IRS e-file Signature Authorization for an Exempt Organization

	_		_			
or calendar year 2013, or fiscal year beginning	JUL	1	, 2013, and ending	JUN	30	_ ,20 <u>1</u>

Department of the Treasury	▶ Do not send to the IRS. Keep for your records.		
Internal Revenue Service	▶ Information about Form 8879-EO and its instructions is at www.irs.	gov/form8879eo.	
Name of exempt organization			identification number
AUDUBON SOCIE	TY OF PORTLAND	93-6	026088
Name and title of officer			
MICHAEL RYAN TREASURER			
	Return and Return Information (Whole Dollars Only)		
Check the box for the retu on line 1a, 2a, 3a, 4a, or 5	rn for which you are using this Form 8879-EO and enter the applicable amount a, below, and the amount on that line for the return being filed with this form wank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the	vas blank, then leave I	ine 1b, 2b, 3b, 4b, or 5b,
1a Form 990 check here	b Total revenue, if any (Form 990, Part VIII, column (A), line 12	2) 1b	5,477,990.
2a Form 990-EZ check he			
3a Form 1120-POL check	. \square		
4a Form 990-PF check he	. \square		
5a Form 8868 check here	. 🗀		•
Part II Declarat	ion and Signature Authorization of Officer		
(a) an acknowledgement of the date of any refund. If a debit) entry to the financial return, and the financial in 1-888-353-4537 no later the processing of the electron payment. I have selected a	der, transmitter, or electronic return originator (ERO) to send the organization's of receipt or reason for rejection of the transmission, (b) the reason for any delapplicable, I authorize the U.S. Treasury and its designated Financial Agent to it institution account indicated in the tax preparation software for payment of the stitution to debit the entry to this account. To revoke a payment, I must contain a 2 business days prior to the payment (settlement) date. I also authorize the ic payment of taxes to receive confidential information necessary to answer incompared a personal identification number (PIN) as my signature for the organization's electronic funds withdrawal.	ay in processing the renitiate an electronic function of the organization's federat the U.S. Treasury Financial institutions in quiries and resolve iss	eturn or refund, and (c) unds withdrawal (direct ral taxes owed on this inancial Agent at nvolved in the sues related to the
	•		93602
A lauthorize MC	DONALD JACOBS, P.C.	to enter m	Enter five numbers. bu
	ERO firm name		do not enter all zeros
is being filed wit enter my PIN on As an officer of indicated within program, I will e	on the organization's tax year 2013 electronically filed return. If I have indicate h a state agency(ies) regulating charities as part of the IRS Fed/State program, the return's disclosure consent screen. The organization, I will enter my PIN as my signature on the organization's tax y this return that a copy of the return is being filed with a state agency(ies) regulater my PIN on the return's disclosure consent screen.	, I also authorize the a year 2013 electronical lating charities as part	Inforementioned ERO to Ity filed return. If I have to the IRS Fed/State
Officer's signature	Date	>	
Part III Certifica	tion and Authentication		
	our six-digit electronic filing identification		
•	your five-digit self-selected PIN. 931394	413131 er all zeros	
	meric entry is my PIN, which is my signature on the 2013 electronically filed reting this return in accordance with the requirements of Pub. 4163 , Modernized as Returns.		
ERO's signature ► MCDO	NALD JACOBS, P.C. Date	>	
	ERO Must Retain This Form - See Instruction Do Not Submit This Form To the IRS Unless Requested		

LHA For Paperwork Reduction Act Notice, see instructions. $^{323051}_{10\text{-}01\text{-}13}$

Form **8879-EO** (2013)

Return of Organization Exempt From Income Tax

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

Open to Public Inspection

OMB No. 1545-0047

▶ Do not enter Social Security numbers on this form as it may be made public. Department of the Treasury ► Information about Form 990 and its instructions is at www.irs.gov/form990. Tax year beginning TUIL 1. 2013 and ending JUN 30, Internal Revenue Service

A 1	OI UII	e 20 is calefidat year, or tax year beginning 000 1, 2015 and	enuing U	ON 30, 2014				
B c	heck if pplicab	C Name of organization		D Employer identifi	ication number			
	Addre							
	Name chang	Doing Business As		93-6	026088			
	Initial return	,	Room/suite					
	Termi ated	SISI NW CORNELL ROAD			292-6855			
	Amen return	City or town, state or province, country, and ZIP or foreign postal code		G Gross receipts \$	6,391,089.			
	Application pendi	TORTHMOD, OR 57210		H(a) Is this a group r				
	ponu	F Name and address of principal officer: MERYL REDISCH		for subordinates				
		SAME AS C ABOVE		H(b) Are all subordinates i				
		empt status: X 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) o	or 527	1 ′	a list. (see instructions)			
		te: > WWW.AUDUBONPORTLAND.ORG		H(c) Group exemption				
	orm o	f organization: X Corporation Trust Association Other ► Summary	L Year	of formation: 1902	M State of legal domicile; OR			
	1	Briefly describe the organization's mission or most significant activities: TO PI	RОМОТЕ	THE ENITOYM	ENT			
e	'	UNDERSTANDING AND PROTECTION OF NATIVE BI						
Activities & Governance	2	Check this box if the organization discontinued its operations or dispose						
Veri	3			3	16			
Ĝ	4	Number of independent voting members of the governing body (Part VI, line 1b)			16			
<u>«</u> خ	5	Total number of individuals employed in calendar year 2013 (Part V, line 2a)			65			
ţie	6	Total number of volunteers (estimate if necessary)			400			
Ξį		Total unrelated business revenue from Part VIII, column (C), line 12			0.			
Ą		Net unrelated business taxable income from Form 990-T, line 34			0.			
		Tect difficiated business taxable mount offin 550 1, line 64		Prior Year	Current Year			
	8	Contributions and grants (Part VIII, line 1h)		1,298,799.	4,123,486.			
ηne	9	Program service revenue (Part VIII, line 2g)		856,241.	836,814.			
Revenue	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)		73,213.	60,287.			
æ	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		418,195.	457,403.			
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)		2,646,448.	5,477,990.			
	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)		0.	0.			
	14	Benefits paid to or for members (Part IX, column (A), line 4)		0.	0.			
"	4-	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)		1,465,426.	1,699,100.			
ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)		23,000.	0.			
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) 193,50	03.	•				
Ä	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,216,370.	1,390,564.			
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)		2,704,796.	3,089,664.			
		Revenue less expenses. Subtract line 18 from line 12		-58,348.	2,388,326.			
or		·		ginning of Current Year	End of Year			
Net Assets or - -und Balances	20	Total assets (Part X, line 16)		6,496,090.	9,122,989.			
Ass J Ba	21	Total liabilities (Part X, line 26)		619,950.	687,557.			
Net Funda	22	Net assets or fund balances. Subtract line 21 from line 20		5,876,140.	8,435,432.			
Pa	ırt II	Signature Block						
Unde	er pena	alties of perjury, I declare that I have examined this return, including accompanying schedules	s and stateme	ents, and to the best of m	y knowledge and belief, it is			
true,	corre	ct, and complete. Declaration of preparer (other than officer) is based on all information of wh	nich preparer	has any knowledge.				
Sigr	า	Signature of officer		Date				
Her	е	MICHAEL RYAN, TREASURER						
		Type or print name and title	1 -)	DTIN DTIN			
		Print/Type preparer's name Preparer's signature		Date Check [PTIN			
Paid		SANG AHN		self-emplo				
	arer	Firm's name MCDONALD JACOBS, P.C.		Firm's EIN ▶	93-0900579			
Use	Only	Firm's address 520 SW YAMHILL ST., STE 500			0.000.0004			
		PORTLAND, OR 97204		Phone no. 5 0	3-227-0581			
May	the I	RS discuss this return with the preparer shown above? (see instructions)			X Yes No			

Page 2

ı aı	Check if Schedule O contains a response or note to any line in this Part III
_	
1	Briefly describe the organization's mission: PROMOTES THE ENJOYMENT, UNDERSTANDING AND PROTECTION OF NATIVE BIRDS,
	OTHER WILDLIFE AND THEIR HABITATS WITH A FOCUS ON LOCAL AREAS AND THE
	PACIFIC NORTHWEST.
	FACIFIC NORTHWEST:
	Did the examination undertake any significant program continued during the year which were not listed as
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. Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
3	· · · · · · · · · · · · · · · · · · ·
_	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 \$1,052,969. including grants of \$) (Revenue \$16,333.)
	THE CONSERVATION PROGRAM PROMOTES THE CONSERVATION OF NATIVE WILDLIFE
	AND THEIR HABITATS IN OREGON AND THE PACIFIC NORTHWEST, AS WELL AS
	CONSERVATION OF HEALTHY URBAN WATERSHEDS FOR WILDLIFE AND PEOPLE IN THE
	METROPOLITAN PORTLAND REGION. THE PROGRAM MAINTAINS AND OPERATES THE
	BUSIEST WILDLIFE CARE CENTER (WWC) IN OREGON TO PROVIDE MEDICAL CARE
	AND REHABILITATION OF 3,000 INJURED OR ORPHANED NATIVE BIRDS AND OTHER
	NATIVE WILDLIFE. WWC ALSO HOUSES FEDERALLY PERMITTED, NON-RELEASABLE
	BIRDS FOR EDUCATIONAL PURPOSES.
	4 064 000
4b	(Code:) (Expenses \$1,061,273. including grants of \$) (Revenue \$802,329.)
	ENVIRONMENTAL EDUCATION PROGRAM PROVIDES GUIDED TOURS OF THE SANCTUARY,
	AS WELL AS HANDS-ON NATURAL HISTORY PROGRAMS, LOCAL, REGIONAL,
	NATIONAL, AND INTERNATIONAL FIELD TRIPS AND TOURS, NATURE CENTER
	EXHIBITS AND PROGRAMS TO LOCAL SCHOOL AND COMMUNITY GROUPS. HOSTED
	15,000 CHILDREN AND UNDERSERVED YOUTH.
	200 075
4c	(Code:) (Expenses \$
	AUDUBON SOCIETY OF PORTLAND SUPPORTS ITS 14,992 MEMBERS THROUGH A
	VARIETY OF OUTREACH AND EDUCATIONAL MATERIALS, INCLUDING A BI MONTHLY
	NEWSLETTER, MONTHLY ELECTRONIC NEWSLETTER, A WEBSITE, SOCIAL MEDIA, AND
	OFFERS PROGRAMS AND CLASSES TO MEMBERS AND THE GENERAL PUBLIC.
4d	Other program services (Describe in Schedule O.)
4 -	(Expenses \$ 187,842 · including grants of \$) (Revenue \$ 318,777 ·) Total program service expenses ▶ 2,510,159 ·
40	Total program service expenses ► 2,510,159.

332002 10-29-13

Form **990** (2013)

Form 990 (2013) AUDUBON SOCI 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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	Х	
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes." <i>complete</i>			
	Schedule D, Part III	8	Х	
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	Х	
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		Х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
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	1.0		
ŭ	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
۵	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		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	, , , , , , , , , , , , , , , , , , ,	12a		Х
h	Schedule D, Parts XI and XII Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D		12b		х
13	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 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,	174		
J	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		Х
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	עדי		
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	10		
.,	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	 '		
10		18	Х	
10	1c and 8a? If "Yes," complete Schedule G, Part II	10	-22	
19	,	40		Х
20-	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a 20b		-22
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		990	(0040)

Form 990 (2013) AUDUBON SOCIETY OF Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 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		
С	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? 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		Х
	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?	1		
	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	Х	
			000	(0010)

Form **990** (2013)

Form 990 (2013) AUDUBON SOCIETY OF PORTLAND 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	<u></u> .		<u></u>		
					Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a	44			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?	·····		1c		
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	65			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	uthori	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a		X
b	If "Yes," enter the name of the foreign country: ▶					
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	ccoun	ts.			
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
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orga	nization 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 contributi	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).		_			77
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser			7a		X
				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	ired	- .		Х
	to file Form 8282?	7.1		7с		
	If "Yes," indicate the number of Forms 8282 filed during the year	7d	0	7-		Х
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit or		?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit control of the organization received a contribution of qualified intellectual property, did the organization file for			7f		Λ
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g 7h		
н 8	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organizations or other vehicles, did the organizations or other vehicles, did the organizations. Does not of the organizations of the organiza			/11		
0	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at a			8		
9	Sponsoring organizations maintaining donor advised funds.	ury urin	during the year:			
	Did the organization make any taxable distributions under section 4966?			9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:					
	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:					
а	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.					
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.					
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				
	Enter the amount of reserves on hand	13c				7-
	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 in Schedule	e O		14b	000	/0C ! = '
				Form	990	(2013)

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 16			
	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 in 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		Х
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		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	Х	
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		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
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 in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(The social 2 register members as at person in regalited by the internal his order		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
	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		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
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	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	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	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	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		х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) as	ailable		
-	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	n: 🕨		
	ALEXANDER PATTERSON - 503-292-6855			
	5151 NW CORNELL ROAD, PORTLAND, OR 97210			

Form **990** (2013)

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.

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

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

(A) Name and Title	(B) Average hours per	(do box	not c	Pos heck	ition		one n an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer		Highest compensated employee		from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
(1) DAVID MANDELL	2.00								•	
PRESIDENT		Х		Х				0.	0.	0.
(2) JOHN OSBORN	2.00			l					•	•
VICE PRESIDENT		Х		Х				0.	0.	0.
(3) MICHAEL RYAN TREASURER	5.00	х		x				0.	0.	0.
(4) JAY WITHGOTT	2.00									
SECRETARY		Х		x				0.	0.	0.
(5) ADNENNE WOLFE-LOCKETT	2.00									
DIRECTOR		Х						0.	0.	0.
(6) TONY DEFALCO	2.00									
DIRECTOR		Х						0.	0.	0.
(7) MERRIL KEANE	2.00									
DIRECTOR		Х						0.	0.	0.
(8) MARY SOLARES	2.00									
DIRECTOR		Х						0.	0.	0.
(9) KOTO KISHIDA	2.00									
DIRECTOR		Х						0.	0.	0.
(10) ANNE SAMMIS	2.00									
DIRECTOR		Х						0.	0.	0.
(11) DAN ROHLF	2.00									
DIRECTOR		Х						0.	0.	0.
(12) TAMMY SPENCER	2.00									
DIRECTOR		Х						0.	0.	0.
(13) LORENA O'NEAL	2.00								_	_
DIRECTOR		Х						0.	0.	0.
(14) JIM RAPP	2.00									
DIRECTOR		Х						0.	0.	0.
(15) JENNIFER MILLER	2.00									
DIRECTOR		Х						0.	0.	0.
(16) RUTH MORTON	2.00								_	^
DIRECTOR	10.00	Х				_		0.	0.	0.
(17) MERYL REDISCH	40.00			χ,				102 006	^	^
EXECUTIVE DIRECTOR				X				103,886.	0.	0. Form 990 (2012)

332007 10-29-13

Form **990** (2013)

Section A. Officers, Directors, Tr		oloye	ees,			ghes	st C		· ′	$\overline{}$			
(A)	(B)			() Pos	C) ition	1		(D)	(E)			(F)	
Name and title	Average hours per	(do not check more than one box, unless person is both an						Reportable compensation	Reportable compensation			mated ount o	
	week					or/trus		from	from related			ther	
	(list any	ector						the	organizations		compe	ensati	on
	hours for	Individual trustee or director	96			ated		organization	(W-2/1099-MISC	(ز		n the	
	related organizations	ustee	truste		9	Suedi		(W-2/1099-MISC)			•	nizatio relate	
	below	lual tr	tional	١.	ploye	st com	_				organ		
	line)	Indivic	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organ	Latio	.0
		\Box	_	_	_					一			
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								100.006		\rightarrow			
1b Sub-total								103,886.		0.			0.
c Total from continuation sheets to Part								0.		0.			0.
d Total (add lines 1b and 1c)							<u> </u>	103,886.		0.			0.
2 Total number of individuals (including bu		ose	liste	d ab	oove	e) wh	o re	eceived more than \$100,	000 of reportable				1
compensation from the organization	•	—										'es	⊥ No
2. Did the organization list any former office	or director or tr	uotoc	. ko		مامم		امدا	highoot componented on	anlovoo on	Г		63	140
3 Did the organization list any former offic				•	•	•		•			3		Х
line 1a? If "Yes," complete Schedule J fo 4 For any individual listed on line 1a, is the										··	<u> </u>		
and related organizations greater than \$	•		•					·	•		4		Х
5 Did any person listed on line 1a receive of			•								7		
rendered to the organization? If "Yes." Co									idal for scrvices		5		Х
Section B. Independent Contractors	ompiete Scriedur	3	UI SL	ICIT I	JEIS	OII .							
Complete this table for your five highest	compensated inc	deper	nder	nt co	ontra	acto	rs th	nat received more than \$	100.000 of compe	nsati	ion from	1	
the organization. Report compensation for													
(A)	,			<u> </u>				(B)			(C)		
Name and busine	ss address	NC	ONE	S				Description of s	ervices	Co	ompens	ation	
				_									
2 Total number of independent contractors		ot lin	nited	to t			ted	above) who received mo	ore than				
\$100,000 of compensation from the orga	anization >				()						20	
										ſ	Form 99	9U (2()13)

Form 990 (2013) AUDUBON
Part VIII Statement of Revenue

		Check if Schedule O contr	nine a roenoneo	or note to any lin	o in this Part VIII			
		Crieck ii Scriedule O com	airis a response	or note to any in	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function	Unrelated business	Revenuè excluded from tax under
						revenue	revenue	sections 512 - 514
इ इ	1 a	Federated campaigns	1a					
Contributions, Gifts, Grants and Other Similar Amounts		Membership dues		238,519.				
S, G	С	Fundraising events	1c					
ar A		Related organizations						
s, G	е	Government grants (contributi	ons) 1e					
ion	f	All other contributions, gifts, gran						
ibut		similar amounts not included above	/e 1f 3 ,	884,967.				
do		Noncash contributions included in lines						
<u>အ လ</u>	h	Total. Add lines 1a-1f			4,123,486.			
				Business Code				
e	2 a	CLASSES, TOURS,	CAMPS	611600	836,814.	836,814.		
Program Service Revenue	b	·						
Se	С	:						
ran Sev	d	·						
og H	е	·						
هَ		All other program service reve		•	006 014			
		Total. Add lines 2a-2f			836,814.			
	3	Investment income (including			F7 F10			
	_	other similar amounts)			57,512.			57,512.
	4	Income from investment of tax						
	5	Royalties						
	•	Out to word	(i) Real 9,325.	(ii) Personal				
		Gross rents	0.					
		Less: rental expenses	9,325.					
		Rental income or (loss)			9,325.	9,325.		
		Net rental income or (loss) Gross amount from sales of	(i) Securities	(ii) Other	7,525.	7,323.		
	/ a		332,723.					
	h	Less: cost or other basis	332,723.					
	, ,	and sales expenses	329 948					
	_	Gain or (loss)	2,775.					
		Net gain or (loss)			2,775.			2,775.
		Gross income from fundraising			= 7			= 7
Jue	0 4	including \$	`					
š		contributions reported on line						
, a		Part IV, line 18		208,777.				
Other Revenu	b	Less: direct expenses		51,999.				
Ò		Net income or (loss) from fund			156,778.			156,778.
	9 a	Gross income from gaming ac	tivities. See					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam		<u></u>				
	10 a	Gross sales of inventory, less						
		and allowances	a	822,452.				
	b	Less: cost of goods sold	b	531,152.				
Ļ	С	Net income or (loss) from sale	s of inventory		291,300.	291,300.		
ļ		Miscellaneous Revenue	e	Business Code				
	11 a	·						
	b							
	С							
		All other revenue						
	е	Total. Add lines 11a-11d			F 455 000	1 125 122		015 065
332009	12	Total revenue. See instructions.		>	5,477,990.	1,13/,439.	0.	217,065.
10-29-	13							Form 990 (2013)

