMPSHIRE

Employer identification number: 02-6005322

Part I **Contributors** (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		$ 223,750	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
2		$ 25,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
3		$ 30,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
4		$ 24,240	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
5		$ 25,000	Person [X] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)
		$	Person [ ] Payroll [ ] Noncash [ ] (Complete Part II for noncash contributions.)

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

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

u Complete if the organization is described below. u Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	Employer identification number
AUDUBON SOCIETY OF NEW HAMPSHIRE	02-6005322

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")

2 Political campaign activity expenditures (see instructions) . . . u $

3 Volunteer hours for political campaign activities (see instructions) . . .

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . u $

2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . u $

3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . ☐ Yes ☐ No

4a Was a correction made? . . . ☐ Yes ☐ No

b If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . u $

2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . u $

3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . u $

4 Did the filing organization file **Form 1120-POL** for this year? . . . ☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

	(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from 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-.
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

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

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	**(a)** Filing organization's totals	**(b)** Affiliated group totals
1a Total lobbying expenditures to influence public opinion (grassroots lobbying)		
b Total lobbying expenditures to influence a legislative body (direct lobbying)		
c Total lobbying expenditures (add lines 1a and 1b)		
d Other exempt purpose expenditures		
e Total exempt purpose expenditures (add lines 1c and 1d)		
f Lobbying nontaxable amount. Enter the amount from the following table in both columns.		

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e.
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000.
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000.
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000.
Over $17,000,000	$1,000,000.

	(a)	(b)
g Grassroots nontaxable amount (enter 25% of line 1f)		
h Subtract line 1g from line 1a. If zero or less, enter -0-		
i Subtract line 1f from line 1c. If zero or less, enter -0-		

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ **Yes** ☐ **No**

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	**(a)** 2016	**(b)** 2017	**(c)** 2018	**(d)** 2019	**(e)** Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a	Volunteers?	X		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c	Media advertisements?		X	
d	Mailings to members, legislators, or the public?		X	
e	Publications, or published or broadcast statements?		X	
f	Grants to other organizations for lobbying purposes?		X	
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X		9,176
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i	Other activities?		X	
j	Total. Add lines 1c through 1i			9,176
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
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 political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

Schedule C, Part II-B, Line 1

PARTR II-B LOBBYING ACTIVITIES

LINE 1A - THE VOLUNTEER BOARD AND ENVIROMENTAL POLICY COMMITTEE MEMBERS DELIVER TESTIMONY AT STATE LEGISATIVE COMMITTEE HEARINGS AND MEET WITH CONGRESSIONAL DELEGATION MEMBERS AND STAFF TO DISCUSS LEGISLATIVE ISSUES

Part IV Supplemental Information *(continued)*

RELATED TO WILDLIFE AND THE ENVIROMENT.

LINE 1G - STAFF PREPARES TESTIMONY FOR STATE LEGISLATIVE HEARINGS ON BILLS OF INTEREST AND COMMUNICATES WITH CONGRESSIONAL DELEGATION MEMBERS AND STAFF REGARDING ISSUES OF CONCERN

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

u Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
u Attach to Form 990.
u Go to *www.irs.gov/Form990* for instructions and the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization: AUDUBON SOCIETY OF NEW HAMPSHIRE
Employer identification number: 02-6005322

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can 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? ☐ Yes ☐ No

Part II Conservation Easements.
Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).
- [X] Preservation of land for public use (for example, recreation or education)
- [X] Protection of natural habitat
- [X] Preservation of open space
- [X] Preservation of a historically important land area
- [ ] Preservation of a certified historic structure

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

			Held at the End of the Tax Year
a	Total number of conservation easements	2a	26
b	Total acreage restricted by conservation easements	2b	2,664.90
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year u

4 Number of states where property subject to conservation easement is located u 2

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? [X] Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
u 100

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
u $ 3,500

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? [X] Yes ☐ No

9 In Part XIII, 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 conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, 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 XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, 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) Revenue included on Form 990, Part VIII, line 1 u $

(ii) Assets included in Form 990, Part X u $ 225,000

2 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 FASB ASC 958 relating to these items:

a Revenue included on Form 990, Part VIII, line 1 u $

b Assets included in Form 990, Part X u $

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):

a [ ] Public exhibition
b [ ] Scholarly research
c [X] Preservation for future generations
d [ ] Loan or exchange program
e [ ] Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? [ ] Yes [X] No

Part IV **Escrow and Custodial Arrangements.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

		Amount
c Beginning balance	1c	
d Additions during the year	1d	
e Distributions during the year	1e	
f Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? [ ] Yes [ ] No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII [ ]

Part V **Endowment Funds.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	1,827,466	1,824,957	1,801,622	1,687,088	1,895,526
b Contributions	104,440	6,116	6,106	8,650	5,420
c Net investment earnings, gains, and losses	6,895	76,314	89,330	181,085	-123,567
d Grants or scholarships					
e Other expenditures for facilities and programs	79,609	79,921	72,101	75,201	90,291
f Administrative expenses					
g End of year balance	1,859,192	1,824,466	1,824,957	1,801,622	1,687,088

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment u 42.23 %

b Permanent endowment u 35.03 %

c Term endowment u 22.74 %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

		Yes	No
(i) Unrelated organizations	3a(i)		X
(ii) Related organizations	3a(ii)		X
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI **Land, Buildings, and Equipment.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		8,157,936		8,157,936
b Buildings		999		999
c Leasehold improvements				
d Equipment				
e Other		6,016,715	3,033,552	2,983,163
Total. Add lines 1a through 1e. *(Column (d) must equal Form 990, Part X, column (B), line 10c.)* u				11,142,098

Part VII Investments – Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 12.)* u		

Part VIII Investments – Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 13.)* u		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) SPLIT INTEREST AGREEMENTS	2,782,683
(2) ART COLLECTION	225,000
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 15.)* u	3,007,683

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GIFT ANNUITY PAYABLE	73,070
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. *(Column (b) must equal Form 990, Part X, col. (B) line 25.)* u	73,070

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

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

1	Total revenue, gains, and other support per audited financial statements			1	1,887,003
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
a	Net unrealized gains (losses) on investments	2a	-234,853		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	-234,853
3	Subtract line **2e** from line **1**			3	2,121,856
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	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	2,121,856

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

1	Total expenses and losses per audited financial statements			1	2,077,733
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
e	Add lines **2a** through **2d**			2e	
3	Subtract line **2e** from line **1**			3	2,077,733
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b			
c	Add lines **4a** and **4b**			4c	
5	Total expenses. Add lines **3** and **4c.** *(This must equal Form 990, Part I, line 18.)*			5	2,077,733

Part XIII Supplemental Information.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

