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Department of the

Internal Revenue Service

Treasury

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.

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

OMB No. 1545-0047
2019

DLN: 93493318062960

Open to Public Inspection

A F	or th	e 2019 d	alendar year, or tax year beg	inning 01-01-2019 $$, and ending 12-	31-2019			
B Che	ck if a	pplicable:	C Name of organization Auduhon Nature Institute Inc	C Name of organization Audubon Nature Institute Inc			D Employer identification number	
☐ Address change			Addison Nature Institute Inc			51-015762	51-0157624	
□ Na □ Ini		-	Doing business as					
		n/terminated						
☐ Amended return☐ Application pending			Number and street (or P.O. box if mail is not delivered to street address) Room/suite			E Telephone n	number	
						(504) 861	-2537	
						G Gross recei	pts \$ 38,931,580	
			F Name and address of principal officer:			s this a group retur	n for	
			L Ronald Forman 6500 Magazine Street			subordinates? ☐Yes ☑No		
			New Orleans, LA 70118			Are all subordinates included?		
I Tax	<-exer	mpt status:	: 🗹 501(c)(3) 🗌 501(c)()	((insert no.)	ı	f "No," attach a list	. (see instructions)	
J W	ebsit	te:▶ ww	w.audubonnatureinstitute.org			Group exemption nu	ımber ▶	
K Form	n of o	rganization	n: 🗹 Corporation 🗌 Trust 🔲 As	sociation Other	L Year of	formation: 1975 M	State of legal domicile: LA	
Pa	ırt I	Sum	nmary					
Briefly describe the organization's mission or most significant activities:								
e)		Operation of museums and parks dedicated to nature on behalf of the City of New Orleans.						
<u> </u>	-							
Ē	_							
Activities & Governance	2	2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.						
Ğ								
න් ග	4	Number	of independent voting members	of the governing body (Part VI, line 1b)			4 32	
Ţ,	5	Total number of individuals employed in calendar year 2019 (Part V, line 2a)					5 1,384	
Ř	6	6 Total number of volunteers (estimate if necessary)					6 3,013	
Ă	7a						7a 0	
	b						7b 0	
						Prior Year	Current Year	
Qi.	8	Contribu	tions and grants (Part VIII, line 1	1)		4,113,003	6,993,379	
Ravenue	9 Program service revenue (Part VIII, line 2g			g)		28,260,140	29,167,299	
λċ	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)				224,592	633,829	
_	11					2,511,984	-2,765	
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)				35,109,719	36,791,742	
	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)				9,689,137	7 3,995,669	
	14	Benefits	paid to or for members (Part IX ,		(0		
83	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)				29,157,546	30,471,144	
J.S.	1 6a	Professional fundraising fees (Part IX, column (A), line 11e)				(0	
Expenses	b	Total fundraising expenses (Part IX, column (D), line 25) ▶1,582,026						
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)				757,992	1,116,571	
	18	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)				39,604,675	35,583,384	
	19	Revenue less expenses. Subtract line 18 from line 12				-4,494,956	1,208,358	
Net Assets or Fund Balances					Begir	nning of Current Year	r End of Year	
	20	Total ass	sets (Part X, line 16)			16,197,515	5 17,757,715	
	21	Total liab	oilities (Part X, line 26)			9,796,019	9 10,744,847	
zű_	22	Net asse	ts or fund balances. Subtract line	21 from line 20		6,401,496	7,012,868	
	rt II		nature Block					
				mined this return, including accompanyin e. Declaration of preparer (other than of				
any k								
		1 *****	*****					
Sian		Signat	***** 2020-11-13 Date					
Sign Here	:	l'	anald Forman Procident & CEO					
			ald Forman President & CEO or print name and title					
		_ 7	Print/Type preparer's name	Preparer's signature	Date	□ PTII	N	
Paid Preparer Use Only			•• • •	' -			222673	
		_{ar}	Firm's name LaPorte APAC	ı		Firm's EIN ► 72-10	88864	
		H						
		ייש י	Firm's address ► 111 Veterans Memorial Blvd 600				5-5522	
			Metairie, LA 700054	958				
May t	he IR	S discuss	s this return with the preparer sh	own above? (see instructions)			☑ Yes ☐ No	
For P	aper	work Re	eduction Act Notice, see the se	parate instructions.	Cat.	No. 11282Y	Form 990 (2019)	