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 (**D**) Fundraising (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 92,817. 21,770. 5,285. 119,872. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,245,647. 964,502. 226,227. 54,918. Other salaries and wages 7 Pension plan accruals and contributions (include 41,255. 34,833. 6,422 section 401(k) and 403(b) employer contributions) 27,371.148,467. 175,838. Other employee benefits 9 92,467. 116,488. 19,285. 4,736. 10 Payroll taxes 11 Fees for services (non-employees): 5,855. 114,067. 102,109. 6,103. Management 11,772. 11,772. Legal 20,737. 20,737. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 2,660. 1,670. 830. 160. column (A) amount, list line 11g expenses on Sch O.) 9,334. 9,400. 35,001. 16,267. Advertising and promotion 12 298,155. 220,791. 15,763. 61,601. 13 Office expenses 21,167. 476. 18,187. 2,504. Information technology 14 Royalties 15 4,800. 4,800. 16 Occupancy 357,623. 331,979. 4,736. 20,908. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 39,533. 21,880. 17,559. 94. Conferences, conventions, and meetings 19 2,053. 2.053. 20 Payments to affiliates 21 67,352. 67,352. Depreciation, depletion, and amortization 22 35,433. 4,614. 30,819. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 203,319. 180,435. 16,166. 6,718. SUPPLIES VOLUNTEER AND MEMBERSHI 133,362. 61,469. 58,957. 12,936. 43,530. 40,402. 3,100. 28. REPAIRS AND MAINTENANCE -201,106. d ADMIN ALLOCATION 192,928. 8,178. e All other expenses 3,089,664. 2,510,159. 386,002. 193,503. Total functional expenses. Add lines 1 through 24e 25 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 if following SOP 98-2 (ASC 958-720)

Form **990** (2013)

Form 990 (2013)
Part X | Balance Sheet

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or not	e to an	y line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			10,368.	1	0.
	2	Savings and temporary cash investments			639,648.	2	721,564.
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net		110,477.	4	87,965.	
	5	Loans and other receivables from current and fo					
		trustees, key employees, and highest compensa	ted em	plovees. Complete			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualit					
		section 4958(f)(1)), persons described in section	-	·			
		employers and sponsoring organizations of sect					
Ø		employees' beneficiary organizations (see instr).		· ·		6	
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use			165,059.	8	198,605.
	9	Description of the second seco			61,455.	9	198,605. 53,989.
	10a	Land, buildings, and equipment: cost or other					
			10a	4,427,526.			
	b	basis. Complete Part VI of Schedule D Less: accumulated depreciation	10b	1,117,002.	3,314,458.	10c	3,310,524.
	11	Investments - publicly traded securities		2,194,625.	11	3,310,524. 4,750,342.	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line			13		
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			6,496,090.	16	9,122,989. 264,597.
	17	Accounts payable and accrued expenses	189,115.	17	264,597.		
	18	Grants payable			18		
	19	Deferred revenue			388,689.	19	383,714.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I				21	
S	22	Loans and other payables to current and former	officers	s, directors, trustees,			
Liabilities		key employees, highest compensated employee	s, and	disqualified persons.			
abi		Complete Part II of Schedule L				22	
Ξ	23	Secured mortgages and notes payable to unrela	ted thi	rd parties	42,146.	23	39,246.
	24	Unsecured notes and loans payable to unrelated	third p	parties		24	
	25	Other liabilities (including federal income tax, pa	yables	to related third			
		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			619,950.	26	687,557.
		Organizations that follow SFAS 117 (ASC 958		k here ▶ X and			
es		complete lines 27 through 29, and lines 33 an	d 34.		0.065.024		2 210 024
Juc	27			·····	2,867,834.	27	3,319,934.
3ak	28				2,084,592.	28	4,092,225.
둳	29	•			923,714.	29	1,023,273.
Ξ		Organizations that do not follow SFAS 117 (A	SC 958	3), check here			
٥		and complete lines 30 through 34.					
ets	30	Capital stock or trust principal, or current funds			30		
Ass	31	Paid-in or capital surplus, or land, building, or ed				31	
Net Assets or Fund Balances	32	Retained earnings, endowment, accumulated in			E 076 140	32	0 425 420
~	33				5,876,140.	33	8,435,432.
	34	Total liabilities and net assets/fund balances			6,496,090.	34	9,122,989.

Form **990** (2013)

Pai	t 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	5,47	7,9	<u>90.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,08		
3	Revenue less expenses. Subtract line 2 from line 1	3	2,38		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	5,87	<u>6,1</u>	<u>40.</u>
5	Net unrealized gains (losses) on investments	5	17	0,9	<u>66.</u>
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 in Schedule O)	9			0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,				
	column (B))	10	8,43	5,4	32.
Pai	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X 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:				
	X Separate basis Consolidated basis Both consolidated and separate basis				
С	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	$ldsymbol{ld}}}}}}}}}$
	If the organization changed either its oversight process or selection process during the tax year, explain in Sche	dule O.			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single	gle 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 require				
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b		
			Form	990	(2013)

332012

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

Pa	rt I	Reason		ity Status (All organiz	zatione mus		ta thic nod	t) San inst	ructions			0020		
									ructions.					
	organ		•	because it is: (For lines 1	•	•	•	•						
1	H	•		s, or association of churc		ibea in se	ection 1/U	(D)(T)(A)(I)						
2	\mathbb{H}			70(b)(1)(A)(ii). (Attach Sc	•									
3	\square	•	•	tal service organization of										
4				operated in conjunction	with a hosp	oital descr	ibed in se	ection 170	(b)(1)(A)(ii	i). Enter	the	hospita	l's nam	e,
		city, and stat												
5		-		benefit of a college or un	niversity ow	ned or op	erated by	a governn	nental unit	describe	ed ir	1		
		section 170	(b)(1)(A)(iv). (Compl	ete Part II.)										
6		A federal, sta	ate, or local governm	ent or governmental unit	described	l in sectio	on 170(b)(1)(A)(v).						
7	X	An organizati	ion that normally red	eives a substantial part o	of its suppo	ort from a	governme	ntal unit o	r from the	general p	oubl	lic desci	ibed in	
		section 170((b)(1)(A)(vi). (Comple	ete Part II.)										
8	Ш	A community	trust described in	section 170(b)(1)(A)(vi).	(Complete	Part II.)								
9		An organizati	ion that normally red	eives: (1) more than 33 1	/3% of its	support fr	om contrib	outions, m	embership	fees, an	d gr	ross rec	eipts fr	om
		activities rela	ited to its exempt fu	nctions - subject to certa	in exceptio	ons, and (2	2) no more	than 33 1	/3% of its	support f	rom	n gross i	nvestm	ent
		income and u	unrelated business t	axable income (less secti	ion 511 tax	() from bus	sinesses a	cquired by	the orgar	nization a	ıfter	June 30), 1975	
		See section	509(a)(2). (Complet	e Part III.)										
10		An organizati	ion organized and o	perated exclusively to tes	st for public	c safety. S	ee sectio	on 509(a)(4	1).					
11		An organizati	ion organized and o	perated exclusively for th	e benefit o	of, to perfo	rm the fun	ctions of,	or to carry	out the	pur	poses o	f one o	r
		more publicly	y supported organiza	ations described in section	on 509(a)(1) or sectio	n 509(a)(2)	. See see	ction 509(a)(3). Ch	eck	the box	that	
		describes the	e type of supporting	organization and comple	ete lines 11	e through	11h.							
		a Type I	I b 🗌 Т	ype II c T	ype III - Fur	nctionally	integrated		d Typ	e III - No	n-fu	nctional	ly integ	rated
е		By checking	this box, I certify that	at the organization is not	controlled	directly or	r indirectly	by one or	more disc	qualified p	oers	ons oth	er than	
		foundation m	nanagers and other t	han one or more publicly	supported	d organiza	tions desc	ribed in se	ection 509	(a)(1) or s	secti	ion 509(a)(2).	
f			-	tten determination from t		-				()()			, , ,	
			rganization, check tl											
g				organization accepted an										
9				lirectly controls, either ale									Yes	No
				upported organization?			porcorio a					11g(i)		
		-		n described in (i) above?								11g(ii)		
				person described in (i) o								11g(iii		
h				about the supported org								rig(iii	/	
"		i Tovide tile i	ollowing information	about the supported of	yai iizatioi i(3).								
		, , ,	(II) EIN		(iv) le the c	rganization	(v) Did yo	u notify the	(vi) l	s the	Ι		. ,	
(i)		of supported	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) lis	•	()	tion in col.	organizati	on in col.	(Vii	i) Amoun		netary
	orga	anization		above or IRC section	governing	-	_	r support?	(i) organiz U.S	red in the S.?		Sup	port	
				(see instructions))	Yes	No	Yes	No	Yes	No	ł			
					163	NO	163	140	163	140				
										1	_			
											_			
Γota	ı										l			

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

Schedule A (Form 990 or 990-EZ) 2013

332021 09-25-1

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1177941.	1160132.	1180175.	1298799.	4123486.	8940533.
2	Tax revenues levied for the organ-						
	ization'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	1177941.	1160132.	1180175.	1298799.	4123486.	8940533.
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	-						
	column (f)						
							6163382.
Sec	tion B. Total Support				T		
		(a) 2009	(b) 2010				(f) Total
7	Amounts from line 4	1177941.	1160132.	1180175.	1298799.	4123486.	8940533.
8	,						
	-						
	· · ·	40 450	44 204	25 505	50.000	FF F40	044 060
	****	40,473.	41,304.	35,587.	70,093.	57,512.	244,969.
9	Net income from unrelated business						
	activities, whether or not the						
	* *						
10	· ·						
	·	101 754	100 200	140 010	140 266		E40 000
		121,/54.	122,388.	148,812.	149,266.		
	• • • • • • • • • • • • • • • • • • • •		,			3	
	•	•	,				,040,304.
13		-			•		. —
Sec	organization, check this box and stop	c Support Per	centage				P
	-			olumn (fl)		14	63.36 %
100							
h							
~		•		•		•	
17a							
	1 Giffe, grants, contributions, and membrashing free sneewed, 10o 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 potion 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 (i) 6 Public support. Futlesclible 5 tow the 4 8 Gross income from interest, cividends, payments necessed on securities leans, rents, royalties and income from similar sources 9 Net income from interest, cividender, by supports. 1177941. 1160132. 1180175. 1298799. 4123486. 8940533. 1177941. 11601						
	_					-	
h							
		-					
							•
18	Private foundation. If the organization		• .	•	,		
		a.ao. o. 1001. a 1		., ,	, 3 and box a	55556.406.0116	

Schedule A (Form 990 or 990-EZ) 2013

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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. Publi	c Support						
Calendar year (or fiscal	l year beginning in) 🕨	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, co	ntributions, and						
membership fee	s received. (Do not						
include any "uni	usual grants.")						
2 Gross receipts f	rom admissions,						
	ld or services per-						
formed, or facilit any activity that							
	x-exempt purpose						
3 Gross receipts f	rom activities that						
are not an unrela	ated trade or bus-						
iness under sect	tion 513						
4 Tax revenues lev	vied for the organ-						
ization's benefit	and either paid to						
or expended on	its behalf						
5 The value of ser	vices or facilities						
furnished by a g	overnmental unit to						
the organization	without charge						
6 Total. Add lines	1 through 5						
	ed on lines 1, 2, and						
	disqualified persons						
b Amounts included on	lines 2 and 3 received						
from other than disqua							
exceed the greater of amount on line 13 for	\$5,000 or 1% of the the year						
	d 7b						
8 Public support							
Section B. Total				I.	1		
Calendar year (or fiscal	year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from li			• •				
10a Gross income from	om interest,						
	ents received on						
securities loans, and income fron	n similar sources						
b Unrelated busines	T I						
(less section 511 t	axes) from businesses						
acquired after Jun	e 30, 1975						
	nd 10b						
11 Net income from							
	luded in line 10b,						
whether or not t regularly carried							
12 Other income. D	o not include gain						
or loss from the							
13 Total support. (Ad	n Part IV.)						
• • • • • • • • • • • • • • • • • • • •	If the Form 990 is for	the organization's	first second thin	d fourth or fifth ta	ax vear as a section	n 501(c)(3) organiza	ation
=	and stop here	-			•		
Section C. Com	putation of Public	c Support Per	centage				············
	percentage for 2013 (li			olumn (f))		15	%
	percentage from 2012					16	%
Section D. Com	putation of Inves	tment Income				•	
	me percentage for 20			ne 13, column (f))		17	%
	me percentage from 2					18	%
	rt tests - 2013. If the						
	3%, check this box an						
	t tests - 2012. If the						
	ore than 33 1/3%, chec						
	ion. If the organization						

Schedule A

Identification of Excess Contributions Included on Part II, Line 5

2013

** Do Not File **

*** Not Open to Public Inspection ***

Contributor's Name	Total Contributions	Excess Contributions
ESTATE OF MARTHA ROSACKER	693,748.	499,194.
ESTATE OF WILLIAM M FOSTER	2,240,000.	2,045,446.
ESTATE OF NICHOLAS DODGE	419,690.	225,136.
ESTATE OF MARY E BAPTIST	201,929.	7,375.
Total Excess Contributions to Schedule A, Part II, Line 5		2,777,151.

Schedule B (Form 990, 990-EZ,

Department of the Treasury Internal Revenue Service

or 990-PF)

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
 ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 .

AUDUBON SOCIETY OF PORTLAND

OMB No. 1545-0047

93-6026088

2013

Name of the organization

Organization type (check one):

Employer identification number

Filers of:		Section:
Filers of: Section: Form 990 or 990-EZ \$\begin{array}{cccccccccccccccccccccccccccccccccccc		
Form 990 or 990-EZ \$\text{\$\text{\$\text{501(c)}(\$3\$})(enter number)\text{ organization}\$ \$\text{\$\text{4947(a)(1)}\text{ nonexempt charitable trust not treated as a private foundation}\$ \$\text{\$\text{\$\text{501(c)(3)}\text{ exempt private foundation}}\$ \$\text{\$\text{\$\text{4947(a)(1)}\text{ nonexempt charitable trust treated as a private foundation}}\$ \$\text{\$\text{\$\text{\$\text{4947(a)(1)}\text{ nonexempt charitable trust treated as a private foundation}}\$ \$\text{\$\text{\$\text{\$\text{\$\text{\$\text{40}\text{ organization}}}}\$ \$\$\text{		
		527 political organization
Form 990-F	PF	501(c)(3) exempt private foundation
		4947(a)(1) nonexempt charitable trust treated as a private foundation
		501(c)(3) taxable private foundation
	-	•
General Ru	ıle	
	-	
Special Ru	lles	
50	09(a)(1) and 170(b))(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2%
to	tal contributions o	of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or
4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization 527 political organization 54947(a)(1) nonexempt charitable trust treated as a private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation 501(c)(3) taxable private foundation 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(v)) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III. For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions of oruse exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., contributions of \$5,000 or more during the year		
	-	at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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 does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

AUDUBON SOCIETY OF PORTLAND

93-6026088

Part I	Contributors (see instructions). Use duplicate copies of Part I if add	litional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	THE ESTATE OF WILLIAM M FOSTER 5115 SE 35TH AVE PORTLAND, OR 97202	\$\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	THE ESTATE OF NICHOLAS DODGE 18321 SW PACIFIC HWY UNIT 216 TUALATIN, OR 97062	\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	THE ESTATE OF MARY E BAPTIST 8305 SE MONTEREY AVE STE 100 HAPPY VALLEY, OR 97086	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	- Nume, dudicos, una En 1 1	\$	Person Payroll Occupate Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

AUDUBON SOCIETY OF PORTLAND

93-6026088

Part II	Noncash Property (see instructions). Use duplicate copies of Par	t II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	990 990-F7 or 990-PF) (2013

Employer identification number

Name of organization

AUDUBON SOCIETY OF PORTLAND 93-6026088 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter Part III the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once.) Use duplicate copies of Part III if additional space is needed. (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

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

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

➤ See separate instructions. ➤ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

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

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

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 AUDUB	ON SOCIETY OF PORTLAND	93-6	026088 Page 2
Part II-A Complete if the organization (election under section 501	n is exempt under section 501(c)(3) and file	ed Form 5768	
A Check ► if the filing organization belong expenses, and share of exces	gs to an affiliated group (and list in Part IV each affiliated	group member's name	, address, EIN,
Limits on Lobi	oying Expenditures eans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence publ	ic opinion (grass roots lobbying)	12,508.	
b Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	6,655.	
c Total lobbying expenditures (add lines 1a and	19,163.		
		2,918,881.	
	s 1c and 1d)	2,938,044.	
f Lobbying nontaxable amount. Enter the amount		296,902.	
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.		
g Grassroots nontaxable amount (enter 25% of	line 1f)	74,226.	
h Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j If there is an amount other than zero on eithe	r 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)		
, ,	it made a section 501(h) election do not have to comp low. See the instructions for lines 2a through 2f on pa		
Lobi	bying Expenditures During 4-Year Averaging Period		

Lobbying Expenditures During 4-Year Averaging Period									
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total				
2a Lobbying nontaxable amount	266,786.	285,923.	274,564.	296,902.	1,124,175.				
b Lobbying ceiling amount (150% of line 2a, column(e))					1,686,263.				
c Total lobbying expenditures	4,550.	3,495.	26,825.	19,163.	54,033.				
d Grassroots nontaxable amount	66,697.	71,481.	68,641.	74,226.	281,045.				
e Grassroots ceiling amount (150% of line 2d, column (e))					421,568.				
f Grassroots lobbying expenditures			17,325.	12,508.	29,833.				

