

**2025**

# **Accommodations Tax Funds Request Application**

**Organization Name:** Hilton Head Audubon Society

**Project/Event Name:** Hilton Head Audubon

## **Executive Summary**

An ATAX Effectiveness Measurement form has been attached to this application.

# 2025 Accommodations Tax Funds Request Application

Date Received: 09/06/2024

Time Received: 11:09 AM

By: Online Submittal

*Applications will not be accepted if submitted after 4 pm on September 6, 2024*

## A. SUMMARY OF GRANT REQUEST:

**ORGANIZATION NAME:** Hilton Head Audubon Society

**Project/Event Name:** Hilton Head Audubon

Contact Name: SARAH GUSTAFSON Title: Treasurer

Address: PO BOX 6185, Hilton Head Island, SC 29938

Email Address:  
sarchrisgus@hotmail.com

Contact Phone: 703-479-0425

Event Date: Throughout 2025

Event Location: Audubon Newhall Preserve and HHI  
generally

**Total Budget:** \$21,400.00

**Grant Requested:** \$21,400.00

Provide a brief summary on the intended use of the grant and how the money would be used. (100 words or less)

The grant is requested for four purposes which will enhance tourists' and visitors' experience at Audubon Newhall Preserve, a 50-acre nature preserve, and increase the number of people visiting Newhall and HHI: (1) continue our quest to improve visitors' enjoyment of Newhall (2) expand social media interaction and advertising to attract more people to Newhall, to birding on the Island, and to HH Audubon events (3) cover costs of three larger events planned to attract eco-tourists, (4) reprint birding and event brochures for distribution to tourism centers.

How does the organization/event either drive tourism to Hilton Head Island or enhance the visitor experience on Hilton Head Island? How is this impact being measured? (100 words or less)

HHA maintains a website and Facebook pages providing relevant content, with visitors in mind, including imagery of Lowcountry birds and local/regional birding hotspots. Through our social media and FB advertising, tourists discover how special HHI is as a birding destination and we provide resources to enhance their birding experience. We perform website analytics to track the number and location of site visitors.

Through Newhall we provide visitors easy access to a native maritime forest ecosystem. We maintain a visitor log in which we tally visitors by location, and a people counter to count everyone coming in.

A. Total Number of Physical Tourists Served: 19293

*A Tourist is considered a non-resident, traveling more than 50 miles to the Town of Hilton Head Island.*

B. Total Number of Physical Visitors Served: 236

*A Visitor is considered a non-resident, who travels 50 miles or less to visit the Town of Hilton Head Island.*

C. Total Number of Physical Residents Served: 2652

*A Resident is considered any person who claims their property address within the limits of the Town of Hilton Head Island as their primary residence.*

D. Total Number of Physical Patrons Served (A+B+C=D): 22181

How was the Number of Visitors/Tourists Documented? (250 words or less)

The number of visitors/tourists includes people visiting Audubon Newhall Preserve, members of HH Audubon, the attendees at "Celebrating Naycha and B'uhds (Nature & Birds)" HHA's day at HMFP's weeklong Juneteenth Celebration, two large events we held this year, the people attending our various bird walks, and the people with whom we spoke at two festivals HHA participated in this summer.

For Newhall Preserve, there is a visitor log where people may note their visitation. We capture the state which they are from or whether they are a local resident. We have visitor log data for the past several years. In June 2023, we added another mechanism to better determine the number of people visiting Newhall -- we installed a people counter, which counts the number of people walking past the welcome kiosk on the main trail. We compared the visitor log sign-in totals to that of the people counter and found that 24.5% of people signed the log in August through December 2023 and 21.5% in January through July 2024. We used these percentages to extrapolate the visitor sign-ins to derive the estimated number of people visiting Newhall, using the percentages of tourists vs. locals as documented in the visitor log. Documentation of our approach is included as an attachment in the Visitor Survey section.

For members of HH Audubon, we used their address per our membership database. We have 190 members who are HHI residents, 73 members in Bluffton, Beaufort etc. who are Visitors and 68 people who reside out of state.

The number of people who attended Nature & Birds, the two large events, and the bird walks is determined based upon review of the event registration address.

For the Outside Foundation's Keep the Broad Creek Clean festival, we asked for the location of the people who stopped by our information booth.

## B. DESCRIPTION OF OPERATIONS:

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1. For state reporting purposes, give a brief description of the organization. (250 words or less)

Hilton Head Audubon is a leading voice for conservation on the Island and the surrounding Lowcountry working to preserve and protect wildlife and natural ecosystems and to encourage responsible environmental stewardship. Our goals include preservation and protection of our coastal marshes, beaches, maritime forests, and other habitats, ensuring they will be available for the continued enjoyment of residents and visitors, and for their use by migrating and resident birds. We actively partner with state and local leaders (conservation) and the community-at large (membership, communications) to promote a positive, forward-looking agenda for people and wildlife.

We are an all-volunteer membership-driven organization. We own and actively manage the Audubon Newhall Preserve, a 50-acre nature preserve on the south end of the Island. We conduct field trips and bird walks for members and visitors, run both small-group educational meetings and larger community events with a nature conservation focus, provide nature and bird presentations to local community groups, conduct the annual Christmas Bird Count (a citizen-science project), publish a monthly on-line newsletter, maintain a dynamic website that provides resources for birding on the Island, and interact with community and government leaders on conservation issues such as preserving the red-headed woodpecker habitat in Mid-island Tract, the only known breeding spot for this bird on the Island.

2. Describe in detail how the requested grant funding would be used? (250 words or less)

**(1) Expand social media interaction/advertising to attract more people to Newhall and to birding on the Island: \$9,900**

In 2024, we received \$4,800 for social media interaction/advertising. We had used an intern, but determined a professional contractor was more effective. In 2025, we request an increase to \$8,400 for the higher cost of using a professional.

Targeted advertising on Facebook/Google to promote Newhall/birding on the Island to attract eco-tourists: \$1,500.

**(2) Newhall Reserve Improvements: \$5,800**

The Newhall Preserve is HHA's primary driver of physical tourists. Yearly, we make improvements to ensure our thousands of visitors enjoy their visits. We request \$2,000 to grind tree roots on the main trail to improve access for wheel chairs and strollers; \$1,300 for bird seed refilling (in 2024 we installed several bird feeders as a pilot program and visitor notes indicate they are greatly enjoyed); \$2,000 for a summer intern to greet visitors and conduct visitor surveys; \$500 to redesign and print posters for our new kiosk

**(3) Host three larger events to attract eco-tourists: \$1,500**

In 2024, we held two bird-focused events with nationally known speakers. The Purple Haze film presented by director Zach Steinhauser about the conservation of Purple Martins was a huge hit. Bruce Beehler, an ornithologist with the Smithsonian Institution, was also very well attended. Both events were heavily promoted on social media and through Facebook advertising. Based upon our 2024 success, we request \$1,500 for event costs.

