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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Inspection

<u>A</u>	For the	2023 calendar year, or tax year beginning JUL 1, 2023	and e	ending J	<u>UN 30, 2024</u>	1				
В	Check if applicable	C Name of organization			D Employer identi	fication number				
	Addres	The Houston Audubon Society								
	Name change Initial	Doing business as			23-70118	370				
L	return	Number and street (or P.O. box if mail is not delivered to street address)	address) Room/suite E Telephone number 713-932-1639							
	Final return/	440 Wilchester Boulevard	er Boulevard							
	termin- ated		G Gross receipts \$	3,119,312.						
L	Amend	Houston, IX //0/9-/329	H(a) Is this a group return							
	Applica tion pendin				for subordinates? Yes X No					
	· .	same as C above			H(b) Are all subordinates	included? Yes No				
<u>T</u>	Tax-exe		7(a)(1) oı	r 527	1	a list. See instructions				
	Websit				H(c) Group exempt					
	orm of art I	organization: X Corporation Trust Association Other Summary		L Year	of formation: 1969	M State of legal domicile; TX				
			Iouat	0n 711	dubon Cogic	tu atrivoa				
é	1	Briefly describe the organization's mission or most significant activities: $\underline{\mathtt{H}}$ to advance the conservation of birds a				cy strives				
Governance		Check this box if the organization discontinued its operations or								
ern	2		-			1 1				
Š	3				3					
જ	4	Number of independent voting members of the governing body (Part VI, line 20								
ties	5	Total number of individuals employed in calendar year 2023 (Part V, line 2a								
Activities &	6	Total number of volunteers (estimate if necessary)								
Ą	l 'a	Total unrelated business revenue from Part VIII, column (C), line 12								
_	0	Net unrelated business taxable income from Form 990-T, Part I, line 11			Prior Year	Current Year				
	8	Contributions and grants (Part VIII, line 1h)			1,703,542					
Revenue	9				277,204					
	10	Program service revenue (Part VIII, line 2g) Investment income (Part VIII, column (A), lines 3, 4, and 7d)			106,786					
Be	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			51,318					
	1	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line			2,138,850					
_		Grants and similar amounts paid (Part IX, column (A), lines 1-3)			2,500	1,610.				
	1				0					
"	45	Salaries, other compensation, employee benefits (Part IX, column (A), lines	umn (Δ) lines 5-10)		1,186,833					
ses	16a	Professional fundraising fees (Part IX, column (A), line 11e)			0.					
Expenses	. b	Total fundraising expenses (Part IX, column (D), line 25) 24	9,50	8.						
ŭ	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			804,773	748,844.				
		Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)			1,994,106					
		Revenue less expenses. Subtract line 18 from line 12			144,744					
or or	3	,		Ве	ginning of Current Year					
Net Assets or	20	Total assets (Part X, line 16)			13,500,876	14,053,681.				
Ass	21	Total liabilities (Part X, line 26)			123,454					
Net	22	Net assets or fund balances. Subtract line 21 from line 20			13,377,422	13,945,648.				
Pi	art II	Signature Block		·						
Und	er pena	lties of perjury, I declare that I have examined this return, including accompanying so	chedules	and stateme	ents, and to the best of r	ny knowledge and belief, it is				
true	, correc	t, and complete. Declaration of preparer (other than officer) is based on all information	on of whi	ch preparer	has any knowledge.					
		Electronically Filed								
Sig		Signature of officer			Date					
He	e e	Jed Aplaca, President & CEO								
		Type or print name and title		1.						
		Print/Type preparer's name Preparer's signature	_	l l	Date Check	PTIN				
Pai	The state of the s	Susanna Blackmon Susanna Blac	05/14/25 self-employed P01226926							
	parer	Firm's name Blazek & Vetterling	Firm's EIN	76-0269860						
Use	Only	Firm's address 2900 Weslayan, Suite 200								
		Houston, TX 77027			Phone no. 7	13-439-5739				
Ma	y the IF	RS discuss this return with the preparer shown above? See instructions				X Yes No				

4d Other program services	(Describe on Schedule O.)	
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(Expenses \$ including grants of \$

1,391,422. Total program service expenses

Form 990 (2023) The Houston Audubon Society 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? See instructions	2	Х	
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 Rev. Proc. 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		x
0	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>	- '-		1
8	, ,			X
•	Schedule D, Part III	8		
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			 ₩
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		37	
	or in quasi-endowments? If "Yes," complete Schedule D, Part V	10	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
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	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
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			
	Schedule D, Parts XI and XII	12a	Х	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		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		Х
b				<u> </u>
D	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b		X
15	or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	170		
13		15		x
16	foreign organization? If "Yes," complete Schedule F, Parts II and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		1
16		46		x
4-	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			_v
40	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	,-	37	
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	-
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		X

The Houston Audubon Society 23-7011870 Page 4 Part IV Checklist of Required Schedules (continued) Yes No Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III Х 22 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 X 23 Schedule J 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 Х Schedule K. If "No," go to line 25a 24a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? 24c d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? 24d 25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I 25a Х b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III Х 27 28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV 28b c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If 28c "Yes," complete Schedule L, Part IV Х 29 29 Did the organization receive more than \$25,000 in noncash contributions? If "Yes," complete Schedule M Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? |f "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I 31 31

	Schedule N, Part II	32		<u> </u>
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			х
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		
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		Х
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	X	

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete

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 13 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 0 Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?