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 AUDUBON SOCIETY OF PORTLAND 93-60260 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 to lines 1a through 1i below, provide in Part IV a detailed description		(a)		(b)	
of the	e lobbying activity.	Yes	No	Amo	ount
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:				
а	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total. Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	501(c)(6).				
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
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 expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), section		3		
1	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'answered "Yes." Dues, assessments and similar amounts from members				
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).				
а	Current year		. 2a		
	Carryover from last year				
	Total				
3	4		ا م		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess			
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditure next year?		. 4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
Par	t IV Supplemental Information				
Prov	de 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	, line 2; ar	nd Part II-B,	line 1.
	complete this part for any additional information.	•			
					·

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

Pa	rt I Organizations Maintaining Donor Advised	I Funds or Other Similar Funds o	or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	riting that the assets held in donor advise	ed funds
	are the organization's property, subject to the organization's e	_	
6	Did the organization inform all grantees, donors, and donor ad		
	for charitable purposes and not for the benefit of the donor or		-
Pa	rt II Conservation Easements. Complete if the organization		
1	Purpose(s) of conservation easements held by the organization	n (check all that apply).	
	Preservation of land for public use (e.g., recreation or ed	ducation) Preservation of an hist	torically important land area
	Protection of natural habitat	Preservation of a certi	
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifie	ed conservation contribution in the form o	of a conservation easement on the last
	day of the tax year.		
			Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic structure		
d	Number of conservation easements included in (c) acquired af	fter 8/17/06, and not on a historic structur	re l
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, rele		
	year ▶		
4	Number of states where property subject to conservation ease	ement is located	
5	Does the organization have a written policy regarding the period	odic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it l	holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting, a	and enforcing conservation easements dur	ring the year
7	Amount of expenses incurred in monitoring, inspecting, and en	nforcing conservation easements during t	he year > \$
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	on's financial statements that describes th	ne organization's accounting for
	conservation easements.		
Pa	rt III Organizations Maintaining Collections of	Art, Historical Treasures, or Oth	ner Similar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (ASC	C 958), not to report in its revenue stateme	ent and balance sheet works of art,
	historical treasures, or other similar assets held for public exhi	bition, education, or research in furtheran	ce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that describ	es these items.	
b	If the organization elected, as permitted under SFAS 116 (ASC	C 958), to report in its revenue statement a	and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, edu	ucation, or research in furtherance of publ	lic service, provide the following amounts
	relating to these items:		
	(i) Revenues included in Form 990, Part VIII, line 1		> \$
2	If the organization received or held works of art, historical trea-		
	the following amounts required to be reported under SFAS 11	6 (ASC 958) relating to these items:	
а	Revenues included in Form 990, Part VIII, line 1		> \$
b	Assets included in Form 990, Part X		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2013

		SOCIETY OF							26088		age 2
Par	rt III Organizations Maintaining C	ollections of Art	, Histori	ical Trea	asures, o	r Other	Sim	ilar Asset	S (contin	ued)	
3	Using the organization's acquisition, accession	on, and other records	s, check ar	ny of the fo	ollowing that	are a sig	gnificar	nt use of its	collection	items	
	(check all that apply):										
а	X Public exhibition	d	Lo	an or exch	nange progra	ams					
b	Scholarly research	е	Ot	her							
С	X Preservation for future generations										
4	Provide a description of the organization's co	llections and explain	how they	further the	e organizatio	n's exem	npt pui	pose in Par	t XIII.		
5	During the year, did the organization solicit o										
	to be sold to raise funds rather than to be ma	aintained as part of th	e organiza	ation's coll	lection?				Yes	X	No
Par	rt IV Escrow and Custodial Arran								line 9, or		
	reported an amount on Form 990, Par										
1a	Is the organization an agent, trustee, custodi	an or other intermedi	ary for cor	ntributions	or other ass	sets not i	nclude	d			
	on Form 990, Part X?								Yes		No
b	If "Yes," explain the arrangement in Part XIII										
									Amount		
С	Beginning balance						1	С			
d	Additions during the year							d			
е	Distributions during the year							е			
f	Ending balance							f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?						Yes		No
	If "Yes," explain the arrangement in Part XIII.										
Par	rt V Endowment Funds. Complete i	f the organization ans	swered "Y	es" to For	m 990, Part	IV, line 10	0.				
		(a) Current year	(b) Prio	or year	(c) Two year	rs back	(d) Thr	ee years back	(e) Four	years	back
1a	Beginning of year balance	867,401.	7	70,216.	714	4,839.	1	,035,639		834,	052.
b	Contributions	24,913.		58,095.	87	7,048.		47,908		172,	889.
С	Net investment earnings, gains, and losses	90,802.		57,313.	-13	3,475.		-356,774		28,	698.
d	Grants or scholarships										
е	Other expenditures for facilities										
	and programs	64,173.		18,223.	18	8,196.		11,934	•		
f	Administrative expenses										
g	End of year balance	918,943.	8	67,401.	770	0,216.		714,839	. 1,	035,	639.
2	Provide the estimated percentage of the curr	ent year end balance	(line 1g, c	column (a))) held as:						
а	Board designated or quasi-endowment	50.56	_%								
b	Permanent endowment ► 48.83	%									
С	Temporarily restricted endowment ▶	.61%									
	The percentages in lines 2a, 2b, and 2c shou	ld equal 100%.									
За	Are there endowment funds not in the posses	ssion of the organiza	tion that a	re held an	d administer	ed for the	e orga	nization	_		
	by:									Yes	No
	(i) unrelated organizations								3a(i)		_X_
	783								3a(ii)		_X_
b	If "Yes" to 3a(ii), are the related organizations	listed as required or	Schedule	e R?					. 3b		
4	Describe in Part XIII the intended uses of the	organization's endov	vment fun	ds.							
Par	rt VI Land, Buildings, and Equipm	ent.									
	Complete if the organization answered	d "Yes" to Form 990,	Part IV, lir	ne 11a. Se	e Form 990,	Part X, I	ine 10.				
	Description of property	(a) Cost or ot	her	(b) Cost	or other	(c) A	ccumu	lated	(d) Bool	c value	Э
		basis (investm	nent)	basis (,	dep	oreciat	ion			
1a	Land				9,783.				2,369		
	Buildings			1,79	4,288.	9	49,	258.	845	5,03	30.
	Leasehold improvements										
	Equipment				8,955.	1		394.	8.5	5,56	51.
_	Othor			1.	<u> </u>		1	350	1 (1 1	50

Schedule D (Form 990) 2013

3,310,524.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c),)

Schedule D (Form 990) 2013 AUDUBON SOC	IETY OF POR	RTLAND	93-	-6026088	Page
Part VII Investments - Other Securities. Complete if the organization answered "Yes" to	to Form 000 Dort IV	line 11h See Form 000	Dort V. line 12		
(a) Description of Security or Category (including name of security)	(b) Book value		valuation: Cost or end	of-vear market v	/alue
(1) Financial derivatives	(1)			,	
(2) Closely-held equity interests					
(3) Other					
(A)					
(B)					
(C)					
(D)					
(E)					
(F)					
(G)					
(H)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)					
Part VIII Investments - Program Related.					
Complete if the organization answered "Yes" t					
(a) Description of investment	(b) Book value	(c) Method of	valuation: Cost or end	of-year market v	/alue
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)					
Part IX Other Assets.					
Complete if the organization answered "Yes" t	to Form 990 Part IV	line 11d See Form 990	Part X line 15		
	Description	, 1110 114. 0001 0111 000,	Tarry, into to.	(b) Book v	alue
(1)	· · · · · · · · · · · · · · · · · · ·			. ,	
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
Total. (Column (b) must equal Form 990, Part X, col. (B) line Part X Other Liabilities.	15.)		>		
Complete if the organization answered "Yes" t	to Form 990, Part IV,	, line 11e or 11f. See Forn	n 990, Part X, line 25.		
1. (a) Description of liability		(b) Book value			
(1) Federal income taxes					
(2)					
(3)					
(4)					

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

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Schedule D (Form 990) 2013

)	٦-	- 6	ი :	76	n:	2	R	Page 4	L
,		- 0	v 2	3 ()	v	c) (Pane -	г

Par	Reconciliation of Revenue per Audited Financial Stateme		Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				E 600 930
1				1	5,690,839.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	ا ء ا	170 066		
a	Net unrealized gains on investments		170,966. 41,883.	-	
b	Donated services and use of facilities	1 1	41,005.	-	
C	Recoveries of prior year grants Other (Describe in Part XIII.)			-	
d	Other (Describe in Part XIII.) Add lines 2a through 2d			2e	212,849.
е 3	•			3	5,477,990.
4	Subtract line 2e from line 1 Amounts included on Form 990, Part VIII, line 12, but not on line 1:				3,411,3300
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)				
				4c	0.
5	Add lines 4a and 4b Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	5,477,990.
	t XII Reconciliation of Expenses per Audited Financial Statem	ents With	Expenses per F		
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12a				
1	Total expenses and losses per audited financial statements			1	3,131,547.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
– a	Donated services and use of facilities	2a	41,883.		
b	Prior year adjustments	—	•		
c	Other losses	1 1			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	41,883.
3	Subtract line 2e from line 1			3	41,883. 3,089,664.
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.)	4b			
С	Add lines 4a and 4b			4c	0.
	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,089,664.
Par	t XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Par			; Part >	K, line 2; Part XI,
lines	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any add	ditional inforn	nation.		
DAE	m tit iine 4.				
PAR	T III, LINE 4:				
EXE	LANATION: THE ORGANIZATION MAINTAINS A CO	I.I.E.C.T.C	N OF BRUCE	нон	RSFALL.
	DIMENTION: THE ORGANIZATION MITHING IT CO	<u> </u>	N OI BROCE	1101	. COLITICAL
PAI	NTINGS. THESE PAINTINGS ARE OF BIRDS AND	OTHER V	VILDLIFE SO	THI	EY HELP
TNS	PIRE A LOVE OF NATURE. JOHN JAY AUDUBON W	AS MOST	r FAMOUS AS	AN	AVIAN
TT T	II CMD A MOD				
777	USTRATOR.				
PAR	T V, LINE 4:				
	II V, DIND I.				
EXE	LANATION: THE ORGANIZATION HAS NOT YET ES	TABLISE	HED A POLIC	Y F	OR
SPE	INDING FOR THE SANCTUARY STEWARDSHIP ENDOW	MENT AS	THE FUNDS	/AH	/E NOT
REA	CHED THE LEVEL REQUIRED TO BEGIN FUNDING.	SPENDI	ING FOR THE	TEI	N MILE
CRE	EK SANCTUARY ENDOWMENT IS IN ACCORDANCE W	ITH THE	E ENDOWMENT	AGI	REEMENT.

Schedule D (Form 990) 2013

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form-990.

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

Part I Fundraising Activities. required to complete this par	Complete if the organization answe	red "Y	es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not		
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a X Mail solicitations e X Solicitation of non-government grants b X Internet and email solicitations f X Solicitation of government grants c Phone solicitations g X Special fundraising events d X In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? x Yes No b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.								
(i) Name and address of individual or entity (fundraiser)	III) ACTIVITY I have cuctody I i					(vi) Amount paid to (or retained by) organization		
KATY EHRLICH - 2663 SW TALBOT	DEVELOPMENT OF LEGACY	Yes	No					
ROAD, PORTLAND, OR 97201	CIRCLE PROGRAM		Х	0.	12,889.	-12,889.		
Total			>		12,889.	-12,889.		
3 List all states in which the organization or licensing.	on is registered or licensed to solicit o	ontrib	utions	or has been notified	it is exempt from reg	gistration		
OR								

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

Schedule G (Form 990 or 990-EZ) 2013

332081 09-12-13

		ile G (Form 990 or 990-EZ) 2013 AUDUBON				6026088 Page 2
Pa	ırt					
		of fundraising event contributions and gr				s greater than \$5,000.
			(a) Event #1 WILD ARTS FESTIVAL	(b) Event #2 NATIVE PLANT SALE	(c) Other events NONE	(d) Total events (add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
ne			(616.113)[66)	(eventiges)	(10141111201)	
Revenue	1	Gross receipts	142,137.	53,288.		195,425.
	2	Less: Contributions				
	3	Gross income (line 1 minus line 2)	142,137.	53,288.		195,425.
	4	Cash prizes				
S	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
	7	Food and beverages	1,004.	264.		1,268.
		Entertainment				
	9	Other direct expenses		30,642.		50,731.
	1 -	Direct expense summary. Add lines 4 through		3373223	•	51,999.
	l	Net income summary. Subtract line 10 from I				143,426.
Pa	irt	III Gaming. Complete if the organization	answered "Yes" to Form	990, Part IV, line 19, or re	ported more than	
		\$15,000 on Form 990-EZ, line 6a.				
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev						
	1	Gross revenue				
ses	2	Cash prizes				
ect Expenses	3	Noncash prizes				
Direct	4					
		Rent/facility costs				
	5		Yes %	Yes %	Yes %	
	5	Other direct expenses	Yes%	Yes %	Yes %	
	5	Other direct expenses Volunteer labor	No No	No No	No No	
	6	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through	No No h 5 in column (d)	No No	No▶	
	6	Other direct expenses Volunteer labor	No No h 5 in column (d)	No No	No▶	
9	5 6 7 8	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	No h 5 in column (d)	No No	No▶	
	6 7 8	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	No h 5 in column (d) from line 1, column (d) ttes gaming activities:	No No	No	Yes No
а	5 6 7 8 En	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Iter the state(s) in which the organization operate organization licensed to operate gaming act	No h 5 in column (d) from line 1, column (d) tes gaming activities: ctivities in each of these s	No No	No	☐ Yes ☐ No
а	5 6 7 8 En	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7	No h 5 in column (d) from line 1, column (d) tes gaming activities: ctivities in each of these s	No No	No	Yes No
а	5 6 7 8 En	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Iter the state(s) in which the organization operate organization licensed to operate gaming act	No h 5 in column (d) from line 1, column (d) tes gaming activities: ctivities in each of these s	No No	No	Yes No
b	5 6 7 8 En	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Iter the state(s) in which the organization operate organization licensed to operate gaming act	No h 5 in column (d) from line 1, column (d) ttes gaming activities: ctivities in each of these s	states?	No	
a b 10a	5 6 7 8 En Is Is If '	Other direct expenses Volunteer labor Direct expense summary. Add lines 2 through Net gaming income summary. Subtract line 7 Iter the state(s) in which the organization operate organization licensed to operate gaming active.	No h 5 in column (d) from line 1, column (d) tes gaming activities: ctivities in each of these servoked, suspended or tele	states?	No	

Schedule G (Form 990 or 990-EZ) 2013

332082 09-12-13

Sch	edule G (Form 990 or 990-EZ) 2013 AUDUBUN SOCIETY OF PORTLAND 93-6	00200	100	Page 3
11	Does the organization operate gaming activities with nonmembers?	Y	es (No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		es	□ No
13	Indicate the percentage of gaming activity operated in:	I = I		
	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		70
14	The the flame and address of the person who prepares the organization's gaining/special events books and records.			
	Nama 🏲			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	📖 ነ	′ es	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party >			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
	, ideal cool p			
16	Gaming manager information:			
10	Garning manager information.			
	Nama 🏲			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	\	′ es	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line	nes 9 9	h 10l	15h
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	.00 0, 0.	.,	, ,
	100, 10, and 170, as applicable. Also complete this part to provide any additional information (see instructions).			
PA	RT I, LINE 2B, COLUMN (V):			
	III IIII III IIII IIII IIII IIII IIII IIII			
ΓV	PLANATION: AGREEMENT WITH FUNDRAISER PROVIDED FOR PAYMENT OF FE	ידים ד	27 (21	מב
ĿΛ	FLANATION: AGREEMENT WITH FUNDRAISER PROVIDED FOR PAIMENT OF FE	ies e	DAO.	ענ
~ 3T	AN AGREED HOOM HOURTY DAME AND DAWNENW OF DOGMAGE DYDENGES / A		٠,	
ON	AN AGREED UPON HOURLY RATE AND PAYMENT OF POSTAGE EXPENSES (\$4	.,540))•	
			_	
				<u> </u>

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Name of the organization

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

Attach to Form 990.

Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection **Employer identification number**

AUDUBON SOCIETY OF PORTLAND 93-6026088 Types of Property Part I (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or applicable amounts reported on noncash contribution amounts items contributed Form 990, Part VIII, line 1g Art - Works of art Art - Historical treasures 2 Art - Fractional interests 3 Books and publications 4 Clothing and household goods 5 Cars and other vehicles 6 Boats and planes 7 Intellectual property 8 Securities - Publicly traded 10 Securities - Closely held stock Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 15 Real estate - Residential Real estate - Commercial 16 Real estate - Other 17 18 Collectibles Food inventory 19 Drugs and medical supplies 20 Taxidermy 21 Historical artifacts 22 Scientific specimens 23 24 Archeological artifacts 75.933. DONOR ESTIMATE (MATERIALS/SUP) 25 26 Other 27 Other 28 Other Number of Forms 8283 received by the organization during the tax year for contributions Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for Х the entire holding period? 30a **b** If "Yes," describe the arrangement in Part II. Х Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? **b** If "Yes," describe in Part II. If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, 33

For Paperwork Reduction Act Notice, see the Instructions for Form 990. LHA

Schedule M (Form 990) (2013)

SCHEDULE O

Internal Revenue Service

(Form 990 or 990-EZ) epartment of the Treasury

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.

Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

Attach to Form 990 or 990-EZ.

Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE NATURE STORE SELLS ITEMS THAT HELP PROMOTE THE ENJOYMENT, UNDERSTANDING, AND PROTECTION OF THE NATURAL WORLD. EXPENSES \$ 187,842. INCLUDING GRANTS OF \$ 0. REVENUE \$ 318,777. FORM 990, PART VI, SECTION A, LINE 6: EXPLANATION: THE ORGANIZATION HAS APPROXIMATELY 14,992 MEMBERS WHO SUPPORT THE ORGANIZATION'S AVIAN VETERINARIAN SERVICES, RECEIVE THE NEWSLETTER, PARTICIPATE IN PROGRAMS AND VOTE FOR THE ORGANIZATION'S OFFICERS AND DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7A: EXPLANATION: THE ORGANIZATION HAS APPROXIMATELY 14,992 MEMBERS WHO SUPPORT THE ORGANIZATION'S AVIAN VETERINARIAN SERVICES, RECEIVE THE NEWSLETTER, PARTICIPATE IN PROGRAMS AND VOTE FOR THE ORGANIZATION'S OFFICERS AND DIRECTORS. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: A DRAFT IS CIRCULATED BY EMAIL TO THE BOARD FOR REVIEW AND COMMENT PRIOR TO SIGNING. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: THE ORGANIZATION'S BYLAWS REQUIRE ALL BOARD MEMBERS, DIRECTORS, AND STAFF TO DISCLOSE CONFLICTS OF INTEREST. SHOULD ANY BE FOUND, THE INDIVIDUAL MUST ABSTAIN FROM PARTICIPATION IN RELATED DECISION

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

IF NECESSARY RESIGN FROM THE BOARD.

Schedule O (Form 990 or 990-EZ) (2013)

AND,

AUDUBON SOCIETY OF PORTLAND	93-6026088
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: A COMMITTEE OF DIRECTORS OR OFFICERS WHO HAVE	PERSONNEL
BACKGROUNDS GATHER COMPENSATION INFORMATION FROM COMPARABL	E ORGANIZATIONS
IN THIS EMPLOYMENT REGION. THAT INFORMATION IS THEN PROVI	DED TO THE
EXECUTIVE COMMITTEE WHO ESTABLISHES THE EXECUTIVE DIRECTOR	'S SALARY.
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ANNUAL AUDITED FINANCIAL STATEMENTS ARE P	OSTED ON THE
ORGANIZATION'S WEBSITE.	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: THE PROCESS HAS NOT CHANGED FROM THE PRIOR YE	AR.

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

➤ See separate instructions.

Open to Public Inspection Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

OMB No. 1545-0047

(a)	(b)	(c)	(d)		(e)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)		me End-c	of-year assets	•		g
rt II Identification of Related Tax-Exempt Organizations during the tax year.	anizations Complete if the organization	answered "Yes" on Form 990,	Part IV, line 34 be	ecause it had	one or more	related tax-exen	npt	
Identification of Related Tax-Exempt Organizations during the tax year. (a) Name, address, and EIN of related organization	(b) Primary activity	answered "Yes" on Form 990, (c) Legal domicile (state or foreign country)	Part IV, line 34 be (d) Exempt Code section	(e) Public cha	arity Dir	related tax-exen (f) rect controlling entity	Section s	g) 512(b)(1: trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public cha	arity Dir	(f) rect controlling	Section s	trolled
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public cha	arity Dir	(f) rect controlling	Section sent	trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public cha	arity Dir	(f) rect controlling	Section sent	trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public cha	arity Dir	(f) rect controlling	Section sent	trolled tity?

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

Schedule R (Form 990) 2013

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

		,	I	1					•		
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total	Share of	Disprop	ortionate	Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	alloca	itions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	o
-											
-											
											+

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Direct controlling Type of entity Share of total Share of entity (C corp, S corp, income end-of-ye		(g) (h) Share of end-of-year assets			tion b)(13) rolled tity?
		country						Yes	No

X

10

Page 3 Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Yes No During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity **b** Gift, grant, or capital contribution to related organization(s) 1b c Gift, grant, or capital contribution from related organization(s) 1c d Loans or loan guarantees to or for related organization(s) 1d Х e Loans or loan guarantees by related organization(s) 1e Х f Dividends from related organization(s) 1f Х Sale of assets to related organization(s) 1g X h Purchase of assets from related organization(s) 1h Х Exchange of assets with related organization(s) Х j Lease of facilities, equipment, or other assets to related organization(s) 1i Х k Lease of facilities, equipment, or other assets from related organization(s) 1k 11 Performance of services or membership or fundraising solicitations for related organization(s) Х 1m m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n

p Reimbursement paid to related organization(s) for expenses 1p Reimbursement paid by related organization(s) for expenses 1q r Other transfer of cash or property to related organization(s) 1r **s** Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Name of related organization Method of determining amount involved Transaction Amount involved type (a-s) (1) NATIONAL AUDUBON SOCIETY C 13,129.

o Sharing of paid employees with related organization(s)

332163 09-12-13 Schedule R (Form 990) 2013 39

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners sec 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	Disprotion allocat	opor- ate ions?		(j) Genera manag partn	(k) Percentage
		GGanary	under Section 312-314)	Yes No	iniosinio	433313	Yes	No	(FOITH 1005)	Yes	NO
									0-1		

Schedule R (Form 990) 2013

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

► File a separate application for each return.

