

Forms 990 / 990-EZ Return Summary

For calendar year 2019, or tax year beginning _____, and ending _____

23-7403757

Armand Bayou Nature Center Inc

Net Asset / Fund Balance at Beginning of Year 635,542

Revenue

Contributions	<u>738,791</u>		
Program service revenue	<u>268,354</u>		
Investment income	<u>1,702</u>		
Capital gain / loss			
Fundraising / Gaming:			
Gross revenue	<u>137,002</u>		
Direct expenses	<u>112,146</u>		
Net income	<u>24,856</u>		
Other income	<u>0</u>		
Total revenue		<u>1,033,703</u>	

Expenses

Program services	<u>712,357</u>		
Management and general	<u>216,740</u>		
Fundraising			
Total expenses		<u>929,097</u>	
Excess / (deficit)			<u>104,606</u>

Changes 121,504

Net Asset / Fund Balance at End of Year 861,652

Reconciliation of Revenue

Total revenue per financial statements	_____
Less:	
Unrealized gains	_____
Donated services	_____
Recoveries	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total revenue per return	<u>1,033,703</u>

Reconciliation of Expenses

Total expenses per financial statements	_____
Less:	
Donated services	_____
Prior year adjustments	_____
Losses	_____
Other	_____
Plus:	
Investment expenses	_____
Other	_____
Total expenses per return	<u>929,097</u>

	Beginning	Ending	Differences
Assets	<u>684,327</u>	<u>900,287</u>	
Liabilities	<u>48,785</u>	<u>38,635</u>	
Net assets	<u>635,542</u>	<u>861,652</u>	<u>226,110</u>

Miscellaneous Information

Amended return _____
 Return / extended due date 11/16/20
 Failure to file penalty _____

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)
▶ Do not enter social security numbers on this form as it may be made public.
▶ Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2019 calendar year, or tax year beginning _____, and ending _____

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization Armand Bayou Nature Center Inc		D Employer identification number 23-7403757
	Doing business as		E Telephone number 281-474-2551
	Number and street (or P.O. box if mail is not delivered to street address) Room/suite PO Box 58828		
	City or town, state or province, country, and ZIP or foreign postal code Houston TX 77258		G Gross receipts \$ 1,145,849
F Name and address of principal officer: Timothy Pylate PO Box 58828 Houston TX 77258		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
J Website: ▶ www.abnc.org H(c) Group exemption number ▶			
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other ▶			L Year of formation: 1974
M State of legal domicile: TX			

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: See Schedule O		
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	31
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5 Total number of individuals employed in calendar year 2019 (Part V, line 2a)	5	35
	6 Total number of volunteers (estimate if necessary)	6	0
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 39	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	576,139	738,791
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	224,821	268,354
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,382	1,702
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	91,907	24,856
		894,249	1,033,703
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		0
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	550,599	535,257
	16a Professional fundraising fees (Part IX, column (A), line 11e)	38,500	0
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 0		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	268,567	393,840
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	857,666	929,097
	19 Revenue less expenses. Subtract line 18 from line 12	36,583	104,606
	Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year
21 Total liabilities (Part X, line 26)		684,327	900,287
22 Net assets or fund balances. Subtract line 21 from line 20		48,785	38,635
		635,542	861,652

Part II Signature Block

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

Sign Here	Signature of officer	Date			
	Garry McMahan Type or print name and title	President			
Paid Preparer Use Only	Print/Type preparer's name	Preparer's signature	Date	Check <input type="checkbox"/> if self-employed	PTIN
	W. Chris Peden, CPA	W. Chris Peden, CPA	11/09/20		P00358720
	Firm's name ▶ Peden & Associates	Firm's EIN ▶ 76-0506181			
	Firm's address ▶ 312 Morningside Dr Suite C Friendswood, TX 77546	Phone no. 281-992-1512			

May the IRS discuss this return with the preparer shown above? (see instructions) Yes No

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<input checked="" type="checkbox"/>	
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<input checked="" type="checkbox"/>	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I		<input checked="" type="checkbox"/>
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II		<input checked="" type="checkbox"/>
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		<input checked="" type="checkbox"/>
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		<input checked="" type="checkbox"/>
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II		<input checked="" type="checkbox"/>
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<input checked="" type="checkbox"/>
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<input checked="" type="checkbox"/>
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? If "Yes," complete Schedule D, Part V	<input checked="" type="checkbox"/>	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<input checked="" type="checkbox"/>	
b Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII		<input checked="" type="checkbox"/>
c Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII		<input checked="" type="checkbox"/>
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX		<input checked="" type="checkbox"/>
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X		<input checked="" type="checkbox"/>
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X		<input checked="" type="checkbox"/>
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII		<input checked="" type="checkbox"/>
b Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		<input checked="" type="checkbox"/>
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<input checked="" type="checkbox"/>
14a Did the organization maintain an office, employees, or agents outside of the United States?		<input checked="" type="checkbox"/>
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV		<input checked="" type="checkbox"/>
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV		<input checked="" type="checkbox"/>
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV		<input checked="" type="checkbox"/>
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		<input checked="" type="checkbox"/>
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	<input checked="" type="checkbox"/>	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III		<input checked="" type="checkbox"/>
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<input checked="" type="checkbox"/>
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		<input checked="" type="checkbox"/>