Form 990 (2023) The Houston Audubon Society

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

				Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,				
	filed for the calendar year ending with or within the year covered by this return	2a 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?	2b	X	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?		3a		Х
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	o	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a				
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccount)?	4a		Х
b	If "Yes," enter the name of the foreign country				
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Advanced Financial Financial Advanced Financial Financ	ccounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction	ction?	5b		X
С	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 organization solicit			
			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 provided to the payor?	7a	X	
b			7b	Х	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	is required			
	to file Form 8282?	1 1	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. Did a donor advised fund maintained	•	_		
^			8		
9	Sponsoring organizations maintaining donor advised funds.		0-		
a			9a 9b		
10	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? Section 501(c)(7) organizations. Enter:		90		
а	Initiation fees and capital contributions included on Part VIII, line 12	10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b			
11	Section 501(c)(12) organizations. Enter:	100			
	Gross income from members or shareholders	11a			
	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		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.				
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			
С	Enter the amount of reserves on hand	13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul		14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than $$1,000,000$ in remuned the organization subject to the section $$4960$$ tax on payment(s) of more than $$1,000,000$$ in remuned $$1,000,0000$$ in remuned $$$				
	excess parachute payment(s) during the year?		15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.				
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		X
	If "Yes," complete Form 4720, Schedule O.				
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac				
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17		
	If "Yes," complete Form 6069.				

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

	to mile da, db, di 100 belon, decembe and amountaineed, produced, di changes on conteduce e. eee mendenene.			
	Check if Schedule O contains a response or note to any line in this Part VI			X
Sec	tion A. Governing Body and Management			l
	Enter the number of voting members of the governing body at the end of the tax year 16		Yes	No
та	J J J ,	-		
	If there are material differences in voting rights among members of the governing body, or if the governing			
	body delegated broad authority to an executive committee or similar committee, explain on Schedule 0. Enter the number of voting members included on line 1a. above, who are independent 16 16			
b	, , , , , , , , , , , , , , , , , , , ,	1		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			Х
•	officer, director, trustee, or key employee?	2		^
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?			х
4	of officers, directors, trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
4		5		X
5 6	Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders?	6	Х	
о 7а		-	21	
<i>1</i> a		7a	х	
h	more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	1a	21	
b		7b	х	
8	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	75	21	
а		8a	х	
b	The governing body? 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	00		
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	(This Section B requests information about policies not required by the internal nevertue Gode.)		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,			
	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 on 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		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	on 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	
b	Other officers or key employees of the organization	15b		X
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
	taxable entity during the year?	16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	exempt status with respect to such arrangements?	16b		
Sec	tion C. Disclosure			
17	List the states with which a copy of this Form 990 is required to be filed			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availal	ole
	for public inspection. Indicate how you made these available. Check all that apply.			
	X Own website Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finano	cial	
	statements available to the public during the tax year.			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	Barbara Thompson - 713-932-1639 440 Wilchester Blvd, Houston, TX 77079			
	TTO MITTOROGULE DIVA, MURDUUM, MA //V/J			

Form 990 (2023)

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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 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 all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

(A)	(B)	Jiga	IIIZA		(C)			(D)	(E)	(F)		
Name and title	Average	Po		Pos	Position eck more than one			Reportable	Reportable	Estimated		
	hours per	box, unles		ess person is both an nd a director/trustee)			an	compensation	compensation	amount of		
	week (list any					from the	from related organizations	other compensation				
	hours for	direc				D.		organization	(W-2/1099-MISC/	from the		
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)	organization		
	organizations	al trus	nal tr		loyee	com p		1099-NEC)		and related		
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			organizations		
(1) Helen E. Drummond	line) 40.00	흐	Ë	JO.	- S	± €	Po					
President & CEO	0.00	-		Х				126,831.	0.	18,662.		
(2) Greg Whittaker	1.00							220,0021				
Chair (As of 2/24)	0.00	Х		х				0.	0.	0.		
(3) Janeen Judah	1.00								•			
Chair (thru 1/24)	0.00	Х		х				0.	0.	0.		
(4) Lucy Barrow	1.00								-			
Secretary	0.00	Х		Х				0.	0.	0.		
(5) Robert Westendarp	1.00											
Treasurer	0.00	Х		Х				0.	0.	0.		
(6) Stanley Almoney	1.00											
Director at Large	0.00	Х						0.	0.	0.		
(7) Catherine Clark	1.00											
Director at Large	0.00	Х						0.	0.	0.		
(8) Tony Dang	1.00											
Director at Large	0.00	Х						0.	0.	0.		
(9) Rob Jones	1.00								_	_		
Director at Large	0.00	Х						0.	0.	0.		
(10) Bill Matthews	1.00								_	_		
Director at Large	0.00	Х						0.	0.	0.		
(11) Eric Mayer	1.00											
Director at Large	0.00	Х						0.	0.	0.		
(12) Bradford Moore	1.00											
Director at Large	0.00	Х						0.	0.	0.		
(13) Glenn Olsen	1.00								•	•		
Director at Large	0.00	Х						0.	0.	0.		
(14) Margaret Pierce	1.00									0		
Director at Large	0.00	Х						0.	0.	0.		
(15) Carol Price	1.00	3,7							0	0		
Director at Large	0.00	Х						0.	0.	0.		
(16) Letha Slagle Director at Large	1.00	v						0.	0.	0		
	2.00	Х						1 0.	U •	0.		
(17) Sam Smith Director at Large	0.00	Х						0.	0.	0.		
DITECTOL OF HOLDE	1 0.00	Λ						<u> </u>	U •	000		

332007 12-21-23 Form **990** (2023)