 \blacktriangleright Information about Form 8868 and its instructions is at $_{WWW.irs.gov/form8868}$.

OMB No. 1545-1709

If you a	re filing for an Automatic 3-Month Extension, complet	e only Pa	rt I and check this box			ightharpoons
•	re filing for an Additional (Not Automatic) 3-Month Ext	-				
	mplete Part II unless you have already been granted a					
	c filing (e-file) . You can electronically file Form 8868 if y					
required to	o file Form 990-T), or an additional (not automatic) 3-mon	nth extensi	ion of time. You can electronically fil	le Form 88	68 to request an	extension
of time to	file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for T	ransfers A	ssociated With C	Certain
Personal E	Benefit Contracts, which must be sent to the IRS in pape	er format (see instructions). For more details o	n the elect	ronic filing of this	s form,
	irs.gov/efile and click on e-file for Charities & Nonprofits.					
Part I	Automatic 3-Month Extension of Time.					
A corpora	tion required to file Form 990-T and requesting an autom	natic 6-mo	nth extension - check this box and c	complete		. —
Part I only						
	orporations (including 1120-C filers), partnerships, REMI	Cs, and tru	usts must use Form 7004 to request	an extensi	ion of time	
	nme tax returns.				er's identifying n	
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employe	r identification nu	ımber (EIN) or
orint					00 6006	000
ile by the	AUDUBON SOCIETY OF PORTLAND				93-6026	088
due date for iling your	Number, street, and room or suite no. If a P.O. box, se	ee instruct	ions.	Social se	curity number (S	SN)
eturn. See	5151 NW CORNELL ROAD					
nstructions.	City, town or post office, state, and ZIP code. For a fo	reign addr	ress, see instructions.			
	PORTLAND, OR 97210					
						01
Enter the	Return code for the return that this application is for (file	a separat	e application for each return)			0 1
		I	I			
Application	on	Return	Application			Return
s For		Code	Is For			Code
	or Form 990-EZ	01	Form 990-T (corporation)			07
orm 990-		02	Form 1041-A			08
	O (individual)	03	Form 4720 (other than individual)			09
Form 990-		04	Form 5227			10
	T (sec. 401(a) or 408(a) trust)	05	Form 6069			11
orm 990-	T (trust other than above)	06 ID CON	Form 8870			12
	ALEXANDER PATTE		DODMI AND OD 05	7210		
	oks are in the care of \triangleright 5151 NW CORNELL	ROAL		/ 2 1 0		
	one No. ► 503-292-6855		Fax No.			
	rganization does not have an office or place of business					
	s for a Group Return, enter the organization's four digit G					
oox ▶	. If it is for part of the group, check this box		ch a list with the names and EINs of		ers the extension	is for.
	quest an automatic 3-month (6 months for a corporation					
		t organizat	tion return for the organization name	ed above.	The extension	
IS fC	or the organization's return for:					
► L	calendar year or		TITN 20 201 <i>4</i>			
	\overline{X} tax year beginning \overline{JUL} 1, 2013	, an	d ending JUN 30, 2014		<u> </u>	
0 16.41-	and the second second section of the feet land the second second second			Fire all materials		
2 If th	e tax year entered in line 1 is for less than 12 months, ch	neck reaso	on: Initial return	Final retur	'n	
0- 16.41-	Change in accounting period		and a standard and a			
	is application is for Forms 990-BL, 990-PF, 990-T, 4720,	or 6069, 6	enter the tentative tax, less any	1		0.
	refundable credits. See instructions.		, notice debte one different d	3a	\$	<u></u>
	is application is for Forms 990-PF, 990-T, 4720, or 6069,					0.
	mated tax payments made. Include any prior year overpa			3b	\$	<u></u>
	ance due. Subtract line 3b from line 3a. Include your pay			1		0.
	using EFTPS (Electronic Federal Tax Payment System). S			3c	d Form 9970 FO	_
caution. Instruction	lf you are going to make an electronic funds withdrawal (ns	uirect det	org with this form 8000, see form 80	+ວა-EU an	u roiii 88/9-E0	ior payment

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions. 323841 12-31-13

Form **8868** (Rev. 1-2014)

TAX RETURN FILING INSTRUCTIONS

OREGON CT-12

FOR THE YEAR ENDING

JUNE 30, 2014

Prepared for	AUDUBON SOCIETY 5151 NW CORNELL ROAD PORTLAND, OR 97210
Prepared by	MCDONALD JACOBS, P.C. 520 SW YAMHILL, STE 500 PORTLAND, OR 97204
Amount due or refund	\$712.00
Make check payable to	OREGON DEPARTMENT OF JUSTICE.
Mail tax return and check (if applicable) to	CHARITABLE ACTIVITIES SECTION OREGON DEPARTMENT OF JUSTICE 1515 SW 5 TH AVE., SUITE 410 PORTLAND, OR 97201-5451
Return must be mailed on or before	May 15, 2015
Special Instructions	THE RETURN SHOULD BE SIGNED AND DATED.

Form

CT-12

For Oregon Charities

Charitable Activities Section Oregon Department of Justice

1515 SW 5th Avenue, Suite 410 VOIC Portland, OR 97201-5451 TTY Email: charitable.activities@doj.state.or.us FAX Website: http://www.doj.state.or.us

VOICE (971) 673-1880 TTY (800) 735-2900 FAX (971) 673-1882 2013

For Accounting Periods Beginning in:

3 e	Cuon I.	General informat	lion									
						ems and Correct ame or accounting per						
12	2857			Registration #	t:							
Α	UDUBON SC	OCIETY OF PORTLAND		Organization	Name:							
5	151 NW COF	RNELL ROAD		Address:								
Р	ORTLAND, C	OR 97210		City, State, Zi	p:							
(5	503) 292-685	5		Phone:		Fax:	Amended					
07	7/01/2013 - 0	6/30/2014		Email: Period Beginr	nina: / /	Period Ending:	/ /	Re	port?			
2.		ied public accountant audit yo ying notes, schedules, or other		If yes, attach a copy of	the auditor's report,		√	Yes	Nc			
3.	Oregon?	nization a party to a contract in the name of the fund-raising			ng machine or teleph	none fund-raising in		Yes	√ No			
4.	Has the organization or any of its officers, directors, trustees, or key employees ever signed a voluntary agreement with any government agency, such as a state attorney general, secretary of state, or local district attorney, or been a party to legal action in any court or administrative agency regarding charitable solicitation, administration, management, or fiduciary practices? If yes, attach explanation of each such agreement or action. See instructions.											
5. During this reporting period, did the organization amend its articles of incorporation, bylaws, or trust documents, OR did the organization receive a determination letter from the Internal Revenue Service relating to its tax-exempt status? If yes, attach a copy of the amended document or letter.												
6.	Is the orga	nization ceasing operations ar	nd is this the final repor	t? (If yes, see instruction	ons on how to close	your registration.)		Yes	√ No			
7.	Provide co	ntact information for the perso	n responsible for retair	ning the organization's I	records.							
		Name	Position	Phone	Phone Mailing Address & Email Address							
	ALEXANDE	R PATTERSON	FINANCE MANAGER	(503) 292-6855) 292-6855 5151 NW CORNELL ROAD, PORTLAND, OR 97210 xpatterson@audubonportland.org							
8.	not receive	ers, Directors, Trustees and k compensation. Attach addition "See IRS Form" may be enter	onal sheets if necessar	y. If an attached IRS for	orm includes substa	ntially the same comp	ensation	ven if t	they did ation,			
		(A) Name, ma	ailing address, daytime and email address	phone number		(B) Title & average weekly hours devoted to position	Compe	r \$0 if				
	Name: Address:	SEE ATTACHED IRS FORI	M 990									
	Phone:	[
	Email:	\										
	Name: Address:											
	Phone:	[
	Email:											
	Name:											
	Address: Phone:											
	Email:	\/										
		1				1						

From: Marsha Dayna < Dayna.Marsha@doj.state.or.us > on behalf of Charitable EMail

<charitable@doj.state.or.us>

Sent: Thursday, November 13, 2014 8:43 AM

To: mail

Subject: RE: Extension Request For Audubon Society of Portland, Oregon

Your extension request is acknowledged. You may assume the request is approved unless you hear otherwise from our office. If approved, the new date will 5/15/2015.

Dayna Marsha Charitable Activities Section/Department of Justice 1515 SW 5th Ave., Suite 410 Portland, OR 97201 (971) 673-1880

From: mail@mcdonaldjacobs.com [mailto:mail@mcdonaldjacobs.com]

Sent: Tuesday, November 11, 2014 9:52 AM

To: Charitable EMail

Subject: Extension Request For Audubon Society of Portland, Oregon

12857 936026088

180 days Sang Ahn

CPA

(503) 227-0581

Tue Nov 11 09:51:38 2014

*****CONFIDENTIALITY NOTICE****

This e-mail may contain information that is privileged, confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.

Sec	tion II.	Fee Calculation			
9.	(From Line 1	enue	Form 990-PF; Line 9 on Form 1041;	9. \$5,477,990.00	
10.	(See chart be	Fee			10. \$200.00
11.	(From Line 2	s or Fund Balances at End of the Reporting Period 2 (end of year) on Form 990, Line 21 on Form 990-EZ, or Part III, Line 10-PF; or see page 3 of CT-12 instructions to calculate.)	\$8,435,432.00		
12.	(Generally, fr II, Line 14b c	Assets Used to Conduct Charitable Activities om Part X, Line 10c on Form 990, Line 23B on Form 990-EZ or Part n Form 990-PF; or see page 4 of CT-12 instructions to calculate. See organization owns income-producing.)	\$3,310,524.00		
13.		ubject to Net Assets or Fund Balances Feeus Line 12. If Line 11 minus Line 12 is less than \$50,000, write \$0.)		13. \$5,124,908.00	
14.		s or Fund Balances Feeiplied by .0001. If the fee is less than \$5, enter \$0. Not to exceed \$1,00			14. \$512.00
15.	(If yes, the la	ling this report late? Yes No	he report is. See Instruction 15 for add		15.
16.		ount Due 0, 14, and 15. Make check payable to the Oregon Department of Justice.			16. \$712.00
17.	exception 990-N, bu be require	copy of the organization's federal 990 or other return and that Form 990 & 990EZ filers do not need to attach a contract that Total Revenue of \$25,000 or more, or Net Assets and to complete certain IRS forms for Oregon purposes on Purposes Only." If your organization files IRS Form	copy of their Schedule B. Also s or Fund Balances of \$50,00 only. If the attached return wa	o, if the organization did not fi 0 or more, see the instruction as not filed with the IRS, then	le with the IRS or filed a s as the organization may mark any such return as
Plea Sig Her	n	Under penalties of perjury, I declare that I have exam to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief, it is true, corresponding to the best of my knowledge and belief.		accompanying forms, schedu	les, and attachments, and
Detail		Signature of officer	Date	Title	
Paid Prep Use	arer's		Dut	(503) 227	-0581
	,	Preparer's signature	Date	Phone	
		SANG AHN Preparer's name	520 SW YAMHILL Address	, SUITE 500, PORTLAND, OI	R 97204
		i reparer s name	Auuless		

AUDUBON SOCIETY OF PORTLAND, OREGON

Audited Financial Statements

For the Year Ended June 30, 2014





INDEPENDENT AUDITOR'S REPORT

Jake Jacobs, CPA Shareholder

Susan J. Marks, CPA Shareholder

Mark A. Clift, CPA Shareholder

Karin S. Wandtke, CPA Shareholder

Sang Ahn, CPA Shareholder

Gerard DeBlois Jr., CPA Shareholder

Mary Strasdin, CPA Shareholder

Jill Oswald Shareholder

Anthony Almer, CPA Principal

Tyee Carr, CPA Principal

Dennis C. Johnson, CPA of counsel

To the Board of Directors
Audubon Society of Portland, Oregon

We have audited the accompanying financial statements of Audubon Society of Portland, Oregon (a nonprofit corporation), which comprise the statement of financial position as of June 30, 2014, and the related statements of activities, functional expenses, and cash flows for the year then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the organization's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the organization's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the financial position of Audubon Society of Portland, Oregon as of June 30, 2014, and changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

Report on Summarized Comparative Information

McDonald Jacobs, P.C.

We have previously audited Audubon Society of Portland, Oregon's 2013 financial statements, and we expressed an unmodified audit opinion on those audited financial statements in our report dated November 19, 2013. In our opinion, the summarized comparative information presented herein as of and for the year ended June 30, 2013 is consistent, in all material respects, with the audited financial statements from which it has been derived.

Portland, Oregon October 14, 2014

AUDUBON SOCIETY OF PORTLAND, OREGON STATEMENT OF FINANCIAL POSITION June 30, 2014

(With comparative totals for 2013)

		2014	 2013
ASSETS			
Cash and cash equivalents	\$	721,564	\$ 650,016
Accounts receivable		87,965	110,477
Inventory		198,605	165,059
Prepaid expenses		53,989	61,455
Investments		4,750,342	2,194,625
Property and equipment, net		1,307,414	1,311,348
Conservation property		2,003,110	 2,003,110
TOTAL ASSETS	\$	9,122,989	\$ 6,496,090
1011121100210			
LIABILITIES AND NET ASSET	S		
Liabilities:			
Accounts payable	\$	126,163	\$ 112,142
Accrued expenses		138,434	76,973
Deferred revenue		383,714	388,689
Note payable		39,246	 42,146
Total liabilities		687,557	619,950
Net assets:			
Unrestricted:			
Available for operations		1,104,170	650,650
Board designated		464,643	465,029
Conservation property and			
net property and equipment		1,751,121	 1,752,155
Total unrestricted		3,319,934	2,867,834
Temporarily restricted		4,092,225	2,084,592
Permanently restricted		1,023,273	 923,714
Total net assets		8,435,432	 5,876,140
TOTAL LIABILITIES AND NET ASSETS	\$	9,122,989	\$ 6,496,090

AUDUBON SOCIETY OF PORTLAND, OREGON STATEMENT OF ACTIVITIES

For the year ended June 30, 2014 (With comparative totals for 2013)

	2014								
			T	emporarily	Per	manently			2013
	Uı	nrestricted]	Restricted	Re	estricted		Total	Total
Support and revenue:									
Contributions and grants	\$	1,275,494	\$	2,508,627	\$	24,913	\$	3,809,034	\$ 1,034,932
Donated assets, materials and services		117,816		-		-		117,816	348,397
Memberships		238,519		-		-		238,519	217,822
Program service revenue		836,814		-		-		836,814	856,241
Special events revenue, net of direct costs									
of \$51,999 for 2014 and \$54,451 for 2013		156,778		-		-		156,778	149,266
Sales, net of cost of goods sold of									
\$531,152 for 2014 and \$485,995 for 2013		291,300		-		-		291,300	256,118
Investment income		48,782		3,695		5,035		57,512	70,093
Net realized/unrealized investment gain		102,127		2,003		16,282		120,412	51,275
Change in perpetual trust		-		-		53,329		53,329	28,674
Other income		9,325		-		-		9,325	14,541
Net assets released from restrictions:									
Satisfaction of purpose and time restrictions		506,692		(506,692)		-		-	-
Total support and revenue		3,583,647		2,007,633		99,559		5,690,839	3,027,359
Expenses:									
Program services:									
Conservation		886,293		_		_		886,293	901,922
Education		1,061,273		_		-		1,061,273	966,285
Nature Store		187,842		_		-		187,842	157,455
Membership and publications		208,075		_		-		208,075	195,881
Sanctuary		203,852		_		-		203,852	202,367
Total program services		2,547,335		_		_		2,547,335	2,423,910
Management and general		390,450		_		_		390,450	366,048
Fundraising		193,762		_		_		193,762	212,084
Total expenses		3,131,547		-				3,131,547	3,002,042
Change in net assets		452,100		2,007,633		99,559		2,559,292	25,317
Net assets:									
Beginning of year		2,867,834		2,084,592		923,714	_	5,876,140	5,850,823
End of year	\$	3,319,934	\$	4,092,225	\$	1,023,273	\$	8,435,432	\$ 5,876,140
· J	_		_				_		

AUDUBON SOCIETY OF PORTLAND, OREGON STATEMENT OF FUNCTIONAL EXPENSES

For the year ended June 30, 2014 (With comparative totals for 2013)

Program Services Management Membership Nature and Total and 2014 2013 Publications Sanctuary Conservation Education Store Program General Fundraising Total Total 90,040 \$ Salaries and related expenses 452,879 \$ 503,107 \$ 124,927 \$ 151,656 \$ 1,322,609 \$ 318,060 \$ 62,399 \$ 1,703,068 \$ 1,465,425 Professional and contract services 226,200 20,361 12,800 24.745 284,106 42.163 48,422 374,691 571,975 21,919 82,209 Operating expenses 33,842 13,415 9,123 3,910 42,243 1,217 125,669 93,824 Facilities 8,012 187 3,392 2,675 2,269 59,260 75,608 18,850 94,645 116,853 Communications 2,237 8,192 12,300 50,345 78 73,152 31,333 32,797 137,282 110,026 Materials and supplies 34,432 146,771 3,223 1,038 10,480 195,944 45,448 19,554 260,946 234,854 Transportation and travel 917 17,523 294,815 3,440 8 316,703 4,736 20,908 342,347 330,857 Volunteer and membership 420 473 2,750 9,970 433 4,076 21,371 100 25,547 67,352 Depreciation 67,352 68,258 19,331 33,959 192,928 Administration allocation 115,368 71,464 (47,194)(201,106)8,178 886,293 \$ 1,061,273 \$ 187,842 \$ 208,075 203,852 2,547,335 390,450 193,762 Total expenses \$ 3,131,547 \$ 3,002,042

AUDUBON SOCIETY OF PORTLAND, OREGON STATEMENT OF CASH FLOWS

For the year ended June 30, 2014 (With comparative totals for 2013)

	2014	2013
Cash flows from operating activities:		
Change in net assets	\$ 2,559,292	\$ 25,317
Adjustments to reconcile change in net assets to net		
cash provided by operating activities:		
Depreciation	67,352	68,258
Net realized/unrealized gain on investments	(120,412)	(51,275)
Change in perpetual trust	(53,329)	(28,674)
Contributions restricted for endowment	(24,913)	(58,095)
(Increase) decrease in:		
Accounts receivable	22,512	71,431
Inventory	(33,546)	(9,543)
Prepaid expenses	7,466	(13,523)
Increase (decrease) in:		
Accounts payable and accrued expenses	75,482	(7,108)
Deferred revenue	(4,975)	20,609
Net cash provided by operating activities	2,494,929	17,397
Cash flows from investing activities:		
Purchase of property and equipment	(63,418)	(17,742)
Purchase of investments	(2,714,699)	,
Proceeds from investments	332,723	18,226
Net cash used in investing activities	(2,445,394)	
Cash flows from financing activities:		
Contributions restricted for endowment	24,913	58,095
Principal payments on note payable	(2,900)	(2,900)
Net cash provided by financing activities	22,013	55,195
rvet easit provided by intarients activities	22,013	00,170
Net increase (decrease) in cash and cash equivalents	71,548	(232,229)
Cash and cash equivalents - beginning of year	650,016	882,245
Cash and cash equivalents - end of year	\$ 721,564	\$ 650,016
Supplemental cash flow information:		
Cash paid for interest	\$ 2,053	\$ 2,198

1. THE ORGANIZATION

Audubon Society of Portland, Oregon (ASoP or the Organization) is a nonprofit organization founded in 1902. ASoP promotes the enjoyment, understanding and protection of native birds, other wildlife and their habitats with a focus on the local area and the Pacific Northwest. ASoP is affiliated with the National Audubon Society but is financially and structurally independent. ASoP's support is provided by a combination of contributions and memberships, grants, program revenues and Nature Store sales.