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

		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
	2a		35
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		X
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O		
4a	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)?		X
b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
d	If "Yes," indicate the number of Forms 8282 filed during the year		
	7d		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the sponsoring organization make any taxable distributions under section 4966?		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?		
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12		
	10a		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
	10b		
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders		
	11a		
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)		
	11b		
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
	12b		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note: See the instructions for additional information the organization must report on Schedule O.		
	13a		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans		
	13b		
c	Enter the amount of reserves on hand		
	13c		
14a	Did the organization receive any payments for indoor tanning services during the tax year?		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O		
	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.		X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.		X

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former** directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Alex Angelina	0.00									
Trustee	0.00	X					0	0	0	
(2) Randy Ashby	0.00									
2nd VP	0.00	X		X			0	0	0	
(3) Jerred Bellina	0.00									
Trustee	0.00	X					0	0	0	
(4) Chad Burke	0.00									
Trustee	0.00	X					0	0	0	
(5) John Collins	0.00									
Trustee	0.00	X					0	0	0	
(6) Cathy Culpeper	0.00									
EC Advisor	0.00	X					0	0	0	
(7) Margaret Dickson	0.00									
Trustee	0.00	X					0	0	0	
(8) Gene Fisseler	0.00									
Trustee	0.00	X					0	0	0	
(9) Cliff Grim	0.00									
Trustee	0.00	X					0	0	0	
(10) Nicole Hausler	0.00									
Secretary	0.00	X		X			0	0	0	
(11) Helen Hodges	0.00									
Trustee	0.00	X					0	0	0	

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line in this Part VIII

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b 45,710				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 103,545				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 589,536				
	g Noncash contributions included in lines 1a-1f	1g \$				
	h Total. Add lines 1a-1f		738,791			
Program Service Revenue	2a Program Services	Business Code	268,354	268,354		
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g Total. Add lines 2a-2f		268,354			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,702	1,702		
	4 Income from investment of tax-exempt bond proceeds					
	5 Royalties					
	6a Gross rents	6a	(i) Real			
		6b	(ii) Personal			
		6c				
	d Net rental income or (loss)					
	7a Gross amount from sales of assets other than inventory	7a	(i) Securities			
		7b	(ii) Other			
		7c				
	d Net gain or (loss)					
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	8a		137,002		
		8b		112,146		
		c Net income or (loss) from fundraising events		24,856		
	9a Gross income from gaming activities. See Part IV, line 19	9a				
9b						
c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	10a					
	b Less: cost of goods sold	10b				
	c Net income or (loss) from sales of inventory					
Miscellaneous Revenue	11a	Business Code				
	b					
	c					
	d All other revenue					
	e Total. Add lines 11a-11d					
12 Total revenue. See instructions		1,033,703	270,056	0	0	

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing	112,281	1	84,984
	2	Savings and temporary cash investments	392,053	2	496,859
	3	Pledges and grants receivable, net	5,000	3	
	4	Accounts receivable, net	5,043	4	27
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	4,777	8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	766,407		
	10b	Less: accumulated depreciation	464,990	10c	301,417
	11	Investments—publicly traded securities		11	17,000
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
16	Total assets. Add lines 1 through 15 (must equal line 33)	684,327	16	900,287	
Liabilities	17	Accounts payable and accrued expenses	14,902	17	11,079
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties	33,883	24	27,556
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D		25	
	26	Total liabilities. Add lines 17 through 25	48,785	26	38,635
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27	Net assets without donor restrictions	243,489	27	75,114
	28	Net assets with donor restrictions	392,053	28	786,538
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29	Capital stock or trust principal, or current funds		29	
	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
	31	Retained earnings, endowment, accumulated income, or other funds		31	
	32	Total net assets or fund balances	635,542	32	861,652
33	Total liabilities and net assets/fund balances	684,327	33	900,287	