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	t C	ompensated Employee	s (continued)			
(A)	(B)			•	C)			(D)	(E)		(F)	1
Name and title	Average Position (do not check more than one box, unless person is both an							Reportable	Reportable		Estima	
	hours per week					s both or/trus		compensation	compensation from related		amour othe	
	(list any	tor						from the	organizations		compen	
	hours for	Individual trustee or director				ъ В		organization	(W-2/1099-MISC		from	
	related	tee or	ustee			ensate		(W-2/1099-MISC/	1099-NEC)		organiz	ation
	organizations	al trus	nal tr		oyee	om p		1099-NEC)			and rel	
	below line)	ividu	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organiza	ations
(10) Para Grantan	,	n Di	lus	#0	Ke	iĘ, E	요			\dashv		
(18) Pam Smolen	10.00	~								ا ۸		0
Director at Large	0.00	Х						0.		0.		0.
										\dashv		
										\dashv		
		-										
										\dashv		
		•										
										\neg		
										\Box		
										\Box		
1b Subtotal								126,831.		0.	18,	662.
c Total from continuation sheets to Part VI	I, Section A							0.		0.		0.
d Total (add lines 1b and 1c)								126,831.		0.	18,	662.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d ab	ove) wh	o re	eceived more than \$100,0	000 of reportable			_
compensation from the organization												1
										1	Ye	s No
3 Did the organization list any former officer,	•		•	•	•		•		•			37
line 1a? If "Yes," complete Schedule J for s											3	<u> </u>
4 For any individual listed on line 1a, is the su												v
and related organizations greater than \$150											4	X
5 Did any person listed on line 1a receive or a	•				,			J	ual for services		5	х
rendered to the organization? [f "Yes," com	iplete Schedule	e <i>J f</i>	or su	ich r	oers	on .				<u>l</u>	3	
Complete this table for your five highest contains the second secon	mnensated inc	lene	nder	nt cc	ntra	acto	re th	nat received more than \$	100 000 of compe	neat	tion from	
the organization. Report compensation for	•	•							•	, i ioai		
(A)	ine calcinaar y	Jui C	, run	<u>19 W</u>	1011	J1 VV1	Ï	(B)	<u> </u>		(C)	
Name and business	address							Description of s	ervices	С	ompensat	ion
Course Construction Group	LLC											
3535 W 12th St #150, Hous		7	70	8 0				Construction			343,	502.
	-											
2 Total number of independent contractors (in		ot lin	nited	d to t	_		ted	above) who received mo	re than			
\$100,000 of compensation from the organia	zation				1	L						

		Check if Schedule O cor	ntains a response	or note to any line	≘ in this Part VIII			
		Check ii defiedate o coi	ritains a response	or riote to arry link	(A)	(B)	(C)	(D)
					Total revenue	Related or exempt	Unrelated	Revenuè excluded
						function revenue	business revenue	from tax under sections 512 - 514
			T. T					Sections 512 - 514
nts nts		Federated campaigns						
3ra Iou		Membership dues		83,303.				
s, (Am		Fundraising events		282,363.				
ig ig	d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts	е	Government grants (contribu	utions) 1e	50,799.				
ig S	f	All other contributions, gifts, gra	ants, and					
the state		similar amounts not included ab	oove 1f	1,289,489.				
Ę Ġ	g	Noncash contributions included in line	es 1a-1f 1g \$	87,434.				
Se	h	Total. Add lines 1a-1f			1,705,954.			
				Business Code				
o o	2 a	Admission and program	fees	900099	373,270.	373,270.		
Š.	b				·	•		
Ser	c							
E S	d							
gra Re	u o		_					
Program Service Revenue	e •	All other program service rev	vonuo					
_					373,270.			
\dashv		Total. Add lines 2a-2f			373,270.			
	3	Investment income (including			170 000			172 222
					172,233.			172,233.
	4	Income from investment of t	•	[
	5	Royalties						
			(i) Real	(ii) Personal				
			За <u> </u>					
	b	Less: rental expenses 6	6b					
	С	Rental income or (loss) 6	6c					
	d	Net rental income or (loss)						
	7 a	Gross amount from sales of	(i) Securities	(ii) Other				
		assets other than inventory 7	7a 602,075.	25,000.				
	b	Less: cost or other basis						
ē		and sales expenses 7	7b 530,874.	26,061.				
ē	С		7c 71,201.	-1,061.				
Revenue		Net gain or (loss)	•		70,140.			70,140.
ē		Gross income from fundraising						
₽			2,363. of					
		contributions reported on lin						
		Part IV, line 18	I	149,860.				
	h		8b	 				
		Net income or (loss) from fur		,	22,478.			22,478.
		Gross income from gaming a						, , , , ,
	Ja	Part IV, line 19						
	L	Less: direct expenses						
		Net income or (loss) from ga	_	· · · · · · · · · · · · · · · · · · ·				
	то а	Gross sales of inventory, les	l l	90,920.				
		and allowances	l l					
		Less: cost of goods sold		22,631.	60.000	60,000		
\dashv	С	Net income or (loss) from sa	iles of inventory		68,289.	68,289.		
2				Business Code				
Miscellaneous Revenue	11 a							
and	b							
Sevel	С							
Aiš	d	All other revenue						
	е	Total. Add lines 11a-11d						
	12	Total revenue See instructions	2		2 412 364.	441 559.	0.	264 851.

Form 990 (2023) The Houston Audubon Society 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											
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses							
1	Grants and other assistance to domestic organizations											
	and domestic governments. See Part IV, line 21	1,610.	1,610.									
2	Grants and other assistance to domestic											
	individuals. See Part IV, line 22											
3	Grants and other assistance to foreign											
	organizations, foreign governments, and foreign											
	individuals. See Part IV, lines 15 and 16											
4	Benefits paid to or for members											
5	Compensation of current officers, directors,											
	trustees, and key employees	153,745.	89,741.	51,243.	12,761.							
6	Compensation not included above to disqualified											
	persons (as defined under section 4958(f)(1)) and											
	persons described in section 4958(c)(3)(B)	225 512	504 540	4.5 004								
7	Other salaries and wages	926,619.	621,648.	147,281.	157,690.							
8	Pension plan accruals and contributions (include	04 540	44 000	4 645	E 00E							
	section 401(k) and 403(b) employer contributions)	21,518. 73,008.	11,838. 40,286.	4,645. 16,174.	5,035. 16,548.							
9	Other employee benefits	73,008.	40,286.	16,1/4.	16,548.							
10	Payroll taxes	78,286.	51,755.	14,107.	12,424.							
11	Fees for services (nonemployees):											
а	Management											
b	Legal	10 000		10 000								
С	Accounting	19,000.		19,000.								
d	Lobbying											
е	Professional fundraising services. See Part IV, line 17	25 170		25 170								
f	Investment management fees	25,170.		25,170.								
g	,	60 175	22 244	27 601	7 450							
	column (A), amount, list line 11g expenses on Sch O.)	68,475. 10,316.	23,344. 10,153.	37,681.	7,450.							
12	Advertising and promotion	78,665.	32,051.	28,486.	18,128.							
13	Office expenses	42,185.	29,783.	6,201.	6,201.							
14	Information technology	42,103.	29,703.	0,201.	0,201.							
15	Royalties	38,603.	37,101.	751.	751.							
16	Occupancy	21,664.	17,249.	3,281.	1,134.							
17	Travel Payments of travel or entertainment expenses	21,004.	11,247•	3,201.	1,134.							
18	for any federal, state, or local public officials											
19	Conferences, conventions, and meetings	5,302.	4,700.	252.	350.							
20		21.	2,700	21.	3301							
21	Payments to affiliates			2.1.								
22	Depreciation, depletion, and amortization	212,944.	208,596.	2,174.	2,174.							
23	Insurance	89,584.	82,437.	5,047.	2,100.							
24	Other expenses. Itemize expenses not covered	22,22=:	<u> </u>	3,3=::	=,=							
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)											
а	Sanctuary maintenance	107,999.	107,999.									
b	Licenses, subscriptions	8,773.	7,189.	512.	1,072.							
c	Membership dues	6,519.	6,463.	28.	28.							
d	Classes, field trips	5,189.	5,189.									
-	All other expenses	8,435.	2,290.	483.	5,662.							
25	Total functional expenses. Add lines 1 through 24e	2,003,630.	1,391,422.	362,700.	249,508.							
26	Joint costs. Complete this line only if the organization	-	-	-	-							
	reported in column (B) joint costs from a combined											
	educational campaign and fundraising solicitation.											
	Check here if following SOP 98-2 (ASC 958-720)											
					E 000 (2222)							