ASoP's headquarters is located on Cornell Road in Portland, Oregon. Facilities include the Nature Store, administrative offices, the Wildlife Care Center, and the Sanctuary. ASoP also owns the Marmot Cabin and Sanctuary located near Sandy, Oregon and Ten Mile Creek Sanctuary on the Oregon coast.

ASoP's programs are as follows:

Conservation: Promotes the conservation of native birds, wildlife and their habitats in Oregon and the Pacific Northwest, as well as conservation of healthy urban watersheds for wildlife and people in the Metropolitan-Portland region. Maintains and operates the Wildlife Care Center (WCC) to provide medical care and rehabilitation of injured or orphaned native birds and other native wildlife. WCC also houses federally-permitted non-releasable birds for educational purposes.

Education: Provides guided tours in the Sanctuary, as well as hands-on natural history programs, local, regional, national and international field trips and tours, nature center exhibits, and programs to local school and community groups.

Nature Store: Sells items that help promote the enjoyment, understanding and protection of the natural world.

Membership and Publications: Distributes a newsletter, "Warbler", and offers programs and classes to members and the general public.

Sanctuary: A 150-acre, free-to-the-public Nature Sanctuary is a showcase for native flora and fauna. It has over four miles of forested hiking trails available to the general public.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Presentation

ASoP reports information regarding its financial position and activities according to three classes of net assets: unrestricted net assets, temporarily restricted net assets, and permanently restricted net assets.

- Unrestricted net assets represent net assets not subject to donor-imposed stipulations.
- Temporarily restricted net assets represent net assets subject to donorimposed stipulations that may or will be met by actions of ASoP or the passage of time.
- Permanently restricted net assets represent net assets subject to donorimposed stipulations that neither expire with the passage of time nor can be fulfilled or otherwise removed by actions of ASoP.

Cash and Cash Equivalents

For purposes of the statement of cash flows, ASoP considers all highly liquid investments available for current use with maturities of three months or less at the time of purchase to be cash equivalents.

Accounts Receivable

Accounts receivable are reported at the amount management expects to collect on balances outstanding at year-end. Based on an assessment of the credit history with those having outstanding balances and current relationships with them, management has concluded that realization losses on balances outstanding at year-end will be immaterial.

Inventory

Inventory consists primarily of merchandise held for sale by ASoP's Nature Store and is carried at the lower of cost or market value. Cost is determined using an average cost method.

Investments

Investments are carried at fair value.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

Property and Equipment

Acquisitions of property and equipment in excess of \$1,000 are capitalized. Property and equipment purchased are recorded at cost. Donated assets are reflected as contributions at their estimated values on the date received.

Depreciation

Depreciation of buildings, equipment and furniture is calculated using the straight-line method over the estimated useful lives of the assets which range from 3 to 40 years.

Program Service Revenue and Deferred Revenue

Program service revenue is recognized in the period the program is conducted. Funds received in advance are recorded as deferred revenue.

Restricted and Unrestricted Revenue and Support

Contributions received are recorded as unrestricted, temporarily restricted, or permanently restricted support, depending on the existence and/or nature of any donor restrictions. Donor-restricted support is reported as an increase in temporarily or permanently restricted net assets, depending on the nature of the restriction. When a restriction expires (that is, when a stipulated time restriction ends or purpose restriction is accomplished), temporarily restricted net assets are reclassified to unrestricted net assets and reported in the statement of activities as net assets released from restrictions.

Memberships are recorded as revenue when received.

Donated Assets and Services

Donations of property, equipment, materials and other assets are recorded as support at their estimated fair value at the date of donation. Such donations are reported as unrestricted support unless the donor has restricted the donated asset to a specific purpose.

ASoP recognizes donated services that create or enhance nonfinancial assets or that require specialized skills, are provided by individuals possessing those skills, and would typically need to be purchased if not provided by donation.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

Donated Assets and Services, Continued

During the years ended June 30, 2014 and 2013, donated assets, materials and services consisted of the following:

	 2014		2013
Program services:			
Materials and supplies	\$ 75,933	\$	46,045
Veterinary services - conservation	41,883		40,200
Legal services - conservation	 _		262,152
Total donated facilities, materials and services	\$ 117,816	\$	348,397

In addition, many individuals volunteer a substantial amount of time and perform a variety of tasks that assist the Organization with programs, development and administrative duties. These volunteer services represent approximately 43,100 hours of donated time for 2014 and 41,500 hours for 2013 and are not recognized as contributions in the financial statements since the recognition criteria were not met.

Contributions of Long-Lived Assets

Contributions of equipment and other long-lived assets without donor-imposed stipulations concerning the use of such assets are reported as unrestricted revenues. Contributions of cash or other assets to be used to acquire equipment or other long-lived assets with such donor stipulations are reported as temporarily restricted revenue. The restrictions are considered to be released at the time of acquisition of such long-lived assets.

Expense Allocation

The costs of providing various programs and other activities have been summarized on a functional basis in the statements of activities and functional expenses. Accordingly, certain costs have been allocated among the programs and supporting services benefited.

Advertising

ASoP uses advertising to promote its programs among the audiences it serves. Advertising costs are expensed as incurred. During the years ended June 30, 2014 and 2013, advertising expenses approximated \$34,000 and \$27,000, respectively.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, Continued

Income Tax Status

Audubon Society of Portland, Oregon is a nonprofit corporation exempt from federal and state income tax under section 501(c)(3) of the Internal Revenue Code and applicable state law. No provision for income taxes is made in the accompanying financial statements because ASoP has no activities subject to unrelated business income tax.

The Organization follows the provisions of FASB ASC Topic, *Accounting for Uncertainty in Income Taxes*. Management has evaluated the Organization's tax positions and concluded that there are no uncertain tax positions that require adjustment to the financial statements to comply with provisions of this Topic.

The Organization's information returns for years ended June 30, 2010 and prior are generally no longer subject to examination by taxing authorities in its major tax jurisdictions. ASoP is not a private foundation.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Subsequent Events

The Organization has evaluated all subsequent events through October 14, 2014, the date the financial statements were available to be issued.

Summarized Financial Information for 2013

The financial information as of June 30, 2013 and for the year then ended is presented for comparative purposes and is not intended to be a complete financial statement presentation.

Reclassifications

Certain accounts in the prior-year financial statements have been reclassified for comparative purposes to conform with the presentation in the current-year financial statements.

3. ACCOUNTS RECEIVABLE

Accounts receivable consist of grants, bequests, pledges and other receivables and are unsecured. Management believes all accounts receivable are fully collectible; therefore, no allowance for uncollectible accounts has been recorded. Accounts receivable are as follows at June 30, 2014 and 2013:

	2014		2013
Grants and pledges receivable			
within one year	\$ 29,765	\$	31,111
Contracts and accounts receivable	 58,200		79,366
Total accounts receivable	\$ 87,965	\$_	110,477

4. INVESTMENTS

Investments are carried at fair value and consist of the following at June 30, 2014 and 2013:

		2014		2013
Securities held in perpetual trust:			-	
Cash and cash equivalents	\$	7,286	\$	17,243
Fixed income fund		50,929		71,227
Equity mutual funds		140,965		19,571
Equity securities		375,412		413,222
		574,592	•	521,263
Beneficial interest in assets held by OCF		464,643		419,778
Cash and cash equivalents		1,330,875		381,976
Certificates of deposit		1,193,572		-
Fixed income securities		820,604		494,667
Mutual funds		366,056		376,941
			-	
Total investments	\$_	4,750,342	\$	2,194,625

4. INVESTMENTS, Continued

Beneficial interest in assets held by OCF

The Organization established a fund that is held by the Oregon Community Foundation (OCF), an Oregon charitable organization. The Organization's funds are pooled with other assets managed by OCF and the Organization's fund is pooled with other assets managed by OCF which are invested in a mixture of equities, fixed-income instruments, alternative investment classes, and cash, which are reflected at fair value. Under the terms of the agreement, variance power has been granted to OCF, however, the Organization is the beneficiary of the fund and the transfer is reciprocal in nature. Accordingly, OCF recognizes the fund as a liability on its statement of financial position. Also, under the terms of the agreement, OCF shall distribute not less than annually, a percentage of the fair value of the funds as determined by the board of directors of OCF. However, in no event will the percentage be less than a reasonable rate of return. OCF may make additional distributions from the funds to the Organization upon a majority vote of all of the directors of the Organization, if, in the sole judgment of the board of OCF, the requested distribution is consistent with the objectives and purposes of the Organization.

5. PROPERTY AND EQUIPMENT

Property and equipment consist of the following at June 30, 2014 and 2013:

	_	2014	2013	
Land	\$	366,673	\$	366,673
Buildings		1,794,288		1,772,383
Furniture and equipment		248,955		207,443
Library collection		14,500		14,500
	_	2,424,416		2,360,999
Less accumulated depreciation		1,117,002	_	1,049,651
	_			·
Property and equipment, net	\$_	1,307,414	\$	1,311,348

6. CONSERVATION PROPERTY

In August 2008, ASoP entered into an agreement with the National Audubon Society (NAS) to receive, conserve, and manage land on the Oregon coast, valued at \$1,520,157, as a wildlife sanctuary, known as Ten Mile Creek Sanctuary. The property is subject to a conservation easement between NAS, as grantor, and McKenzie River Trust, as grantee. Other conservation property includes the Hilltop property acquired in July 2007 for \$482,953.

7. NOTE PAYABLE

Note payable represents a loan from an unrelated individual for the remodeling and rehabilitation of the caretaker's house. Interest is payable quarterly on outstanding advances at 5% per annum from May 1, 2010 through May 1, 2016 and 8% per annum thereafter, until paid. The outstanding balance is payable in quarterly installments of \$725 plus interest, until paid in full. The note is unsecured and due and payable on May 1, 2028. Future maturities are as follows:

Years ending June 30, 2015	\$ 2,900
2016	2,900
2017	2,900
2018	2,900
2019	2,900
Thereafter	24,746
	\$ 39,246

8. BOARD DESIGNATED NET ASSETS

Board designated net assets consist of unrestricted net assets designated by the Board as a reserve fund for the long-term benefit of ASoP. The reserve fund is intended to be permanent; however, the reserve fund may be utilized in the event of an emergency, opportunity, or unanticipated income shortfall. See Note 11 for further discussion.

9. TEMPORARILY RESTRICTED NET ASSETS

Temporarily restricted net assets consist of time and purpose-restricted net assets as follows:

	_	2014	 2013
Earnings on endowment (Note 11)	\$	5,619	\$ _
Time restricted	·	-	46,012
Various programs		2,566,449	518,423
Land held for conservation	_	1,520,157	1,520,157
Total temporarily restricted net assets	\$	4,092,225	\$ 2,084,592

10. PERMANENTLY RESTRICTED NET ASSETS

Permanently restricted net assets include a permanently restricted bequest (perpetual trust) received in 2003. The assets are held in trust and administered by a bank. The donor restrictions stipulated that the annual income earned on the trust, determined by the greater of the actual earnings or 5% of the asset value, be released for the care of wild birds and for public education regarding birds. In the event the 5% distribution exceeds actual earnings, the corpus will be reduced accordingly.

In August 2009, ASoP entered into an agreement with the National Audubon Society (NAS) to receive, conserve, and manage land on the Oregon coast, valued at \$1,520,157, as a wildlife sanctuary, known as Ten Mile Creek Sanctuary. NAS also contributed \$190,000 to be held in an endowment for management and maintenance of the property (easement funding). In the event that ASoP conveys the property to a third party, the balance of the easement funding will also be transferred to such third party. An additional contribution of \$10,000 was received for the endowment but is not part of the easement funding. See Note 11 for further discussion of the endowment.

10. PERMANENTLY RESTRICTED NET ASSETS, Continued

During the year ended June 30, 2010, the Organization established the sanctuary stewardship endowment fund. Contributions will be held in perpetuity, with the earnings to support stewardship of the sanctuary after the fund reaches \$250,000.

Permanently restricted net assets are summarized as follows at June 30, 2014 and 2013:

	_	2014	2013
Perpetual trust Ten Mile Creek Sanctuary endowment (Note 11) Sanctuary stewardship endowment (Note 11)	\$	574,592 201,250 247,431	\$ 521,263 200,000 202,451
Total permanently restricted net assets	\$_	1,023,273	\$ 923,714

11. ENDOWMENT FUNDS

Audubon Society of Portland, Oregon's endowment consists of both donor-restricted endowment funds and funds designated by the Board of Directors to function as endowments. As required by U.S. generally accepted accounting principles, net assets associated with endowment funds, including funds designated by the Board of Directors to function as endowments, are classified and reported based on the existence or absence of donor-imposed restrictions or board designations.

Interpretation of Relevant Law

The Board of Directors of Audubon Society of Portland, Oregon has interpreted Oregon's enacted Uniform Prudent Management of Institutional Funds Act (UPMIFA or the Act) as requiring the preservation of the fair value of the original gift as of the gift date of the donor-restricted endowment funds absent explicit donor stipulations to the contrary. As a result of this interpretation, the Organization classifies as permanently restricted net assets (a) the original value of gifts donated to the permanent endowment (b) the original value of subsequent gifts to the permanent endowment and (c) accumulations to the permanent endowment made in accordance with the direction of the applicable donor gift instrument at the time the accumulation is added to the fund. The remaining portion of the donor-restricted endowment fund that is not classified in permanently restricted net assets is classified as temporarily restricted net assets until those amounts are appropriated for expenditure by the Organization in a manner consistent with the standard of prudence prescribed by the Act.

11. ENDOWMENT FUNDS, Continued

Interpretation of Relevant Law, Continued

In accordance with UPMIFA, the Organization considers the following factors in making a determination to appropriate or accumulate donor-restricted endowment funds:

- (1) The duration and preservation of the fund
- (2) The purposes of the Organization and the donor-restricted endowment fund
- (3) General economic conditions
- (4) The possible effect of inflation and deflation
- (5) The expected total return from income and the appreciation of investments
- (6) Other resources of the Organization
- (7) The investment policies of the Organization

Investment Return Objectives, Risk Parameters and Strategies

The Organization has adopted an investment policy that attempts to maximize total return consistent with an acceptable level of risk. Endowment assets are invested in a well-diversified asset mix, which includes equity and debt securities, that is intended to result in a consistent inflation-protected rate of return that has sufficient liquidity to fund cash flow needs.

Spending Policy:

The Organization has not yet established a policy for spending for the sanctuary stewardship endowment as the funds have not reached the level required to begin funding. Spending for the Ten Mile Creek Sanctuary endowment is in accordance with the endowment agreement.

Composition of endowment net assets at June 30, 2014 and 2013 is as follows:

			Temporarily		Permanently		
	Un	restricted	Res	stricted	Restricted		Total
June 30, 2014							
Donor-restricted	\$	-	\$	5,619	\$	448,681	\$ 454,300
Board-designated		464,643					464,643
	\$	464,643	\$	5,619	\$	448,681	\$ 918,943
June 30, 2013							
Donor-restricted	\$	(79)	\$	-	\$	402,451	\$ 402,372
Board-designated		465,029		_			465,029
	\$	464,950	\$	_	\$	402,451	\$ 867,401

11. ENDOWMENT FUNDS, Continued

Changes in endowment net assets for the years ended June 30, 2014 and 2013 are as follows:

	Tem		Temporarily	Permanently			
	Un	restricted	Restricted	Restricted			Total
Balance - June 30, 2012	\$	432,535	\$ 759	\$	336,922	\$	770,216
Contributions		-	-		58,095		58,095
Investment income		2,600	4,646		7,434		14,680
Realized/unrealized gain (loss)							
on investments		48,117	(5,484)		-		42,633
Appropriated for expenditure		(18,223)	-		-		(18,223)
Transfer		(79)	79				_
Balance - June 30, 2013		464,950	-		402,451		867,401
Contributions		-	-		24,913		24,913
Investment income		1,033	3,695		5,035		9,763
Realized/unrealized gain							
on investments		62,754	2,003		16,282		81,039
Appropriated for expenditure		(64,173)	-		-		(64,173)
Transfer		79	(79)				
Balance – June 30, 2014	\$	464,643	\$ 5,619	\$	448,681	\$	918,943

12. RETIREMENT PLAN

ASoP has a 401(k) salary deferral retirement plan available to eligible employees. Participants may make contributions through a salary reduction agreement. ASoP's contribution to the plan is discretionary and based on the approval of the Board of Directions. ASoP contributed \$46,710 and \$37,508 to the plan for the years ended June 30, 2014 and 2013, respectively.

13. LEASE COMMITMENT

In June 2014, ASoP entered into an equipment and service contract for telecommunications to begin upon installation of the equipment, which is scheduled to take place in the year ending June 30, 2015. The contract will continue for three years from the date of installation. Minimum payments under the contract are approximately \$2,900 per month.

14. CONCENTRATIONS OF CREDIT RISK

ASoP maintains its cash balances in several financial institutions located in Portland. The balances in each financial institution are insured by the Federal Deposit Insurance Corporation up to \$250,000. At June 30, 2014 and 2013, uninsured cash balances approximate \$454,600 and \$157,500, respectively.

Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statement of financial position.

15. FAIR VALUE MEASUREMENTS

Assets and liabilities recorded at fair value in the statement of financial position are categorized based upon the level of judgment associated with the inputs used to measure their fair value. Level inputs are defined as follows:

Level 1: Unadjusted quoted prices in active markets for identical assets and liabilities.

Level 2: Observable inputs other than those included in Level 1, such as quoted market prices for similar assets or liabilities in active markets, or quoted market prices for identical assets or liabilities in inactive markets.

Level 3: Unobservable inputs reflecting management's own assumptions about the inputs used in pricing the asset or liability. Level 3 assets and liabilities include financial instruments whose value is determined using pricing models, discounted cash flow methodologies, or similar techniques, as well as instruments for which the determination of fair values requires significant management judgment or estimation.

15. FAIR VALUE MEASUREMENTS, Continued

Fair values of assets measured on a recurring basis at June 30, 2014 and 2013 are as follows:

2014	Fair Value		Level 1	L	evel 3
Mutual funds:					
Fixed income	\$	820,604	\$ 820,604	\$	-
Balanced		366,056	366,056		-
Investments held in perpetual trust:					
Fixed income mutual fund		50,929	50,929		-
Equity mutual funds		375,412	375,412		-
Equity securities		140,965	140,965		-
Beneficial interest in assets held by OCF		464,643	 -		164,643
	\$:	2,218,609	\$ 1,753,966	\$ 4	164,643
	-				
2013	Fa	ir Value	 Level 1	L	evel 3
Mutual funds:					
Fixed income	\$	494,667	\$ 494,667	\$	-
Balanced		376,941	376,941		-
Investments held in perpetual trust:					
Fixed income mutual fund		71,227	71,227		-
Equity mutual funds		19,571	19,571		-
Equity securities		413,222	413,222		-
Beneficial interest in assets held by OCF		419,778	 		119,778
•	\$	1,795,406	\$ 1,375,628	\$ 4	119,778

Fair values for fixed income, equity securities and mutual funds are determined by reference to quoted market prices and other relevant information generated by market transactions.

Investments held at OCF in pooled funds are valued at the net asset value per unit as provided by OCF trustees. Net asset value is based on fair value of the underlying assets of the funds using quoted market prices when available determined using a market approach. Quoted market prices are not available for certain alternative investment classes, such as limited partnership investments. The valuations for limited partnership investments are based on the net asset value of OCF's ownership interest in the partners' capital which includes assumptions and methods that were prepared by the general partners of the limited partnerships and were reviewed by OCF.