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(20) Linda Retherford	0.00									
Trustee	0.00	X					0	0	0	
(21) Chris Shineldecker	0.00									
Trustee	0.00	X					0	0	0	
(22) Sharon Stewart	0.00									
Trustee	0.00	X					0	0	0	
(23) Julia Tschappat	0.00									
Trustee	0.00	X					0	0	0	
(24) Fred Welch	0.00									
Trustee	0.00	X					0	0	0	
(25) Chris Whatley	0.00									
Trustee	0.00	X					0	0	0	
(26) Tracy Whatley	0.00									
Trustee	0.00	X					0	0	0	
(27) Chris Wild	0.00									
Trustee	0.00	X					0	0	0	
1b Subtotal										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual		
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2019

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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 for instructions and the latest information.**

Name of the organization

Armand Bayou Nature Center Inc

Employer identification number

23-7403757

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 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 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.)
- 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 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).

(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)						
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

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
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						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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**

Section C. Computation of Public Support Percentage

15 Public support percentage for 2019 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage for 2018 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2019 (line 10c, column (f), divided by line 13, column (f))	17	%
18 Investment income percentage for 2018 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests—2019. 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—2018. 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 *(continued)*

- 11** Has the organization accepted a gift or contribution from any of the following persons?
- a** A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?
 - b** A family member of a person described in (a) above?
 - c** A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI.*

	Yes	No
11a		
11b		
11c		

Section B. Type I Supporting Organizations

- 1** Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.*
- 2** Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.*

	Yes	No
1		
2		

Section C. Type II Supporting Organizations

- 1** 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)? *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).*

	Yes	No
1		

Section D. All Type III Supporting Organizations

- 1** Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?
- 2** Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).*
- 3** By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.*

	Yes	No
1		
2		
3		

Section E. Type III Functionally-Integrated Supporting Organizations

- 1** Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (*see instructions*).
- a** The organization satisfied the Activities Test. *Complete line 2 below.*
 - b** The organization is the parent of each of its supported organizations. *Complete line 3 below.*
 - c** The organization supported a governmental entity. *Describe in Part VI how you supported a government entity (see instructions).*

2 Activities Test. *Answer (a) and (b) below.*

- a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.*
 - b** Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3** Parent of Supported Organizations. *Answer (a) and (b) below.*
- a** 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? *Provide details in Part VI.*
 - b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.*

	Yes	No
2a		
2b		
3a		
3b		

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

Section D - Distributions		Current Year		
1	Amounts paid to supported organizations to accomplish exempt purposes			
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purposes of supported organizations			
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI). See instructions.			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.			
9	Distributable amount for 2019 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1	Distributable amount for 2019 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2019 (reasonable cause required-explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2019			
a	From 2014			
b	From 2015			
c	From 2016			
d	From 2017			
e	From 2018			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2019 distributable amount			
i	Carryover from 2014 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2019 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2019 distributable amount			
c	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	Excess distributions carryover to 2020. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2015			
b	Excess from 2016			
c	Excess from 2017			
d	Excess from 2018			
e	Excess from 2019			

Schedule B(Form 990, 990-EZ,
or 990-PF)Department of the Treasury
Internal Revenue Service**Schedule of Contributors**▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2019

Name of the organization

Employer identification number

Armand Bayou Nature Center Inc**23-7403757**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

 501(c)(3) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization

Form 990-PF

 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundationCheck if your organization is covered by the **General Rule** or a **Special Rule**.**Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.**General Rule**

-
- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

Armand Bayou Nature Center Inc

Employer identification number

23-7403757

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	The Brown Foundation 2217 Welch St Houston TX 77019	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	McGovern Foundation 2211 Norfolk Houston TX 77098	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	Shell Oil Company PO Box 100 Deer Park TX 77536	\$ 107,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
10	Mary Beth Maher 5120 Woodway Dr Ste 6000 Houston TX 77056	\$ 30,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	Commissioner Adrian Garcia 1001 Preston St Houston TX 77002	\$ 85,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
		\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a Public exhibition
 - b Scholarly research
 - c Preservation for future generations
 - d Loan or exchange program
 - e Other
- 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment %
 - b Permanent endowment %
 - c Term endowment %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|---|-----|-------------------------------------|
| (i) Unrelated organizations | | <input checked="" type="checkbox"/> |
| (ii) Related organizations | | <input checked="" type="checkbox"/> |
| 3b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? | | |
- 4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		131,189	3,539	127,650
d Equipment		304,368	144,250	160,118
e Other		330,850	317,201	13,649
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				301,417

