Form 990-EZ

Return of Organization Exempt From Income Tax

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

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

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

A For the 2016 calendar year, or tax year beginning JUNE 1, 2016, and ending MAY 31, 2017

B Check if applicable:

☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
AUDUBON OF SOUTHWEST FLORIDA, INC

D Employer identification number
23-7282218

E Telephone number
(239) 936-6982

F Group Exemption Number

G Accounting Method: ☐ Cash ☐ Accrual ☐ Other (specify) □

H Check □ if the organization is not required to attach Schedule B
(Form 990, 990-EZ, or 990-PF).

J Tax-exempt status (check only one) — ☐ 501(c)(3) ☐ 501(c) ( ) □ (insert no.) ☐ 4947(a)(1) or ☐ 527

K Form of organization: ☐ 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) below) are $500,000 or more, file Form 990 instead of Form 990-EZ □ $ 14,331

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 □

1 Contributions, gifts, grants, and similar amounts received ........................................ 1 11,499
2 Program service revenue including government fees and contracts .............................. 2
3 Membership dues and assessments ............................................................................. 3
4 Investment income ...................................................................................................... 4 2,734
5a Gross amount from sale of assets other than inventory ............................................ 5a 98
5b Less: cost or other basis and sales expenses ......................................................... 5b 0
5c Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) .... 5c 98
6 Gaming and fundraising events
   a Gross income from gaming (attach Schedule G if greater than $15,000) ............... 6a
   b Gross income from fundraising events (not including $4,300 of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds $15,000) .................... 6b 981
   c Less: direct expenses from gaming and fundraising events ................................... 6c
   d Net income or (loss) from gaming and fundraising events (add lines 6a and 6b and subtract line 6c) ................................................................. 6d -981
7a Gross sales of inventory, less returns and allowances .............................................. 7a
7b Less: cost of goods sold ............................................................................................ 7b
7c Gross profit or (loss) from sales of inventory (Subtract line 7b from line 7a) ............... 7c
8 Other revenue (describe in Schedule O) .................................................................. 8
9 Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8 ................................................. 9 13,350

10 Grants and similar amounts paid (list in Schedule O) .............................................. 10 3,760
11 Benefits paid to or for members .............................................................................. 11
12 Salaries, other compensation, and employee benefits ............................................. 12
13 Professional fees and other payments to independent contractors ......................... 13 1,343
14 Occupancy, rent, utilities, and maintenance ............................................................. 14 575
15 Printing, publications, postage, and shipping ........................................................... 15 2,237
16 Other expenses (describe in Schedule O) ................................................................. 16 1,197
17 Total expenses. Add lines 10 through 16 ................................................................. 17 9,112

18 Excess or (deficit) for the year (Subtract line 17 from line 9) .................................... 18 4,238
19 Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with end-of-year figure reported on prior year's return) ...................................................... 19 89,570
20 Other changes in net assets or fund balances (explain in Schedule O) ..................... 20 1,801
21 Net assets or fund balances at end of year. Combine lines 18 through 20 .................. 21 95,609

For Paperwork Reduction Act Notice, see the separate instructions.
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.

<table>
<thead>
<tr>
<th></th>
<th>(A) Beginning of year</th>
<th>(B) End of year</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Cash, savings, and investments</td>
<td>89,570</td>
</tr>
<tr>
<td>23</td>
<td>Land and buildings</td>
<td>22</td>
</tr>
<tr>
<td>24</td>
<td>Other assets (describe in Schedule O)</td>
<td>24</td>
</tr>
<tr>
<td>25</td>
<td>Total assets</td>
<td>89,570</td>
</tr>
<tr>
<td>26</td>
<td>Total liabilities (describe in Schedule O)</td>
<td>26</td>
</tr>
<tr>
<td>27</td>
<td>Net assets or fund balances (line 27 of column (B) must agree with line 21)</td>
<td>89,570</td>
</tr>
</tbody>
</table>

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

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.