Part II, Line 5 - Monitoring and Enforcement Policy

THE SOCIETY HAS A POLICY IN REGARDS TO PERIODIC MONITORING INSPECTION AND POLICY VIOLATIONS FOR THE EASEMENTS IN ITS COMTROL

Part II, Line 9 - Accounting for Conservation Easements

PURCHASED CONSERVATION EASEMENTS ARE EXPENSED IN THE YEAR THEY ARE PURHCASED AND ARE INCLUDED IN THE EXPENSESS FOR THE WILDLIFE CONSERVATIUON PROGRAM

Part III, Line 4 - Collections and Relation to Exempt Purpose

THE SOCIETY HAS ACQUIRED MOSTLY BY NDONATION ABOUT 100 ORIGINAL AUDUBON QUADREPED PRINTS AND OTHER ART PRINTS RELATED TO WILDLIFE, SOME OF WHICH

Part XIII Supplemental Information *(continued)*

ARE USED FOR DISPLAY AT SOCIRTY FACILITIESD, SOME OF WHICH ARE USED GENERALLY FOR EDUCATION ABOUT THE SOCIETY'S NAMKESAKE. J.J. AUDUBON AND THE HISTORY OF WILDLFE CONSERVATION. MOST ARTWORK IS CURRENTLY HELD FPOR PRESERVATION FOR FUTURE GENERATIONS.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

u Attach to Form 990 or 990-EZ.
u Go to *www.irs.gov/Form990* for the latest information.

OMB No. 1545-0047
2019
Open to Public Inspection

Name of the organization	Employer identification number
AUDUBON SOCIETY OF NEW HAMPSHIRE	02-6005322

Form 990 - Organization's Mission

NEW HAMPSHIRE AUDUBON'S MISSION IS TO PROTECT NEW HAMPSHIRE'S NATURAL ENVIRONMENT FOR WILDLIFE AND PEOPLE. IT ACCOMPLISHES THESE GOALS THROUGH THREE MAJOR AREAS OF INTEREST; LAND PROTECTION,STEWARDSHIP, AND CONSERVATION SCIENCE/POLICY AND ENVIRONMENTAL EDUCATION.

Form 990, Part III, Line 4a - First Accomplishment

NHA OPERATES FOUR NATURE CENTERS; THE MCLANE CENTER, MASSABESIC, AMOSKEAG FISHWAYS, AND NEWFOUND - THAT SERVE AS FOCAL POINTS FOR THE MAJORITY OF OUR ENVIRONMENTAL EDUCATION PROGRAMMING AND OUTREACH. VISITORS WHO ARRIVE AT THESE CENTERS ARE TREATED TO A VARIETY OF INTERACTIVE DISPLAYS AND LIVE ANIMAL EXHIBITS AIMED AT INCREASING AWARENESS AND UNDERSTANDING OF NEW HAMPSHIRE'S FLORA AND FAUNA AND THE ROLE HUMANS PLAY IN PROTECTING THEM. OUR NATURE CENTERS HOST A VARIETY OF ONSITE EDUCATIONAL PROGRAMMING THAT INCLUDES HOMESCHOOL CLASSES, PRESCHOOL CLASSES, GUIDED NATURE WALKS, SELF GUIDED TOURS, PROFESSIONAL DEVELOPMENT FOR K-12 TEACHERS, AND LECTURES WHICH REACH OVER 30,000 ADULTS AND CHILDREN ANNUALLY. IN ADDITION, EACH CENTER OFFERS OFF - SITE PROGRAMMING TO SCHOOLS, CAMPS, AND OTHER ORGANIZATIONS THROUGH THE STATE, OFTEN INCLUDING THE USE OF LIVE ANIMALS SUCH AS RAPTORS, AMPHIBIANS AND REPTILES. NATURALISTS DELIVER OVER 650 SCHOOL PROGRAMS EACH YEAR, REACHING APPROXIMATELY 21,000 STUDENTS. OUR SCHOOL PROGRAMS ARE ALIGNED WITH CURRENT NH STATE SCIENCE FRAMEWORKS WHICH AUGMENT TRADITIONAL CLASSROOM INSTRUCTION BY PROVIDING HANDS - ON, EXPERIMENTAL LEARNING OPPORTUNITIES. IN ADDITION, TWO OF OUR CENTERS (MCLANE AND MASSABESIC) OPERATE NATURE - BASED SUMMER AND VACATION CAMPS

Name of the organization	Employer identification number
AUDUBON SOCIETY OF NEW HAMPSHIRE	02-6005322

WHICH HOST OVER 300 CHILDREN ANNUALLY, RANGING FROM AGES 4 - 15.

Form 990, Part III, Line 4b - Second Accomplishment

NHA OWNS AND MANAGES 39 WILDLIFE SANTUARIES TOTALING ALMOST 7500 ACRES, MANAGES ANOTHER FOUR PROPERTIES TOTALING 1,250 ACRES UNDER MEMORANDUMS OF UNDERSTANDING, AND MONITORS THE CONSERVATION VALUE OF 26 EASEMENTS ON 2,664.90 ACRES. NHA'S LAND INTERESTS OCCUPY EVERY COUNTY OF THE STATE ACROSS VARIED HABITATS FROM NORTHERN PEAT BOGS TO COASTAL SALTMARSHES, HIGH-ELEVATION SPRUCE FORESTS TO APPALACHIAN OAK-HICKORY FORESTS, AND MUCH IN BETWEEN. NHA'S SANCTUARIES PROTECT SEVERAL UNIQUE NATURAL COMMUNITIES, AND RARE PLANT AND WILDLIFE SPECIES. THIRTY - ONE OF THESE PROPERTIES HAVE A TRAIL SYSTEM OF SOME TYPE (TOTALING 75 MILES), AND MANY ARE HEAVILY VISITED FOR LOW-IMPACT RECREATIONAL USES AND EVIRONMENTAL EDUCATION. IN PARTICULAR, PONDICHERRY, PONEMAH BOG, MASSABESIC, SILK FARM, PARADISE POINT, AND WILLARD POND WILDLIFE SANCTUARIES ARE VISITED ANNUALLY BY OVER 20,000 INDIVIDUALS.

