Form 990

Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service ▶ Do not enter social security numbers on this form as it may be made public.

Open to Public

A	For the	2021 calendar v	ear, or tax year begin	www.irs.gov/Forn	1990 for instruction	CONTRACTOR	40			Inspection		
В		applicable:			05-	01 , 2021 , and	d endin	g	0	4-30 ,2022		
П	Address		C Name of organizationS	L LOUIS AUDUE	SON SOCIETY				D Emp	oloyer identification number		
Ħ.	Name cha		Doing business as							43-6052063		
	Initial retu		Tenanciani in companyana in a cara tenanciana and a cara	O. box if mail is not delive	ered to street address)	R	Room/suite		E Tele	phone number		
\equiv		rn/terminated	PO BOX 220227	MAN - MAN CANCELL TO LOS BINAS COMOS CONTROL MAN CONTROL DE	N W 00000 1600					(314)687-3942		
	Amended	2 00		ovince, country, and ZIP o					G Gross receipts			
\Box		n pending	SAINT LOUIS, I		7				\$	182,050		
Ц	Аррисацо	in pending	F Name and address of pr	incipal officer:			1	H(a) Is this a g	a group return for subordinates? The Yes No			
1	Tax-exem	opt status: X 501	->/2>				'	H(b) Are all s	ubordina	tes included? Yes No		
	Website:) (insert no.)	4947(a)(1) or	527		If "No," a	attach a I	ist. See instructions		
5377	200	rganization: X Corp	CLOUISAUDUBON.					H(c) Group e	xemption	number		
	rt I	Summary	poration Trust Ass	ociation Other		L Year of formation:	1946	M S	tate of le	gal domicile: MO		
1 6		ways to fold the same and	ho presuitatiania min				-					
	1.		he organization's miss			CREATE A CO	NUMMO	ITY COL	NECT	TION TO NATURE		
9		IRCOGH EDU	CATION AND COM	SERVATION AC	ROSS THE GREA	TER ST LOUI	IS REC	GION				
an		6.										
Jerr	2	Chook this have b	☐ : : #				1000					
Activities & Governance	3	Number of voting	if the organization	n discontinued its of					S.	L		
ంర			members of the gove						3	13		
ies	-	Total number of indep	endent voting member	s of the governing i	oody (Part VI, line 1b)			4	13		
Ξ			ndividuals employed ir						5	3		
Aci			olunteers (estimate if						6	75		
	7a	Not were letted b	usiness revenue from	Part VIII, column (C	C), line 12				7a	0		
-	D	b Net unrelated business taxable income from Form 990-T, Part I, line 11								0		
40		C4-ib4i						Prior Year		Current Year		
			grants (Part VIII, line					119	,660	132,361		
Ĭ			revenue (Part VIII, line					17	,668	29,667		
Revenue	10	Investment incom	e (Part VIII, column (A	A), lines 3, 4, and 7d	1)			13	,455	16,956		
ď				art VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)								
	12	l otal revenue - a	dd lines 8 through 11 (must equal Part VII	I, column (A), line 12)			153	798	178,407		
	13	Grants and simila	r amounts paid (Part I	X, column (A), lines	6	,409	5,613					
	14	Benefits paid to d	r for members (Part I)	K, column (A), line 4			0					
S	15	Salaries, other co	npensation, employee benefits (Part IX, column (A), lines 5-10)							109,038		
Expenses	16a	Professional fund	raising fees (Part IX,	column (A), line 11e)					0		
xpe			expenses (Part IX, col									
Ш	17	Other expenses (Part IX, column (A), lir	nes 11a-11d, 11f-24	e)				432	27,319		
	18	Total expenses.	Add lines 13-17 (must	equal Part IX, colur	nn (A), line 25)			152,	726	141,970		
		Revenue less exp	enses. Subtract line	18 from line 12				1,	,072	36,437		
Sor	20	Total assets (Daw	V line 40)			-	Beginni	ng of Currer		End of Year		
Sset	21		t X, line 16)					537,	735	546,050		
Net Assets or Fund Balances	22		art X, line 26)					New and the same	-X 300000	0		
	rt II	Signature E	d balances. Subtract	line 21 from line 20		• • • • • • • •	_	537,	735	546,050		
-			nat I have examined this return	m including accompanyir	as schedules and statement	and to the best of m	av kaavula	daa aad balla	£ 14.1-			
true,	correct, a	nd complete. Declaration	on of preparer (other than offi	cer) is based on all inform	nation of which preparer has	any knowledge.	ny knowied	uge and belle	T, IT IS			
		ANDDEW	T HOWE									
Sig	n	ANDREW Signature of of							De			
Her		THE RESERVE THE THE							Da	.e		
IICI		Type or print na	T HOYNE, TREAS	URER								
		Print/Type preparer's		Preparer's signature		Date			₩ I	PTIN		
Paid	4				n d				X if			
	parer	Karen Cope		Karen Copela	ilu	09-04-2022		self-empl	oyed	P00671283		
	Only	Firm's name		Services LLC			14.567	's EIN ►				
J36	Cilly	Firm's address	3217 Sun				Phor	ne no.				
Mari	the IDC	diagues this		ge MO 63049	about land					253-8420		
iviay	me IKS	uiscuss this retur	n with the preparer sh	own above? See in	structions					X Yes No		