**(4) Designing/Printing Brochures: \$4,200**

We plan to design/print three brochures about birding on HHI. We distribute these brochures to SC visitor centers and at Newhall Preserve. 1) Annual guide to HHA events; 2) New brochure - a HHA information guide; 3) "Where to Bird on HHI" of which 50 remain.

3. What impact would partial funding have on the activities, if full funding were not received? What would the organization change to account for partial funding? *(100 words or less)*

Our grant request is ordered based upon our priorities. If we receive partial funding, we would fund our top priorities first.

If we received less funding, HH Audubon would fund the brochures and larger event deficit with our own funds.

For our social media funding request, we could lessen the hours of the social media consultant or lessen the number of social media campaigns.

4. What is expected economic impact and benefit to the Island's tourism? *(100 words or less)*

Detail statistics of visitation are provided in the Documentation of Visitors/Tourists attachment included in the Visitor Survey section.

A 2015 study by the U.S. Fish & Wildlife Service showed \$15 billion spent annually on travel for birdwatching: \$4.5 billion for food, \$3 billion for lodging, and \$5 billion for transportation.

The Newhall preserve brings visitors from nearly every state and from several countries -- it is a destination for those who enjoy birding and nature.

By increasing our social media presence, we can bring more tourists to HHI and with enhancements to Newhall, we can ensure that they enjoy their visit.

5. In order to comply with the State's Tourism Expenditure Review Committee annual reporting requirements, **please classify your current grant request into the following authorized categories:**

1 - Destination Advertising/Promotion <i>Advertising and promotion of tourism so as to develop and increase tourist attendance through the generation of publicity.</i>	100 %
2 - Tourism-Related Events <i>Promotion of the arts and cultural events.</i>	0 %
3 - Tourism-Related Facilities <i>Construction, maintenance and operation of facilities for civic and cultural activities including construction and maintenance of access and other nearby roads and utilities for the facilities.</i>	0 %
4 - Tourism-Related Public Services <i>The criminal justice system, law enforcement, fire protection, solid waste collection and health facilities when required to serve tourists and tourist facilities. This is based on the estimated percentage of costs directly attributed to tourist. Also includes public facilities such as restrooms, dressing rooms, parks and parking lots.</i>	0 %
5 - Tourist Public Transportation <i>Tourist shuttle transportation.</i>	0 %
6 - Waterfront Erosion/Control/Repair <i>Control and repair of waterfront erosion.</i>	0 %
7 - Operation of Visitor Information Centers <i>Operating visitor information centers.</i>	0 %
<b>Total:</b>	<b>100 %</b>

6. If not covered elsewhere in the application, please describe (a) how the organization will collaborate with other organizations to enhance tourism efforts, and (b) provide a venue or service not otherwise available to visitors to the Town of Hilton Head Island. (250 words or less)

Establishing strong partnerships is necessary to enhance our credibility and effectiveness, achieve our policy goals, increase our visibility and grow our membership.

This year Historic Mitchelville Freedom Park invited HHA to host its own day at HMFP's weeklong Juneteenth Celebration. We named our day: "Celebrating Naycha and B'uhds" (Nature & Birds). For the event, we were joined by seven other conservation groups including Outside Foundation, Sea Turtle Patrol and Lowcountry Master Gardeners. All the invited groups appreciated the synergy of environmental groups banding together to highlight the importance of conservation.

One of our Board members serves on the Board of the new Rotary of HHI Satellite Club of Hilton Head Island-Lowcountry Environmental, allowing ongoing dialogue with other conservation and environmental groups.

We worked with the Boys & Girls Club taking their kids out on bird and nature walks and they also joined us at Celebrating Naycha and B'uhds.

We again partnered with Friends of SC Wildlife Refuges to conduct bird "walks" at

Pinckney Island NWR using the Friends golf cart to transport people out to Ibis Pond who would be unable to walk the one mile to reach the beautiful rookery of breeding birds.

Through the operation of Audubon Newhall Preserve, we provide tourists with a unique, accessible venue to experience the beautiful nature that HHI offers. Throughout the year, our volunteer members host weekly bird and nature walks so that tourists experience a personalized tour of the incredible Preserve.

7. Additional comments. (250 words or less)

HH Audubon has grown significantly in the past two years. Our FY2022 revenue was \$32,500, our FY2024 revenue was \$69,100 and we are budgeting FY2025 revenue to be \$87,800. The past two ATAX grants contributed a great deal to our growth, not only in the dollars we've received from the Town of HHI, but also in the type of funding which has allowed us to attract more tourists and residents to our organization.

We envisioned back 2021 that HHA could be a more vibrant organization, and we've achieved that goal through a larger membership, more volunteer involvement and many more activities of community outreach. We've reached the point where we need to evolve from a completely volunteer organization to hiring a staff/consultant to be our Conservation Coordinator. We are in the process of submitting a grant to the Community Foundation of the Lowcountry to kickstart this effort. To qualify for the CFL grant, we must demonstrate that we have sufficient resources to continue this program after the initial year of funding that CFL provides. We believe we can meet their conditions for funding this new program position due to our increased profitability and our cash and investments on hand.

**C. FUNDING:**

1. Please describe how the organization is currently funded. (100 words or less)

Hilton Head Audubon is primarily funded through membership dues, donations and grants. We generate some program revenue through field trips and special educational classes. We also receive a yearly allocation from National Audubon.

In past years we received grant funding from National Audubon for specific project needs. We've submitted another grant request about which we will be notified by the end of this year.

2. Please also estimate, as a percentage, the source of the organization's total annual funding.

<u>32</u>	Government Sources	<u>23</u>	Private Contributions, Donations and Grants
	Corporate Support, Sponsors	<u>34</u>	Membership, Dues, Subscriptions
<u>11</u>	Ticket Sales, or Sales and Services		Other

3. Has the organization requested other ATAX or any other funding from other public sources or organizations?

Yes  No

If so, please list top 3 sources and amounts.

National Audubon - Grant pending -beginning bird booklets English/Spanish \$15,000.00

#### D. FINANCIAL INFORMATION:

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Fiscal Year Disclosure: Start Month: **May** End Month: **April**

#### Financial Statement Requirements:

1. The upcoming fiscal year's **operating budget** for the organization.

Budget Provided: **Yes**

2. The previous two fiscal years and current year-to-date **profit and loss reports** for the organization.

Current fiscal year Profit Loss Report Provided: **Yes**

Previous fiscal year Profit Loss Reports Provided:

FY23- Previous FY 1

FY24- Previous FY 2

3. The previous two fiscal years and current year-to-date **balance sheets**.

Current fiscal year Balance Sheet Provided: **Yes**

Previous fiscal year Balance Sheets Provided:

FYE 2023 - Previous FY 1

FYE 2024 - Previous FY 2

4. The previous two years and current year **IRS Form 990 or 990T**.

Current year IRS Form 990 or 990T Provided: **Yes**

Previous IRS Form 990 or 990T Years Provided:

2021 - Previous FY 1

### E. FINANCIAL GUARANTEES AND PROCEDURES:

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1. Provide a copy of the **official minutes** wherein the organization approves the submission of this application.