Form 990, Part III, Line 4c - Third Accomplishment

NHA IS ACTIVE IN CONSERVATION SCIENCE AND ENVIRONMENTAL POLICY ISSUES. NHA'S CONSERVATION SCIENCE WORK INCLUDES RESEARCH, MONITORING, AND MANAGEMENT OF NEW HAMPSHIRE'S WILDLIFE, PARTICULARLY SPECIES OF CONSERVATION CONCERN. WHILE MANY PROJECTS FOCUS ON BIRDS, RECENT STUDIES HAVE ALSO INCLUDED BATS, DRAGONFLIES, BUTTERFLIES, AND TURTLES. THE ORGANIZATION ENGAGES A LARGE CADRE OF CITIZEN SCIENTISTS IN ITS WORK; APPROXIMATELY 2,100 VOLUNTEERS CONTRIBUTE OVER 17,400 HOURS ANNUALLY. NHA'S ADVOCACY WORK PROMOTES SCIENCE - BASED PUBLIC POLICY AT NATIONAL, STATE, AND LOCAL LEVELS. A STAFF/VOLUNTEER ENVIRONMENTAL POLICY COMMITTEE

Name of the organization: AUDUBON SOCIETY OF NEW HAMPSHIRE

Employer identification number: 02-6005322

DETERMINES NHA'S POSITION ON PROPOSED LEGISLATION AND DELIVERS TESTIMONY AT HEARINGS. STAFF MEMEBERS REPRESENT THE ORGANIZATION ON VARIOUS STATE POLICY WORKING GROUPS AND TECHNICAL COMMITTEES AND PARTICIPATE IN STATE AND REGIONAL COALITIONS. NHA COLLABORATES WITH OTHER NONPROFITS, STATE AND FEDERAL AGENCIES, ACADEMIC INSTITUTIONS, MUNICIPALITIES, AND BUSINESSES, RESPECTING COLLABORATORS' PERSPECTIVES WHILE ADVOCATING THE BEST POSSIBLE ENVIRONMENTAL OUTCOMES

Form 990, Part VI, Line 6 – Classes of Members or Stockholders

THE AUDUBON SOCIETY IS A MEMBERSHIP ORGANIZATION. MOST MEMBERS PAY ANNUAL MEMBERSHIP DUES, SOME MEMBERS ARE GRANTED COMPLIMNETARY MEMBERSHIP

Form 990, Part VI, Line 7a - Election of Members and Their Rights

MEMBERS ELECT THE BOARD AT THE ANNUAL MEETING

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

THE ORGANIZATIONS TREASURER AND EXECUTIVE COMMITTEE REVIEW THE FORM 990 AND REQUIRED SCHEDULES PRIOR TO SUBMITTING TO THE IRS

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

CONFLICT OF INTEREST DISCLOSURES ARE DISTRIBUTED TO BOARD MEMEBRS ANNUALLY. SHOULD A CONFLICT OF INTEREST ARISE, THE BOARD IS NOTIFIED AND THAT BOARD MEMBER IS RESTRICTED FROM DICUSSION AND VOTING ON THE ISSUE.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

EXECUTIVE COMPENSATIONN IS REVEIEWED BY A SUBCOMMITTE OF THE BOARD OF DIRECTORS AND TAKES INTO ACCOUNT COMPARABLE DATA WITH OTHER LOCAL

Name of the organization: AUDUBON SOCIETY OF NEW HAMPSHIRE

Employer identification number: 02-6005322

ORNGANIZATIONS AND ACCOMPLISHMENT OF GOALS

Form 990, Part VI, Line 15b - Compensation Process for Officers

FOR ANY OTHER OFFICERS OR KEY EMPLOYEES OF THE SOCIETY, THE SAME PROCESS WILL BE FOLLOWED AS DESCRIBED ABOVE FOR THE PRESIDENT

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

No documents available to the public

AUDUBON 03/19/2021 3:19 PM

Form **4562** Department of the Treasury Internal Revenue Service (99)

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Go to *www.irs.gov/Form4562* for instructions and the latest information.

OMB No. 1545-0172

2019

Attachment Sequence No. **179**

Name(s) shown on return: AUDUBON SOCIETY OF NEW HAMPSHIRE

Identifying number: 02-6005322

Business or activity to which this form relates: Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	

6 (a) Description of property	(b) Cost (business use only)	(c) Elected cost

7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the **smaller** of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12 ▶	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	152,651

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here u ☐		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only–see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	
				MM	S/L	

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	**Total.** Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	152,651
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