	art III Statement of Program Service Accomplishments	43-6052063	Page 2
Po			
1	Check if Schedule O contains a response or note to any line in this Part III		П
	Bhelly describe the organization's mission:		
	TO CREATE A COMMUNITY CONNECTION TO NATURE THROUGH EDUCATION AND CONSERVATION	N ACROSS THE	GREATE
	ST LOUIS REGION		
2	Did the organization undertake any similar at the second s		
	Did the organization undertake any significant program services during the year which were not listed on the		
	prior Form 990 or 990-EZ?	· · · · L Yes	X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any program		
	services?		-
	If "Yes," describe these changes on Schedule O.	· · · . ∐ Yes	X No
4	Describe the organization's program service accomplishments for each of its three largest program services, as measure	al bu	
	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to o	d by	
	the total expenses, and revenue, if any, for each program service reported.	illers,	
4a	(Code:) (Expenses \$44,939 including grants of \$) (Revenue	\$ 22	,601)
	ST LOUIS AUDUBON'S BRING CONSERVATION HOME PROGRAM PROVIDES ON SITE HABITAT	RESTORATION	ADVICE
	AND CERTIFICATION FOR URBAN LANDOWNERS IN THE ST LOUIS REGION. THE PROGRAM A	DDRESSES NAT	TVE AND
	INVASIVE PLANTS, WATER AND CONSERVATION, AND WILDLIFE STEWARDSHIP PRACTICES	FOR THE BENE	FIT OF
	BIRDS, OTHER WILDLIFE AND THE COMMUNITY. THE PROGRAM ALSO INCLUDES UNIQUE EV	ENTS AND OUT	REACH
	PROGRAMMING TO PROVIDE A VARIETY OF OPPORTUNITIES FOR THE PUBLIC TO LEARN AB	OUT THE PRING	CIPLES
	AND PRACTICES OF SUSTAINABLE NATIVE PLANT HABITAT GARDENING. SOME OF THESE P.	ROGRAMS AND	EVENTS
	HAVE BEEN RESTRUCTURED TO VIRTUAL PLATFORMS FOR MOST OF THE FISCAL YEAR. DUE	TO ONGOING	COVID-19
	CONCERNS, HOMEOWNERS MAY CHOOSE WHETHER TO HAVE THEIR CONSULTATIONS ON A VIR	TUAL OR IN-P	ERSON
	BASIS, AND SOME COMMUNITY PRESENTATIONS HAVE BEEN VIRTUAL.		
4b	(Code:) (Expenses \$34,956 including grants of \$5,613) (Revenue		
	(1) OUR IN-CLASS PROGRAMMING HAS BEEN ON HOLD FOR TWO YEARS, BUT VIRTUAL PROGRAMMING HAS BEEN ON HOLD FOR TWO YEARS, BUT VIRTUAL PROGRAMMING HAS BEEN ON HOLD FOR TWO YEARS, BUT VIRTUAL PROGRAMMING HAS BEEN ON HOLD FOR TWO	Φ 6,	,265)
	WITH PROGRAMS ON BIRDS OFFERED THROUGH LOCAL PARTNERS (LIBRARY, AUDOBON CENT)	FRAMMING CON	TINUES,
	BIRD-OF-THE-WEEK FEATURE GOES OUT VIA EMAIL AND FACEBOOK EVERY WEEK. (3) CONS	EPWATTON AND	DEL ATE
	EDUCATIONAL GRANTS ARE OFFERED ANNUALLY IF THE RESTRICTED FUND HAS SUFFICIENT	TINCOME (4)	ME MUDI
	TO PROTECT BIRDS AND THEIR HABITAT BY ADVOCATING FOR BIRDS TO GOVERNMENT OFF:	CIALS AND A	GENCIES.
	IDENTIFYING AND PROTECTING IMPORTANT BIRD AREAS (IBA), FUNDING SPECIES-SPECI	IC PROJECTS	AND
	SUPPORTING CITIZEN SCIENCE EFFORTS. (5) WE LEAD BIRDING FIELD TRIPS AND BEGIN	NNER BIRD WAI	LKS ALL
	YEAR IN PARKS, REFUGES, AND OTHER PUBLIC SPACES. (6) WE COORDINATE VOLUNTEER	COMMUNITY WO	ORKDAYS
	TO RESTORE LOCAL WILDLIFE HABITAT.		
4c	(Code:) (Expenses \$ including grants of \$) (Revenue	•	
	(Revenue	\$)
ld	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
le	Total program service expenses ► 79,895		

Part IV

Checklist of Required Schedules

Yes No Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," 1 X 2 X Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to 3 X Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) 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 Rev. Proc. 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 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," 8 X 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 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 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," 11a X b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more 11b X c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more 11c d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets 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 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 X 12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete 12a X 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 13 X 14a 14a X 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 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 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other 16 X Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on 17 17 X 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on 18 X 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 19 X 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

Part IV Checklist of Required Schedules (continued)