**SCHEDULE G
(Form 990 or 990-EZ)**

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2019

Open to Public Inspection

Name of the organization

Armand Bayou Nature Center Inc

Employer identification number

23-7403757

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Name of the organization

Armand Bayou Nature Center Inc

Employer identification number

23-7403757

Form 990, Part III, Line 4c - Third Accomplishment

Visitor Services: Over 20,000 guests visit ABNC annually, another 2,000 member visits are also recorded. Almost 2,500 people travel to ABNC to attend meetings and private events each year. Visitors follow the self-guided accessible Discovery Trail interpretive loop to habitat overlooks, interpretive exhibits, and historical farm displays, other venture out on over 5 miles of developed hiking trails. Volunteers help ABNC conduct numerous interpretive activities, including guided trail hikes, animal demonstrations, hands-on-history craft demonstrations, and guided canoe and pontoon boat tours of Armand Bayou. ABNC special places are also available for family retreats, company meetings and seasonal parties. Several community groups utilize ABNC meeting spaces, and ABNC regularly hosts nature-related conferences.

Form 990, Part III, Line 4d - All Other Accomplishments

Fundraising

Form 990, Part VI - Additional Information

Tracy and Chris Whatley have a family relationship.

The Executive Committee is made up of the President, two Vice-Presidents, Secretary, Treasurer, Executive Director and Immediate Past-President. The Immediate Past-President and Executive Director do not have voting rights. The President shall act as Chairman of the Executive Committee and shall form a new Executive Committee on an annual basis following Trustee elections. The members of the Executive Committee shall have such powers and perform such duties as may be delegated to it by the Board of Trustees,

Form **4562**
 Department of the Treasury
 Internal Revenue Service (99)

Depreciation and Amortization
 (Including Information on Listed Property)
 Attach to your tax return.

OMB No. 1545-0172
2019
 Attachment Sequence No. **179**

Go to www.irs.gov/Form4562 for instructions and the latest information.

Name(s) shown on return **Armand Bayou Nature Center Inc** Identifying number **23-7403757**

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	1,020,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,550,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2018 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5. See instructions	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2020. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property. See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year. See instructions	14	110,298
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	

Part III MACRS Depreciation (Don't include listed property. See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2019	17	20,434
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B—Assets Placed in Service During 2019 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
			27.5 yrs.	MM	S/L	
i Nonresidential real property	01/02/19	1,360	39 yrs.	MM	S/L	33
	Various	39,731	39.0	MM	S/L	776

Section C—Assets Placed in Service During 2019 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 30-year			30 yrs.	MM	S/L	
d 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	131,541
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

23-7403757

Federal Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179 Bonus	Basis for Depr	Per Conv Meth	Prior	Current
51	Pontoon Boat and Other vehicles	6/30/14	11,380		X	5,690	5 HY 200DB	11,380	0
58	Shop Tools	6/30/91	1,000			1,000	5 HY 200DB	1,000	0
59	Shop Tools	6/30/92	669			669	5 HY 200DB	669	0
60	Shop Tools	6/30/93	196			196	5 HY 200DB	196	0
61	Shop Tools	6/30/96	50			50	5 HY 200DB	50	0
62	Shop Tools	6/30/97	288			288	5 HY 200DB	288	0
66	Education Building	9/24/18	48,935			48,935	39 MMS/L	366	1,255
67	NgN Design	10/19/18	11,381			11,381	39 MMS/L	61	292
68	Education Building	11/02/18	6,437			6,437	39 MMS/L	21	165
69	NgN Design	11/05/18	14,445			14,445	39 MMS/L	46	371
70	NgN Design	11/27/18	8,900			8,900	39 MMS/L	29	228
			<u>520,006</u>			<u>422,777</u>		<u>372,773</u>	<u>20,434</u>
ACRS:									
7	Furniture & Fixtures	6/30/81	26,861			26,861	5 HY PRE	26,861	0
8	Furniture & Fixtures	6/30/82	2,697			2,697	5 HY PRE	2,697	0
9	Furniture & Fixtures	6/30/83	4,368			4,368	5 HY PRE	4,368	0
10	Furniture & Fixtures	6/30/84	11,264			11,264	5 HY PRE	11,264	0
11	Furniture & Fixtures	6/30/85	-9,277			-9,277	5 HY PRE	-9,277	0
12	Furniture & Fixtures	6/30/86	9,173			9,173	5 HY PRE	9,173	0
55	Shop Tools	6/30/82	910			910	5 HY PRE	910	0
56	Shop Tools	6/30/83	872			872	5 HY PRE	872	0
57	Shop Tools	6/30/85	-2,428			-2,428	5 HY PRE	-2,428	0
	Total ACRS Depreciation		<u>44,440</u>			<u>44,440</u>		<u>44,440</u>	<u>0</u>
Other Depreciation:									
1	Furniture & Fixtures	6/30/75	1,884			1,884	10 MO200DB	1,884	0
2	Furniture & Fixtures	6/30/76	590			590	10 MO200DB	590	0
3	Furniture & Fixtures	6/30/77	14,868			14,868	10 MO200DB	14,868	0
4	Furniture & Fixtures	6/30/78	5,521			5,521	10 MO200DB	5,521	0
5	Furniture & Fixtures	6/30/79	3,083			3,083	10 MO200DB	3,083	0
6	Furniture & Fixtures	6/30/80	7,363			7,363	10 MO200DB	7,363	0
52	Shop Tools	6/30/77	892			892	5 MO200DB	892	0
53	Shop Tools	6/30/78	902			902	5 MO200DB	902	0
54	Shop Tools	6/30/79	634			634	5 MO200DB	634	0
63	Library Books	6/30/78	348			348	10 MO200DB	348	0
64	Library Books	6/30/79	33			33	10 MO200DB	33	0
65	Library Books	6/30/80	768			768	10 MO200DB	768	0
	Total Other Depreciation		<u>36,886</u>			<u>36,886</u>		<u>36,886</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>81,326</u>			<u>81,326</u>		<u>81,326</u>	<u>0</u>
Listed Property:									
39	Truck	6/30/14	13,686		X	6,843	5 HY 200DB	13,686	0
			<u>13,686</u>			<u>6,843</u>		<u>13,686</u>	<u>0</u>
	Grand Totals		766,407			552,037		467,785	131,541
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>766,407</u>			<u>552,037</u>		<u>467,785</u>	<u>131,541</u>