There are no amounts for Page 2

Federal Asset Report
Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
Other Depreciation:												
1	3 Silk Farm Rd Original	9/15/72	24,500				24,500	40	MO	S/L	24,500	0
2	1984 Addition	9/15/84	57,417				57,417	40	MO	S/L	51,674	1,435
3	1985 Additions	9/15/85	549,488				549,488	40	MO	S/L	480,801	13,737
4	1986 Additions	9/15/86	2,059				2,059	40	MO	S/L	1,748	51
5	1987-88 Additions	9/15/87	2,896				2,896	40	MO	S/L	2,315	72
6	1988-89 Additions	9/15/88	1,050				1,050	40	MO	S/L	813	26
7	1989-90 Additions	9/15/89	2,395				2,395	40	MO	S/L	1,797	59
8	1990-91 Additions	9/15/90	7,032				7,032	40	MO	S/L	5,099	176
9	1992-93 Add (Well)	9/15/92	1,650				1,650	40	MO	S/L	1,113	41
10	Willard Pond Cottage	9/15/91	5,370				5,370	40	MO	S/L	5,370	0
11	11 Hebron Marsh House	9/15/79	27,000				27,000	40	MO	S/L	27,000	0
12	Paradis Pt Nature Ct	9/15/66	27,000				27,000	40	MO	S/L	27,000	0
13	Madison NH	9/15/89	45,000				45,000	35	MO	S/L	38,573	1,286
15	FY95 Additions Signs	9/30/94	689				689	40	MO	S/L	423	17
16	Pave & Drainage Parking Lot	9/15/95	1,935				1,935	10	MO	S/L	1,935	0
17	Building Dahl	11/25/97	17,500				17,500	40	MO	S/L	9,371	438
19	1983-84 Addition	9/15/83	9,299				9,299	5	MO	S/L	9,299	0
20	1987-88 Additions	9/15/87	7,639				7,639	3	MO	S/L	7,639	0
21	1988-89 Additions	9/15/88	4,700				4,700	3	MO	S/L	4,700	0
22	1989-90 Additions	9/15/89	12,047				12,047	3	MO	S/L	12,047	0
23	1990-91 Additions	9/15/90	10,962				10,962	3	MO	S/L	10,962	0
24	1991-92 Additions	9/15/91	10,216				10,216	3	MO	S/L	10,216	0
25	Sound System (Terns)	8/28/97	2,004				2,004	5	MO	S/L	2,004	0
29	Water Tfeatment System	8/05/97	1,621				1,621	5	MO	S/L	1,621	0
33	Well Tank	11/30/96	1,395				1,395	5	MO	S/L	1,395	0
34	Assitions 98-99	1/04/99	9,790				9,790	5	MO	S/L	9,790	0
35	Various Additions	9/15/80	11,291				11,291	5	MO	S/L	11,291	0
36	1985-86 Additions	9/15/85	27,265				27,265	10	MO	S/L	27,265	0
37	1986-87 Additions	9/15/86	4,506				4,506	10	MO	S/L	4,506	0
38	1987-88 Additions	9/15/87	848				848	10	MO	S/L	848	0
39	1986-87 Additions	9/15/86	1,288				1,288	10	MO	S/L	1,288	0
40	Office Dividers	10/27/96	872				872	10	MO	S/L	872	0
41	Electric Clinton St	12/03/97	3,555				3,555	10	MO	S/L	3,555	0
43	1993-94 Additions	9/15/93	341,626				341,626	40	MO	S/L	222,059	8,541
59	59 Woods Property	8/29/95	118,480				118,480	40	MO	S/L	70,101	2,962
60	Misc Building Costs	5/21/98	18,122				18,122	40	MO	S/L	9,476	453
61	Misc Building Costs	6/30/98	4,777				4,777	40	MO	S/L	2,488	119
62	Misc Buiding Costs	7/31/98	31,794				31,794	40	MO	S/L	16,493	795
63	Misc Building Costs	9/09/98	105,457				105,457	40	MO	S/L	54,267	2,636
64	Misc Building Costs	9/30/98	59,920				59,920	40	MO	S/L	30,834	1,498
65	Misc Building Costs	11/02/98	90,955				90,955	40	MO	S/L	46,426	2,273
66	Misc Building Costs	12/11/98	218,288				218,288	40	MO	S/L	110,963	5,457
67	Misc Building Costs	2/28/99	20,229				20,229	40	MO	S/L	10,199	505
68	Additional Costs	11/06/98	236				236	40	MO	S/L	121	6
69	Adjustment	3/09/99	246				246	40	MO	S/L	124	6
79	Misc Furn & Fixtures	6/30/98	2,877				2,877	7	MO	S/L	2,877	0
80	Misc Furn & Fixtures	2/28/99	2,634				2,634	10	MO	S/L	2,634	0
81	Chairs/Table	2/28/99	655				655	10	MO	S/L	655	0
82	Parking Lot Improvements	8/31/96	31,000				31,000	10	MO	S/L	31,000	0
83	Plumbing	1/31/97	1,064				1,064	10	MO	S/L	1,064	0
84	Auburn Property Improvement	9/30/97	16,145				16,145	10	MO	S/L	16,145	0
85	Misc Prop Improvements	2/28/99	4,430				4,430	10	MO	S/L	4,430	0
103	ASNH Miscellaneous	3/31/97	2,432,788				2,432,788	0	--	Land	0	0
105	ASNH Boat Ramp Easement	3/31/98	15,000				15,000	0	--	Land	0	0
106	ASNH Antrim Easement	3/31/97	148,040				148,040	0	--	Land	0	0
107	Gillard	3/31/97	10,000				10,000	0	--	Land	0	0
108	ASNH Meetinghouse Pond	3/31/97	34,702				34,702	0	--	Land	0	0
109	ASNH Dahl	2/28/92	732,190				732,190	0	--	Land	0	0
110	ASNH Land & Legal Dahl	3/31/98	547,385				547,385	0	--	Land	0	0
111	ASNH Deering	3/31/98	95,628				95,628	0	--	Land	0	0
112	ASNH Wrabel	3/31/97	30,181				30,181	0	--	Land	0	0
113	ASNH Mara	3/31/97	24,722				24,722	0	--	Land	0	0
114	Massabesic Land	3/31/98	312,740				312,740	0	--	Land	0	0
115	ASNH Chase	3/31/97	11,350				11,350	0	--	Land	0	0
125	New Building	6/08/99	8,771				8,771	40	MO	S/L	4,349	219
128	Furniture Chairs/Table	6/15/99	1,674				1,674	10	MO	S/L	1,674	0
129	Chain Fence	8/25/99	977				977	5	MO	S/L	977	0
130	Wall Display Fixture	11/22/99	675				675	5	MO	S/L	675	0

AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE 03/19/2021 3:19 PM

02-6005322

Federal Asset Report

FYE: 3/31/2020

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
131	New Sign	1/31/00	6,000				6,000	5	MO	S/L	6,000	0
132	Drilling & Pumping Well	8/18/99	4,070				4,070	10	MO	S/L	4,070	0
137	ASNH LAnd Mckee	8/31/99	75,000				75,000	0	--	Land	0	0
138	1995 Voyager	5/03/99	9,584				9,584	5	MO	S/L	9,584	0
155	Freezer	3/06/01	660				660	5	MO	S/L	660	0
159	Land Beauregard	1/29/01	89,317				89,317	0	--	Land	0	0
160	LAnd Meding (Newbury)	10/01/00	110,000				110,000	0	--	Land	0	0
165	Odirone Pond Land	12/08/00	75,000				75,000	0	--	Land	0	0
166	Wyman Easement	4/14/00	1				1	0	--	Land	0	0
167	Frost Trust Acquisition	9/30/01	24,700				24,700	0	--	Land	0	0
168	Grant Brook	9/30/01	40,000				40,000	0	--	Land	0	0
170	Property Improvements	9/30/01	5,770				5,770	10	MO	S/L	5,770	0
176	Shane Easement	3/31/02	1				1	0	--	Land	0	0
181	Farley Road Nashua NH	10/31/02	135,000				135,000	0	--	Land	0	0
182	Land Nashua NH	10/31/02	19,000				19,000	0	--	Land	0	0
189	Printer	1/15/04	3,015				3,015	5	MO	S/L	3,015	0
191	Recabling	10/04/03	2,555				2,555	10	MO	S/L	2,555	0
193	Land	2/02/04	107,000				107,000	0	--	Land	0	0
194	GIS Software	2/17/04	995				995	5	MO	S/L	995	0
195	GIS Extra Ram	12/02/03	1,091				1,091	5	MO	S/L	1,091	0
196	GIS Workstation	12/01/03	10,463				10,463	5	MO	S/L	10,463	0
197	Re Roof Office Bldg	11/15/03	6,333				6,333	10	MO	S/L	6,333	0
198	Printer	2/18/04	1,123				1,123	5	MO	S/L	1,123	0
199	Camp Software	10/08/03	2,925				2,925	5	MO	S/L	2,925	0
200	GIS Software	3/24/04	4,000				4,000	3	MO	S/L	4,000	0
201	Property Improvements	3/26/04	4,000				4,000	10	MO	S/L	4,000	0
206	Bayview Road Land	2/10/04	320,000				320,000	0	--	Land	0	0
213	Mortel Modular Tel System	6/18/04	18,545				18,545	5	MO	S/L	18,545	0
214	APC 1000 for Phome System	6/18/04	312				312	5	MO	S/L	312	0
215	PolyCom Unit	10/18/04	1,560				1,560	5	MO	S/L	1,560	0
230	HP 2300n Printer	1/07/05	602				602	5	MO	S/L	602	0
233	M&D Office Renovations	10/27/04	166				166	10	MO	S/L	166	0
234	Buderus G-315/5 Boiler	10/08/04	13,743				13,743	10	MO	S/L	13,743	0
235	2004 Toyota Prius	9/28/04	23,597				23,597	5	MO	S/L	23,597	0
236	Infocus LP820	8/07/04	3,845				3,845	5	MO	S/L	3,845	0
241	HP 2300n Printer	1/07/05	602				602	5	MO	S/L	602	0
245	Tamposi	12/02/04	454,000				454,000	0	--	Land	0	0
249	Owl Enclosure	8/29/04	295				295	10	MO	S/L	295	0
250	Ash Cottage Sink	4/30/04	521				521	10	MO	S/L	521	0
251	Ash Cottage Roof Material	5/08/04	1,662				1,662	10	MO	S/L	1,662	0
252	Ash Cottage Roof Materials	6/08/04	1,245				1,245	10	MO	S/L	1,245	0
253	Smoke Detectors	6/11/04	825				825	10	MO	S/L	825	0
254	Electrical Work	6/04/04	2,500				2,500	10	MO	S/L	2,500	0
255	Ash Cottage Roof	6/25/04	2,700				2,700	10	MO	S/L	2,700	0
256	Ash Cottage Roof	7/15/04	1,985				1,985	10	MO	S/L	1,985	0
257	Ash Cottage Furnishings	8/26/04	730				730	10	MO	S/L	730	0
258	Kohler Toilet	9/01/04	364				364	10	MO	S/L	364	0
259	Ash Cottage Furnishings	10/21/04	275				275	10	MO	S/L	275	0
260	4- Kayaks & Paddles	3/10/05	1,329				1,329	5	MO	S/L	1,329	0
261	Canoe	3/10/05	650				650	5	MO	S/L	650	0
273	ASNH Dahl Sanctuary Addition	3/31/05	472,000				472,000	0	--	Land	0	0
274	Morton Property	4/20/04	1,000				1,000	0	--	Land	0	0
275	Stoney Brook	6/01/04	29,200				29,200	0	--	Land	0	0
276	Hampton Salt Marsh	12/01/04	714,000				714,000	0	--	Land	0	0
277	Deering (Dawson)	2/25/05	139,900				139,900	0	--	Land	0	0
279	Tyrell Property Deering	8/12/05	122,100				122,100	0	--	Land	0	0
282	ML 350 G3 rack server	4/26/05	5,022				5,022	5	MO	S/L	5,022	0
291	GPS Hardware & Software	11/01/05	3,640				3,640	5	MO	S/L	3,640	0
292	Avon Rover 310 Airdock	4/13/05	2,500				2,500	5	MO	S/L	2,500	0
295	Water Treatment System for Ash Cottage	5/09/05	3,505				3,505	10	MO	S/L	3,505	0
298	Morton Land	12/31/05	54,432				54,432	0	--	Land	0	0
300	Concord Building	10/01/06	3,299,326				3,299,326	40	MO	S/L	1,031,039	82,483
301	Comcord Building 2	3/31/07	113,248				113,248	40	MO	S/L	33,975	2,831
307	Fujitsu Plasma TV's	5/31/07	54,444				54,444	5	MO	S/L	54,444	0
308	Mclane Property	3/31/06	315,000				315,000	0	--	Land	0	0
309	Capitalized Interest	3/31/06	37,210				37,210	40	MO	S/L	12,093	931
310	Chevrolet Express Cargo Van 2500	6/22/07	23,935				23,935	5	MO	S/L	23,935	0
312	LEED Certification	10/02/07	9,868				9,868	40	MO	S/L	2,590	247
313	Additional Misc	4/01/07	23,743				23,743	40	MO	S/L	7,123	594
1001	Volunteer Software - Blackbaud	6/30/08	2,970				2,970	5	MO	S/L	2,970	0
1002	NHCF Grant funded IT Equip	9/01/09	2,150				2,150	5	MO	S/L	2,150	0

AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE 03/19/2021 3:19 PM
02-6005322
FYE: 3/31/2020