15. FAIR VALUE MEASUREMENTS, Continued

Assets measured at fair value on a recurring basis using significant unobservable inputs (Level 3 inputs) are as follows:

Beneficial interest in assets held by OCF:

	 2014	2013
Beginning of year	\$ 419,778	\$ 387,855
Investment income, net of fees	867	2,064
Change in value (included in		
unrestricted net assets)	62,254	48,082
Disbursements	 (18,256)	 (18,223)
End of year	\$ 464,643	\$ 419,778

** PUBLIC DISCLOSURE COPY **

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

▶ Do not enter Social Security numbers on this form as it may be made public.

► Information about Form 990 and its instructions is at www.irs.gov/form990.

2014 A For the 2013 calendar year, or tax year beginning JUL 1, 2013 and ending JUN 30, Check if applicable: C Name of organization D Employer identification number Address change AUDUBON SOCIETY OF PORTLAND Name change 93-6026088 Initial return Number and street (or P.O. box if mail is not delivered to street address) Room/suite E Telephone number Termin-503-292-6855 5151 NW CORNELL ROAD Amended return City or town, state or province, country, and ZIP or foreign postal code **G** Gross receipts \$ 6,391,089. Applica-97210 PORTLAND, OR H(a) Is this a group return pending F Name and address of principal officer: MERYL REDISCH for subordinates? Yes X No SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status: \mathbf{X} 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. (see instructions) J Website: ► WWW.AUDUBONPORTLAND.ORG **H(c)** Group exemption number ▶ **K** Form of organization: **X** Corporation Association Other > L Year of formation: 1902 M State of legal domicile: OR ☐ Trust Part I Summary Briefly describe the organization's mission or most significant activities: TO PROMOTE THE ENJOYMENT **Activities & Governance** UNDERSTANDING AND PROTECTION OF NATIVE BIRDS AND OTHER WILDLIFE. if the organization discontinued its operations or disposed of more than 25% of its net assets. 16 3 Number of voting members of the governing body (Part VI, line 1a) 16 Number of independent voting members of the governing body (Part VI, line 1b) 4 65 Total number of individuals employed in calendar year 2013 (Part V, line 2a) 5 Total number of volunteers (estimate if necessary) 400 6 7 a Total unrelated business revenue from Part VIII, column (C), line 12 **b** Net unrelated business taxable income from Form 990-T, line 34 7b 0. **Prior Year Current Year** 1,298,799. 4,123,486. Contributions and grants (Part VIII, line 1h) 8 856,241. 836,814. Program service revenue (Part VIII, line 2g) 73,213.60,287. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 418,195. 457,403. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 11 2,646,448. 5,477,990. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 12 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. 0. 0. 14 Benefits paid to or for members (Part IX, column (A), line 4) 1,465,426. 1,699,100. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 15 Expenses 23,000. 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 1,216,370. 1,390,564. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 2,704,796. 3,089,664. 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) -58,348. 2,388,326. Revenue less expenses. Subtract line 18 from line 12 **Beginning of Current Year** 26 **End of Year** 6,496,090. 9,122,989. 20 Total assets (Part X, line 16) 687,557. 619,950. 21 Total liabilities (Part X, line 26) 三年 876,140. 8,435,432 22 Net assets or fund balances. Subtract line 21 from line 20 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. Signature of officer Date Sign MICHAEL RYAN, TREASURER Here Type or print name and title Date PTIN Print/Type preparer's name Preparer's signature P00540880 SANG AHN Paid self-employed Firm's name MCDONALD JACOBS, P.C. Firm's EIN ▶ 93-0900579 Preparer Firm's address 520 SW YAMHILL ST., STE 500 Use Only Phone no. 503-227-0581 PORTLAND, OR 97204 X Yes

May the IRS discuss this return with the preparer shown above? (see instructions)

Form	990 (2013) AUDUBON SOCIETY OF PORTLAND	93-6026088	Page 2
Par	t 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: PROMOTES THE ENJOYMENT, UNDERSTANDING AND PROTECTION OF OTHER WILDLIFE AND THEIR HABITATS WITH A FOCUS ON LOCAL	NATIVE BIRDS	,
		AKEAS AND TH	<u>C</u>
	PACIFIC NORTHWEST.		
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? 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	measured by expenses	
•	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		nd
	revenue, if any, for each program service reported.		
4a	(Code:) (Expenses \$ 1,052,969. including grants of \$	TIVE WILDLIF	333. E
	AND THEIR HABITATS IN OREGON AND THE PACIFIC NORTHWEST,		
	CONSERVATION OF HEALTHY URBAN WATERSHEDS FOR WILDLIFE AN	ID PEOPLE IN '	THE
	METROPOLITAN PORTLAND REGION. THE PROGRAM MAINTAINS AND	OPERATES THE	
	BUSIEST WILDLIFE CARE CENTER (WWC) IN OREGON TO PROVIDE	MEDICAL CARE	
	AND REHABILITATION OF 3,000 INJURED OR ORPHANED NATIVE E		ER
	NATIVE WILDLIFE. WWC ALSO HOUSES FEDERALLY PERMITTED, NO		
	BIRDS FOR EDUCATIONAL PURPOSES.	M KEDEASADEE	
	PIKDS FOR EDUCATIONAL PORPOSES.		
4b	(Code:) (Expenses \$1,061,273. including grants of \$) (Reve		329 .)
	ENVIRONMENTAL EDUCATION PROGRAM PROVIDES GUIDED TOURS OF		RY,
	AS WELL AS HANDS-ON NATURAL HISTORY PROGRAMS, LOCAL, REG	GIONAL,	
	NATIONAL, AND INTERNATIONAL FIELD TRIPS AND TOURS, NATUR	RE CENTER	
	EXHIBITS AND PROGRAMS TO LOCAL SCHOOL AND COMMUNITY GROU	JPS. HOSTED	
	15,000 CHILDREN AND UNDERSERVED YOUTH.		
4c	(Code:) (Expenses \$)
	AUDUBON SOCIETY OF PORTLAND SUPPORTS ITS 14,992 MEMBERS		
	VARIETY OF OUTREACH AND EDUCATIONAL MATERIALS, INCLUDING		Υ
	NEWSLETTER, MONTHLY ELECTRONIC NEWSLETTER, A WEBSITE, SC	CIAL MEDIA,	AND
	OFFERS PROGRAMS AND CLASSES TO MEMBERS AND THE GENERAL F	UBLIC.	
4d	Other program services (Describe in Schedule O.)	210 777	
	(Expenses \$ 187,842. including grants of \$) (Revenue \$	318,777.)	
4e	Total program service expenses ▶ 2,510,159.		

Form **990** (2013)

Form 990 (2013) AUDUBON SOCIETY OF PORTLAND 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		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	Х	
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		Х
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		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8	Х	
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		Х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, IX, or X			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
-	Part VI	11a	Х	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	- 1.6		
-	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		х
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	- 1.2		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
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			
ű	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		х
е	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		х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
124	Schedule D, Parts XI and XII	12a		х
h	Was the organization included in consolidated, independent audited financial statements for the tax year?	124		
D	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
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,	174		
	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		х
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		х
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		х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	"		
• •	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	-'-		
.0		18	х	
19	1c and 8a? If "Yes," complete Schedule G, Part II Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	10		
.5	·	19		х
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
ט	ii 165 to iine 20a, uid the organization attaon a copy of its addited infancial statements to this fetum?		990	(2012)

Form **990** (2013)

Form 990 (2013) AUDUBON SOCIETY OF Part IV Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States 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		
С	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a			
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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		Х
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or			
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so,			
	complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity 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, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Х
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,			
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		х
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? <i>If</i> "Yes," <i>complete</i>			
	Schedule N, Part II	32		х
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		х
	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			<u></u>
٠.	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?	<u> </u>		T -
	Note. All Form 990 filers are required to complete Schedule O	38	Х	
		, 55		(0010)

Form **990** (2013)

Form 990 (2013) AUDUBON SOCIETY OF PORTLAND 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	44			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and re	portab	le gaming			
	(gambling) winnings to prize winners?			1c		
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	65			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions	s)				
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?			За		X
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule	O		3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a	authorit	y over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccoun	t)?	4a		_X_
b	If "Yes," enter the name of the foreign country: ▶		_			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial A	Accoun	ts.			
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	ction?		5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	e orgai	nization 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 contributi	ons or	gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices p	rovided to the payor?	7a		<u> X</u>
b				7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as requ	ired			
	to file Form 8282?	······i		7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza			7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.					
_	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at a	any time	during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			0-		
a	Did the organization make any taxable distributions under section 4966?			9a		_
	Did the organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:	100				
a h	Initiation fees and capital contributions included on Part VIII, line 12 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a 10b				
b 11	Section 501(c)(12) organizations. Enter:	LIUD				
''	Gross income from members or shareholders	11a				
	Gross income from other sources (Do not net amounts due or paid to other sources against	- 114				
	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	$\overline{}$		12a		
	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.					
				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				
С	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax year?			14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No." provide an explanation in Schedule	e O		14b		
				Form	990	(2013)

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.

	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion 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 16			
	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 in 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		Х
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		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		Х
6	Did the organization have members or stockholders?	6	Х	
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	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	, u		
	persons other than the governing body?	7b		х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7.0		
а	The governing body?	8a	Х	
a h	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	0.0		
Ū	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This Section & requests information about policies not required by the internal nevenue Code.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iou		
_	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х	
	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	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	Х	
13	Did the organization have a written whistleblower policy?	13	Х	
14	Did the organization have a written document retention and destruction policy?	14	Х	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Х	
	Other officers or key employees of the organization	15b		Х
	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		Х
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		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed ▶OR			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) av	ailable	•	
	for public inspection. Indicate how you made these available. Check all that apply			
	X Own website Another's website X Upon request Other (explain in Schedule O)			
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and	financ	ial	
	statements available to the public during the tax year.			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization	n: 🕨		
	ALEXANDER PATTERSON - 503-292-6855			
	5151 NW CORNELL ROAD, PORTLAND, OR 97210			

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.

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

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

(A) Name and Title	(B) Average hours per week	box	not c , unle:	Pos heck i ss per	more rson i	than	n an	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DAVID MANDELL	2.00	↓		l						•
PRESIDENT		Х		Х		<u> </u>		0.	0.	0.
(2) JOHN OSBORN	2.00	l		l						•
VICE PRESIDENT		Х		X		_		0.	0.	0.
(3) MICHAEL RYAN	5.00	٠,		,,					_	0
TREASURER	1 2 00	X	_	Х		┢		0.	0.	0.
(4) JAY WITHGOTT	2.00	. ,		٦,					_	0
(5) ADNENNE WOLFE-LOCKETT	2.00	X		Х		-		0.	0.	0.
(5) ADNENNE WOLFE-LOCKETT DIRECTOR	2.00	X						0.	0.	0.
(6) TONY DEFALCO	2.00	Λ				\vdash		0.	0.	<u></u>
DIRECTOR	2.00	X						0.	0.	0.
(7) MERRIL KEANE	2.00	Λ				\vdash		0.	0.	<u></u>
DIRECTOR	2.00	X						0.	0.	0.
(8) MARY SOLARES	2.00	^				\vdash		0.	U• _	<u></u>
DIRECTOR	2.00	х						0.	0.	0.
(9) KOTO KISHIDA	2.00							•	•	
DIRECTOR		х						0.	0.	0.
(10) ANNE SAMMIS	2.00	1				\vdash			•	
DIRECTOR		Х						0.	0.	0.
(11) DAN ROHLF	2.00								-	-
DIRECTOR		Х						0.	0.	0.
(12) TAMMY SPENCER	2.00									
DIRECTOR		Х						0.	0.	0.
(13) LORENA O'NEAL	2.00									
DIRECTOR		Х						0.	0.	0.
(14) JIM RAPP	2.00									
DIRECTOR		Х						0.	0.	0.
(15) JENNIFER MILLER	2.00									
DIRECTOR		Х						0.	0.	0.
(16) RUTH MORTON	2.00									
DIRECTOR		Х						0.	0.	0.
(17) MERYL REDISCH	40.00	1								
EXECUTIVE DIRECTOR				Х				103,886.	0.	0. Form 990 (2012)

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Form **990** (2013)

93-6026088

(A) Name and title	(B) Average hours per week (list any	(do box offi	not c	Pos heck i ss per id a di	ition	1 than dis both	one n an	(D) Reportable compensation from the	(E) Reportable compensatio from related organization	n I	an	(F) timater nount of other pensat	of
	hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	organization (W-2/1099-MISC)	(W-2/1099-MIS		fr organo	om the anization d relate anization	e on ed
		•						102.006		0			
1b Sub-total c Total from continuation sheets to Part VI	I, Section A						>	103,886. 0. 103,886.		0. 0.			0. 0.
 d Total (add lines 1b and 1c) 2 Total number of individuals (including but no compensation from the organization 							o re	•	000 of reportable				1
3 Did the organization list any former officer.	, director, or tru	uste	e, ke	y en	nplo	yee,	or h	nighest compensated er	nployee on			Yes	No
line 1a? If "Yes," complete Schedule J for s 4 For any individual listed on line 1a, is the su											3		X
and related organizations greater than \$150Did any person listed on line 1a receive or a											4		X
rendered to the organization? If "Yes," com Section B. Independent Contractors	nplete Schedule	e <i>J f</i>	or su	ıch r	oers	on					5		X
Complete this table for your five highest co the organization. Report compensation for										ensa	tion fro	om	
(A) Name and business	address	N	ONI	3				(B) Description of s	ervices	С	(C omper		1
							 						
2 Total number of independent contractors (i \$100,000 of compensation from the organi		ot lir	nited	d to t	thos	se lis	ted	above) who received mo	ore than				

332008

Form **990** (2013)

Form 990 (2013) AUDUBON
Part VIII Statement of Revenue

		Check if Schedule O cont	ains a response	or note to any lin	ne in this Part VIII			
				<u> </u>	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt function	Unrelated business	Revenuè excluded from tax under
						revenue	revenue	sections 512 - 514
S S	1 a	Federated campaigns	1a					012 011
ant		Membership dues		238,519.				
P G		Fundraising events			-			
fts,		Related organizations			-			
ig ig		Government grants (contribut			-			
ons, Sir		• ,	· —					
utic	т	All other contributions, gifts, gran		991 967				
ē		similar amounts not included abo	ve [11 Э ,	75 022	-			
Contributions, Gifts, Grants and Other Similar Amounts		Noncash contributions included in lines			1 122 106			
O B	n	Total. Add lines 1a-1f			4,123,486.			+
	_	CIACCEC MOUDC	CAMDO	Business Code 611600		026 011		
ice		CLASSES, TOURS,	CAMPS	011000	836,814.	836,814.		
er v	b							+
n S	С							+
ran 3ev	d							
Program Service Revenue	е							
۵		All other program service reve		•	026 614			
	g	Total. Add lines 2a-2f			836,814.			
	3	Investment income (including						
		other similar amounts)			57,512.			57,512.
	4	Income from investment of tax	x-exempt bond p	roceeds				
	5	Royalties						
			(i) Real	(ii) Personal				
	6 a	Gross rents	9,325.					
	b	Less: rental expenses	0.					
	С	Rental income or (loss)	9,325.					
	d	Net rental income or (loss)			9,325.	9,325.		
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory	332,723.					
	b	Less: cost or other basis						
		and sales expenses	329,948.					
	С	Gain or (loss)	2,775.					
	d	Net gain or (loss)			2,775.			2,775.
o	8 a	Gross income from fundraisin	g events (not					
ŭ		including \$	of					
eve		contributions reported on line	1c). See					
Ä		Part IV, line 18	а	208,777.				
Other Revenu	b	Less: direct expenses		51,999.				
0	С	Net income or (loss) from fund	draising events		156,778.			156,778.
	9 a	Gross income from gaming ad	ctivities. See					
		Part IV, line 19						
	b	Less: direct expenses						
		Net income or (loss) from gam						
	10 a	Gross sales of inventory, less	returns					
		and allowances	а	822,452.				
	b	Less: cost of goods sold		531,152.				
		Net income or (loss) from sale		•	291,300.	291,300.		
		Miscellaneous Revenu		Business Code				
	11 a							
	b							
	c							
	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue. See instructions.			5,477,990.	1,137,439.	0.	217,065.
33200 10-29-	9			-	•			Form 990 (2013)

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 (**D**) Fundraising (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b. Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 Grants and other assistance to individuals in the United States. See Part IV, line 22 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, 92,817. 21,770. 5,285. 119,872. trustees, and key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 1,245,647. 964,502. 226,227. 54,918. Other salaries and wages 7 Pension plan accruals and contributions (include 41,255. 34,833. 6,422 section 401(k) and 403(b) employer contributions) 27,371.148,467. 175,838. Other employee benefits 9 92,467. 116,488. 19,285. 4,736. 10 Payroll taxes 11 Fees for services (non-employees): 5,855. 114,067. 102,109. 6,103. Management 11,772. 11,772. Legal 20,737. 20,737. Accounting Lobbying Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, 2,660. 1,670. 830. 160. column (A) amount, list line 11g expenses on Sch O.) 9,334. 9,400. 35,001. 16,267. Advertising and promotion 12 298,155. 220,791. 15,763. 61,601. 13 Office expenses 21,167. 476. 18,187. 2,504. Information technology 14 Royalties 15 4,800. 4,800. 16 Occupancy 357,623. 331,979. 4,736. 20,908. 17 Travel Payments of travel or entertainment expenses 18 for any federal, state, or local public officials 39,533. 21,880. 17,559. 94. Conferences, conventions, and meetings 19 2,053. 2.053. 20 Payments to affiliates 21 67,352. 67,352. Depreciation, depletion, and amortization 22 35,433. 4,614. 30,819. 23 Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.) 203,319. 180,435. 16,166. 6,718. SUPPLIES VOLUNTEER AND MEMBERSHI 133,362. 61,469. 58,957. 12,936. 43,530. $40, \overline{402}$ 3,100. 28. REPAIRS AND MAINTENANCE -201,106. d ADMIN ALLOCATION 192,928. 8,178. e All other expenses 3,089,664. 2,510,159. 386,002. 193,503. Total functional expenses. Add lines 1 through 24e 25 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 if following SOP 98-2 (ASC 958-720)

Form **990** (2013)

Form 990 (2013)
Part X | Balance Sheet

Par	t X	Balance Sheet					
		Check if Schedule O contains a response or not	e to any	line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			10,368.	1	0.
	2	Savings and temporary cash investments			639,648.	2	721,564
	3	Pledges and grants receivable, net				3	
	4	Accounts receivable, net			110,477.	4	87,965
	5	Loans and other receivables from current and fo			,		•
		trustees, key employees, and highest compensa		, , , , , , , , , , , , , , , , , , ,			
		Part II of Schedule L				5	
	6	Loans and other receivables from other disqualif					
	•	section 4958(f)(1)), persons described in section	•	,			
		employers and sponsoring organizations of sect					
				·		6	
Assets	7	employees' beneficiary organizations (see instr).		7			
Ass	7	Notes and loans receivable, net			165,059.	8	198,605
`	8	Inventories for sale or use			61,455.	9	53,989
	9		 I I		01,433.	9	33,909
	iua	Land, buildings, and equipment: cost or other	40-	4 427 526			
		basis. Complete Part VI of Schedule D	10a	4,427,526.	2 21/ /50	40	2 210 524
		Less: accumulated depreciation			3,314,458. 2,194,625.	10c	3,310,524 4,750,342
	11	Investments - publicly traded securities		2,194,023.	11	4,750,342	
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line	l l		13		
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11			5 405 000	15	0 100 000
	16	Total assets. Add lines 1 through 15 (must equa			6,496,090.	16	9,122,989 264,597
	17	Accounts payable and accrued expenses			189,115.	17	264,597
	18	Grants payable		222 522	18	222 544	
	19	Deferred revenue			388,689.	19	383,714
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV	of Schedule D		21	
S	22	Loans and other payables to current and former					
ĬĘ		key employees, highest compensated employee	s, and o	disqualified persons.			
Liabilities		Complete Part II of Schedule L				22	
-	23	Secured mortgages and notes payable to unrela	ted thir	d parties	42,146.	23	39,246
	24	Unsecured notes and loans payable to unrelated	third p	arties		24	
	25	Other liabilities (including federal income tax, pa	yables t	o related third			
		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			619,950.	26	687,557
		Organizations that follow SFAS 117 (ASC 958), checl	k here ▶ X and			
ဖွ		complete lines 27 through 29, and lines 33 an	d 34.				
) 	27	Unrestricted net assets			2,867,834.	27	3,319,934
alai	28	Temporarily restricted net assets			2,084,592.	28	4,092,225
d B	29	B			923,714.	29	1,023,273
<u>.</u> Ĕ		Organizations that do not follow SFAS 117 (A	SC 958), check here 🕨 🗌			
Net Assets or Fund Balances		and complete lines 30 through 34.					
ţ	30	Capital stock or trust principal, or current funds				30	
Sse	31	Paid-in or capital surplus, or land, building, or ed				31	
ایّا	32	Retained earnings, endowment, accumulated in				32	
<u>ا</u> څ	33	Total net assets or fund balances			5,876,140.	33	8,435,432
	34	Total liabilities and net assets/fund balances		l l	6,496,090.	34	9,122,989