28 ENVIRONMENTAL BREAKFAST - ASWF’s nineteenth annual breakfast featured a panel discussion of the upcoming Conservation 20/20 referendum. Attendance at this free and open to the public event was over 120.

(Grants $) If this amount includes foreign grants, check here □ 28a 788

29 DONATIONS TO 501(C)(3) ORGANIZATIONS - ASWF sponsored or co-sponsored the following eco-minded activities - Everglades Coalition Conference, Harns Marsh “Wings Over Water” Festival, Eco-Voice, Yes on Conservation 20/20, FMNP, AWRA, and funding to FGCU for environmental benefit.

(Grants $) If this amount includes foreign grants, check here □ 29a 1,885

30 SHOREBIRD PARTNERSHIP - In cooperation with the Florida Shorebird Alliance, ASWF continued monitoring Least Tern, Snowy Plover, and Black Skimmer nesting sites on the southern tip of Fort Myers Beach. We engaged and educated hundreds of people and included native summer and winter training.

(Grants $) If this amount includes foreign grants, check here □ 30a 1,875

31 Other program services (describe in Schedule O)

(Grants $) If this amount includes foreign grants, check here □ 31a 193

32 Total program service expenses (add lines 28a through 31a) □ 32 4,741

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.

<table>
<thead>
<tr>
<th>Name and title</th>
<th>Average hours per week devoted to position</th>
<th>Reportable compensation (Forms W-2/1099-MISC) (if not paid, enter -0-)</th>
<th>Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
<tr>
<td>DAN VANNORMAN</td>
<td>PRESIDENT</td>
<td>8</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>MELINDA AVERHART</td>
<td>VICE PRESIDENT</td>
<td>6</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>GERRI REAVES</td>
<td>SECRETARY</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JIM RODENFELS</td>
<td>2nd VICE PRESIDENT AND TREASURER</td>
<td>10</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>BRAD CORNELL</td>
<td>DIRECTOR</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>WAYNE DALTRY</td>
<td>DIRECTOR</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>JAYNE JOHNSTON</td>
<td>DIRECTOR</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>COURTNEY KERN</td>
<td>DIRECTOR</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CAROL NEWCOMB</td>
<td>DIRECTOR</td>
<td>4</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>PETE QUASIS</td>
<td>DIRECTOR</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>CARL VEAUX</td>
<td>DIRECTOR</td>
<td>2</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
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.

**Yes**  **No**

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 conforming 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?

39. Section 501(c)(7) organizations. Enter:

a. Initiation fees and capital contributions included on line 9.

b. 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:

section 4911 0; section 4912 0; section 4955 0

b. 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.

c. 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.

d. Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization.

e. 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:

42a. The organization’s books are in care of JIM RODENFELS, TREASURER.

Located at P.O. BOX 61041, FORT MYERS, FL 33906-1041.

Telephone no. (239) 936-6982

b. 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).

c. 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.

44a. Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

b. Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ.

c. Did the organization receive any payments for indoor tanning services during the year?

d. 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) if "Yes," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).

b. Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)?
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.

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.

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

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

b If “Yes,” was the related organization a section 527 organization?

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.”

<table>
<thead>
<tr>
<th>(a) Name and title of each employee</th>
<th>(b) Average hours per week devoted to position</th>
<th>(c) Reportable compensation (Forms W-2/1099-MISC)</th>
<th>(d) Health benefits, contributions to employee benefit plans, and deferred compensation</th>
<th>(e) Estimated amount of other compensation</th>
</tr>
</thead>
<tbody>
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<td>NONE</td>
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</tbody>
</table>

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.”

<table>
<thead>
<tr>
<th>(a) Name and business address of each independent contractor</th>
<th>(b) Type of service</th>
<th>(c) Compensation</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

52 Did the organization complete Schedule A? Note: All section 501(c)(3) organizations must attach a completed Schedule A.

<table>
<thead>
<tr>
<th>Paid Preparer Use Only</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print/Type preparer’s name</td>
</tr>
<tr>
<td>Firm’s name</td>
</tr>
<tr>
<td>Firm’s address</td>
</tr>
</tbody>
</table>

May the IRS discuss this return with the preparer shown above? See instructions.
**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 or 990-EZ).)
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. □ 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)(v). (Complete Part II.)