				1000
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
	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	1		
04	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			
h	through 24d and complete Schedule K. If "No," go to line 25a	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
U	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
d	to defease any tax-exempt bonds?	24c		
25a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part.I			
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior	25a		X
	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	OFF		
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	25b		<u>x</u>
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member or any of these persons? If "Yes," complete Schedule L, Part.II.	26		v
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key	20		X
	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		х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L,			100
	Part IV instructions, for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
С	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? If			
20	"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			
31	conservation contributions? If "Yes," complete Schedule M	30		<u>x</u>
32	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part.1	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			
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		X
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I.	33		v
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,	33		<u>x</u>
	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		X
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		<u>x</u>
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and			
	19? Note: All Form 990 filers are required to complete Schedule O.	38	X	
Part				
	Check if Schedule O contains a response or note to any line in this Part V	• • • •		x
1-	Enter the number reported in Box 3 of Form 1006. Enter 0, if not applicable		Yes	No
1a b	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
C	Did the organization comply with backup withholding rules for reportable payments to vendors and			
	reportable gaming (gambling) winnings to prize winners?	1c	x	
Anna Sanda			42	

Page 5

ı a	continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		162	NO
	Statements, filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	x	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file.</i> See instructions.		A	
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 990-1 for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		Α
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,	OD.		
	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 ▶	70		Λ
	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		Α
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).	0.5		135
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		x
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			21
	required to file Form 8282?	7c		x
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		x
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		x
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		x
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		x
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		x
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		x
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		x
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
1	Section 501(c)(12) organizations. Enter:			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O.			
	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			
	Enter the amount of reserves on hand			
		14a		X
		14b		
	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.			
	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.			2 24
	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

Part VI

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

Se	ction 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		165	NO
	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 in line 1a, above, who are independent			
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, or trustees, or key employees to a management company or other person?	3		х
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:			
а	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			
2	the organization's mailing address? If "Yes," provide the names and addresses on Schedule Q	9		X
sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
10-	Did the association have been been as a few and a second of the second o		Yes	No
l0a	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,	100000		
14-	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
l1a	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.			
l2a	Did the organization have a written conflict of interest policy? If "No," go to line 13.	12a	Х	
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.	40-		
3	Did the organization have a written whistleblower policy?	12c	X	
4	Did the organization have a written document retention and destruction policy?	13 14	X	37
5	Did the process for determining compensation of the following persons include a review and approval by	14		Х
	independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	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 on Schedule O. See instructions.	100	A	
6a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement			
00700000	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	100		*
	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		
Sec	tion C. Disclosure			
7	List the states with which a copy of this Form 990 is required to be filed ▶			
8	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 ☐ Upon request ☐ Other (explain on Schedule O)			
9	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			
	KATHY DAILEY (419)357-8006, P.O. BOX 220227, SAINT LOUIS, MO 63122-0227			

Form	000	(2024)
	990	(2021)

ST LOUIS AUDUBON SOCIETY

43-6052063

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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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	Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/	(E) Reportable compensation from related organizations W-2/	(F) Estimated amount of other compensation from the
	hours for related organizations below dotted line)	Individual trustee or director	nstitutional trustee	Officer	Highest compensated employee Key employee		Former	1099-MISC/ 1099-NEC)	1099-MISC/ 1099-NEC	organization and related organizations
(1) TARA HOHMAN BOARD MEMBER	1.00	х						0	0	0
(2) STEPHANIE SCHROEDER	1.00									
BOARD MEMBER		x						0	0	0
(3) ELLEN HARMON	1.00									
BOARD MEMBER	1	x						0	0	0
(4) GAIL SAXTON	1.00									
BOARD MEMBER		x						0	0	0
(5) KAREN MEYER	10.00									
BOARD MEMBER		x						0	0	0
(6) PAM WILCOX BOARD MEMBER	1.00	x						0	0	0
(7) KATY FECHTER	1.00									
BOARD MEMBER		x						0	0	0
(8) LINDA TOSSING BOARD MEMBER	2.00	х						0	0	
(9) ANDREW HOYNE	5.00	Α		+			-	U	0	0
TREASURER		x		x				0	0	0
(10)JEAN FAVARA	5.00	11		A			_	U	U	U
VICE PRESIDENT OF CONSERVATION		х		x				0	0	0
(11)WILLIAM ROWE	5.00			-						
VICE PRESIDENT OF EDUCATION		x		x				0	0	0
(12)DENNIS MARTIN	10.00									
PRESIDENT		х		x				0	0	0
(13)MICHAEL MEREDITH SECRETARY	5.00	x		x				0	0	0
(14)									J	<u> </u>