An official set of minutes have been attached to this application.

2. Indicate whether your organization follows Town procurement guidelines or has its own procurement guidelines which are utilized and followed in the expenditure of ATAX grant funds.

Follow Town procurement guidelines

Utilize and follow organization's own procurement guidelines

Our organization does not have or follow procurement guidelines

### F. MEASURING EFFECTIVENESS:

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If you received 2023 or 2024 HHI ATAX funds

1. List any ATAX award amounts received in 2023 and/or 2024.

2023	\$17,188.00	Audubon Newhall Preserve and Social Media
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22024	\$20,100.00	Audubon Newhall Preserve and Social Media
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2. How were the ATAX funds used? To what extent were the objectives achieved? The ATAX Effectiveness Measurement spreadsheet available in the application portal will show the numerics. Use the space below for verbal comments. (200 words or less)

As of August 31, 2024, we've spent \$16,675 of the \$20,100 of 2024 ATAX awarded funds.

**Newhall Kiosk** - We spent all \$9,750 of the awarded funds. The new kiosk is a significant improvement and we've received many positive comments from visitors.

**Social Media** - We spent \$3,361 of \$6,800 awarded funds. Engagement with both our website and Facebook pages substantially increased. Tourists and visitors to HHI use both sources to discover outdoor birding and nature destinations on the Island. We will spend the remaining funds in the last four months of 2024.

**Large Events** - We spent all of the \$700 of the awarded funds. Both events were a huge success attracting a combined 176 individuals - Visitors (32%) and Tourists (16%). Both events were widely promoted on social media and through FB advertising.

**Newhall Trail Guides** - We spent \$3,114 of the awarded funds for 5,000 trail guides of Newhall; several boxes were distributed to the nine SC welcome centers at the April 24th brochure swap organized by SC Department of Parks, Recreation & Tourism.

3. What impact did this have on the success of the organization/event and how did it benefit the community? (200 words or less)

With ATAX funds, we were able to make significant improvements within Audubon Newhall Preserve. The 50-acre pristine nature preserve is a treasure for our Island. HH Audubon has a dedicated core group of volunteers that manage and maintain the Preserve -- weeding, mulching, planting trees and bushes to name just a few activities. They are very proud of the Preserve. Having the Town of Hilton Head's continued support by funding enhancements to the Preserve further strengthens their pride and dedication to ensuring that the Preserve continues to be maintained at a high level so tourists and residents can enjoy this Island treasure.

Additionally, the ATAX funds for social media allowed our communications team to get tools and resources so their efforts are more successful. This has bolstered their ability to achieve their goals of expanding HH Audubon's outreach to a larger, broader audience, attracting more tourists and visitors to the Island.

4. How does the organization measure the effectiveness of both the overall activity and of individual programs? (200 words or less)

HH Audubon measures its effectiveness through the following two primary means:

- Number of members. During covid our membership went down significantly . We are trying to gain new members to re-establish our membership base. We currently have 331 members, a 14% increase over the prior year. As an all-volunteer organization we need members to do our important work.
- Number of Visitors to Audubon Newhall Preserve. The Preserve is maintained as a natural area for birds and wildlife, but also for humans to experience this unique natural area. The number of people visiting Newhall reflects our effectiveness in managing and maintaining the Preserve. We had a 7% increase in the number of people signing into the Newhall visitor log from August 2023 to July 2024 vs same prior years' period, which given the overall downturn in tourism is gratifying.

## G. EXECUTIVE SUMMARY

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Provide an executive summary using the "ATAX Effectiveness Measurement" form provided via the link on the left, or by utilizing the text area provided below to report uses of the organization's prior ATAX grant, if applicable. If creating your own format, please refer to the "ATAX Effectiveness Measurement" form and use the criteria as a guideline in developing your executive summary below. *(1300 words or less)*

An ATAX Effectiveness Measurement form has been attached to this application.

Signature: Sarah Gustafson

Title/Position:

Mailing Address: 89 Kingston Dunes Rd, Hilton Head Island, SC 29928

Email Address: sarchrisgus@hotmail.com

Office Phone Number:

Home Phone Number: 703-479-0425



**HILTON HEAD AUDUBON  
DOCUMENTATION OF VISITORS/TOURISTS**

**VISITOR LOG AT AUDUBON NEWHALL PRESERVE**

HHA has a visitor log at the entrance of Audubon Newhall Preserve. The information below is summarized from the log. People are asked to indicate whether they are Local, and if not, provide the State they are from.

	January to July			August to December			January to December		
	Tourists	Local	Total	Tourists	Local	Total	Tourists	Local	Total
2021	1,438	29	1,467	1,024	19	1,043	2,462	48	2,510
2022	2,068	54	2,122	1,044	73	1,117	3,112	127	3,239
2023	3,083	257	3,340	1,474	223	1,697	4,557	480	5,037
2024	2,800	259	3,059						
People Counter Total			14,229			6,931	Actual People Extrapolated to type of Visitor		
			21.5%			24.5%	August 2023 to July 2024		
Extrapolated	13,024	1,205	14,229	6,020	911	6,931	<b>19,044</b>	<b>2,116</b>	<b>21,160</b>

**PEOPLE COUNTER**

HHA installed a People Counter effective June 1, 2023 to get better data on the number of people visiting Newhall.

	Aug-Dec 2023	Jan-Jul 2024	Total
People counter	6,931	14,229	21,160
Visitor log sign-in	1,697	3,059	4,756
Sign-in %	24.5%	21.5%	22.5%

**HILTON HEAD AUDUBON MEMBERSHIP**

**HHA EVENTS and FESTIVALS**

		Juneteenth Birds & Nature	Bruce Beehler	Purple Haze	Outside Water Fest	Total	Bird walks
HHI residents	190						
Visitors	73	105	35	56	36	232	114
Tourists	68	47	32	25		104	59
Total members	<u>331</u>	41	9	19	23	92	89
		<u>193</u>	<u>76</u>	<u>100</u>	<u>59</u>	<u>428</u>	<u>262</u>

Information is based upon address of members

**AGGREGATED PHYSICAL PATRONS SERVED**

	Newhall	Members	Festivals/ Events	Bird Walks	Total
HHI residents	2,116	190	232	114	2,652
Visitors		73	104	59	236
Tourists	19,044	68	92	89	19,293
Total	<u>21,160</u>	<u>331</u>	<u>428</u>	<u>262</u>	<u>22,181</u>

# Certificate of Resolution

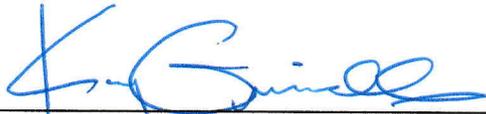
The undersigned as President of the HILTON HEAD AUDUBON certify that the following resolution has been adopted by the Board of Directors and is in full effect:

RESOLVED that the officers of the Hilton Head Audubon (HHA) are directed and empowered to complete and submit the materials and application for the Accommodations Tax Grant. The purpose of asking for funds shall be to enable the HHA to enhance tourists' experience at Audubon Newhall Preserve (Newhall) and increase the number of people visiting Newhall and Hilton Head Island area through the following planned actions:

- expand social media interaction resources and advertising to attract more people to Newhall and to birding on the island,
- enact improvements to Audubon Newhall Preserve to enhance enjoyment of visitors,
- host and promote large events to attract eco-tourists,
- Design and print brochures about birding events and locations on Hilton Head Island

Should the funding be granted, HHA commits to execute the planned actions described above.