Form 990 (2023)
Part X Balance Sheet

ı aı	ιλ	balance Sneet					
		Check if Schedule O contains a response or note	e to any	y line in this Part X			(P)
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			82,925.	1	104,546.
	2	Savings and temporary cash investments			882,035.	2	982,710.
	3	Pledges and grants receivable, net			210,292.	3	273,833.
	4	Accounts receivable, net			33,104.	4	66,669.
	5	Loans and other receivables from any current or					
		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons		5	
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described		6			
ξ	7	Notes and loans receivable, net		7			
Assets	8	Inventories for sale or use			9,352.	8	12,178.
ğ	9	Prepaid expenses and deferred charges			23,499.	9	40,805.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	9,961,293.			
	b	Less: accumulated depreciation	10b	1,360,403.	8,610,767.	10c	8,600,890.
	11	Investments - publicly traded securities	3,416,492.	11	3,734,401.		
	12	Investments - other securities. See Part IV, line 1				12	
	13	Investments - program-related. See Part IV, line 1		13			
	14	Intangible assets			14		
	15	Other assets. See Part IV, line 11		232,410.	15	237,649.	
	16	Total assets. Add lines 1 through 15 (must equa			13,500,876.	16	14,053,681.
	17	Accounts payable and accrued expenses		70,343.	17	55,909.	
	18	Grants payable	46 205	18	40.005		
	19	Deferred revenue			46,325.	19	47,875.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, subst					
iak		controlled entity or family member of any of thes				22	
_	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay					
		parties, and other liabilities not included on lines of Schedule D	17-24)	. Complete Part X	6,786.	25	4,249.
	26	Total liabilities. Add lines 17 through 25			123,454.	26	108,033.
	20	Organizations that follow FASB ASC 958, che			123,131.	20	100,033.
es		and complete lines 27, 28, 32, and 33.					
anc	27	Net assets without donor restrictions			8,268,029.	27	8,940,099.
3ala	28	Net assets with donor restrictions			5,109,393.	28	5,005,549.
ρl		Organizations that do not follow FASB ASC 9					, ,
Fu		and complete lines 29 through 33.					
ō	29	Capital stock or trust principal, or current funds				29	
sets	30	Paid-in or capital surplus, or land, building, or eq				30	
Ass	31	Retained earnings, endowment, accumulated inc				31	
Net Assets or Fund Balances	32	Total net assets or fund balances		13,377,422.	32	13,945,648.	
_	33				13,500,876.	33	14,053,681.

Pa	rt XI │ Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>					
1	Total revenue (must equal Part VIII, column (A), line 12)	1		<u>,41</u>				
2	Total expenses (must equal Part IX, column (A), line 25)	2	2	,00				
3	Revenue less expenses. Subtract line 2 from line 1	3				<u>34.</u>		
4	4 Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) 4 1							
5								
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain on Schedule O)	9				0.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,							
	column (B))	10	13	,94	5,6	48.		
Pa	t XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII							
					Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.							
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X		
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a						
	separate basis, consolidated basis, or both:							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?			2b	X	$ldsymbol{ld}}}}}}$		
	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 on Sche	edule O.						
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the							
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required		.					
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b				
				Form	990	(2023)		

SCHEDULE A

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2023

Open to Public Inspection

Employer identification number

		The :	Houston Aud	dubon Society	7			2	3-701187	70
Pai	tΙ	Reason for Public C	Charity Status.	(All organizations must c	omplete th	nis part.) S	ee instruction	s.		
The c	organ	ization is not a private found	ation because it is: (F	or lines 1 through 12, cl	heck only	one box.)				
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2		A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	ii).			
4		A medical research organiza	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's n	iame,
		city, and state:								
5		An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in	
		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	70(b)(1)(A)	(v).			
7	X	An organization that normal	lly receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general į	oublic described	d in
		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Par	t II.)					
9		An agricultural research org	anization described	in section 170(b)(1)(A)(ix) operate	ed in conju	ınction with a	land-grant	college	
		or university or a non-land-g	rant college of agricu	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
		university:								
10		An organization that normal	lly receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts	from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross inves	tment
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	ifter June 30, 19	975.
		See section 509(a)(2). (Cor	mplete Part III.)							
11	_	An organization organized a	•	•	•					
12		An organization organized a	•	•	-			-		
		more publicly supported org							Check the box o	วท
		lines 12a through 12d that o	• •					-		
а			· · · · · · · · · · · · · · · · · · ·		•	_				
		the supported organization		• • • •	majority o	of the direc	tors or trustee	es of the su	ipporting	
		organization. You must c						/		
b			· ·				-	•	-	
		control or management of			ame perso	ns that co	ntroi or manaç	ge the supp	ported	
		organization(s). You mus	-		in aannaat	مطانيي مما	and functional	lı intograta	ما در ام	
С		Type III functionally interiors its supported organization	= : :					ly integrate	eu wiiri,	
d		Type III non-functionally	.,,	·	•	•	-	tod organi	zation(s)	
u		that is not functionally into						_		
		requirement (see instructi	•	,	•		•	an attenti	7611633	
е		Check this box if the orga	•	•	•			II Type III		
·		functionally integrated, or					Type I, Type	ii, Type iii		
f	Fnte	er the number of supported o		any integrated supporting		ation.				
		vide the following information	•							
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga	nization listed ng document?	(v) Amount of	monetary	(vi) Amount o	f other
		organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see inst	tructions)
T - 4 - 1							I		I	