7. □ A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)

8. □ 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 1/3% 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 1/3% 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.)


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 in 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).

<table>
<thead>
<tr>
<th>(I) Name of supported organization</th>
<th>(II) EIN</th>
<th>(III) Type of organization (described on lines 1-10 above (see instructions))</th>
<th>(IV) Is the organization listed in your governing document?</th>
<th>(V) Amount of monetary support (see instructions)</th>
<th>(VI) Amount of other support (see instructions)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(A)</td>
<td></td>
<td></td>
<td>Yes</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(B)</td>
<td></td>
<td></td>
<td>No</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(C)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>(D)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>(E)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Total ..........................................................................................................................................................
**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**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  Gifts, grants, contributions, and membership fees received. (Do not include any &quot;unusual grants.&quot;)</td>
<td>8,766</td>
<td>10,268</td>
<td>7,833</td>
<td>8,854</td>
<td>11,499</td>
<td>47,220</td>
</tr>
<tr>
<td>2  Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3  Gross receipts from activities that are not an unrelated trade or business under section 513</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4  Tax revenues levied for the organization's benefit and either paid to or expended on its behalf</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5  The value of services or facilities furnished by a governmental unit to the organization without charge</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>6  Total. Add lines 1 through 5</td>
<td>8,766</td>
<td>10,268</td>
<td>7,833</td>
<td>8,854</td>
<td>11,499</td>
<td>47,220</td>
</tr>
<tr>
<td>7a  Amounts included on lines 1, 2, and 3 received from disqualified persons</td>
<td>889</td>
<td>415</td>
<td>831</td>
<td>805</td>
<td>730</td>
<td>3,670</td>
</tr>
<tr>
<td>7b  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</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7c  Add lines 7a and 7b</td>
<td>889</td>
<td>415</td>
<td>831</td>
<td>805</td>
<td>730</td>
<td>3,670</td>
</tr>
<tr>
<td>8  Public support. (Subtract line 7c from line 6)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Section B. Total Support**

<table>
<thead>
<tr>
<th>Calendar year (or fiscal year beginning in)</th>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
<th>(f) Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>9  Amounts from line 6</td>
<td>8,766</td>
<td>10,268</td>
<td>7,833</td>
<td>8,854</td>
<td>11,499</td>
<td>47,220</td>
</tr>
<tr>
<td>10a  Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources</td>
<td>3,849</td>
<td>3,092</td>
<td>3,038</td>
<td>2,640</td>
<td>2,734</td>
<td>15,353</td>
</tr>
<tr>
<td>10b  Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>10c  Add lines 10a and 10b</td>
<td>3,849</td>
<td>3,092</td>
<td>3,038</td>
<td>2,640</td>
<td>2,734</td>
<td>15,353</td>
</tr>
<tr>
<td>11  Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>12  Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>13  Total support. (Add lines 9, 10c, 11, and 12)</td>
<td>12,615</td>
<td>13,360</td>
<td>10,871</td>
<td>11,494</td>
<td>14,233</td>
<td>62,573</td>
</tr>
<tr>
<td>14  First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>(a) 2012</th>
<th>(b) 2013</th>
<th>(c) 2014</th>
<th>(d) 2015</th>
<th>(e) 2016</th>
</tr>
</thead>
<tbody>
<tr>
<td>15  Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>16  Public support percentage from 2015 Schedule A, Part III, line 15</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

| Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f)) | 24.54 % |
| Investment income percentage from 2015 Schedule A, Part III, line 17 | 26.60 % |
| 19a  33½% support tests—2016. If the organization did not check the box on line 14, and line 15 is more than 33½%, and line 17 is not more than 33½%, check this box and stop here. The organization qualifies as a publicly supported organization. | |
| b  33½% support tests—2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33½%, and line 18 is not more than 33½%, 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. | |
Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

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

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

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then
- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then
- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then
- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization:

AUDUBON OF SOUTHWEST FLORIDA, INC

Employer identification number:

23-7282218

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1. Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")

2. Political campaign activity expenditures (see instructions) $ 

3. Volunteer hours for political campaign activities (see instructions) 

Part I-B Complete if the organization is exempt under section 501(c)(3).