		(A) Name and title		(C) Position (do not check more than one box, unless person is both ar officer and a director/trustee)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
(16)				Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former		1099-MISC/	orga	anization	
(17) (18) (19) (20) (21) (22) (23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	<u>(15)</u> _													
(18) (19) (20) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (29) (29) (20) (20) (21) (21) (22) (23) (24) (25) (25) (26) (27) (28) (29) (29) (29) (20) (20) (20) (21) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (28) (29) (29) (20) (20) (21) (21) (22) (23) (24) (25) (25) (26) (27) (27) (28) (28) (29) (29) (20) (20) (21) (21) (22) (23) (24) (25) (25) (25) (26) (27) (27) (28) (28) (29) (29) (20) (20) (21) (21) (22) (23) (24) (25) (25) (25) (26) (27) (27) (27) (28) (28) (29) (29) (20) (20) (20) (21) (21) (22) (23) (24) (25) (25) (26) (27) (27) (27) (28) (28) (29) (29) (20) (20) (20) (20) (20) (21) (21) (22) (23) (24) (25) (25) (26) (27) (27) (27) (28) (28) (29) (29) (20) (20) (20) (20) (20) (20) (20) (20	<u>(16)</u>													
(20) (21) (22) (23) (24) (25) (25) (26) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	<u>(17)</u> _													
(20) (21) (22) (23) (24) (25) (25) (25) (25) (25) (26) (27) (27) (27) (28) (29) (29) (29) (29) (29) (29) (29) (29	<u>(18)</u>													
(21) (22) (23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	<u>(19)</u>													
(22) (23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	<u>(20)</u>													
(23) (24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	<u>(21)</u>													
(24) (25) 1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) 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 Yes No	(22)													
1b Subtotal	(23)_													
1b Subtotal c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c) b 0 0 0 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 Yes No	<u>(24</u>)_													
c Total from continuation sheets to Part VII, Section A d Total (add lines 1b and 1c)	<u>(25)</u>													
d Total (add lines 1b and 1c)		2000/03/03/03/03/03/03/03/03/03/03/03/03/				•								
Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ► Yes No						• 0		• • •	• •	0	0			0
Yes No		Total number of individuals (including but not limite	ed to those li											
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated		reportable compensation non the organization											Yes	No No
	3				33 Tr					15				
employee on line 1a? If "Yes," complete Schedule J for such individual	4											3		X
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											5		v
for services rendered to the organization? If "Yes," complete Schedule J for such person	Secti		s, complete	Scried	uic o	101	Suci	pers	OII					Α
1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of	19,50	Complete this table for your five highest compensat												
compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.			ensation for t	the cal	enda	r ye	ar ei	nding	with	48.171	ization's tax year.	1000		
(A) (B) (C) Name and business address Description of services Compensation			s							Andrew Art Art War and Section	es		sation	
		338												
					_									
										· · · · · · · · · · · · · · · · · · ·				
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 ▶	2		Z				ted a	above)) who	0				

Part VIII Statement of Revenue

		Check if Schedule O c	contains a respons	se or r	note to any line in this	Part VIII			Γ
						(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under
	1a	Federated campaigns .		1a					sections 512–514
120	b			1b	29 404				
ints	C	_		1c	28,404				
Gra	d			1d	5,850				
ffs,		Government grants (cont		1e	24 000				
Contributions, Gifts, Grants and Other Similar Amounts	f	n renew was 1000m and 100		ie	34,200				
Sin		and similar amounts not i		45					
he gë				1f	63,907				
풀걸	g		100000000000000000000000000000000000000						
and				1g	\$ 5,697				
	h	Total. Add lines 1a-1f	• • • • • • •			132,361			
					Business Code				
e		BRING CONSERVATION	900099	25,043	25,043				
e Zi		EDUC AND NATURAL			900099	2,065	2,065		
S n	1	PTRS IN NATIVE LA	ANDSCPG		900099	2,559	2,559		
am Seve	d								
Program Service Revenue	е								
P		All other program service							
	g	Total. Add lines 2a-2f .				29,667			
		Investment income (includ							
		other similar amounts) .			14,902	14,902			
	4	Income from investment of							
	5	Royalties							
			(i) Real		(ii) Personal				
	6a	Gross rents		-	(ii) i eisoliai				
	2555	Less: rental expenses							
		Rental income or (loss)	6c						
	0.000	Net rental income or (loss)	,	11111					
	100000				0.0000	we we we			
	7a	Gross amount from	(i) Securition	es	(ii) Other				
		sales of assets	_	12/12/17					
		other than inventory	7a 2	054					
	D	Less: cost or other basis	1						
<u> </u>		and sales expenses	7b	-					
evenue		Gain or (loss)		054					
00	d	Net gain or (loss)		· <u>· ·</u>	▶	2,054			2,054
Other	8a	Gross income from fundral	ising						
ŏ		events (not including \$	5,850						
		of contributions reported o	on line						
		1c). See Part IV, line 18		8a	3,012				
	b	Less: direct expenses .		8b	3,643				
		Net income or (loss) from t		s .		(631)			(631)
		Gross income from gaming	CANAL SECTION OF THE PROPERTY						(002)
	0.000	activities, See Part IV, line	_	9a					
	b	Less: direct expenses .		9b					
		Net income or (loss) from							
		3337 65		-					
	10a	Gross sales of inventory, le returns and allowances .		100					
				10a					
		Less: cost of goods sold		10b					
K	С	Net income or (loss) from s	sales of inventory	٠					
	SUD				Business Code				
Sn	11a	MISC REVENUE			900099	54	54		
one one	b								
s elle	С								
Miscellanous Revenue	d	All other revenue							
2	е	Total. Add lines 11a-11d				54			
	- 2/7/AV	Total revenue. See instru	DKD1			178,407	44,623	0	1,423

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Form 990 (2021) ST LOUIS AUDUBON SOCIETY Part IX Statement of Functional Expenses

Fait ix Statement of Functional Expenses				
Section 501(c)(3) and 501(c)(4) organizations must complete a	Il columns. All other org	anizations must compl	ete 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,	(A)	(B)	(C)	
8b, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fur
1 Grants and other assistance to domestic organizations			general expenses	ex