332021 12-21-23

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) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	1528832.	2350884.	1644020.	1703542.	1705954.	8933232.
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	1528832.	2350884.	1644020.	1703542.	1705954.	8933232.
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)						769,161.
6	Public support. Subtract line 5 from line 4.						8164071.
Sec	tion B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
7	Amounts from line 4	1528832.	2350884.	1644020.	1703542.	1705954.	8933232.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	118,915.	96,966.	151,797.	186,490.	172,233.	726,401.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on		5,863.			22,478.	28,341.
10	Other income. Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI.)						
11	Total support. Add lines 7 through 10						9687974.
	Gross receipts from related activities,	•	,				,635,239.
13	First 5 years. If the Form 990 is for the	-					
0	organization, check this box and stor						
	tion C. Computation of Publi			. (2)			0.4 0.7
	Public support percentage for 2023 (I					14	84.27 %
	Public support percentage from 2022					15	83.04 %
16a	Sa 33 1/3% support test - 2023. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization						
L-							
D	33 1/3% support test - 2022. If the condition have						
47~	and stop here. The organization qual						
ı/a	10% -facts-and-circumstances test	_					
	and if the organization meets the facts		•	-		· ·	
L	meets the facts-and-circumstances te	-	•	• • •	-	7a, and line 15 is 1	
a	10% -facts-and-circumstances test	_					1070 UI
	more, and if the organization meets the				•		
12	organization meets the facts-and-circu						H
10	Private foundation. If the organization	in ala not check a l	, 100 DO TO	a, 100, 17a, 01 170	, crieck triis box at	ia see iristructions	

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(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						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	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	т	1	T	Г	1	T
	ndar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
"	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
10	regularly carried on Other income. Do not include gain						
12	or loss from the sale of capital						
40	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)			Samuella and Colla Assess		104(-)(0)	
14	First 5 years. If the Form 990 is for the	-			•		
Se	check this box and stop here						<u></u>
	Public support percentage for 2023 (I			column (f))		15	
	Public support percentage from 2022					16	<u>%</u>
	ction D. Computation of Inves		-			10	70
	Investment income percentage for 20			ne 13 column (f))		17	%
18	Investment income percentage from					18	/ 6
	a 33 1/3% support tests - 2023. If the						
	more than 33 1/3%, check this box ar						
ŀ	33 1/3% support tests - 2022. If the						
•	line 18 is not more than 33 1/3%, che	•			•	•	
20	Private foundation. If the organization						

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

		Yes	No
	1		
	2		
	За		
	3b		
	3c		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
	401		
ule	10b A (Forn	n 990)	2023

Pa	rt IV Supporting Organizations _(continued)			
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
С	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,			
	supervised, or controlled the supporting organization.	2		
Sec	stion C. Type II Supporting Organizations			
			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors		103	140
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	·			
	or management of the supporting organization was vested in the same persons that controlled or managed	4		
Sec	the supported organization(s). stion D. All Type III Supporting Organizations	1		
	Ton B.711 Type in Supporting Organizations		. I	
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		
Sec	tion E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions))_		
а	The organization satisfied the Activities Test. Complete line 2 below.			
b	The organization is the parent of each of its supported organizations. Complete line 3 below.			
С	The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structior	ıs).	
2	Activities Test. Answer lines 2a and 2b below.		Yes	No
а	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of			
	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purposes,			
	how the organization was responsive to those supported organizations, and how the organization determined			
	that these activities constituted substantially all of its activities.	2a		
b				
J	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	· '			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged in	Oh		
_	these activities but for the organization's involvement.	2b		
3	Parent of Supported Organizations. Answer lines 3a and 3b below.			
а				
_	trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b		3h		
	of its supported organizations? If "Vos " describe in Part VI the role played by the organization in this regard	: : : Xh		1

Sche	dule A (Form 990) 2023 THE HOUSTON AUGUDON SO			23-7011870 Page 6
Pa	t V Type III Non-Functionally Integrated 509(a)(3) Support	ng Organ	izations	
1	Check here if the organization satisfied the Integral Part Test as a qualify	ing trust on	Nov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mu		•	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			

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

Schedule A (Form 990) 2023

emergency temporary reduction (see instructions).

instructions).