23-7403757

TX Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	TX Prior	TX Current	Federal Current	Difference Fed - TX
51	Pontoon Boat and Other vehicles	6/30/14	11,380	11,380	11,380	0	0	0
58	Shop Tools	6/30/91	1,000	1,000	1,000	0	0	0
59	Shop Tools	6/30/92	669	669	669	0	0	0
60	Shop Tools	6/30/93	196	196	196	0	0	0
61	Shop Tools	6/30/96	50	50	50	0	0	0
62	Shop Tools	6/30/97	288	288	288	0	0	0
66	Education Building	9/24/18	48,935	48,935	366	1,255	1,255	0
67	NgN Design	10/19/18	11,381	11,381	61	292	292	0
68	Education Building	11/02/18	6,437	6,437	21	165	165	0
69	NgN Design	11/05/18	14,445	14,445	46	371	371	0
70	NgN Design	11/27/18	8,900	8,900	29	228	228	0
			<u>520,006</u>	<u>520,006</u>	<u>372,773</u>	<u>20,434</u>	<u>20,434</u>	<u>0</u>
ACRS:								
7	Furniture & Fixtures	6/30/81	26,861	26,861	26,861	0	0	0
8	Furniture & Fixtures	6/30/82	2,697	2,697	2,697	0	0	0
9	Furniture & Fixtures	6/30/83	4,368	4,368	4,368	0	0	0
10	Furniture & Fixtures	6/30/84	11,264	11,264	11,264	0	0	0
11	Furniture & Fixtures	6/30/85	-9,277	-9,277	-9,277	0	0	0
12	Furniture & Fixtures	6/30/86	9,173	9,173	9,173	0	0	0
55	Shop Tools	6/30/82	910	910	910	0	0	0
56	Shop Tools	6/30/83	872	872	872	0	0	0
57	Shop Tools	6/30/85	-2,428	-2,428	-2,428	0	0	0
	Total ACRS Depreciation		<u>44,440</u>	<u>44,440</u>	<u>44,440</u>	<u>0</u>	<u>0</u>	<u>0</u>
Other Depreciation:								
1	Furniture & Fixtures	6/30/75	1,884	1,884	1,884	0	0	0
2	Furniture & Fixtures	6/30/76	590	590	590	0	0	0
3	Furniture & Fixtures	6/30/77	14,868	14,868	14,868	0	0	0
4	Furniture & Fixtures	6/30/78	5,521	5,521	5,521	0	0	0
5	Furniture & Fixtures	6/30/79	3,083	3,083	3,083	0	0	0
6	Furniture & Fixtures	6/30/80	7,363	7,363	7,363	0	0	0
52	Shop Tools	6/30/77	892	892	892	0	0	0
53	Shop Tools	6/30/78	902	902	902	0	0	0
54	Shop Tools	6/30/79	634	634	634	0	0	0
63	Library Books	6/30/78	348	348	348	0	0	0
64	Library Books	6/30/79	33	33	33	0	0	0
65	Library Books	6/30/80	768	768	768	0	0	0
	Total Other Depreciation		<u>36,886</u>	<u>36,886</u>	<u>36,886</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>81,326</u>	<u>81,326</u>	<u>81,326</u>	<u>0</u>	<u>0</u>	<u>0</u>
Listed Property:								
39	Truck	6/30/14	13,686	13,686	13,686	0	0	0
			<u>13,686</u>	<u>13,686</u>	<u>13,686</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Grand Totals		766,407	766,407	467,785	29,740	131,541	101,801
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>766,407</u>	<u>766,407</u>	<u>467,785</u>	<u>29,740</u>	<u>131,541</u>	<u>101,801</u>