Do n	Check if Schedule O contains a response or note to not include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
	b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising
1	Grants and other assistance to domestic organizations		expenses	general expenses	expenses
	and domestic governments. See Part IV, line 21	5,613	5,613		
2	Grants and other assistance to domestic	5,015	3,013		
	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				
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	87,381	40 100		
8	Pension plan accruals and contributions (include	07,301	48,108	24,915	14,358
2.50					
9	Other employee benefits	14 001	0.007		
0	Payroll taxes	14,971	8,324	4,299	2,348
1	Fees for services (nonemployees):	6,686	3,681	1,906	1,099
a	Management				
b	Legal				
C	Accounting				
d	We book that we will be seen and the seen an	951		951	
e	Lobbying				
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.)		The second second		
2	Advertising and promotion	7,451	6,271	1,180	
3	Office expenses	2,043		2,043	
4	Information technology	635		635	
5	Royalties				
6	Occupancy				
7	Travel				
8	Payments of travel or entertainment expenses	a de la companya de l			
_	for any federal, state, or local public officials				
9	Conferences, conventions, and meetings				
0	Interest				
1	Payments to affiliates				
2	Depreciation, depletion, and amortization				
3	Insurance	2,681		2,681	
4	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.)				
а	PROGRAM EXPENSES	6,399	6,399		
b	FUNDRAISING	2,800			2,800
C	MANAGEMENT AND GENERAL	2,860		2,860	
d	LANDSCAPE WORKSHOP	1,499	1,499		
е	All other expenses				
5	Total functional expenses. Add lines 1 through 24e	141,970	79,895	41,470	20,605
	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				
	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			П
79.00			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	18,322	1	23,816
	2	Savings and temporary cash investments	13,407	2	38,456
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net		4	
	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			
Assets		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		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a			
	b	Less: accumulated depreciation 10b		10c	
	11	Investments - publicly traded securities	506,006	11	483,778
	12	Investments - other securities. See Part IV, line 11	200,000	12	105,770
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	537,735	16	546,050
	17	Accounts payable and accrued expenses	337,733	17	340,030
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
(0	22	Loans and other payables to any current or former officer, director,			
Liabilities		trustee, key employee, creator or founder, substantial contributor, or 35%			
apil		controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third		24	
1		parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	0	26	0
		Organizations that follow FASB ASC 958, check here		20	
		and complete lines 27, 28, 32, and 33.			
Ses	27	Net assets without donor restrictions	332,594	27	349,105
lan	28	Net assets with donor restrictions	205,141	28	196,945
Ba	238-3	Organizations that do not follow FASB ASC 958, check here			2307313
		and complete lines 29 through 33.			
Net Assets or Fund Balances	29	Capital stock or trust principal, or current funds		29	
ts o	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
sse	31	Retained earnings, endowment, accumulated income, or other funds		31	
T A	32	Total net assets or fund balances	537,735	32	546,050
Š	33	Total liabilities and net assets/fund balances	537,735	33	546,050
	00	Total navinties and net assets/fully balances	331,135	33	340,030

	m 990 (2021) ST LOUIS AUDUBON SOCIETY	43-605	2063		age 1
Pa	art XI Reconciliation of Net Assets	13 003	2003		age I
-	Check if Schedule O contains a response or note to any line in this Part XI				X
1	rotal roveride (must equal Fait VIII, column (A), line 12)	1 1			,407
2	Total expenses (must equal Part IX, column (A), line 25)	2			,970
3	Revenue less expenses. Subtract line 2 from line 1	3		4000	,437
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4			,735
5	Net unrealized gains (losses) on investments	. 5			,389
6	Donated services and use of facilities	. 6		120	, 505
7	Investment expenses	. 7			
8	Prior period adjustments	. 8			267
9	Other changes in net assets or fund balances (explain on Schedule O)	. 9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line			-	
	32, column (B))	. 10		546	,050
Pa	rt XII Financial Statements and Reporting			310	,050
	Check if Schedule O contains a response or note to any line in this Part XII			700 0	
				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 on				
	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			2b		х
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a		-1		
	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		
	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?		За		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the		Ju		

Form 990 (2021)

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

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SCHEDULE A (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