Federal Asset Report

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per	Conv	Meth	Prior	Current
1003	HP Printer	1/22/10	2,190				2,190	5	MO	S/L	2,190	0
1004	Willard Pond Acquisition	2/13/09	86,710				86,710	0	--	Land	0	0
1005	Willard Pond Acquisition	2/03/10	45,601				45,601	0	--	Land	0	0
1006	Heritage Plumbing	7/29/09	19,984				19,984	10	MO	S/L	19,984	0
1007	Willard Pond Forestry Road	3/11/10	20,834				20,834	10	MO	S/L	18,924	1,910
1009	Computers	12/21/10	2,655				2,655	5	MO	S/L	2,655	0
1010	Air Conditioning Unit	3/26/12	6,200				6,200	10	MO	S/L	4,340	620
1011	Jennison Land Parcel	9/26/11	18,713				18,713	0	--	Land	0	0
1012	Hall Land Parcel	9/06/11	25,967				25,967	0	--	Land	0	0
1013	Hear Clear in PSNH Room	2/23/14	4,607				4,607	5	MO	S/L	4,607	0
1014	Ceramic Tile Bathroom	2/27/14	4,057				4,057	10	MO	S/L	2,062	406
1015	Tower Server	4/29/13	6,340				6,340	5	MO	S/L	6,340	0
1016	Samsung 7030 phone system	1/30/14	3,200				3,200	10	MO	S/L	1,653	320
1017	Carpets - McClane Building	2/18/14	9,773				9,773	10	MO	S/L	4,968	977
1018	Stoney Brook Land Parcel	3/24/14	289,568				289,568	0	--	Land	0	0
1021	HP Probook	1/21/15	1,050				1,050	5	MO	S/L	875	175
1022	Lawn Mower	7/09/14	1,350				1,350	5	MO	S/L	1,282	68
1023	2 anabat SD2 Bat Detectors	4/07/14	4,871				4,871	5	MO	S/L	4,871	0
1024	Interconnect Hardware	6/30/14	2,970				2,970	5	MO	S/L	2,822	148
1025	2 HP Probook 4540	4/01/14	1,312				1,312	5	MO	S/L	1,312	0
1026	3 HP Probook 4540	4/01/14	1,998				1,998	5	MO	S/L	1,998	0
1027	2 HP Probook 4540	4/01/14	1,312				1,312	5	MO	S/L	1,312	0
1028	4 Dell Latitude E6410	5/05/14	1,517				1,517	5	MO	S/L	1,492	25
1029	5 Dell Latitude E6410 Laptops	6/05/14	2,025				2,025	5	MO	S/L	1,957	68
1030	4 HP Laptops	4/17/14	2,640				2,640	5	MO	S/L	2,596	44
1031	Dell atitude E6410 Laptops	4/17/14	870				870	5	MO	S/L	855	15
1032	Thompson Walkway	11/03/15	40,208				40,208	10	MO	S/L	13,738	4,020
1033	Pellet Boiler	2/01/17	26,200				26,200	10	MO	S/L	5,677	2,620
1034	Thompson Boardwalk	11/01/16	11,418				11,418	10	MO	S/L	2,759	1,142
1035	Renovation Rental Space	2/01/17	8,802				8,802	10	MO	S/L	1,907	880
1036	MAC Sense Garden Patio	8/01/17	11,038				11,038	10	MO	S/L	1,840	1,103
1037	Ash Cottage Renovation	10/25/18	20,348				20,348	10	MO	S/L	848	2,035
1038	Weather Curtains	2/25/19	8,100				8,100	10	MO	S/L	68	810
1039	Pump Replacement	6/20/18	5,776				5,776	10	MO	S/L	433	578
1040	Dam Repairs	3/04/19	6,250				6,250	10	MO	S/L	52	625
1041	HVAC Control Software	3/28/19	7,645				7,645	5	MO	S/L	0	1,529
1042	Ash Cottage Renovations	9/30/19	27,030				27,030	10	MO	S/L	0	1,352
1043	Visitor Access	12/01/19	15,350				15,350	10	MO	S/L	0	512
1044	Website	12/13/19	5,000				5,000	3	MO	S/L	0	556
1045	Bean/Mcphail	3/05/20	26,286				26,286	10	MO	S/L	0	219
	Total Other Depreciation		14,174,651				14,174,651				2,880,901	152,651
	Total ACRS and Other Depreciation		14,174,651				14,174,651				2,880,901	152,651
	Grand Totals		14,174,651				14,174,651				2,880,901	152,651
	Less: Dispositions and Transfers		0				0				0	0
	Less: Start-up/Org Expense		0				0				0	0
	Net Grand Totals		14,174,651				14,174,651				2,880,901	152,651

Depreciation Adjustment Report

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences

There are no assets that meet the criteria of this report

AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE 03/19/2021 3:19 PM
02-6005322 **Future Depreciation Report FYE: 3/31/21**
FYE: 3/31/2020 **Form 990, Page 1**

Other Depreciation:

Asset	Description	Date In Service	Cost	Tax	AMT
1	3 Silk Farm Rd Original	9/15/72	24,500	0	0
2	1984 Addition	9/15/84	57,417	1,435	0
3	1985 Additions	9/15/85	549,488	13,737	0
4	1986 Additions	9/15/86	2,059	52	0
5	1987-88 Additions	9/15/87	2,896	73	0
6	1988-89 Additions	9/15/88	1,050	27	0
7	1989-90 Additions	9/15/89	2,395	60	0
8	1990-91 Additions	9/15/90	7,032	176	0
9	1992-93 Add (Well)	9/15/92	1,650	42	0
10	Willard Pond Cottage	9/15/91	5,370	0	0
11	11 Hebron Marsh House	9/15/79	27,000	0	0
12	Paradis Pt Nature Ct	9/15/66	27,000	0	0
13	Madison NH	9/15/89	45,000	1,286	0
15	FY95 Additions Signs	9/30/94	689	17	0
16	Pave & Drainage Parking Lot	9/15/95	1,935	0	0
17	Building Dahl	11/25/97	17,500	437	0
19	1983-84 Addition	9/15/83	9,299	0	0
20	1987-88 Additions	9/15/87	7,639	0	0
21	1988-89 Additions	9/15/88	4,700	0	0
22	1989-90 Additions	9/15/89	12,047	0	0
23	1990-91 Additions	9/15/90	10,962	0	0
24	1991-92 Additions	9/15/91	10,216	0	0
25	Sound System (Terns)	8/28/97	2,004	0	0
29	Water Tfeatment System	8/05/97	1,621	0	0
33	Well Tank	11/30/96	1,395	0	0
34	Assitions 98-99	1/04/99	9,790	0	0
35	Various Additions	9/15/80	11,291	0	0
36	1985-86 Additions	9/15/85	27,265	0	0
37	1986-87 Additions	9/15/86	4,506	0	0
38	1987-88 Additions	9/15/87	848	0	0
39	1986-87 Additions	9/15/86	1,288	0	0
40	Office Dividers	10/27/96	872	0	0
41	Electric Clinton St	12/03/97	3,555	0	0
43	1993-94 Additions	9/15/93	341,626	8,540	0
59	59 Woods Property	8/29/95	118,480	2,962	0
60	Misc Building Costs	5/21/98	18,122	453	0
61	Misc Building Costs	6/30/98	4,777	119	0
62	Misc Buiding Costs	7/31/98	31,794	795	0
63	Misc Building Costs	9/09/98	105,457	2,636	0
64	Misc Building Costs	9/30/98	59,920	1,498	0
65	Misc Building Costs	11/02/98	90,955	2,274	0
66	Misc Building Costs	12/11/98	218,288	5,457	0
67	Misc Building Costs	2/28/99	20,229	506	0
68	Additional Costs	11/06/98	236	6	0
69	Adjustment	3/09/99	246	6	0
79	Misc Furn & Fixtures	6/30/98	2,877	0	0
80	Misc Furn & Fixtures	2/28/99	2,634	0	0
81	Chairs/Table	2/28/99	655	0	0
82	Parking Lot Improvements	8/31/96	31,000	0	0
83	Plumbing	1/31/97	1,064	0	0
84	Auburn Property Improvement	9/30/97	16,145	0	0
85	Misc Prop Improvements	2/28/99	4,430	0	0
103	ASNH Miscellaneous	3/31/97	2,432,788	0	0
105	ASNH Boat Ramp Easement	3/31/98	15,000	0	0
106	ASNH Antrim Easement	3/31/97	148,040	0	0
107	Gillard	3/31/97	10,000	0	0
108	ASNH Meetinghouse Pond	3/31/97	34,702	0	0
109	ASNH Dahl	2/28/92	732,190	0	0
110	ASNH Land & Legal Dahl	3/31/98	547,385	0	0
111	ASNH Deering	3/31/98	95,628	0	0
112	ASNH Wrabel	3/31/97	30,181	0	0
113	ASNH Mara	3/31/97	24,722	0	0
114	Massabesic Land	3/31/98	312,740	0	0
115	ASNH Chase	3/31/97	11,350	0	0
125	New Building	6/08/99	8,771	220	0
128	Furniture Chairs/Table	6/15/99	1,674	0	0
129	Chain Fence	8/25/99	977	0	0

AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE 03/19/2021 3:19 PM

02-6005322 **Future Depreciation Report FYE: 3/31/21**

FYE: 3/31/2020 **Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
130	Wall Display Fixture	11/22/99	675	0	0
131	New Sign	1/31/00	6,000	0	0
132	Drilling & Pumping Well	8/18/99	4,070	0	0
137	ASNH LAnd Mckee	8/31/99	75,000	0	0
138	1995 Voyager	5/03/99	9,584	0	0
155	Freezer	3/06/01	660	0	0
159	Land Beauregard	1/29/01	89,317	0	0
160	LAnd Meding (Newbury)	10/01/00	110,000	0	0
165	Odirone Pond Land	12/08/00	75,000	0	0
166	Wyman Easement	4/14/00	1	0	0
167	Frost Trust Acquisition	9/30/01	24,700	0	0
168	Grant Brook	9/30/01	40,000	0	0
170	Property Improvements	9/30/01	5,770	0	0
176	Shane Easement	3/31/02	1	0	0
181	Farley Road Nashua NH	10/31/02	135,000	0	0
182	Land Nashua NH	10/31/02	19,000	0	0
189	Printer	1/15/04	3,015	0	0
191	Recabling	10/04/03	2,555	0	0
193	Land	2/02/04	107,000	0	0
194	GIS Software	2/17/04	995	0	0
195	GIS Extra Ram	12/02/03	1,091	0	0
196	GIS Workstation	12/01/03	10,463	0	0
197	Re Roof Office Bldg	11/15/03	6,333	0	0
198	Printer	2/18/04	1,123	0	0
199	Camp Software	10/08/03	2,925	0	0
200	GIS Software	3/24/04	4,000	0	0
201	Property Improvements	3/26/04	4,000	0	0
206	Bayview Road Land	2/10/04	320,000	0	0
213	Mortel Modular Tel System	6/18/04	18,545	0	0
214	APC 1000 for Phome System	6/18/04	312	0	0
215	PolyCom Unit	10/18/04	1,560	0	0
230	HP 2300n Printer	1/07/05	602	0	0
233	M&D Office Renovations	10/27/04	166	0	0
234	Buderus G-315/5 Boiler	10/08/04	13,743	0	0
235	2004 Toyota Prius	9/28/04	23,597	0	0
236	Infocus LP820	8/07/04	3,845	0	0
241	HP 2300n Printer	1/07/05	602	0	0
245	Tamposi	12/02/04	454,000	0	0
249	Owl Enclosure	8/29/04	295	0	0
250	Ash Cottage Sink	4/30/04	521	0	0
251	Ash Cottage Roof Material	5/08/04	1,662	0	0
252	Ash Cottage Roof Materials	6/08/04	1,245	0	0
253	Smoke Detectors	6/11/04	825	0	0
254	Electrical Work	6/04/04	2,500	0	0
255	Ash Cottage Roof	6/25/04	2,700	0	0
256	Ash Cottage Roof	7/15/04	1,985	0	0
257	Ash Cottage Furnishings	8/26/04	730	0	0
258	Kohler Toilet	9/01/04	364	0	0
259	Ash Cottage Furnishings	10/21/04	275	0	0
260	4- Kayaks & Paddles	3/10/05	1,329	0	0
261	Canoe	3/10/05	650	0	0
273	ASNH Dahl Sanctuary Addition	3/31/05	472,000	0	0
274	Morton Property	4/20/04	1,000	0	0
275	Stoney Brook	6/01/04	29,200	0	0
276	Hampton Salt Marsh	12/01/04	714,000	0	0
277	Deering (Dawson)	2/25/05	139,900	0	0
279	Tyrell Property Deering	8/12/05	122,100	0	0
282	ML 350 G3 rack server	4/26/05	5,022	0	0
291	GPS Hardware & Software	11/01/05	3,640	0	0
292	Avon Rover 310 Airdock	4/13/05	2,500	0	0
295	Water Treatment System for Ash Cottage	5/09/05	3,505	0	0
298	Morton Land	12/31/05	54,432	0	0
300	Concord Building	10/01/06	3,299,326	82,484	0
301	Comcord Building 2	3/31/07	113,248	2,831	0
307	Fujitsu Plasma TV's	5/31/07	54,444	0	0
308	Mclane Property	3/31/06	315,000	0	0
309	Capitalized Interest	3/31/06	37,210	930	0
310	Chevrolet Express Cargo Van 2500	6/22/07	23,935	0	0
312	LEED Certification	10/02/07	9,868	247	0
313	Additional Misc	4/01/07	23,743	593	0
1001	Volunteer Software - Blackbaud	6/30/08	2,970	0	0

AUDUBON AUDUBON SOCIETY OF NEW HAMPSHIRE 03/19/2021 3:19 PM
02-6005322 **Future Depreciation Report FYE: 3/31/21**
FYE: 3/31/2020 **Form 990, Page 1**