Form **990** (2013)

Pai	T 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	<u>5,47</u>	7,9	<u>90.</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,08	9,6	<u>64.</u>				
3	Revenue less expenses. Subtract line 2 from line 1		2,38						
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) 4 5								
5	Net unrealized gains (losses) on investments	5	17	0,9	<u>66.</u>				
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 in Schedule O)	9			0.				
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33,								
	column (B))	10	8,43	5,4	32.				
Pai	t XII Financial Statements and Reporting								
	Check if Schedule O contains a response or note to any line in this Part XII				X				
				Yes	No				
1	Accounting method used to prepare the Form 990: Cash X 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:								
	X Separate basis Consolidated basis Both consolidated and separate basis								
С	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 in Sche	dule O.							
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sin	gle 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	ed audit							
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3b						
			Form	990	(2013)				

SCHEDULE A

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Public Charity Status and Public Support

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number

_				SOCIETI OF .							<u> </u>	0020	000	
Pa	rt I	Reason	tor Public Char	ity Status (All organiz	ations mu	st complet	e this part	.) See inst	ructions.					
Γhe	organ	ization is not a	a private foundation	because it is: (For lines 1	through 1	1, check of	only one bo	ox.)						
1		A church, co	nvention of churches	s, or association of churc	ches descr	ibed in se	ection 170	(b)(1)(A)(i)						
2		A school des	cribed in section 17	'0(b)(1)(A)(ii). (Attach Sc	hedule E.)									
3		A hospital or	a cooperative hospi	tal service organization o	described i	n section	170(b)(1)	A)(iii).						
4		A medical res	search organization	operated in conjunction v	with a hosp	oital descr	ibed in se	ction 170	(b)(1)(A)(iii). Enter	the	hospital	l's nam	ie,
		city, and stat	e:											
5		An organizati	ion operated for the	benefit of a college or un	niversity ow	vned or op	erated by	a governm	nental unit	describe	ed in	ſ		
		section 170	(b)(1)(A)(iv). (Comple	ete Part II.)										
6		A federal, sta	ite, or local governm	ent or governmental unit	described	in sectio	n 170(b)(1)(A)(v).						
7	X	An organizati	ion that normally rec	eives a substantial part o	of its suppo	ort from a	governmei	ntal unit or	from the	general p	oubl	ic descr	ibed in	
		section 170(b)(1)(A)(vi). (Comple	ete Part II.)										
8		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)												
9		An organizati	ion that normally rec	eives: (1) more than 33 1	/3% of its	support fro	om contrib	utions, me	embership	fees, an	d gr	oss rece	eipts fr	om
		activities rela	ted to its exempt fur	nctions - subject to certain	in exceptio	ons, and (2) no more	than 33 1/	/3% of its s	support f	rom	gross ir	nvestm	ent
		income and u	unrelated business ta	axable income (less secti	ion 511 tax	k) from bus	sinesses a	cquired by	the organ	ization a	fter	June 30), 1975	·.
		See section	509(a)(2). (Complete	e Part III.)										
10		An organizati	ion organized and or	perated exclusively to tes	st for public	c safety. S	ee sectio	n 509(a)(4	I).					
11		An organizati	ion organized and or	perated exclusively for th	e benefit c	of, to perfo	rm the fun	ctions of,	or to carry	out the	purp	oses of	one or	r
		more publicly	supported organiza	ations described in section	on 509(a)(1) or sectio	n 509(a)(2)	. See sed	ction 509(a	a)(3). Ch	eck	the box	that	
		describes the	e type of supporting	organization and comple	ete lines 11	e through	11h.							
		a Type I	l b T	ype II	ype III - Fui	nctionally	integrated	c	ј 🔙 Тур	e III - Noi	n-fui	nctional	ly integ	grated
е		By checking	this box, I certify tha	t the organization is not	controlled	directly or	indirectly	by one or	more disq	ualified p	oers	ons oth	er than	
		foundation m	nanagers and other t	han one or more publicly	supported	d organiza	tions desc	ribed in se	ection 509(a)(1) or s	ecti	on 509(a)(2).	
f		If the organiz	ation received a writ	ten determination from t	he IRS tha	t it is a Ty _l	oe I, Type	II, or Type	III					
		supporting or	rganization, check th	nis box										
g		Since August	t 17, 2006, has the c	organization accepted an	y gift or co	ontribution	from any	of the follo	wing pers	ons?				
		(i) A person	n who directly or ind	lirectly controls, either ale	one or toge	ether with	persons d	escribed ir	n (ii) and (ii	i) below,			Yes	No
		the gove	erning body of the s	upported organization?								11g(i)		
		(ii) A family	member of a persor	n described in (i) above?								11g(ii)		
		(iii) A 35% c	controlled entity of a	person described in (i) o	r (ii) above	?						11g(iii)		
h		Provide the fo	ollowing information	about the supported org	ganization(s).								
				1			1		1					
(i)		of supported anization	(ii) EIN	(iii) Type of organization (described on lines 1-9	in col. (i) li	organization sted in your document?	organizat	inotify the	(vi) Is organizatio (i) organiz U.S	the on in col. ed in the	(vii) Amouni sup	t of mor oport	netary
				above or IRC section (see instructions))	<u> </u>		, ,	1	-	1				
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Yes	No	Yes	No	Yes	No				
												_		
Γota	<u>.l</u>													

332021 09-25-13

Form 990 or 990-EZ.

LHA For Paperwork Reduction Act Notice, see the Instructions for

Schedule A (Form 990 or 990-EZ) 2013

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.)

Calendar year (or fiscal year beginning in) ▶ (a) 2009 (b) 2010 (c) 2011 (d)	0010 (-) 0010								
, ,,	2012 (e) 2013	(f) Total							
1 Gifts, grants, contributions, and									
membership fees received. (Do not									
include any "unusual grants.") 1177941. 1160132. 1180175. 129	8799. 412348	6. 8940533.							
2 Tax revenues levied for the organ-									
ization'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 1177941. 1160132. 1180175. 129	8799. 412348	6. 8940533.							
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)		2777151.							
6 Public support. Subtract line 5 from line 4.		6163382.							
Section B. Total Support									
Calendar year (or fiscal year beginning in) (a) 2009 (b) 2010 (c) 2011 (d)	2012 (e) 2013								
7 Amounts from line 4 1177941. 1160132. 1180175. 129	8799. 412348	6. 8940533.							
8 Gross income from interest,									
dividends, payments received on									
securities loans, rents, royalties		0 0 0 0 0 0 0 0							
···	,093. 57,51	2. 244,969.							
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	266	E40 000							
assets (Explain in Part IV.) 121,754. 122,388. 148,812. 149	, 400.	9727722.							
11 Total support. Add lines 7 through 10	12	3,625,352.							
12 Gross receipts from related activities, etc. (see instructions)		3,023,332.							
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year a		▶ □							
organization, check this box and stop here Section C. Computation of Public Support Percentage									
14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	63.36 %							
15 Public support percentage from 2012 Schedule A, Part II, line 14		77.91 %							
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33									
stop here. The organization qualifies as a publicly supported organization									
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 in									
and stop here. The organization qualifies as a publicly supported organization	·	▶ □							
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a									
and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Exp									
meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a									
more, and if the organization meets the "facts-and-circumstances" test, check this box and stop he	re. Explain in Part IV hov	w the							
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization									
organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly support	orted organization	▶∟							

Schedule A (Form 990 or 990-EZ) 2013

Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I 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.)

Se	ction A. Public Support		•				
Cale	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization'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						
7	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
ı	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						
•	Add lines 7a and 7b						
	Public support (Subtract line 7c from line 6.)						
Se	ction B. Total Support		1	Γ	T		
	endar year (or fiscal year beginning in)	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
	Amounts from line 6						
10	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ı	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included in line 10b,						
	whether or not the business is						
40	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part IV.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u></u>
14	First five years. If the Form 990 is for	-			•		
<u>S</u>	check this box and stop herection C. Computation of Publi						P
	Public support percentage for 2013 (I			olumn (fl)		15	0,4
						16	<u>%</u>
<u>16</u> Se	ction D. Computation of Inves		-			1 10 1	70
	Investment income percentage for 20			ne 13 column (fl)		17	%
18						18	
	a 33 1/3% support tests - 2013. If the						
130	more than 33 1/3%, check this box ar						`
	33 1/3% support tests - 2012. If the						
	line 18 is not more than 33 1/3%, che	•			•	•	
20							

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and

its instructions is at www.irs.gov/form990 .

OMB No. 1545-0047

AUDUBON SOCIETY OF PORTLAND

Employer identification number

93-6026088

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									
	-	covered by the General Rule or a Special Rule . 7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.									
General	Rule										
	For an organization contributor. Comple	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one ete Parts I and II.									
Special I	Rules										
	509(a)(1) and 170(b	(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections (1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.									
	total contributions	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or uelty to children or animals. Complete Parts I, II, and III.									
	contributions for us If this box is checke purpose. Do not co	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, e exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. ed, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., amplete any of the parts unless the General Rule applies to this organization because it received nonexclusively, etc., contributions of \$5,000 or more during the year									
		at is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), 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									

Schedule B (Form 990, 990-EZ, or 990-PF) (2013) LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

AUDUBON SOCIETY OF PORTLAND

93-6026088

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		\$ 2,240,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>419,690.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$ <u>201,929.</u>	Person X Payroll
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Total contributions	Person Payroll Complete Part II for noncash contributions.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZI P + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

AUDUBON SOCIETY OF PORTLAND

93-6026088

Part II	Noncash Property (see instructions). Use duplicate copies of Pa	art II if additional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Name of org	ganization				Employer identification number
AUDUBO	ON SOCIETY OF PORTLAND				93-6026088
Part III	Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional	c., contributions of \$1,000 or	n 501(c)(7), (8), ganizations comp less for the year	or (10) organizations oleting Part III, enter . (Enter this information once.)	s that total more than \$1,000 for the
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Descr	ription of how gift is held
		(e) Transfe	r of gift		
	Transferee's name, address, a	nd ZIP + 4	R	elationship of tran	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Desci	ription of how gift is held
				-	
		(e) Transfe	r of gift		
-	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tran	nsferor to transferee
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Desci	ription of how gift is held
					_
		(e) Transfe	r of gift		
-	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tran	nsferor to transferee
	-				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gi	ft	(d) Descr	ription of how gift is held
		(e) Transfe	r of gift		
}	Transferee's name, address, ar	nd ZIP + 4	R	elationship of tran	nsferor to transferee

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

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

➤ See separate instructions. ➤ Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

Open to Public Inspection

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

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

	Section 501(c)(4), (5), or (6) organiza		y 14x) of 1 offit 990-L2	z, Fait v, line 550 (Floxy Ta	ix), trieff
Nan	ne of organization			Empl	oyer identification number
_	AUDUBON	SOCIETY OF PORT	LAND		93-6026088
Pa	art I-A Complete if the org	ganization is exempt und	er section 501(c)	or is a section 527 org	ganization.
	Provide a description of the organiz	•			
	Political expenditures				
3	Volunteer hours				
Pa	art I-B Complete if the org	janization is exempt und	ler section 501(c)((3).	
1	Enter the amount of any excise tax	incurred by the organization und	der section 4955	▶\$	
	Enter the amount of any excise tax				
	If the organization incurred a section				
	Was a correction made?				Yes No
_	o If "Yes," describe in Part IV.	ganization is exempt und	law a a ati a a 504/a\		1/0\
Pa	art I-C Complete if the org	janization is exempt und	er section 501(c),	except section 501(c)(3).
	Enter the amount directly expended		· · · · · · · · · · · · · · · · · · ·		
2	Enter the amount of the filing organ		*		
	exempt function activities				
3	Total exempt function expenditures				
	line 17b			> \$	
4	Did the filing organization file Form				
5	, , , , , , , , , , , , , , , , , , , ,	• •	,	· ·	0 0
	made payments. For each organiza				•
	contributions received that were pr political action committee (PAC). If				e segregated fund or a
	. , ,	1			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's	(e) Amount of political contributions received and
				funds. If none, enter -0	promptly and directly
					delivered to a separate
					political organization. If none, enter -0
					ii none, enter -o

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

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 AUDUB	ON SOCIETY OF PORTLAND	93-6	026088 Page 2
Part II-A Complete if the organization (election under section 501)	on is exempt under section 501(c)(3) and file	ed Form 5768	
<u>`</u>	gs to an affiliated group (and list in Part IV each affiliated	group member's name	, address, EIN,
expenses, and share of exces	, , ,		
B Check if the filing organization check	sed box A and "limited control" provisions apply.		4. V. A. 65111
	bying Expenditures leans amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to influence pub	lic opinion (grass roots lobbying)	12,508.	
b Total lobbying expenditures to influence a leg	gislative body (direct lobbying)	6,655.	
c Total lobbying expenditures (add lines 1a and	d 1b)	19,163.	
d Other exempt purpose expenditures		2,918,881.	
e Total exempt purpose expenditures (add line	2,938,044.		
f Lobbying nontaxable amount. Enter the amo	unt from the following table in both columns.	296,902.	
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.		
g Grassroots nontaxable amount (enter 25% of	line 1f)	74,226.	
h Subtract line 1g from line 1a. If zero or less, e	enter -0-	0.	
i Subtract line 1f from line 1c. If zero or less, e	nter -0-	0.	
j If there is an amount other than zero on eithe	er 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)		
ί -	at made a section 501(h) election do not have to comp low. See the instructions for lines 2a through 2f on pa		
Lob	bying Expenditures During 4-Year Averaging Period		

Lobbying Expenditures During 4-Year Averaging Period							
Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total		
2a Lobbying nontaxable amount	266,786.	285,923.	274,564.	296,902.	1,124,175.		
b Lobbying ceiling amount (150% of line 2a, column(e))					1,686,263.		
c Total lobbying expenditures	4,550.	3,495.	26,825.	19,163.	54,033.		
d Grassroots nontaxable amount	66,697.	71,481.	68,641.	74,226.	281,045.		
e Grassroots ceiling amount (150% of line 2d, column (e))					421,568.		
f Grassroots lobbying expenditures			17,325.	12,508.	29,833.		

Schedule C (Form 990 or 990-EZ) 2013

Schedule C (Form 990 or 990-EZ) 2013 AUDUBON SOCIETY OF PORTLAND 93-60260 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 to lines 1a through 1i below, provide in Part IV a detailed description		(a)	(b)	
of th	of the lobbying activity.		No	Amo	ount
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:				
	Volunteers?				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes?				
	Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
Pa	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? t III-A Complete if the organization is exempt under section 501(c)(4), sectio	n 501(c)(5) or sec	tion	
ı u	501(c)(6).	11 00 1(0)(0	,, or sec		
				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 expenditures from the prior year? t III-B Complete if the organization is exempt under section 501(c)(4), sectio		3		
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			III-A, line	9 3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).	Jai			
_			2a		
	Current year				
	Carryover from last year				
	Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		"		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
•	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
	expenditure next year?	on trous	4		
5	Taxable amount of lobbying and political expenditures (see instructions)		5		
	t IV Supplemental Information				
	ide 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, line 2; ar	nd Part II-B,	line 1.
Also	complete this part for any additional information.				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

► Attach to Form 990.

► Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047 Open to Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

Par			s or Accounts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	e 6. (a) Donor advised funds	(b) Funds and other accounts
	Takel wounds and at one of	(a) Donor advised funds	(b) i unus and other accounts
	Total number at end of year		
	Aggregate contributions to (during year)		
	Aggregate grants from (during year)		
	Aggregate value at end of year		
	Did the organization inform all donors and donor advisors in	_	
	are the organization's property, subject to the organization's		
	Did the organization inform all grantees, donors, and donor a		
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
_	impermissible private benefit?		
Par	t II Conservation Easements. Complete if the org	ganization answered "Yes" to Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of an hi	istorically important land area
	Protection of natural habitat	Preservation of a cer	tified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualit	fied 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
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
	Number of conservation easements on a certified historic stru		
d	Number of conservation easements included in (c) acquired a	after 8/17/06, and not on a historic struct	ure
	listed in the National Register		2d
	Number of conservation easements modified, transferred, rel		
	year >		
4	Number of states where property subject to conservation eas	sement is located >	
5	Does the organization have a written policy regarding the per	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements it	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	and enforcing conservation easements d	uring the year
7	Amount of expenses incurred in monitoring, inspecting, and	enforcing conservation easements during	the year > \$
	Does each conservation easement reported on line 2(d) above		
9	In Part XIII, describe how the organization reports conservation		
	include, if applicable, the text of the footnote to the organization	•	
	conservation easements.		C C
	t III Organizations Maintaining Collections of	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" to Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stater	ment and balance sheet works of art.
	historical treasures, or other similar assets held for public exh	hibition, education, or research in furthera	ance of public service, provide, in Part XIII.
	the text of the footnote to its financial statements that descri		,
	If the organization elected, as permitted under SFAS 116 (AS		t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items:		gg
	(i) Revenues included in Form 990, Part VIII, line 1		• •
	(m) A		
	If the organization received or held works of art, historical tre	asuras, or other similar assets for financia	·
			ai gairi, provide
	the following amounts required to be reported under SFAS 1		• •
	Revenues included in Form 990, Part VIII, line 1		A
b	Assets included in Form 990, Part X		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule D (Form 990) 2013

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a, See Form 990, Part X, line 10

Complete if the digarization answered Tes to Form 330, Farth, line Tra. See Form 330, Farth, line To.							
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a Land		2,369,783.		2,369,783.			
b Buildings		1,794,288.	949,258.	845,030.			
c Leasehold improvements							
d Equipment		248,955.	163,394.	85,561.			
e Other		14,500.	4,350.	10,150.			
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)							

Schedule D (Form 990) 2013

Schedule D	(Form 990) 2013	
Dart VII	Investments	

Financial derivatives Closely-held equity interes Other (A) (B) (C) (D) (E) (F) (G) (H) (al. (Col. (b) must equal Form art VIII Investments Complete if the (a) Description (1) (2) (3) (4) (5) (6) (7) (8) (9) (al. (Col. (b) must equal Form art IX Other Assets Complete if the (a) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (2) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (2) (1) (1) (2) (2) (3) (4) (5) (6) (7) (8) (9) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1	category (including name of security) ests	(b) Book value	(c) Method of v	raiuation: Cost or end	d-of-year market value
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tal. (Column (b) must equal					
Liability for uncertain tax	al Form 990, Part X, col. (B) line	225.)			