			S AUDUBON SOCIETY					43-605206	3
Pa			Reason for Public Cha	rity Status. (A	II organizations mus	st comple	ete this	part.) See instruction	ons.
Γhe	org	ganiz	zation is not a private foundation b	ecause it is: (For lin	nes 1 through 12, check of	only one bo	ox.)		
1	Į	_ ^	church, convention of churches,	or association of o	churches described in se	ction 170	(b)(1)(A)(i).	
2	Į		school described in section 170						g)
3	Į		hospital or a cooperative hospital						
4	L	A	medical research organization o	perated in conjunc	tion with a hospital desc	ribed in se	ction 170	(b)(1)(A)(iii). Enter the	
		_	ospital's name, city, and state:					71 149 1010 1010 1010 1010 1010 1010 1010	
5	L	A	n organization operated for the be	nefit of a college o	or university owned or op	erated by a	a governm	ental unit described in	
			ection 170(b)(1)(A)(iv). (Comple						
6	Į		federal, state, or local governme						
7	L		n organization that normally recei			governmen	tal unit or f	rom the general public	
			escribed in section 170(b)(1)(A)(
8	Į		community trust described in see						
9	L		n agricultural research organizati						ege
		0	r university or a non-land-grant co	llege of agriculture	(see instructions). Enter	the name,	city, and s	tate of the college or	
			niversity:						
10	E	s	n organization that normally receiveceipts from activities related to its upport from gross investment inco	exempt functions, me and unrelated b	subject to certain excep business taxable income	tions; and (less sect	(2) no mor ion 511 tax	e than 33 1/3% of its	es
11	Γ		cquired by the organization after and open organization organized and open organized by the organization of the organization organ					•	
12	ř		n organization organized and ope						
	L		ne or more publicly supported org						
			ne box in lines 12a through 12d that						o). Check
	a	Г	Type I. A supporting organizat						
	•		the supported organization(s) the						ving
			supporting organization. You n				directors	or trustees of the	
ŀ	0		Type II. A supporting organiza				nnorted ar	raniantan/a) bu basia	
	•		control or management of the s						
			organization(s). You must cor			Jersons una	at control o	r manage the supporte	u
(Г	Type III functionally integrate			onnoction	with and	functionally intograted	ith
			its supported organization(s) (s						witti,
•	Ŀ		Type III non-functionally inte						ion(s)
	-		that is not functionally integrate						
			requirement (see instructions).					one and an actiona veries	
€	9	Г	Check this box if the organization			A STATE OF THE PARTY OF THE PAR		I. Type II. Type III	
			functionally integrated, or Type					,, .,p, .,p	
f		Ent	er the number of supported organi						
ç			vide the following information about		ganization(s).				
			e of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the o listed in you docum		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
۸١									
A)									
В)			-						1
C)									
D)									
E)									

Schedule A (Form 990) 2021 ST LOUIS AUDUBON SOCIETY 43-6052063 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) Part II (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) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total 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 The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 3 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) Public support. Subtract line 5 from line 4. Section B. Total Support Calendar year (or fiscal year beginning in) ▶ (a) 2017 (b) 2018 (c) 2019 (d) 2020 (e) 2021 (f) Total Amounts from line 4 7 8 Gross income from interest, dividends, payments received on securities loans. rents, royalties, and income from similar sources 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 13 First 5 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 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) % 15 Public support percentage from 2020 Schedule A, Part II, line 14 % 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this 16a box and **stop here.** The organization qualifies as a publicly supported organization ▶ b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check 17a 10%-facts-and-circumstances test - 2021. 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 b 10%-facts-and-circumstances test - 2020. 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

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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.)

	ion A. Public Support						
	ndar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.") .	82,285	117,185	106,546	122,034	94,365	522,415
2	Gross receipts from admissions, merchandise sold or services performed, or facilities					•	
	furnished in any activity that is related to the						
	organization's tax-exempt purpose	3,080	5,327	32,840	15,294	29,667	86,208
3	Gross receipts from activities that are not an		(a.d)				
	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					Λ.	
	organization without charge						
6	Total. Add lines 1 through 5	85,365	122,512	139,386	137,328	124,032	608,623
7a	Amounts included on lines 1, 2, and 3		•		207,020	121,032	000,023
	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.)						608,623
Secti	on B. Total Support						000,023
	dar year (or fiscal year beginning in)▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6	85,365	122,512	139,386	137,328	124,032	608,623
10a	Gross income from interest, dividends,	00,000		233,300	137,320	124,032	000,023
	payments received on securities loans, rents,		- 4				
	royalties, and income from similar sources	15,551	16,988	16,315	13,455	14,902	77,211
b	Unrelated business taxable income (less	20,002	20,300	10,313	13,133	14,502	//,211
	section 511 taxes) from businesses		- 1				
	acquired after June 30, 1975						
C	Add lines 10a and 10b	15,551	16,988	16,315	13,455	14,902	77,211
11	Net income from unrelated business	237332	207500	10,313	13,133	11,502	77,211
	activities not included on line 10b, whether						
	or not the business is regularly carried on		-				
12	Other income. Do not include gain or	7					
	loss from the sale of capital assets						
	(Explain in Part VI.)					ĺ	
13	Total support. (Add lines 9, 10c, 11,						
	and 12.)	100,916	139,500	155,701	150,783	138,934	685,834
14	First 5 years. If the Form 990 is for the org						
10.00	organization, check this box and stop here				(F)		
Secti	on C. Computation of Public Suppor						
15	Public support percentage for 2021 (line 8			3. column (f))	TWO IS NOT IN THE A TIME	15	88.74 %
16	Public support percentage from 2020 Sche		The state of the s			16	88.84 %
	on D. Computation of Investment Inc					1.0	00.01 /0
17	Investment income percentage for 2021 (li			v line 13 colum	nn (f))	17	11.00 %
18	Investment income percentage from 2020		A STATE OF THE STA			18	11.00 %
19a	33 1/3% support tests - 2021. If the organ						
1 Ja	17 is not more than 33 1/3%, check this bo						
b	33 1/3% support tests - 2020. If the organization		of the contract of the contrac	CONTRACTOR OF THE PROPERTY OF	and the second s	and the second s	
D	line 18 is not more than 33 1/3%, check this box						
20	Private foundation. If the organization did						
20	i iivate iouiiuation. Ii the organization die	THUL CHECK A L	OA OH HIIC 14,	ioa, or iou, cr	TOOK II IIS DOX a	na see manuel	0.10