Asset	Description	Date In Service	Cost	Tax	AMT
1002	NHCF Grant funded IT Equip	9/01/09	2,150	0	0
1003	HP Printer	1/22/10	2,190	0	0
1004	Willard Pond Acquisition	2/13/09	86,710	0	0
1005	Willard Pond Acquisition	2/03/10	45,601	0	0
1006	Heritage Plumbing	7/29/09	19,984	0	0
1007	Willard Pond Forestry Road	3/11/10	20,834	0	0
1009	Computers	12/21/10	2,655	0	0
1010	Air Conditioning Unit	3/26/12	6,200	620	0
1011	Jennison Land Parcel	9/26/11	18,713	0	0
1012	Hall Land Parcel	9/06/11	25,967	0	0
1013	Hear Clear in PSNH Room	2/23/14	4,607	0	0
1014	Ceramic Tile Bathroom	2/27/14	4,057	406	0
1015	Tower Server	4/29/13	6,340	0	0
1016	Samsung 7030 phone system	1/30/14	3,200	320	0
1017	Carpets - McClane Building	2/18/14	9,773	978	0
1018	Stoney Brook Land Parcel	3/24/14	289,568	0	0
1021	HP Probook	1/21/15	1,050	0	0
1022	Lawn Mower	7/09/14	1,350	0	0
1023	2 anabat SD2 Bat Detectors	4/07/14	4,871	0	0
1024	Interconnect Hardware	6/30/14	2,970	0	0
1025	2 HP Probook 4540	4/01/14	1,312	0	0
1026	3 HP Probook 4540	4/01/14	1,998	0	0
1027	2 HP Probook 4540	4/01/14	1,312	0	0
1028	4 Dell Latitude E6410	5/05/14	1,517	0	0
1029	5 Dell Latitude E6410 Laptops	6/05/14	2,025	0	0
1030	4 HP Laptops	4/17/14	2,640	0	0
1031	Dell atitude E6410 Laptops	4/17/14	870	0	0
1032	Thompson Walkway	11/03/15	40,208	4,021	0
1033	Pellet Boiler	2/01/17	26,200	2,620	0
1034	Thompson Boardwalk	11/01/16	11,418	1,142	0
1035	Renovation Rental Space	2/01/17	8,802	881	0
1036	MAC Sense Garden Patio	8/01/17	11,038	1,104	0
1037	Ash Cottage Renovation	10/25/18	20,348	2,034	0
1038	Weather Curtains	2/25/19	8,100	810	0
1039	Pump Replacement	6/20/18	5,776	577	0
1040	Dam Repairs	3/04/19	6,250	625	0
1041	HVAC Control Software	3/28/19	7,645	1,529	0
1042	Ash Cottage Renovations	9/30/19	27,030	2,703	0
1043	Visitor Access	12/01/19	15,350	1,535	0
1044	Website	12/13/19	5,000	1,666	0
1045	Bean/Mcphail	3/05/20	26,286	2,629	0
	Total Other Depreciation		14,174,651	156,099	0
	Total ACRS and Other Depreciation		14,174,651	156,099	0
	Grand Totals		14,174,651	156,099	0

Form **990**

Event Income and Deduction Worksheet

Description FACILITY STORE

2019

Name AUDUBON SOCIETY OF NEW HAMPSHIRE

Taxpayer Identification Number 02-6005322

Use this worksheet to verify data entered for a specific activity on your form 990/990EZ

Income & Expense Summary:

1. Gross receipts or sales	1.	75,326
2. Advertising income	2.	
3. Circulation income	3.	
4. Other income	4.	
5. Returns and allowances	5.	
6. Contributions received	6.	
7. Total revenue. Add lines 1 through 6	7.	75,326
8. Cost of Goods Sold	8.	43,319
9. Employment Expense	9.	
10. Fees for services	10.	
11. Indirect Expense	11.	
12. Depreciation Expense	12.	
13. Exempt Activity Expense	13.	
14. Fundraising Expense	14.	
15. Total expenses. Add lines 8 through 14	15.	43,319
16. Net Income/Loss. Line 7 minus Line 15	16.	32,007

Expense Details - Cost of Goods Sold:

Beginning inventory	18,907
Purchases	63,546
Labor	
Section 263A costs	
Other costs	
Ending inventory	39,134
Total Cost of Goods Sold	43,319

Expense Details - Employment Expense:

Compensation of officers	
Other salaries and wages	
Pension plan contributions	
Other employee benefits	
Payroll taxes	
Total Employment Expense	

Expense Details - Fees for Services:

Management	
Legal	
Accounting	
Lobbying	
Professional fundraising	
Investment management	
Other	
Total Fees for Services	

Expense Details - Indirect Expense:

Advertising and promotion	
Office	
Printing/publication/postage	
Info technology/Maintenance	
Royalties & License Fees	
Occupancy/Real Estate Taxes	
Travel & Repairs	
Travel/entertainment (officials)	
Conferences/meetings	
Interest	
Insurance	
Total Indirect Expense	

Expense Details - Depreciation Expense:

On investment property	
On non-investment property	
Amortization	
Depletion	
Total Depreciation Expense	

Expense Details - Exempt Activity Expense:

Repairs and Maintenance	
Bad debts	
Taxes/licenses	
Charitable contributions	
Dividend recd deductions	
Readership costs	
Other expenses	
Total Exempt Activity Expense	

Expense Details - Fundraising Expense:

Cash prizes	
Non-cash prizes	
Rent and facility costs	
Food & beverages (Part II only)	
Entertainment (Part II only)	
Other direct expenses	
Total Fundraising Expense	

Information is indicated for use on Form 990-T schedule:

- ☐ Schedule E
- ☐ Schedule F
- ☐ Schedule G
- ☐ Schedule I
- ☐ Schedule J

Allocation of Expense to Program Service Accomplishments:

First	
Second	
Third	
All other	

Federal Statements

Taxable Interest on Investments

Description	Amount	Unrelated Business	Exclusion Code	Postal Code	Acquired after 6/30/75	US Obs ($ or %)
INTEREST AND DIVIDENDS	$ 120,846		14			
Total	$ 120,846					

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
PROFESSIONAL SERVICES	$ 76,943	$ 76,943	$	$
PROFESSIONAL SERVICES	51,577	51,577		
PROFESSIONAL SERVICES	13,183			13,183
PROFESSIONAL SERVICES	40,129		40,129	
Total	$ 181,832	$ 128,520	$ 40,129	$ 13,183

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
MISCELLANEOUS	$	$ 15,709	$ -15,709	$
Total	$ 0	$ 15,709	$ -15,709	$ 0

Federal Statements

Schedule A, Part III, Line 1(e)

Description	Amount
MEMBERSHIPS	$ 99,984
BEQUESTS	187,465
CONTRIBUTIONS	
LESS SCH B $327,990	467,014
TRUST ANONYMOUS	
Cash Contribution	223,750
CLARA BUTLER	
Cash Contribution	25,000
ELIZABETH JANEWAY	
Cash Contribution	30,000
FAITH MATTISON	
Cash Contribution	24,240
ANDREWS MCLANE	
Cash Contribution	25,000
Total	$ 1,082,453

Schedule A, Part III, Line 2(e)

Description	Amount
GRANTS	$ 211,167
SERVICE CONTRACTS	93,946
ENVIROMENTAL PROGRAMS	371,691
OTHER INCOME	122,299
FACILITY STORE	75,326
Total	$ 874,429

Schedule A, Part III, Line 10a(e)

Description	Amount
INTEREST AND DIVIDENDS	$ 120,846
Total	$ 120,846

Federal Statements

Cash - BOY

Code	Description	Amount
	CASH	$ 836,251
Total		$ 836,251

Cash - EOY

Description	Amount
CASH	$ 1,107,349
Total	$ 1,107,349

FACILITY STORE

Purchases

Description	Amount
PURCHASES	$ 43,319
LESS BEG INVENGTORY	-18,907
ADD END INVENTORY	39,134
Total	$ 63,546