23-7403757

AMT Asset Report

FYE: 12/31/2019

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv Meth	Prior	Current
51	Pontoon Boat and Other vehicles	6/30/14	11,380			X	5,690	5 HY 200DB	11,380	0
58	Shop Tools	6/30/91	1,000				1,000	6 HY 150DB	1,000	0
59	Shop Tools	6/30/92	669				669	6 HY 150DB	669	0
60	Shop Tools	6/30/93	196				196	6 HY 150DB	196	0
61	Shop Tools	6/30/96	50				50	6 HY 150DB	50	0
62	Shop Tools	6/30/97	288				288	6 HY 150DB	288	0
66	Education Building	9/24/18	48,935				48,935	39 MMS/L	366	1,255
67	NgN Design	10/19/18	11,381				11,381	39 MMS/L	61	292
68	Education Building	11/02/18	6,437				6,437	39 MMS/L	21	165
69	NgN Design	11/05/18	14,445				14,445	39 MMS/L	46	371
70	NgN Design	11/27/18	8,900				8,900	39 MMS/L	29	228
			<u>520,006</u>				<u>410,301</u>		<u>412,544</u>	<u>7,835</u>
Other Depreciation:										
1	Furniture & Fixtures	6/30/75	0				0	0 HY	0	0
2	Furniture & Fixtures	6/30/76	0				0	0 HY	0	0
3	Furniture & Fixtures	6/30/77	0				0	0 HY	0	0
4	Furniture & Fixtures	6/30/78	0				0	0 HY	0	0
5	Furniture & Fixtures	6/30/79	0				0	0 HY	0	0
6	Furniture & Fixtures	6/30/80	0				0	0 HY	0	0
7	Furniture & Fixtures	6/30/81	0				0	0 HY	0	0
8	Furniture & Fixtures	6/30/82	0				0	0 HY	0	0
9	Furniture & Fixtures	6/30/83	0				0	0 HY	0	0
10	Furniture & Fixtures	6/30/84	0				0	0 HY	0	0
11	Furniture & Fixtures	6/30/85	0				0	0 HY	0	0
12	Furniture & Fixtures	6/30/86	0				0	0 HY	0	0
52	Shop Tools	6/30/77	892				892	5 MO200DB	892	0
53	Shop Tools	6/30/78	902				902	5 MO200DB	902	0
54	Shop Tools	6/30/79	0				0	0 HY	0	0
55	Shop Tools	6/30/82	0				0	0 HY	0	0
56	Shop Tools	6/30/83	0				0	0 HY	0	0
57	Shop Tools	6/30/85	0				0	0 HY	0	0
63	Library Books	6/30/78	0				0	0 HY	0	0
64	Library Books	6/30/79	0				0	0 HY	0	0
65	Library Books	6/30/80	0				0	0 HY	0	0
	Total Other Depreciation		<u>1,794</u>				<u>1,794</u>		<u>1,794</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>1,794</u>				<u>1,794</u>		<u>1,794</u>	<u>0</u>
Listed Property:										
39	Truck	6/30/14	13,686			X	6,843	5 HY 200DB	13,686	0
			<u>13,686</u>				<u>6,843</u>		<u>13,686</u>	<u>0</u>
	Grand Totals		<u>686,875</u>				<u>460,029</u>		<u>428,024</u>	<u>118,942</u>
	Less: Dispositions and Transfers		<u>0</u>				<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>686,875</u>				<u>460,029</u>		<u>428,024</u>	<u>118,942</u>