Part IV **Supporting Organizations**

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

Section A	. All	Supporting	Organizations
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	ion A. All Supporting Organizations		V	
1	Are all of the organization's supported organizations listed by name in the organization's governing		Yes	No
	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	-		
	lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and	- Ou		
	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.	3с		
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 lines 4b and 4c 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 lines 5b and 5c 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			
7	benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i> Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor	6		-
•				
	(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).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line			
•	7? If "Yes," complete Part I of Schedule L (Form 990).	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 on 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 on line 9a) have an ownership interest in, or derive any personal benefit			
S	from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>	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			

10b

determine whether the organization had excess business holdings.)

rait	Supporting Organizations (continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b and			
_	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described in line 11a above?	11b		- Heranin - A
C	A 35% controlled entity of a person described in 11a or 11b above? If "Yes" to line 11a, 11b, or 11c,			
2 41	provide detail in Part VI.	11c		
Secti	ion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
	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 officers, 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		
Secti	ion 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		
Secti	on 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 line 2, above, did the organization's supported organizations have			F. (18)
	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	on 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	instr	uctio	ns).
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 instruc	tions).		
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	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 on line 2a, above, constitute activities that, but for the organization's			
7	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	Page		
	have engaged in these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. <i>Answer lines 3a and 3b below.</i>			
а	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? If "Yes" or "No," provide details in Part VI.	3a		
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each		B)E	
	of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.	3b		
	or the supported or garinedictio. If too, december it are trainer to played by the organization in the regard.		1	

Cabadula A	/F	0001	
Schedule A	(Form	9901	2021

ST LOUIS AUDUBON SOCIETY

43-6052063

Part		gan	izations	1 age C
1	☐ Check here if the organization satisfied the Integral Part Test as a qualifying	a trus	st on Nov. 20, 1970 (exp	lain in Part VI) See
	instructions. All other Type III non-functionally integrated supporting organ	izati	ons must complete Sect	ions A through F
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		(Optional)
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		
Sect	ion 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		
	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		
е	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 0.015 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 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Secti	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 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-functional	lly in	tegrated Type III suppor	ting organization
	(see instructions).			
EEA				Schedule A (Form 990) 202

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Organ	izations (continu	ed)	2063 Page 7
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish e	xempt purposes		1	
2	Amounts paid to perform activity that directly furthers exe	mpt purposes of support	ed		
	organizations, in excess of income from activity	2			
3	Administrative expenses paid to accomplish exempt purpo	oses of supported organi	zations	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required)	- provide details in Part	VI)	5	
6	Other distributions (describe in Part VI). See instructions.		1	6	
_ 7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which	the organization is resp	onsive		
	(provide details in Part VI). See instructions.	V		8	
9	Distributable amount for 2021 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount		41	10	
		(i)	(ii)	1.0	(iii)
Secti	on E - Distribution Allocations (see instructions)	Underdistributio	ns	Distributable Amount for 2021	
1	Distributable amount for 2021 from Section C, line 6		KALIN PROME		
2	Underdistributions, if any, for years prior to 2021				
	(reasonable cause required - explain in Part VI). See				
	instructions.				
3	Excess distributions carryover, if any, to 2021				
а	From 2016				
b	From 2017				
С	From 2018				
d	From 2019				
е	From 2020				
f	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
i	Carryover from 2016 not applied (see instructions)				
i	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2021 from				
	Section D, line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2021 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2021, 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 2021. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2022. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
а	Excess from 2017				
b	Excess from 2018				
C	Excess from 2019				

d Excess from 2020 e Excess from 2021

	prm 990) 2021 Page 8
Part VI	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 P. line 1o: Part V. Section D. lines 5. 6
	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.)

Schedule B (Form 990)

Schedule of Contributors

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or Form 990-PF.

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

Name of the organization

Employer identification number ST LOUIS AUDUBON SOCIETY 43-6052063 Organization type (check one):

Filers o	f:	Se	ection:			
Form 99	90 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 99	00.PE		501(c)(3) exempt private foundation			
· omi oc	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	П	30 (C)(3) exempt private foundation			
			4947(a)(1) nonexempt charitable trust treated as a private foundation			
			501(c)(3) taxable private foundation			
			by the General Rule or a Special Rule.			
instruction	only a section $501(c)(7)$, (8) ons.	3), or	r (10) organization can check boxes for both the General Rule and a Special Rule. See			
General	Rule					
X		pert	rm 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 ty) from any one contributor. Complete Parts I and II. See instructions for determining a ns.			
Special	Rules					
	regulations under section 16b, and that received fr	ns 50 rom a	od in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the 09(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or any one contributor, during the year, total contributions of the greater of (1) \$5,000; or 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						
must a	answer "No" on Part IV, lin	e 2,	covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it, 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 ling requirements of Schedule B (Form 990).	•		

SCHEDULE D (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public Inspection
Employer identification number

ST LOUIS AUDUBON SOCIETY 43-6052063 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (b) Funds and other accounts 1 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) 3 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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 Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year. Held at the End of the Tax Year 2a 2b Number of conservation easements on a certified historic structure included in (a) C Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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. 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: 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:

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				
b	Buildings				
C	Leasehold improvements				
d	Equipment				
е	Other				
Total.	Add lines 1a through 1e. (Column (d) must equal	Form 990, Part X, colur	mn (B), line 10c.)		