Signed:



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Kay Grinnell, President  
Hilton Head Island Audubon Society, Inc.  
Dated: September 5, 2024

**Hilton Head Audubon**  
**Budget vs Actual: FY24 and FY25 Budget**  
**FY24 = May 1, 2023 to April 30, 2024**

	FY24 Budget	FY24 Actual	Over/(under)	FY25 Budget	
<b>Revenue</b>					
4010 Memberships	18,000	23,689	5,689	25,000	
4110 Donations	10,800	12,713	1,913	14,500	
4200 Programs and Events		2,222	2,222	2,800	
4210 Educational Classes		2,780	2,780	6,525	
4310 Field Trips	2,000	2,379	379	2,500	
4420 Grants - Foundation	3,450	3,434	(16)	1,800	
4421 Grants - Foundation - Booklets				15,000	Applied for Grant from Nat'l Aud
<u>4430 Grants - Government</u>					
ATAX 2023	17,558	16,360	(1,198)		
ATAX 2024		5,550	5,550	14,550	2024 ATAX left to invoice in FY25
ATAX 2025				5,090	2025 ATAX expected to invoice in FY25
4500 Miscellaneous Income	300		(300)		
<b>Total Revenue</b>	<b>\$ 52,108</b>	<b>\$ 69,127</b>	<b>\$ 17,019</b>	<b>\$ 87,765</b>	
<b>Expenditures</b>					
8031 Social Media/Advertising	2,058	3,722	1,664	8,700	
8110 Speakers, Presentations	1,000	2,050	1,050	2,500	
8115 Program supplies	200	1,374	1,174	970	
8130 Technology (Website, Zoom)	6,500	5,983	(517)	6,226	
8210 Interns	4,500	3,803	(697)	2,000	
8310 Field Trip Expenses		250	250	800	
8350 Educational class expenses		1,043	1,043	3,075	
8510 Rent (Storage)	1,800	1,925	125	756	
8520 Utilities	750	656	(94)	750	
8530 Rental (Space, Equip)	2,575	2,195	(380)	1,000	
8540 Equipment, Repairs & Maintenance	5,000	3,449	(1,551)	4,400	
8541 Kiosk		4,750	4,750	4,750	
8545 Special Projects	11,473	10,651	(822)	450	
8550 Signage	6,300	4,461	(1,839)	1,000	
8555 Printing & Design	2,350	2,480	130	5,500	
8560 Postage & Shipping	500	274	(226)	855	
8580 Property Taxes	900	738	(162)	800	
8610 Bank and Credit Card Fees	1,300	1,577	277	1,700	
8620 PO & Safety Deposit Boxes	200	308	108	320	
8700 Dues & subscriptions	450	450	-	450	
8710 Grants to other entities	3,000	2,000	(1,000)	-	
8810 Insurance	1,925	1,924	(2)	2,020	
Audubon in Action booklets (if get grant)				15,000	
8890 Miscellaneous	250	490	240	200	
<b>Total Expenditures</b>	<b>\$ 53,031</b>	<b>\$ 56,554</b>	<b>\$ 3,523</b>	<b>\$ 64,222</b>	
<b>Excess of revenue over costs</b>	<b>\$ (923)</b>	<b>\$ 12,573</b>	<b>\$ 13,496</b>	<b>\$ 23,543</b>	

**Hilton Head Audubon**  
**Balance Sheet**  
**As of August 31, 2024**  
**Cash Basis**

**8/31/2024**

Cash	\$ 16,829
Investments	\$ 70,652
Total Assets	<u>\$ 87,481</u>
Liabilities	\$ -
Restricted surplus for Newhall hurricane	\$ 20,000
Unrestricted surplus	67,481
Total Liabilities and Retained Surplus	<u>\$ 87,481</u>
Change in surplus May to August	13,700

**Hilton Head Audubon**  
**Balance Sheet**  
**As of April 30, 2024**  
**Cash Basis**

**4/30/2023**

Cash	\$ 81,181
Investments	\$ 20,000
Total Assets	<u>\$ 101,181</u>
Liabilities	\$ -
Restricted surplus for Newhall hurricane	\$ 20,000
Unrestricted surplus	81,181
Total Liabilities and Retained Surplus	<u>\$ 101,181</u>

**Hilton Head Audubon**  
**Balance Sheets**  
**As of April 30, 2023 and 2022**  
**Cash Basis**

	<b>4/30/2023</b>	<b>4/30/2022</b>
Cash	\$ 88,608	\$ 74,909
Total Assets	<u>\$ 88,608</u>	<u>\$ 74,909</u>
Liabilities	\$ -	\$ -
Retained Surplus	88,608	74,909
Total Liabilities and Retained Surplus	<u>\$ 88,608</u>	<u>\$ 74,909</u>

**Hilton Head Audubon**  
**Comparative Actual Profit and Loss Reports**  
**May 1 to April 30, 2024 and 2023**

Cash basis

	FY24 Actual	FY23 Actual	Increase/ (Decrease)
<b><u>Revenue</u></b>			
4010 Memberships	\$ 23,689	\$ 16,452	\$ 7,237
4110 Donations	12,713	10,436	2,277
4200 Program Events	2,222	468	1,754
4210 Educational Classes	2,780		2,780
4310 Field Trips	2,379	1,785	594
4420 Grants - Foundation	3,434	12,784	(9,350)
<b><u>4430 Grants - Government</u></b>			
ATAX 2023	16,360	-	16,360
ATAX 2024	5,550	-	5,550
4500 Miscellaneous Income	-	240	(240)
<b>Total Revenue</b>	<b>\$ 69,127</b>	<b>\$ 42,165</b>	<b>\$ 26,962</b>
<b><u>Expenditures</u></b>			
8031 Social Media Advertising	3,722	-	3,722
8110 Speakers, Presentations	2,050	625	1,425
8115 Program supplies	1,374	607	767
8130 Technology (Website, Zoom)	5,983	4,775	1,208
8210 Interns	3,803	1,025	2,778
8310 Field Trip Expenses	250	-	250
8350 Educational class expenses	1,043	-	1,043
8510 Rent (Storage)	1,925	1,776	149
8520 Utilities	656	657	(1)
8530 Rental (Space, Equip)	2,195	2,220	(25)
8540 Equipment, Repairs & Maintenance	3,449	3,090	359
8541 Kiosk	4,750	-	4,750
8545 Special Projects	10,651	1,550	9,101
8550 Signage	4,461	4,274	187
8555 Printing & Design	2,480	3,114	(634)
8560 Postage & Shipping	274	470	(196)
8580 Property Taxes	738	812	(74)
8610 Bank and Credit Card Fees	1,577	1,165	412
8620 PO & Safety Deposit Boxes	308	60	248
8700 Dues & subscriptions	450	-	450
8710 Grants to other entities	2,000	-	2,000
8810 Insurance	1,924	1,891	33
8890 Miscellaneous	490	83	407
<b>Total Expenditures</b>	<b>\$ 56,554</b>	<b>\$ 28,195</b>	<b>\$ 28,359</b>
<b>Excess of revenue over costs</b>	<b>\$ 12,573</b>	<b>\$ 13,970</b>	<b>\$ (1,397)</b>