1. Enter the amount of any excise tax incurred by the organization under section 4955 $ 0

2. Enter the amount of any excise tax incurred by organization managers under section 4955 $ 0

3. If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No

4a. Was a correction made? Yes No

b. If "Yes," describe in Part IV.

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1. Enter the amount directly expended by the filing organization for section 527 exempt function activities $ 

2. Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities $ 

3. Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b $ 

4. Did the filing organization file Form 1120-POL for this year? Yes No

5. Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name

(b) Address

(c) EIN

(d) Amount paid from filing organization's funds. If none, enter -0-

(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

(1)

(2)

(3)

(4)

(5)

(6)

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.
Part II-B  Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each “Yes,” response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

<table>
<thead>
<tr>
<th></th>
<th>(a)</th>
<th>(b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>No</td>
<td>Amount</td>
</tr>
</tbody>
</table>

1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:
   a Volunteers? ✓
   b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ✓
   c Media advertisements? ✓
   d Mailings to members, legislators, or the public? ✓
   e Publications, or published or broadcast statements? ✓
   f Grants to other organizations for lobbying purposes? ✓ 250
   g Direct contact with legislators, their staffs, government officials, or a legislative body? ✓
   h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? ✓
   i Other activities? ✓
   j Total. Add lines 1c through 1i 250

2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? ✓
   b If “Yes,” enter the amount of any tax incurred under section 4912
   c If “Yes,” enter the amount of any tax incurred by organization managers under section 4912
   d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
</table>

1 Were substantially all (90% or more) dues received nondeductible by members? 1
2 Did the organization make only in-house lobbying expenditures of $2,000 or less? 2
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year? 3

Part III-B  Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered “No,” OR (b) Part III-A, line 3, is answered “Yes.”

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
</table>

1 Dues, assessments and similar amounts from members
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).
   a Current year 2a
   b Carryover from last year 2b
   c Total 2c
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4
5 Taxable amount of lobbying and political expenditures (see instructions) 5

Part IV  Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

GRANTS TOTALLING $250.00 WERE MADE TO "YES ON CONSERVATION 20/20" - A COALITION OF LOCAL CITIZENS AND ORGANIZATIONS WORKING TO SUPPORT THE PASSAGE OF THE LEE COUNTY CONSERVATION 20/20 REFERENDUM ON THE NOVEMBER 2016 BALLOT.
**Supplemental Information to Form 990 or 990-EZ**

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

Attach to Form 990 or 990-EZ.

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

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**Name of the organization:**

**AUDUBON OF SOUTHWEST FLORIDA, INC**

**Employer identification number:**

23-7282218

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**Part I - line 10 (Grants and similar amounts paid):**

no grants or similar amounts were paid in excess of $5,000

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**Part I - line 18 (Other expenses):**

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Business Registration Fees</td>
<td>61</td>
</tr>
<tr>
<td>Credit Card Processing Fees</td>
<td>341</td>
</tr>
<tr>
<td>Supplies</td>
<td>236</td>
</tr>
<tr>
<td>Insurance</td>
<td>559</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,197</strong></td>
</tr>
</tbody>
</table>

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**Part I - line 20 (Other changes to net assets):**

unrealized gains and losses on investments carried at market value 1,801

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**Part III - What is the organization's primary exempt purpose:**

The mission of Audubon of Southwest Florida is to protect plants, animals, and their habitats and to provide environmental education and a greater community involvement with the natural world.

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**Part III - line 31 (Other program services):**

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>holiday party</td>
<td>39</td>
</tr>
<tr>
<td>ribbons for Photo Contest</td>
<td>154</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>193</strong></td>
</tr>
</tbody>
</table>

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