	(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		cost of end-of-year market value
) Closely-h	eld equity interests		
) Other			4
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	nn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments - Program Related.		
CIT VIII	Complete if the organization answered "Yes" on F	orm 990, Part IV, line	11c. See Form 990, Part X, line 1
	(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)			
otal. (Colum	n (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on F	orm 990. Part IV. line	11d. See Form 990, Part X, line 1
	(a) Description	1	(b) Book value
(1)			(b) Book value
(2)			
(3)		- The state of the	
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	n (b) must equal Form 990, Part X, col. (B) line 15.)		
Part X	Other Liabilities.		
dit X	Complete if the organization answered "Yes" on F line 25.	orm 990, Part IV, line 1	11e or 11f. See Form 990, Part X
		ok value	
(1) Federal i	ncome taxes	ON VAIUE	
(2)	TICOTHE LAXES		
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
tal. (Column	(b) must equal Form 990, Part X, col. (B) line 25.) . ▶	43.23	
-			
Liability for	uncertain tax positions. In Part XIII, provide the text of the footnot liability for uncertain tax positions under FASB ASC 740. Check h		

	e D (Form 990) 2021 ST LOUIS AUDUBON SOCIETY	43-6052063	Page 4
Pari	Reconciliation of Revenue per Audited Financial Statements With Revenue per	Return	rage 2
CONF	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	return.	
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments		
b	Donated services and use of facilities		
C	Recoveries of prior year grants		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
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	
Part	XII Reconciliation of Expenses per Audited Financial Statements With Expenses p	er 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	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities		
b	Prior year adjustments		
C	Other losses		
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)		
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	
Part	XIII Supplemental Information.		
	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; XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.	rait A, line	
		_	
			7

SCHEDULE O (Form 990)

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.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

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ST LOUIS AUDUBON SOCIETY 43-6052063 01. Members or stockholder classes and rights (Part VI, line 6) ALL CLASSES OF MEMBERS SHALL ENJOY ALL THE RIGHTS AND PRIVILEGES PERTAINING TO THE MEMBER OF BOTH THIS LOCAL SOCIETY AND THE NATIONAL AUDUBON SOCIETY INCLUDING THE RIGHT TO ELECT THE ST LOUIS AUDUBON SOCIETY BOARD MEMBERS AND TO VOTE ON ALL AMENDMENTS TO STRUCTURAL DOCUMENTS SUCH AS BYLAWS OR RESOLUTIONS 02. Member election for additional members (Part VI, line 7a) THE ANNUAL ELECTION SHALL BE BY THOSE ATTENDING THE ANNUAL MEMBERS MEETING. IF THERE IS BUT ONE CANIDATE FOR ANY OFFICE, ELECTION TO THAT OFFICE MAY BE BY ACCLAMATION. 03. Governing body decisions (Part VI, line 7b) THIS SOCIETY IS A MEMBERSHIP ORGANIZATION. MEMBERS GET TO VOTE TO APPROVE OR DISAPPROVE MEMBERS OF THE BOARD OF DIRECTORS. MEMBERS OF THE ST. LOUIS AUDUBON SOCIETY ELECT AND MAY REMOVE THE MEMBERS OF THE BOARD OF DIRECTORS, ELECT THE OFFICERS OF THE SOCIETY, AND MUST APPROVE AMENDMENTS OF THE SOCIETY'S BYLAWS. 04. Form 990 governing body review (Part VI, line 11) THE BOARD OF DIRECTORS REVIEWS THE TAX RETURN BEFORE IT IS FILED. 05. Conflict of interest policy compliance (Part VI, line 12c) BOARD MEMBERS ARE ASKED TO SIGN AND ACKNOWLEDGE CONFLICTS OF INTEREST WHEN THEY JOIN THE BOARD AND ANNUALLY THEREAFTER. 06. CEO, executive director, top management comp (Part VI, line 15a)

A PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES THE COMPENSATION OF EMPLOYEES

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07. Other officer or key employee compensation (Part VI, line	15b
A PERSONNEL COMMITTEE OF THE BOARD OF DIRECTORS DETERMINES TH	E COMPENSATION OF EMPLOYEES.
08. Governing documents, etc, available to public (Part VI, 1	ine 19)
THE ORGANIZATION'S TAX RETURN AND GOVERNING DOCUMENTS ARE AVA	ILABLE TO THE PUBLIC UPON
REQUEST AND ON THE ORGANIZATION'S WEBSITE.	
09. Cessation of, or significant change to, any program servi	ce (Part III, line 3)
SOME PROGRAMS HAVE BEEN CHANGED TO VIRTUAL FORMAT.	
10. Part V, response or note to any other line in Part V	
ALTHOUGH ST. LOUIS AUDUBON'S REGULAR PRACTICE IS TO NOTIFY DON	NORS OF THE VALUE OF
GOODS/SERVICES PROVIDED	
BY ST. LOUIS AUDUBON, IT DID NOT DO SO IN ALL CASES.	
11. Part XI, response or note to any line in Part XI	
PRIOR PERIOD ADJUSTMENTS	
- 1	