**Hilton Head Audubon**  
**Comparative Actual Profit and Loss Reports**  
**May 1 to April 30, 2024 and 2023**

Cash basis

	FY24 Actual	FY23 Actual	Increase/ (Decrease)
<b><u>Revenue</u></b>			
4010 Memberships	\$ 23,689	\$ 16,452	\$ 7,237
4110 Donations	12,713	10,436	2,277
4200 Program Events	2,222	468	1,754
4210 Educational Classes	2,780		2,780
4310 Field Trips	2,379	1,785	594
4420 Grants - Foundation	3,434	12,784	(9,350)
<b><u>4430 Grants - Government</u></b>			
ATAX 2023	16,360	-	16,360
ATAX 2024	5,550	-	5,550
4500 Miscellaneous Income	-	240	(240)
<b>Total Revenue</b>	<b>\$ 69,127</b>	<b>\$ 42,165</b>	<b>\$ 26,962</b>
<b><u>Expenditures</u></b>			
8031 Social Media Advertising	3,722	-	3,722
8110 Speakers, Presentations	2,050	625	1,425
8115 Program supplies	1,374	607	767
8130 Technology (Website, Zoom)	5,983	4,775	1,208
8210 Interns	3,803	1,025	2,778
8310 Field Trip Expenses	250	-	250
8350 Educational class expenses	1,043	-	1,043
8510 Rent (Storage)	1,925	1,776	149
8520 Utilities	656	657	(1)
8530 Rental (Space, Equip)	2,195	2,220	(25)
8540 Equipment, Repairs & Maintenance	3,449	3,090	359
8541 Kiosk	4,750	-	4,750
8545 Special Projects	10,651	1,550	9,101
8550 Signage	4,461	4,274	187
8555 Printing & Design	2,480	3,114	(634)
8560 Postage & Shipping	274	470	(196)
8580 Property Taxes	738	812	(74)
8610 Bank and Credit Card Fees	1,577	1,165	412
8620 PO & Safety Deposit Boxes	308	60	248
8700 Dues & subscriptions	450	-	450
8710 Grants to other entities	2,000	-	2,000
8810 Insurance	1,924	1,891	33
8890 Miscellaneous	490	83	407
<b>Total Expenditures</b>	<b>\$ 56,554</b>	<b>\$ 28,195</b>	<b>\$ 28,359</b>
<b>Excess of revenue over costs</b>	<b>\$ 12,573</b>	<b>\$ 13,970</b>	<b>\$ (1,397)</b>

# Hilton Head Audubon

## Statement of Activity Comparison

Fiscal Years Ended April 30, 2023 and 2022

Cash Basis

	Total	
	May 2022 - Apr 2023	May 2021 - Apr 2022
<b>Revenue</b>		
4010 Memberships	16,452	13,083
4110 Donations	10,005	11,714
4120 Fundraising	432	
4210 Educational Programs	468	
4310 Field Trips	1,785	3,398
4420 Grants - Foundation	12,784	4,284
4500 Miscellaneous Income	240	31
<b>Total Revenue</b>	<b>\$ 42,165</b>	<b>\$ 32,510</b>
<b>Gross Profit</b>	<b>\$ 42,165</b>	<b>\$ 32,510</b>
<b>Expenditures</b>		
8020 Membership		100
8110 Speakers, Presentations	625	
8120 Refreshments	607	128
8130 Technology (Website, Zoom)	4,776	2,396
8210 Interns	1,025	
8400 Accounting and Office Supplies	119	179
8510 Rent (Storage)	1,776	1,498
8520 Utilities	657	546
8530 Rental (Space, Equip)	2,220	
8540 Equipment, Repairs & Maintenance	3,090	6,872
8545 Special Projects	1,550	750
8550 Signage	4,274	454
8555 Printing	3,114	
8560 Postage, Shipping	470	
8570 Licenses, Fees and Permits	50	
8580 Taxes	812	736
8610 Bank and Credit Card Fees	1,165	945
8620 PO & Safety Deposit Boxes	60	264
8710 Grants to other entities		2,500
8810 Insurance	1,891	1,891
8890 Miscellaneous	33	921
<b>Total Expenditures</b>	<b>\$ 28,315</b>	<b>\$ 20,179</b>
<b>Net Operating Revenue</b>	<b>\$ 13,851</b>	<b>\$ 12,331</b>
<b>Net Revenue vs. expenses</b>	<b>\$ 13,851</b>	<b>\$ 12,331</b>

\$11k received from National Audubon - spending in FY24

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/Form990EZ for instructions and the latest information.

Department of the Treasury Internal Revenue Service

A For the 2023 calendar year, or tax year beginning 05/01/2023 and ending 04/30/2024

B Check if applicable: [ ] Address change [ ] Name change [ ] Initial return [ ] Final return/terminated [ ] Amended return [ ] Application pending
C Name of organization: HILTON HEAD ISLAND AUDUBON SOCIETY aka Hilton Head Audubon
D Employer identification number: 51-0168071
E Telephone number: 703-479-0425
F Group Exemption Number

G Accounting Method: [x] Cash [ ] Accrual Other (specify):
H Check [x] if the organization is not required to attach Schedule B (Form 990).

I Website: www.hiltonheadaudubon.org

J Tax-exempt status (check only one) - [x] 501(c)(3) [ ] 501(c) ( ) (insert no.) [ ] 4947(a)(1) or [ ] 527

K Form of organization: [x] Corporation [ ] Trust [ ] Association [ ] Other:

L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B)) are \$500,000 or more, file Form 990 instead of Form 990-EZ \$ 69,127

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I)
Check if the organization used Schedule O to respond to any question in this Part I [x]

Table with 3 columns: Description, Line Number, Amount. Rows include Revenue (1-9), Expenses (10-17), and Net Assets (18-21). Total revenue: 69,127; Total expenses: 56,554; Net assets at end of year: 101,181.