Sche Pa r		udubon Society	nizations /		3-7011870 Page 7			
	on D - Distributions	mnt nurnassa		1	Current Year			
_1	Amounts paid to supported organizations to accomplish exe			-'-				
2	Amounts paid to perform activity that directly furthers exemp organizations, in excess of income from activity	or purposes or supported		2				
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations		3				
4	Amounts paid to acquire exempt-use assets	es or supported organizations	•	4				
5	Qualified set-aside amounts (prior IRS approval required - pri	ovide details in Part VI)		5				
-5 -	Other distributions (describe in Part VI). See instructions.	Ovide details in Fait VI)		6				
7	Total annual distributions. Add lines 1 through 6.			7				
 -8	Distributions to attentive supported organizations to which the	ne organization is responsive						
Ü	(provide details in Part VI). See instructions.	ic organization is responsive		8				
9	Distributable amount for 2023 from Section C, line 6			9				
10	Line 8 amount divided by line 9 amount			10				
		(i)	(ii) Underdistributior		(iii) Distributable			
Secti	on E - Distribution Allocations (see instructions)	Excess Distributions	Pre-2023	13	Amount for 2023			
1	Distributable amount for 2023 from Section C, line 6							
2	Underdistributions, if any, for years prior to 2023 (reason-							
	able cause required - explain in Part VI). See instructions.							
3	Excess distributions carryover, if any, to 2023							
а	From 2018							
b	From 2019							
_ с	From 2020							
d	From 2021							
е	From 2022							
f	Total of lines 3a through 3e							
g	Applied to underdistributions of prior years							
h	Applied to 2023 distributable amount							
i_	Carryover from 2018 not applied (see instructions)							
j_	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.							
4	Distributions for 2023 from Section D,							
	line 7: \$							
a	Applied to underdistributions of prior years							
b	Applied to 2023 distributable amount							
с	Remainder. Subtract lines 4a and 4b from line 4.							
5	Remaining underdistributions for years prior to 2023, if							
	any. Subtract lines 3g and 4a from line 2. For result greater							
	than zero, explain in Part VI. See instructions.							
6	Remaining underdistributions for 2023. Subtract lines 3h							
	and 4b from line 1. For result greater than zero, explain in							
	Part VI. See instructions.							
7	Excess distributions carryover to 2024. Add lines 3j							
	and 4c.							
8_	Breakdown of line 7:							
	Excess from 2019							
b	Excess from 2020							
С	Excess from 2021							
d	Excess from 2022							
е	Excess from 2023							

Schedule A (Form 990) 2023

332028 12-21-23 Schedule A (Form 990) 2023

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Schedule of Contributors

Attach to Form 990, 990-EZ, or 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2023

Name of the organization **Employer identification number** The Houston Audubon Society 23-7011870 Organization type (check one):

•						
Filers of:		Section:				
Form 990 o	r 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-P	F	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 Ru	lle					
		filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special Rul	les					
sec	For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.					
col	For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.					
yea is d pu	ar, contributions of checked, enter he prose. Don't com	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box ere the total contributions that were received during the year for an exclusively religious, charitable, etc., plete any of the parts unless the General Rule applies to this organization because it received nonexclusively etc., contributions totaling \$5,000 or more during the year \$				
answer "No	on Part IV, line 2	t isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it must 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 requirements of Schedule B (Form 990).				

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

Schedule B (Form 990) (2023)

Name of organization Employer identification number

The Houston Audubon Society

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		\$131,661.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
2		\$100,749.	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		\$	Person X Payroll			
(a)	(b)	(c)	(d)			
	Name, address, and ZIP + 4	\$ 75,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
5		\$60,000.	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			
6		\$60,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

Name of organization Employer identification number

The Houston Audubon Society

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			
7		\$ 55,000.	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			
8		\$ 53,457.	Person X Payroll Noncash X (Complete Part II for noncash contributions.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
9		\$50,000.	Person X Payroll			
(a)	(b)	(c)	(d)			
No10	Name, address, and ZIP + 4	Total contributions \$ 45,000.	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
11_		\$\$\$	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			
12		\$\$	Person X Payroll Noncash (Complete Part II for noncash contributions.)			

The Houston Audubon Society

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			
13		\$\$	Person X Payroll			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
14		\$\$	Person X Payroll			
(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			
NO.	Name, address, and ZIP + 4	\$	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.)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)			

Name of organization Employer identification number

The Houston Audubon Society

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if a	dditional space is needed.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
8	Publicly-traded securities		
		\$53,457.	02/13/24
(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 organization **Employer identification number** The Houston Audubon Society 23-7011870 Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this info. once.) Use duplicate copies of Part III if additional space is needed. (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (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 D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

Attach to Form 990.

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

OMB No. 1545-0047 Inspection

Name of the organization

The Houston Audubon Society

Employer identification number 23-7011870

Pai	TI Organizations Maintaining Donor Advised organization answered "Yes" on Form 990, Part IV, line		or Accounts. Complete if the
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in w	vriting that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's e	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor ac	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor or	donor advisor, or for any other purpose	conferring
_	impermissible private benefit?		Yes No
Pai	t II Conservation Easements. Complete if the org	anization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	`	
	Preservation of land for public use (for example, recreat	ion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
_	Total number of conservation easements		
b			
	Number of conservation easements on a certified historic stru		2c
d	Number of conservation easements included on line 2c acquire	• • •	
_	on a historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation easi		
5	Does the organization have a written policy regarding the peri		Yes No
6	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting, h	landing of violations, and emorcing cons	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handl	ling of violations, and enforcing conserva	ition easements during the year
-	3,		
8	Does each conservation easement reported on line 2d above	satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?	•	
9	In Part XIII, describe how the organization reports conservation		
	balance sheet, and include, if applicable, the text of the footne	ote to the organization's financial statem	ents that describes the
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or Ot	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 958	3, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	lic exhibition, education, or research in fu	urtherance of public
	service, provide in Part XIII the text of the footnote to its finan-	cial statements that describes these item	ns.
b	If the organization elected, as permitted under FASB ASC 958	B, to report in its revenue statement and	balance sheet works of
	art, historical treasures, or other similar assets held for public $% \left(1\right) =\left(1\right) \left(1\right) $	exhibition, education, or research in furth	herance of public service,
	provide the following amounts relating to these items.		
	(i) Revenue included on Form 990, Part VIII, line 1		
			\$
2	If the organization received or held works of art, historical trea	sures, or other similar assets for financia	al gain, provide
	the following amounts required to be reported under FASB AS	_	
а	Revenue included on Form 990, Part VIII, line 1		\$
b	Assets included in Form 990, Part X		

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		4,609,780.		4,609,780.
b Buildings		5,047,416.	1,138,986.	3,908,430.
c Leasehold improvements				
d Equipment		273,543.	190,863.	82,680.
e Other		30,554.	30,554.	0.
Total. Add lines 1a through 1e. (Column (d) must equa	8,600,890.			