23-7403757

Depreciation Adjustment Report

FYE: 12/31/2019

All Business Activities

Form	Unit	Asset	Description	Tax	AMT	AMT Adjustments/ Preferences
MACRS Adjustments:						
Page 1	1	13	Furniture & Fixtures	0	0	0
Page 1	1	14	Furniture & Fixtures	0	0	0
Page 1	1	15	Furniture & Fixtures	0	0	0
Page 1	1	16	Furniture & Fixtures	0	0	0
Page 1	1	17	Furniture & Fixtures	0	0	0
Page 1	1	18	Furniture & Fixtures	0	0	0
Page 1	1	19	Furniture & Fixtures	0	0	0
Page 1	1	20	Furniture & Fixtures	0	0	0
Page 1	1	21	Furniture & Fixtures	0	0	0
Page 1	1	22	Furniture & Fixtures	0	0	0
Page 1	1	23	Furniture & Fixtures	0	0	0
Page 1	1	24	Furniture & Fixtures	0	0	0
Page 1	1	25	Furniture & Fixtures	0	0	0
Page 1	1	26	Furniture & Fixtures	0	0	0
Page 1	1	27	Furniture & Fixtures	0	0	0
Page 1	1	28	Furniture & Fixtures	0	0	0
Page 1	1	29	Furniture & Fixtures	0	0	0
Page 1	1	30	Furniture & Fixtures	0	0	0
Page 1	1	31	Furniture & Fixtures	0	0	0
Page 1	1	32	Furniture & Fixtures	0	0	0
Page 1	1	33	Furniture & Fixtures	0	0	0
Page 1	1	34	Furniture & Fixtures	0	0	0
Page 1	1	35	Furniture & Fixtures	0	0	0
Page 1	1	36	ATV	0	0	0
Page 1	1	37	AJE	0	0	0
Page 1	1	38	Dell Computer	0	0	0
Page 1	1	39	Truck	0	0	0
Page 1	1	40	John Deere Tractor	11,855	3,917	7,938
Page 1	1	41	Ag-Meier Sprayer	496	160	336
Page 1	1	42	Kawasaki Mule Hstn Mtrsports	2,923	739	2,184
Page 1	1	43	Kawasaki Mule Hstn Mtrsports	2,849	708	2,141
Page 1	1	44	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	45	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	46	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	47	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	48	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	49	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	50	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	51	Pontoon Boat and Other vehicles	0	0	0
Page 1	1	58	Shop Tools	0	0	0
Page 1	1	59	Shop Tools	0	0	0
Page 1	1	60	Shop Tools	0	0	0
Page 1	1	61	Shop Tools	0	0	0
Page 1	1	62	Shop Tools	0	0	0
Page 1	1	66	Education Building	1,255	1,255	0
Page 1	1	67	NgN Design	292	292	0
Page 1	1	68	Education Building	165	165	0
Page 1	1	69	NgN Design	371	371	0
Page 1	1	70	NgN Design	228	228	0
Page 1	1	71	Telephone Cables	33	33	0
Page 1	1	72	EZ Dock of TX - Kayak Launch	335	335	0
Page 1	1	73	Kayak Trailer	101	101	0
Page 1	1	74	NgN Design-Electrical Outlets	11	11	0
Page 1	1	75	NgN Design-Kaneka Refurb	122	122	0
Page 1	1	76	EZ Dock-Telescoping pilings	18	18	0
Page 1	1	77	NgN Design-Kaneka Build Refurb	96	96	0
Page 1	1	78	NgN Design	79	79	0
Page 1	1	79	Confluence Outdoor	14	14	0
Page 1	1	80	Golf Carts	18,500	18,500	0
Page 1	1	81	Golf Carts	18,620	18,620	0
Page 1	1	82	Golf Carts	18,500	18,500	0
Page 1	1	83	Office Furniture-Kaneka Bldg	3,929	3,929	0
Page 1	1	84	Lighting-Kaneka Bldg	1,441	1,441	0
Page 1	1	85	Aquarium-Kaneka Bldg	3,999	3,999	0
Page 1	1	86	Library Shelves	5,067	5,067	0
Page 1	1	87	Trodent Pontoons	40,242	40,242	0