**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

		(A) Beginning of year	(B) End of year	
22	Cash, savings, and investments	88,608	22	101,181
23	Land and buildings	0	23	0
24	Other assets (describe in Schedule O)	0	24	0
25	<b>Total assets</b>	88,608	25	101,181
26	<b>Total liabilities</b> (describe in Schedule O)	0	26	0
27	<b>Net assets or fund balances</b> (line 27 of column (B) must agree with line 21)	88,608	27	101,181

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O, Statement 2

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

28	<u>Conservation: Advocacy, Education Programs and Community Science to promote protection and respect of critical habitat for resident and migrating birds. Participated in three festivals including a large presence at</u> <u>(Continued on Schedule O, Statement 3)</u> (Grants \$ <u>5,170</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	28a	32,146
29	<u>Maintain and operate Audubon Newhall Preserve, a 50-acre nature preserve open to the public at no charge. This year we continued our improvement program by adding new informative signage, improving the main</u> <u>(Continued on Schedule O, Statement 4)</u> (Grants \$ <u>11,687</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	29a	17,115
30	   (Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	30a	
31	Other program services (describe in Schedule O) (Grants \$ <u>0</u> ) If this amount includes foreign grants, check here <input type="checkbox"/>	31a	0
32	<b>Total program service expenses</b> (add lines 28a through 31a)	32	49,261

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Kay Grinnel President	20.00	0	0	0
Lynn Hodgson Vice President	10.00	0	0	0
Sarah Gustafson Treasurer	20.00	0	0	0
Patty Kappmeyer Secretary	10.00	0	0	0
Ken Adams Director	10.00	0	0	0
Shannon Wilkinson Director	10.00	0	0	0
Rosemary Staples Director	10.00	0	0	0
Terry Cerisoles Director	20.00	0	0	0
Denise Prichard Director	10.00	0	0	0
John Coleman Director	10.00	0	0	0
Susan Murphy Director	10.00	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O. See instructions
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?
35b If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II, and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T
41 List the states with which a copy of this return is filed: SC
42a The organization's books are in care of: Sarah Gustafson Telephone no. 703-479-0425
Located at: 89 Kingston Dunes Road, Hilton Head Island, SC 29928 ZIP + 4 29928
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? If "Yes," enter the name of the foreign country: See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).
42c At any time during the calendar year, did the organization maintain an office outside the United States? If "Yes," enter the name of the foreign country:
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the tax year 43
44a Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44b Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b 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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ. See instructions

**46** Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . . 

	Yes	No
<b>46</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI . . . . .

**47** 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 . . . . . 

	Yes	No
<b>47</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**48** Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . . 

	Yes	No
<b>48</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**49a** Did the organization make any transfers to an exempt non-charitable related organization? . . . . . 

	Yes	No
<b>49a</b>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**b** If "Yes," was the related organization a section 527 organization? . . . . . 

	Yes	No
<b>49b</b>	<input type="checkbox"/>	<input type="checkbox"/>

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
None				

**f** Total number of other employees paid over \$100,000 . . . . . \_\_\_\_\_

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation
None		

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . \_\_\_\_\_

**52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . .  **Yes**  **No**

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

<b>Sign Here</b>	Signature of officer <b>Sarah Gustafson, Treasurer</b>	Date			
	Type or print name and title				
<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name			Firm's EIN	
	Firm's address			Phone no.	

May the IRS discuss this return with the preparer shown above? See instructions . . . . .  **Yes**  **No**

**SCHEDULE A  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

Attach to Form 990 or Form 990-EZ.

Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization <b>HILTON HEAD ISLAND AUDUBON SOCIETY aka Hilton Head Audubon</b>	Employer identification number <b>51-0168071</b>
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2023 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2022 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2023.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 33 1/3% support test—2022.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>17a 10%-facts-and-circumstances test—2023.</b> If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . . <input type="checkbox"/>		
<b>b 10%-facts-and-circumstances test—2022.</b> If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and <b>stop here</b> . Explain . . . . . <input type="checkbox"/>		

in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .

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

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	22,350	19,597	29,112	39,240	61,746	172,045
<b>2</b> Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose . . . .	6,047	4,113	3,398	2,925	7,382	23,865
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513						
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .						
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>6 Total.</b> Add lines 1 through 5 . . . . .	28,397	23,710	32,510	42,165	69,128	195,910
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .						
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
<b>c</b> Add lines 7a and 7b . . . . .						
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . . .						195,910

**Section B. Total Support**

Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) 2023	(f) Total
<b>9</b> Amounts from line 6 . . . . .	28,397	23,710	32,510	42,165	69,128	195,910
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	231	317	0	0	0	548
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . . .						
<b>c</b> Add lines 10a and 10b . . . . .	231	317	0	0	0	548
<b>11</b> Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . . .	28,628	24,027	32,510	42,165	69,128	196,458
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . . <input type="checkbox"/>						

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2023 (line 8, column (f), divided by line 13, column (f)) . . . . .	<b>15</b>	99.72 %
<b>16</b> Public support percentage from 2022 Schedule A, Part III, line 15 . . . . .	<b>16</b>	99 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for 2023 (line 10c, column (f), divided by line 13, column (f)) . . . . .	<b>17</b>	0.28 %
<b>18</b> Investment income percentage from 2022 Schedule A, Part III, line 17 . . . . .	<b>18</b>	0.5 %

- 19a 33 1/3% support tests—2023.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .
- b 33 1/3% support tests—2022.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization . . . . .

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

**Part IV Supporting Organizations**

(Complete only if you checked a box 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**

	Yes	No
<b>1</b> Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
<b>2</b> Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
<b>3a</b> Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
<b>b</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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
<b>c</b> Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
<b>4a</b> Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
<b>b</b> Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
<b>c</b> 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)? <i>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.</i>		
<b>5a</b> Did the organization add, substitute, or remove any supported organizations during the tax year? <i>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).</i>		
<b>b Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
<b>c Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
<b>6</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>7</b> 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? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>8</b> Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
<b>9a</b> 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))? <i>If "Yes," provide detail in Part VI.</i>		
<b>b</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? <i>If "Yes," provide detail in Part VI.</i>		
<b>c</b> 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? <i>If "Yes," provide detail in Part VI.</i>		
<b>10a</b> 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)? <i>If "Yes," answer line 10b below.</i>		
<b>b</b> Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** *(continued)*

	Yes	No
<b>11</b> Has the organization accepted a gift or contribution from any of the following persons?		
<b>a</b> 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?		
<b>b</b> A family member of a person described on line 11a above?		
<b>c</b> A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
<b>11a</b>		
<b>11b</b>		
<b>11c</b>		

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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? <i>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.</i>		
<b>2</b> 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? <i>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.</i>		
<b>1</b>		
<b>2</b>		

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> 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?		
<b>2</b> 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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
<b>3</b> 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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
<b>1</b>		
<b>2</b>		
<b>3</b>		

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
<b>2</b> Activities Test. Answer lines 2a and 2b below.		
<b>a</b> 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? <i>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.</i>		
<b>b</b> Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>		
<b>3</b> Parent of Supported Organizations. Answer lines 3a and 3b below.		
<b>a</b> Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No," provide details in Part VI.</i>		
<b>b</b> Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>		
<b>2a</b>		
<b>2b</b>		
<b>3a</b>		
<b>3b</b>		

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

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

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D—Distributions		Current Year
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required— <i>provide details in Part VI</i> )	<b>5</b>
<b>6</b>	Other distributions ( <i>describe in Part VI</i> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive ( <i>provide details in Part VI</i> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2023 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

Section E—Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2023	(iii) Distributable Amount for 2023
<b>1</b> Distributable amount for 2023 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2023 (reasonable cause required— <i>explain in Part VI</i> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2023			
<b>a</b> From 2018 . . . . .			
<b>b</b> From 2019 . . . . .			
<b>c</b> From 2020 . . . . .			
<b>d</b> From 2021 . . . . .			
<b>e</b> From 2022 . . . . .			
<b>f</b> Total of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2023 distributable amount			
<b>i</b> Carryover from 2018 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2023 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2023 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2023, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>6</b> Remaining underdistributions for 2023. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.			
<b>7</b> Excess distributions carryover to 2024. Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> Excess from 2019 . . .			
<b>b</b> Excess from 2020 . . .			
<b>c</b> Excess from 2021 . . .			
<b>d</b> Excess from 2022 . . .			
<b>e</b> Excess from 2023 . . .			