Schedule D (Form 990) 2023

Part VII Investments - Other Securities Complete if the organization answered "Yes" or	n Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end	of-year market value
(1) Financial derivatives			•
(2) Closely held equity interests			
(3) Other			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, line 12, col. (B))			
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes" or		_	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end	-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, line 13, col. (B))			
Part IX Other Assets			
Complete if the organization answered "Yes" or		e 11d. See Form 990, Part X, line 15.	
(a) D	escription		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, line 15, col. Part X Other Liabilities	<u>(B))</u>		
Complete if the organization answered "Yes" or	n Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			(b) Book value
(2) Finance lease liability			4,249.
			7,447
(3)			
<u>(4)</u>			
<u>(6)</u>			
<u>(7)</u>			
(8)			
<u>(9)</u>			4 240
Total. (Column (b) must equal Form 990, Part X, line 25, col.	(B))		4,249.

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

Pa	rt XI	Reconciliation of Revenue per Audited Financial Sta	itements With F	Revenue per Re	turn	
		Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total	revenue, gains, and other support per audited financial statements			1	2,591,709.
2		ints included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net u	nrealized gains (losses) on investments	2a	159,492.		
b		ted services and use of facilities		22,392.		
С	Recov	veries of prior year grants	2c			
d	Other	(Describe in Part XIII.)	2d	22,631.		
е	Add li	nes 2a through 2d			2e	204,515.
3	Subtr	act line 2e from line 1			3	2,387,194.
4		ints included on Form 990, Part VIII, line 12, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a	25,170.		
b	Other	(Describe in Part XIII.)	4b			
С	Add li	nes 4a and 4b			4c	25,170. 2,412,364.
5	Total	revenue. Add lines 3 and 4c. (This must equal Form 990, Part I. line 12 Reconciliation of Expenses per Audited Financial St	2.)		5	2,412,364.
Pa	rt XII	•		Expenses per F	Returr	ו
		Complete if the organization answered "Yes" on Form 990, Part IV, li	ne 12a.			
1	Total	expenses and losses per audited financial statements			1	2,023,483.
2	Amou	ints included on line 1 but not on Form 990, Part IX, line 25:				
а	Donat	ted services and use of facilities	2a	22,392.		
b	Prior	year adjustments	2b			
С	Other	losses	2c			
d		(Describe in Part XIII.)		22,631.		
е	Add li	nes 2a through 2d			2e	45,023. 1,978,460.
3	Subtr	act line 2e from line 1			3	1,978,460.
4		ints included on Form 990, Part IX, line 25, but not on line 1:				
а	Invest	ment expenses not included on Form 990, Part VIII, line 7b	4a	25,170.		
b	Other	(Describe in Part XIII.)	4b			
С	Add li	nes 4a and 4b			4c	25,170. 2,003,630.
5	Total	expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line	18.)		5	2,003,630.
Pa	rt XIII	Supplemental Information				
Prov	ide the	descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and	4; Part IV, lines 1b a	and 2b; Part V, line 4	; Part X	K, line 2; Part XI,
lines	2d and	I 4b; and Part XII, lines 2d and 4b. Also complete this part to provide a	ny additional inform	ation.		
Pa:	rt V	, line 4:				
Ηοι	usto	n Audubon Society intends to grow t	he endowme	nt funds t	o ge	enerate a
st	ream	of earnings available for land and	facilitie	s stewards	hip,	, land
pu	rcha	ses, and general operations.				
Pa	rt X	I, Line 2d - Other Adjustments:				
In	vent	ory cost of goods sold				22,631.
Pa:	rt X	II, Line 2d - Other Adjustments:				
In	vent	ory cost of goods sold				22 621
		<u> </u>				22,631.
						22,031.

Schedule D (Form 990) 2023 The Part XIII Supplemental Information	Houston	Audubon	Society	23-7011870	Page 5
Part XIII Supplemental Information	n (continued)				

SCHEDULE G (Form 990)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 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.

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

OMB No. 1545-0047

Open to Public Inspection

Internal Revenue Service Name of the organization Employer identification number The Houston Audubon Society 23-7011870 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. 1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. а Mail solicitations е Solicitation of non-government grants Internet and email solicitations b Solicitation of government grants Phone solicitations Special fundraising events С g 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? Yes No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (iii) Did fundraiser have custody or control of contributions? (v) Amount paid (vi) Amount paid (i) Name and address of individual (iv) Gross receipts to (or retained by) (ii) Activity to (or retained by) fundraiser or entity (fundraiser) from activity organization listed in col. (i) Yes No Total 3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II Fundraising Events. Complete if the organization answered "Yes" on 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

		of fundraising event contributions and gr				ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Avian Affair	Evening on	None	(add col. (a) through
			Gala	the Canopy		1
			(event type)	(event type)	(total number)	col. (c))
ne			, , , ,	, ,,,	,	
Revenue	4	Gross receipts	406,355.	25,868.		432,223.
Be	'	Gross receipts	100,3331	2370001		132/2231
	2	Less: Contributions	262,900.	19,463.		282,363.
		Less. Contributions	202,300:	15,405.		202,303.
	2	Gross income (line 1 minus line 2)	143,455.	6,405.		149,860.
	3	Gross income (line 1 minus line 2)	143,4336	0,403.		140,000.
	4	Cash prizes				
	4	Cash prizes				
	_	Nanagah prizas				
Ø	5	Noncash prizes				
Direct Expenses	_	Double allity and to	12 100	669.		12 067
ber	6	Rent/facility costs	43,198.	009.		43,867.
ñ	_		44 275	2 074		40 240
ęc	7	Food and beverages	44,375.	3,974.		48,349.
ā			1 000			1 000
	8	Entertainment		1 200		1,800. 33,366.
	9	Other direct expenses	\ <u></u>	1,300.		
	10		()			127,382.
_		Net income summary. Subtract line 10 from I				22,478.
Pa	rt I		answered "Yes" on Form	1990, Part IV, line 19, or r	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	Т	T		T
Φ			(a) Bingo	(b) Pull tabs/instant	(c) Other gaming	(d) Total gaming (add
Revenue			.,,	bingo/progressive bingo		col. (a) through col. (c))
Şe						
	1	Gross revenue				
S	2	Cash prizes				
SUS						
Direct Expenses	3	Noncash prizes				
H H						
ie	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No No	No	
	7	Direct expense summary. Add lines 2 through	h 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			
		ter the state(s) in which the organization condu				
а	ls t	the organization licensed to conduct gaming a	ctivities in each of these s	states?		Yes No
b	If "	No," explain:				
10a	We	ere any of the organization's gaming licenses re	evoked, suspended, or te	rminated during the tax y	ear?	Yes No
b	If "	Yes," explain:				