Par	t XI Reconciliation of Revenue per Audited Financial Staten	nents With I	Revenue per Re	turn.	
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	5,690,839.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains on investments	2a	170,966. 41,883.		
b	Donated services and use of facilities		41,883.		
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	212,849. 5,477,990.
3	Subtract line 2e from line 1			3	5,477,990.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:	1 1			
а	Investment expenses not included on Form 990, Part VIII, line 7b				
b	Other (Describe in Part XIII.)	4b			•
С	Add lines 4a and 4b			4c	0.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)		Evrance new E	5	5,477,990.
Pal	rt XII Reconciliation of Expenses per Audited Financial State		Expenses per F	teturr	1.
	Complete if the organization answered "Yes" to Form 990, Part IV, line 12			I I	2 121 545
1	Total expenses and losses per audited financial statements			1	3,131,547.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:	1 - 1	41 002		
a	Donated services and use of facilities		41,883.		
b	Prior year adjustments				
С.	Other losses				
a	Other (Describe in Part XIII.)				11 003
e	Add lines 2a through 2d			2e	41,883. 3,089,664.
3	Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:			3	3,003,004.
4	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
a					
b	Other (Describe in Part XIII.) Add lines 4a and 4b			4c	0.
	Add lines 4a and 4b Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)			5	3,089,664.
	rt XIII Supplemental Information.				3700370021
	ide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Pa	art IV. lines 1b a	and 2b: Part V. line 4	: Part X	(, line 2: Part XI.
	2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any a			,	,,
PAF	RT III, LINE 4:				
EXI	PLANATION: THE ORGANIZATION MAINTAINS A CO	OLLECTIO	N OF BRUCE	HOI	RSFALL
PA:	INTINGS. THESE PAINTINGS ARE OF BIRDS AND	OTHER W	ILDLIFE SO	THI	EY HELP
INS	SPIRE A LOVE OF NATURE. JOHN JAY AUDUBON I	WAS MOST	FAMOUS AS	AN	AVIAN
ILI	LUSTRATOR.				
PAI	RT V, LINE 4:				
EXI	PLANATION: THE ORGANIZATION HAS NOT YET E	STABLISH	ED A POLIC	Y FO	OR
ant					TE 170E
SPI	ENDING FOR THE SANCTUARY STEWARDSHIP ENDO	WMENT AS	THE FUNDS	HA\	/E NOT
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KEA	ACHED THE LEVEL REQUIRED TO BEGIN FUNDING	• PLENDI	NG FUK THE	TEL	и мтгр
רסי	EEK SANCTUARY ENDOWMENT IS IN ACCORDANCE	מדחם שמב	י באור <i>ואו</i> איביאייי	7 CT	FEMENT
CKI	THE DANCTOART EMPOWEENT TO IN ACCORDANCE	MITTH THE	тиромитит.	AGI	/11/11/11 •

SCHEDULE G

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form 990.

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number

93-6026088

Part I Fundraising Activities required to complete this pa	• Complete if the organization answart.	vered "Y	es" to	Form 990, Part IV, li	ne 17. Form 990-EZ	filers are not
 1 Indicate whether the organization rate a X Mail solicitations b X Internet and email solicitation c Phone solicitations d X In-person solicitations 2 a Did the organization have a written key employees listed in Form 990, I b If "Yes," list the ten highest paid indicompensated at least \$5,000 by the 	e X Solicit f X Solicit g X Speci or oral agreement with any individual Part VII) or entity in connection with dividuals or entities (fundraisers) pur	tation of tation of al fundra al (includ profession	non-g gover ising of ing of	overnment grants nment grants events ficers, directors, trus undraising services?	X Yes	'
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) fundr have co or con contribu	ustody trol of	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
KATY EHRLICH - 2663 SW TALBOT	DEVELOPMENT OF LEGACY	Yes	No			
ROAD, PORTLAND, OR 97201	CIRCLE PROGRAM		Х	0.	12,889.	-12,889.
Total 3 List all states in which the organization or licensing. OR	on is registered or licensed to solici	t contrib	▶ utions	or has been notified	12,889. it is exempt from re	-12,889. gistration
LHA For Paperwork Reduction Act No	tice, see the Instructions for Form	990 or	990-E	Z. S	Schedule G (Form 9	90 or 990-EZ) 2013

332081 09-12-13

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a) Event #1 **(b)** Event #2 (c) Other events (d) Total events WILD ARTS NATIVE PLANT NONE (add col. (a) through FESTIVAL SALE col. (c)) (event type) (event type) (total number) 142,137. 53,288. 195,425. Gross receipts 2 Less: Contributions 195,425. **3** Gross income (line 1 minus line 2) 142,137. 53,288. 4 Cash prizes 5 Noncash prizes Direct Expenses Rent/facility costs 1,004. 264. 1,268. 7 Food and beverages 8 Entertainment 20,089. 30,642. 50,731 Other direct expenses 51,999. **10** Direct expense summary. Add lines 4 through 9 in column (d) 143,426. 11 Net income summary. Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming (add (c) Other gaming (a) Bingo Revenue bingo/progressive bingo col. (a) through col. (c)) Gross revenue 2 Cash prizes Direct Expenses Noncash prizes Rent/facility costs Other direct expenses Yes Yes Yes 6 Volunteer labor No 7 Direct expense summary. Add lines 2 through 5 in column (d) 8 Net gaming income summary. Subtract line 7 from line 1, column (d) **9** Enter the state(s) in which the organization operates gaming activities: a Is the organization licensed to operate gaming activities in each of these states? **b** If "No," explain: _ 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? **b** If "Yes," explain:

Schedule G (Form 990 or 990-EZ) 2013

332082 09-12-13

Sch	edule G (Form 990 or 990-EZ) 2013 AUDUBUN SOCIETY OF PORTLAND 93-6	00200	700	Page 3
11	Does the organization operate gaming activities with nonmembers?	Y	es (No
	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed			
	to administer charitable gaming?		es	□ No
13	Indicate the percentage of gaming activity operated in:	I = I		
	The organization's facility	13a		%
	An outside facility	13b		%
	Enter the name and address of the person who prepares the organization's gaming/special events books and records:	100		70
14	The the flame and address of the person who prepares the organization's gaining/special events books and records.			
	Nama 🏲			
	Name			
	Address			
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	📖 ነ	′ es	No
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the amount			
	of gaming revenue retained by the third party >			
С	If "Yes," enter name and address of the third party:			
	Name			
	Address			
	, ideal cool p			
16	Gaming manager information:			
10	Garning manager information.			
	Nama 🏲			
	Name			
	Gaming manager compensation > \$			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to			
	retain the state gaming license?	\	′ es	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the			
	organization's own exempt activities during the tax year > \$			
Pa	rt IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, line	nes 9 9	h 10l	15h
	15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).	.00 0, 0.	.,	, ,
	100, 10, and 170, as applicable. Also complete this part to provide any additional information (see instructions).			
PA	RT I, LINE 2B, COLUMN (V):			
	III IIII III IIII IIII IIII IIII IIII IIII			
ΓV	PLANATION: AGREEMENT WITH FUNDRAISER PROVIDED FOR PAYMENT OF FE	ידים ד	27 (21	מב
ĿΛ	FLANATION: AGREEMENT WITH FUNDRAISER PROVIDED FOR PAIMENT OF FE	ies e	DAO.	ענ
~ 3T	AN AGREED HOOM HOURTY DAME AND DAWNENW OF DOGMAGE DYDENGES / A		٠,	
ON	AN AGREED UPON HOURLY RATE AND PAYMENT OF POSTAGE EXPENSES (\$4	.,540))•	
			_	
				<u> </u>

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

AUDUBON SOCIETY OF PORTLAND

▶ Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization

Employer identification number 93-6026088

Par	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contri amounts report		(d) Method of do noncash contribu	etermin	•	
		аррпоавто	items contributed	Form 990, Part VI		Tierioderi ceritiie	ation a		
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded								
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other • (MATERIALS/SUP)	Х	111	75	933.	DONOR ESTIM	ΙΑΤΕ		
26	Other ()			, , ,		DOMOR EDITE			
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organiz	ation during	the tax year for e	ontributions					
23	for which the organization completed Form 828	_	•		29				
	for which the organization completed Form 626	o, raitiv, i	Jonee Acknowledg	Jernent	29			Yes	No
202	During the year, did the organization receive by	contributio	n any proporty rop	ortod in Part I lino	c 1 22 th	act it must hold for		162	INO
30a	at least three years from the date of the initial c								
	•						30a		Х
h	the entire holding period?						Sua		
	Does the organization have a gift acceptance p	olicy that re	auiros tha raviow o	of any non standar	d contribu	tions?	24		Х
31							31		
	Does the organization hire or use third parties of contributions?			•			32a	х	
b	If "Yes," describe in Part II.								
33	If the organization did not report an amount in o	column (c) f	or a type of proper	ty for which columi	n (a) is che	ecked,			
	describe in Part II.								
I HA	For Paperwork Reduction Act Notice, see t	the Instruct	tions for Form 990).		Schedule M	(Form	990) (2013)

SCHEDULE 0

Internal Revenue Service

(Form 990 or 990-EZ)

Department of the Treasury

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.

► Attach to Form 990 or 990-EZ.

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990

2013 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES: THE NATURE STORE SELLS ITEMS THAT HELP PROMOTE THE ENJOYMENT, UNDERSTANDING, AND PROTECTION OF THE NATURAL WORLD. EXPENSES \$ 187,842. INCLUDING GRANTS OF \$ 0. REVENUE \$ 318,777. FORM 990, PART VI, SECTION A, LINE 6: EXPLANATION: THE ORGANIZATION HAS APPROXIMATELY 14,992 MEMBERS WHO SUPPORT THE ORGANIZATION'S AVIAN VETERINARIAN SERVICES, RECEIVE THE NEWSLETTER, PARTICIPATE IN PROGRAMS AND VOTE FOR THE ORGANIZATION'S OFFICERS AND DIRECTORS. FORM 990, PART VI, SECTION A, LINE 7A: EXPLANATION: THE ORGANIZATION HAS APPROXIMATELY 14,992 MEMBERS WHO SUPPORT THE ORGANIZATION'S AVIAN VETERINARIAN SERVICES, RECEIVE THE NEWSLETTER, PARTICIPATE IN PROGRAMS AND VOTE FOR THE ORGANIZATION'S OFFICERS AND DIRECTORS. FORM 990, PART VI, SECTION B, LINE 11: EXPLANATION: A DRAFT IS CIRCULATED BY EMAIL TO THE BOARD FOR REVIEW AND COMMENT PRIOR TO SIGNING. FORM 990, PART VI, SECTION B, LINE 12C: EXPLANATION: THE ORGANIZATION'S BYLAWS REQUIRE ALL BOARD MEMBERS, DIRECTORS, AND STAFF TO DISCLOSE CONFLICTS OF INTEREST. SHOULD ANY BE FOUND, THE INDIVIDUAL MUST ABSTAIN FROM PARTICIPATION IN RELATED DECISION

IF NECESSARY RESIGN FROM THE BOARD.

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

332211 09-04-13 AND,

Schedule O (Form 990 or 990-EZ) (2013)

AUDUBON SOCIETY OF PORTLAND	93-6026088
FORM 990, PART VI, SECTION B, LINE 15A:	
EXPLANATION: A COMMITTEE OF DIRECTORS OR OFFICERS WHO HAVE	PERSONNEL
BACKGROUNDS GATHER COMPENSATION INFORMATION FROM COMPARABL	E ORGANIZATIONS
IN THIS EMPLOYMENT REGION. THAT INFORMATION IS THEN PROVI	DED TO THE
EXECUTIVE COMMITTEE WHO ESTABLISHES THE EXECUTIVE DIRECTOR	'S SALARY.
FORM 990, PART VI, SECTION C, LINE 19:	
EXPLANATION: THE ANNUAL AUDITED FINANCIAL STATEMENTS ARE P	OSTED ON THE
ORGANIZATION'S WEBSITE.	
FORM 990, PART XII, LINE 2C:	
EXPLANATION: THE PROCESS HAS NOT CHANGED FROM THE PRIOR YE	AR.
	_

SCHEDULE R (Form 990)

Related Organizations and Unrelated Partnerships

▶Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

➤ Attach to Form 990.

➤ See separate instructions.

Open to Public Inspection Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

Department of the Treasury Internal Revenue Service Name of the organization

AUDUBON SOCIETY OF PORTLAND

Employer identification number 93-6026088

OMB No. 1545-0047

(a)	(b)	(c)	(d)	(4	*)		(f)	
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state o foreign country)		I		Direct o	Direct controlling entity	
rt II Identification of Related Tax-Exempt Organizations during the tax year.	anizations Complete if the organization	answered "Yes" on Form 990,	Part IV, line 34 be	ecause it had one	or more r	elated tax-exen	npt	
Identification of Related Tax-Exempt Organizations during the tax year. (a) Name, address, and EIN of related organization	anizations Complete if the organization (b) Primary activity	answered "Yes" on Form 990, (c) Legal domicile (state or foreign country)	Part IV, line 34 be (d) Exempt Code section	(e) Public charity status (if sectio	Direc	elated tax-exen (f) ct controlling entity	Section cont	(g) 512(b)(1: trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity	Direc	(f) ct controlling	Section cont	trolled
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if sectio	Direc	(f) ct controlling	Section cont	trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if sectio	Direc	(f) ct controlling	Section cont	trolled tity?
organizations during the tax year. (a) Name, address, and EIN	(b)	(c) Legal domicile (state or	(d) Exempt Code	(e) Public charity status (if sectio	Direc	(f) ct controlling	Section cont	trolled tity?

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

Schedule R (Form 990) 2013

Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)				
Name, address, and EIN	Primary activity	Legal domicile	Direct controlling	Predominant income	Predominant income	Predominant income	Predominant income	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Predominant income Share of total	Share of	Disproportionate		Code V-UBI	General	Percentage ownership
of related organization		(state or foreign	entity	excluded from tax under	income	end-of-year assets	alloca	itions?	amount in box 20 of Schedule K-1 (Form 1065)	partner	ownership				
		country)		sections 512-514)			Yes	No	K-1 (Form 1065)	Yes N	o				
-															
-															
											+				

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership		tion b)(13) rolled iity?
		country						Yes	No

Х

10

Page 3 Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36. Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule. Yes No During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV? a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity **b** Gift, grant, or capital contribution to related organization(s) 1b c Gift, grant, or capital contribution from related organization(s) 1c d Loans or loan guarantees to or for related organization(s) 1d Х e Loans or loan guarantees by related organization(s) 1e Х f Dividends from related organization(s) 1f Х Sale of assets to related organization(s) 1g X h Purchase of assets from related organization(s) 1h Х Exchange of assets with related organization(s) Х j Lease of facilities, equipment, or other assets to related organization(s) 1i Х k Lease of facilities, equipment, or other assets from related organization(s) 1k 11 Performance of services or membership or fundraising solicitations for related organization(s) Х 1m m Performance of services or membership or fundraising solicitations by related organization(s) n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s) 1n

p Reimbursement paid to related organization(s) for expenses 1p Reimbursement paid by related organization(s) for expenses 1q r Other transfer of cash or property to related organization(s) 1r **s** Other transfer of cash or property from related organization(s) If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds. Name of related organization Method of determining amount involved Transaction Amount involved type (a-s) (1) NATIONAL AUDUBON SOCIETY C 13,129.

o Sharing of paid employees with related organization(s)

332163 09-12-13 Schedule R (Form 990) 2013 39

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners sec 501(c)(3) orgs.?	(f) Share of total income	(g) Share of end-of-year assets	Disprotion allocat	opor- late tions?		Gener mana partn	(k) Percenta ownersh
		osumiy)	under Section 312-314)	Yes No	indesine	433313	Yes	No	(FOITH 1005)	Yes	NO
									0-1		

Schedule R (Form 990) 2013

Form **8868**

(Rev. January 2014)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

▶ Information about Form 8868 and its instructions is at www.irs.gov/form8868 .

OMB No. 1545-1709

			WWW.mo.gov/norm	0000			
	are filing for an Automatic 3-Month Extension, complete				>	X	
	are filing for an Additional (Not Automatic) 3-Month Ext						
	complete Part II unless you have already been granted a						
Electro	nic filing $_{(e extit{-}file)}$. You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time	e to file (6	months for a corpo	ration	
required	to file Form 990-T), or an additional (not automatic) 3-mon	th extensi	on of time. You can electronically file	e Form 88	68 to request an ext	tension	
of time t	o file any of the forms listed in Part I or Part II with the exc	eption of	Form 8870, Information Return for Tr	ansfers A	ssociated With Cert	ain	
Persona	I Benefit Contracts, which must be sent to the IRS in paper	er format (see instructions). For more details or	the elect	ronic filing of this fo	rm,	
	w.irs.gov/efile and click on e-file for Charities & Nonprofits.						
Part I							
A corpo Part I or	ration required to file Form 990-T and requesting an autom			•	>		
	corporations (including 1120-C filers), partnerships, REMIC come tax returns.	Cs, and tru	usts must use Form 7004 to request a		on of time e <mark>r's identifying nu</mark> m	ber	
Type or print	Name of exempt organization or other filer, see instruc	ctions.		Employe	identification numb	er (EIN) or	
ile by the	AUDUBON SOCIETY OF PORTLAND				93-602608	8	
due date fo iling your	5151 NW CORNELL ROAD	e instruct	ions.	Social se	curity number (SSN))	
eturn. See nstructions	City, town or post office, state, and ZIP code. For a fo	reign addr	ress, see instructions.				
	PORTLAND, OR 97210						
	Detrume and fourth a nature that their application is fau (file					0 1	
Enter th	e Return code for the return that this application is for (file	a separat	e application for each return)				
Applica	tion	Return	Application			Return	
s For		Code	Is For			Code	
	0 or Form 990-EZ	01	Form 990-T (corporation)			07	
Form 99		02	Form 1041-A			08	
	20 (individual)	03	Form 4720 (other than individual)				
Form 99	·	04	Form 5227		10		
	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	0-T (trust other than above)	06	Form 8870				
	ALEXANDER PATTE	RSON					
• The b	books are in the care of > 5151 NW CORNELL	ROAD	- PORTLAND, OR 97	210			
Telep	hone No. ► 503-292-6855		Fax No.				
If the	organization does not have an office or place of business	in the Uni	ted States, check this box		>		
If this	is for a Group Return, enter the organization's four digit G	Group Exe	mption Number (GEN) I	f this is fo	r the whole group, c	heck this	
oox ►	. If it is for part of the group, check this box	and atta	ch a list with the names and EINs of	all membe	ers the extension is	for.	
1 In	equest an automatic 3-month (6 months for a corporation	required to	o file Form 990-T) extension of time ເ	ıntil			
_	FEBRUARY 15, 2015 , to file the exempt	t organizat	ion return for the organization name	d above.	The extension		
is	for the organization's return for:						
>	calendar year or						
	X tax year beginning JUL 1, 2013	, an	d ending <u>JUN 30, 2014</u>		_ ·		
2 If	the tax year entered in line 1 is for less than 12 months, ch	neck reaso	n: Initial return I	Final retur	n		
L	Change in accounting period						
	this application is for Forms 990-BL, 990-PF, 990-T, 4720,			0			
	onrefundable credits. See instructions.	3a	\$	0.			
	this application is for Forms 990-PF, 990-T, 4720, or 6069,		•	0			
_	timated tax payments made. Include any prior year overpa			3b	\$	0.	
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required,						Λ	
	using EFTPS (Electronic Federal Tax Payment System). S			3c	\$	0.	
Caution netructi	. If you are going to make an electronic funds withdrawal (uirect deb	אנוו נחוג Form 84 אנון with this Form 84	ಏತ-EU an	u rorm 88/9-EU for	payment	

LHA 323841 12-31-13 For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form **8868** (Rev. 1-2014)