**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](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2023**

**Open to Public  
Inspection**

Name of the organization

**HILTON HEAD ISLAND AUDUBON SOCIETY aka Hilton Head Audubon**

Employer identification number

**51-0168071**

**Form 990-EZ, Part I, Line 10 - Grant to Audubon South Carolina**

Area with horizontal dashed lines for providing supplemental information.

Other Expenses Structured Explanation

Description	Amount
Educational programs	4,924
Juneteenth Celebration	9,245
Audubon Newhall improvements	9,136
Port Royal Sound Maritime program for kids	1,650
Website	3,341
Membership system and other IT costs	2,642
Social media marketing and advertising	3,722
Insurance	1,924
Credit card fees	1,577
Property taxes	738
Miscellaneous	872
<b>Total:</b>	<b>39,771</b>

**Primary Exempt Purpose**

**Primary Exempt Purpose**

Our mission is to be a leading voice for birds and conservation in the Lowcountry, where people and nature thrive together. Our goals include preservation and protection of our coastal marshes, beaches, maritime forests and other habitats, ensuring they will be available for the continued enjoyment of residents and visitors, and for their use by migrating and resident birds. We actively partner with state and local leaders and the community-at large to promote a positive, forward-looking agenda for people and wildlife.

**First Program Service Accomplishments Description**

**Description**

Juneteenth at Historic Mitchelville Freedom park, funded through a \$10,000 grant from National Audubon (received in FY23). Hosted nine education events throughout the year, led twenty field trips including for both members and other community groups, spoke at 11 community groups, co-ordinated the Christmas bird count for the Hilton Head Island circle with 250 participants, and active on social media with conservation messages

**Second Program Service Accomplishments Description**

**Description**

trail to the pond and beginning work on a new, larger kiosk to showcase information about the Preserve. Through installation of a people counter, we estimate the Preserve gets approximately 10,000 visitors per year



**Part II Balance Sheets** (see the instructions for Part II)

Check if the organization used Schedule O to respond to any question in this Part II

	(A) Beginning of year	(B) End of year
<b>22</b> Cash, savings, and investments	62,578	74,909
<b>23</b> Land and buildings		
<b>24</b> Other assets (describe in Schedule O)		
<b>25 Total assets</b>	62,578	74,909
<b>26 Total liabilities</b> (describe in Schedule O)		
<b>27 Net assets or fund balances</b> (line 27 of column (B) <b>must</b> agree with line 21)	62,578	74,909

**Part III Statement of Program Service Accomplishments** (see the instructions for Part III)

Check if the organization used Schedule O to respond to any question in this Part III

What is the organization's primary exempt purpose? See Schedule O, Statement 2

Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. In a clear and concise manner, describe the services provided, the number of persons benefited, and other relevant information for each program title.

**Expenses**  
(Required for section 501(c)(3) and 501(c)(4) organizations; optional for others.)

<b>28</b> MAINTENANCE AND OPERATION OF AUDUBON NEWHALL PRESERVE, A 50 ACRE NATURE PRESERVE. OPEN TO PUBLIC AT NO CHARGE. SEVERAL THOUSAND VISITORS PER YEAR.		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>28a</b>	7,168
<b>29</b> CONSERVATION: ADVOCACY, EDUCATION PROGRAMS AND COMMUNITY SCIENCE TO PROMOTE PROTECTION AND RESPECT OF CRITICAL HABITAT FOR THREATENED AND ENDANGERED BIRDS. REACH THOUSANDS THROUGH SIGNAGE ON BEACHES, FIELD TRIPS, CHRISTMAS BIRD COUNT, PROGRAMS.		
(Grants \$ 2,500) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>29a</b>	5,368
<b>30</b> MOTUS: Funding for construction of antenna on HHI for Motus Wildlife Tracking System, an international collaborative research network that uses radio telemetry to track the movement of small flying animals. Thousands of international researchers are and will use data generated from HHI Motus antenna.		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>30a</b>	1,435
<b>31</b> Other program services (describe in Schedule O)		
(Grants \$ ) If this amount includes foreign grants, check here <input type="checkbox"/>	<b>31a</b>	
<b>32 Total program service expenses</b> (add lines 28a through 31a)	<b>32</b>	13,971

**Part IV List of Officers, Directors, Trustees, and Key Employees** (list each one even if not compensated—see the instructions for Part IV)

Check if the organization used Schedule O to respond to any question in this Part IV

(a) Name and title	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC) (if not paid, enter -0-)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation
Kay Grinnell President, Director	5	0	0	0
Lynn Hodgson Vice President, Director	5	0	0	0
Tony Johnson Treasurer, Director	5	0	0	0
Patty Kappmeyer Director of Communications	5	0	0	0
David and Julia Buzzard Directors of Conservation	5	0	0	0
Robert Clemens Director of Newhall Preserve	10	0	0	0
Natalie Hefter Director of Membership	5	0	0	0
Lois Lewis and Mary Ellen Blankenship Directors of Education	5	0	0	0
Carlos Chacon Director of Field Trips	5	0	0	0
Susan Murphy Director of Christmas Bird Count	5	0	0	0
Alan Biggs Director at-large	5	0	0	0

Part V Other Information (Note the Schedule A and personal benefit contract statement requirements in the instructions for Part V.) Check if the organization used Schedule O to respond to any question in this Part V

33 Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O
34 Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name.
35a Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities...
35b If "Yes" to line 35a, has the organization filed a Form 990-T for the year?
35c Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice...
36 Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year?
37a Enter amount of political expenditures, direct or indirect, as described in the instructions
37b Did the organization file Form 1120-POL for this year?
38a Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee; or were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?
38b If "Yes," complete Schedule L, Part II, and enter the total amount involved
39 Section 501(c)(7) organizations. Enter:
39a Initiation fees and capital contributions included on line 9
39b Gross receipts, included on line 9, for public use of club facilities
40a Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under:
40b Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year...
40c Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons...
40d Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization
40e All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction?
41 List the states with which a copy of this return is filed
42a The organization's books are in care of Sarah Gustafson Telephone no. 703-479-0425 Located at 89 Kingston Dunes, Hilton Head Island, SC ZIP + 4 29928
42b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country...
42c At any time during the calendar year, did the organization maintain an office outside the United States?
43 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here and enter the amount of tax-exempt interest received or accrued during the tax year
44a Did the organization maintain any donor advised funds during the year?
44b Did the organization operate one or more hospital facilities during the year?
44c Did the organization receive any payments for indoor tanning services during the year?
44d If "Yes" to line 44c, has the organization filed a Form 720 to report these payments?
45a Did the organization have a controlled entity within the meaning of section 512(b)(13)?
45b Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?