Sch	ledule G (Form 990) 2023 The Houston Audubon Society 23-	70118	70 Page 3
11	Does the organization conduct gaming activities with nonmembers?	Ye	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?	Ye	es No
13	Indicate the percentage of gaming activity conducted in:		
	a 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:		,-
•	The the hame and address of the person who propares the organization organization of garming operation of the person and resolves.		
	Name		
	Name		
	Address		
	Address		
45.	Poss the examination have a contract with a third party from whom the examination receives coming revenue?	Ye	es No
158	a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	16	s NO
b	o If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount		
	of gaming revenue retained by the third party \$		
C	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	Director/officer Employee Independent contractor		
	Mandatory distributions:		
а	a Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	. L Ye	es L 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	Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Pa	rt III, lines	9, 9b, 10b,
	15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.		
_			

Schedule G	(Form 990) T	he Houston	Audubon	Society	23-7011870	Page 4
Part IV	(Form 990) T Supplemental Informa	tion _(continued)				

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

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.

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

The Houston Audubon Society

Employer identification number 23-7011870

Types of Property Part I (a) (b) (c) (d) Check if Number of Noncash contribution Method of determining contributions or amounts reported on applicable 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 58,469.NYSE Х Securities - Closely held stock 10 Securities - Partnership, LLC, or trust interests Securities - Miscellaneous 12 13 Qualified conservation contribution -Historic structures Qualified conservation contribution - Other 14 Real estate - Residential 15 Real estate - Commercial 16 Real estate - Other 17 18 Collectibles 19 Food inventory Drugs and medical supplies 20 21 Taxidermy Historical artifacts 22 Scientific specimens 23 Archeological artifacts 24 28,965.FMV (Auction items Х 25 Other 26 Other 27 Other Other 28 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement 29 Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for Х exempt purposes for 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 nonstandard contributions? 31 31 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash Х contributions? 32a **b** If "Yes," describe in Part II. If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

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

Schedule M (Form 990) 2023

Schedule N	M (Form 990) 2023 The Houston Audubon Society	23-7011870	Page 2
Part II	Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, a is reporting in Part I, column (b), the number of contributions, the number of items received, or a combit this part for any additional information.		n te

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2023
Open to Public Inspection

OMB No. 1545-0047

Name of the organization

The Houston Audubon Society

Employer identification number 23-7011870

Form 990, Part VI, Section A, line 1a:

The Executive Committee is made up of the immediate Past Chairperson, the Chairperson-Elect, the Secretary, the Treasurer, and the President as an ex officio member. Upon recommendation of the Chairperson and a majority vote of the Board, the Executive Committee may be empowered to act on designated matters. The Executive Committee is required to report its activities at each regularly scheduled Board meeting.

Form 990, Part VI, Section A, line 6:

Houston Audubon Society (HAS) has three classes of members: (1) Life

Members, whose membership is effective upon payment in full of the

specified lifetime dues; however, no new life memberships were accepted

after January 1, 2008; (2) Supporting Members, who pay dues annually to

HAS; and (3) Members, who are members of the National Audubon Society (NAS)

living within the geographical area of Houston so designated by NAS. Only

Life Members and Supporting Members have voting rights in any matter in

which members of HAS are entitled or required to vote.

Form 990, Part VI, Section A, line 7a:

Supporting Members and Life Members elect members of the Board of Directors at the Annual Meeting held in May.

Form 990, Part VI, Section A, line 7b:

Changes to the Bylaws require approval by vote of Supporting Members and Life Members, generally at the Annual Meeting held in May.

Schedule O (Form 990) 2023 Page 2

Name of the organization
The Houston Audubon Society

Employer identification number 23-7011870

Form 990, Part VI, Section B, line 11b:

Form 990 is reviewed in detail by the Finance Committee prior to filing. In addition, Form 990 is provided electronically to all members of the Board of Directors before filing. Any questions or concerns by members of those groups are resolved prior to filing the return with the IRS.

Form 990, Part VI, Section B, Line 12c:

Houston Audubon directors and committee members sign a Conflict of Interest Policy acknowledgment at the beginning of their term and annually thereafter in which they agree to divulge any situation that is or might be considered a conflict of interest with regard to their duties to the organization. Those acknowledgments are collected by administrative staff, and any potential conflicts divulged therein are reviewed by the President/CEO and Board Chair. Anyone who has a conflict of interest is not permitted to participate in official discussions or vote on the conflicted matter. In addition, the Employee Handbook prohibits employees from using their positions with the organization for private gain or benefit. Failure to comply with this policy may be grounds for disciplinary action.

Form 990, Part VI, Section B, Line 15a:

Data from Guidestar and/or compensation surveys is collected by the

Treasurer regarding salaries of individuals in comparable positions (CEO or

Executive Director) at local non-profits and presented to the Board of

Directors' Executive Committee for review. The Board approves the

President/CEO's starting salary as well as the annual operating budget

which incorporates the President/CEO's compensation as recommended by the

Executive Committee.

<u>Schedule O (Form 990) 2023</u> Page **2**

Name of the organization The Houston Audubon Society	Employer identification number 23-7011870
Form 990, Part VI, Section C, Line 19:	
The audited financial statements, Bylaws and Forms 990 are	e posted on the
Houston Audubon website. The Conflict of Interest Policy	and all governing
documents are available to the public upon request.	