	Yes	No
<b>46</b> Did the organization engage, directly or indirectly, in political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I . . . . .	46	✓

**Part VI Section 501(c)(3) Organizations Only**

All section 501(c)(3) organizations must answer questions 47–49b and 52, and complete the tables for lines 50 and 51.

Check if the organization used Schedule O to respond to any question in this Part VI

	Yes	No
<b>47</b> 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 . . . . .	47	✓
<b>48</b> Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E . . . . .	48	✓
<b>49a</b> Did the organization make any transfers to an exempt non-charitable related organization? . . . . .	49a	✓
<b>b</b> If "Yes," was the related organization a section 527 organization? . . . . .	49b	

**50** Complete this table for the organization's five highest compensated employees (other than officers, directors, trustees, and key employees) who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MISC/1099-NEC)	(d) Health benefits, contributions to employee benefit plans, and deferred compensation	(e) Estimated amount of other compensation

**f** Total number of other employees paid over \$100,000 . . . . . ▶ \_\_\_\_\_

**51** Complete this table for the organization's five highest compensated independent contractors who each received more than \$100,000 of compensation from the organization. If there is none, enter "None."

(a) Name and business address of each independent contractor	(b) Type of service	(c) Compensation

**d** Total number of other independent contractors each receiving over \$100,000 . . . . . ▶ \_\_\_\_\_

**52** Did the organization complete Schedule A? **Note:** All section 501(c)(3) organizations must attach a completed Schedule A . . . . . ▶  **Yes**  **No**

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

<b>Sign Here</b>	▶ Signature of officer	Date
	▶ Sarah Gustafson, Treasurer FY2022-2023	
	Type or print name and title	

<b>Paid Preparer Use Only</b>	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	Firm's name ▶	Firm's EIN ▶			
	Firm's address ▶	Phone no.			

May the IRS discuss this return with the preparer shown above? See instructions . . . . . ▶  **Yes**  **No**

**Internal Revenue Service**

**Date:** April 6, 2007

HILTON HEAD ISLAND AUDUBON SOCIETY  
% CLEMENS P DIETZE  
277 MOSS CREEK DR  
HILTON HEAD SC 29926-1073

**Department of the Treasury**  
**P. O. Box 2508**  
**Cincinnati, OH 45201**

**Person to Contact:**

Kim A. Chambers 31-07674  
Customer Service Specialist

**Toll Free Telephone Number:**  
877-829-5500

**Federal Identification Number:**  
51-0168071

Dear Sir or Madam:

This is in response to your request of April 6, 2007, regarding your organization's tax-exempt status.

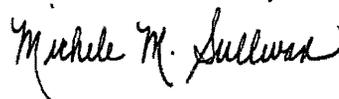
In January 1976 we issued a determination letter that recognized your organization as exempt from federal income tax. Our records indicate that your organization is currently exempt under section 501(c)(3) of the Internal Revenue Code.

Our records indicate that your organization is also classified as a public charity under section 509(a)(2) of the Internal Revenue Code.

Our records indicate that contributions to your organization are deductible under section 170 of the Code, and that you are qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Internal Revenue Code.

If you have any questions, please call us at the telephone number shown in the heading of this letter.

Sincerely,



Michele M. Sullivan, Oper. Mgr.  
Accounts Management Operations 1

Date: JAN 14 1976

Person to Contact:  
Barbara Pierce

Telephone Number:  
(404) 526-4516

Refer Reply to:  
EP/EO 7203:2273

Hilton Head Island Audobon Society,  
Inc.  
P. O. Box 5176  
Neidlinger Building, Colligny Plaza  
Hilton Head, S.C. 29928

Advance Ruling Period Ends: August 31, 1977

Gentlemen:

Based on information supplied, and assuming your operations will be as stated in your application for recognition of exemption, we have determined you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code.

We have further determined you can reasonably be expected to be an organization of the type described in section 509(a)(2). Accordingly, for your first three tax years, you will be treated as an organization which is not a private foundation.

At the end of your first three tax years, however, you must establish with the Internal Revenue Service that for such three years you were in fact an organization of the type described in section 509(a)(2). If you establish this fact with the Service, you will be classified as a section 509(a)(2) organization for all purposes beginning with the first day of your fourth tax year and you must normally meet the requirements of section 509(a)(2) thereafter. If, however, you do not meet the requirements of section 509(a)(2) for your first three tax years, you will be classified as a private foundation as of the first day of your fourth tax year. Furthermore, you will be treated as a private foundation as of the first day of your first tax year for purposes of section 507(d) and 4940.

Grantors and donors may rely on the determination that you are not a private foundation for your first three tax years, unless notice that you will no longer be treated as a section 509(a)(2) organization is published in the Internal Revenue Bulletin. However, a grantor or donor may not rely on such determination if he was in part responsible for, or was aware of, the act or failure to act that resulted in your loss of section 509(a)(2) status, or acquired knowledge that the Internal Revenue Service had given notice that you would be removed from classification as a section 509(a)(2) organization.

You are not liable for social security (FICA) taxes unless you file a waiver of exemption certificate as provided in the Federal Insurance Contributions Act. You are not liable for the taxes imposed under the Federal Unemployment Tax Act (FUTA).

cc: Peter L. Wolf

Organizations that are not private foundations are not subject to the excise taxes under Chapter 42 of the Code. However, you are not automatically exempt from other Federal excise taxes.

Donors may deduct contributions to you as provided in section 170 of the Code. Bequests, legacies, devises, transfers, or gifts to you or for your use are deductible under sections 2055, 2106, and 2522 of the Code.

If your sources of support, or your purposes, character, or method of operation is changed, you must let us know so we can consider the effect of the change on your status. Also, you must inform us of all changes in your name or address.

If your gross receipts each year are normally more than \$5,000, you are required to file Form 990, Return of Organization Exempt From Income Tax, by the 15th day of the fifth month after the end of your annual accounting period. The law imposes a penalty of \$10 a day, up to a maximum of \$5,000, for failure to file a return on time.

You are not required to file Federal income tax returns unless you are subject to the tax on unrelated business income under section 511 of the Code. If you are subject to this tax, you must file an income tax return on Form 990-T. In this letter we are not determining whether any of your present or proposed activities are unrelated trade or business as defined in section 513 of the Code.

You need an employer identification number even if you have no employees. If an employer identification number was not entered on your application, a number will be assigned to you and you will be advised of it. Please use that number on all returns you file and in all correspondence with the Internal Revenue Service.

Please keep this determination letter in your permanent records.

Sincerely yours,

*J. T. Wilson*

Exempt-Organization Specialist