Asset	Description	Date In Service	Cost	Tax	AMT
Prior MACRS:					
13	Furniture & Fixtures	6/30/87	3,192	0	0
14	Furniture & Fixtures	6/30/88	4,940	0	0
15	Furniture & Fixtures	6/30/89	4,257	0	0
16	Furniture & Fixtures	6/30/90	1,350	0	0
17	Furniture & Fixtures	6/30/91	15,281	0	0
18	Furniture & Fixtures	6/30/92	8,600	0	0
19	Furniture & Fixtures	6/30/93	14,553	0	0
20	Furniture & Fixtures	6/30/94	-11,918	0	0
21	Furniture & Fixtures	6/30/95	8,710	0	0
22	Furniture & Fixtures	6/30/96	28,099	0	0
23	Furniture & Fixtures	6/30/97	7,345	0	0
24	Furniture & Fixtures	6/30/98	1,217	0	0
25	Furniture & Fixtures	6/30/99	40,897	0	0
26	Furniture & Fixtures	6/30/00	10,975	0	0
27	Furniture & Fixtures	6/30/01	9,156	0	0
28	Furniture & Fixtures	6/30/02	20,940	0	0
29	Furniture & Fixtures	6/30/03	32,111	0	0
30	Furniture & Fixtures	6/30/04	6,505	0	0
31	Furniture & Fixtures	6/30/05	5,346	0	0
32	Furniture & Fixtures	6/30/06	1,173	0	0
33	Furniture & Fixtures	6/30/07	1,090	0	0
34	Furniture & Fixtures	6/30/08	21,024	0	0
35	Furniture & Fixtures	6/30/09	2,027	0	0
36	ATV	6/30/09	10,193	0	0
37	AJE	7/01/05	1,883	0	0
38	Dell Computer	6/30/13	1,559	0	0
40	John Deere Tractor	6/30/16	62,704	8,467	2,798
41	Ag-Meier Sprayer	6/30/16	2,559	354	115
42	Kawasaki Mule Hstn Mtrsports	6/30/16	12,821	2,923	738
43	Kawasaki Mule Hstn Mtrsports	6/30/16	12,279	2,848	707
44	Pontoon Boat and Other vehicles	6/30/92	37,532	0	0
45	Pontoon Boat and Other vehicles	6/30/93	5,179	0	0
46	Pontoon Boat and Other vehicles	6/30/95	1,063	0	0
47	Pontoon Boat and Other vehicles	6/30/08	6,504	0	0
48	Pontoon Boat and Other vehicles	6/30/12	9,322	0	0
49	Pontoon Boat and Other vehicles	6/30/13	11,000	0	0
50	Pontoon Boat and Other vehicles	6/30/13	4,857	0	0
51	Pontoon Boat and Other vehicles	6/30/14	11,380	0	0
58	Shop Tools	6/30/91	1,000	0	0
59	Shop Tools	6/30/92	669	0	0
60	Shop Tools	6/30/93	196	0	0
61	Shop Tools	6/30/96	50	0	0
62	Shop Tools	6/30/97	288	0	0
66	Education Building	9/24/18	48,935	1,254	1,254
67	NgN Design	10/19/18	11,381	291	291
68	Education Building	11/02/18	6,437	165	165
69	NgN Design	11/05/18	14,445	370	370
70	NgN Design	11/27/18	8,900	228	228
71	Telephone Cables	1/02/19	1,360	35	35
72	EZ Dock of TX - Kayak Launch	2/14/19	14,911	382	382
73	Kayak Trailer	2/15/19	4,502	115	115
74	NgN Design-Electrical Outlets	2/19/19	475	12	12
75	NgN Design-Kaneka Refurb	3/07/19	5,985	153	153
76	EZ Dock-Telescoping pilings	4/08/19	990	25	25
77	NgN Design-Kaneka Build Refurb	5/03/19	6,010	154	154
78	NgN Design	5/04/19	4,957	128	128
79	Confluence Outdoor	9/20/19	1,901	49	49
80	Golf Carts	7/30/19	18,500	0	0
81	Golf Carts	10/30/19	18,620	0	0
82	Golf Carts	11/22/19	18,500	0	0
83	Office Furniture-Kaneka Bldg	4/08/19	3,929	0	0
84	Lighting-Kaneka Bldg	4/08/19	1,441	0	0
85	Aquarium-Kaneka Bldg	4/11/19	3,999	0	0
86	Library Shelves	11/06/19	5,067	0	0
87	Trodent pontoons	10/11/19	40,242	0	0

Asset	Description	Date In Service	Cost	TX
Prior MACRS:				
13	Furniture & Fixtures	6/30/87	3,192	0
14	Furniture & Fixtures	6/30/88	4,940	0
15	Furniture & Fixtures	6/30/89	4,257	0
16	Furniture & Fixtures	6/30/90	1,350	0
17	Furniture & Fixtures	6/30/91	15,281	0
18	Furniture & Fixtures	6/30/92	8,600	0
19	Furniture & Fixtures	6/30/93	14,553	0
20	Furniture & Fixtures	6/30/94	-11,918	0
21	Furniture & Fixtures	6/30/95	8,710	0
22	Furniture & Fixtures	6/30/96	28,099	0
23	Furniture & Fixtures	6/30/97	7,345	0
24	Furniture & Fixtures	6/30/98	1,217	0
25	Furniture & Fixtures	6/30/99	40,897	0
26	Furniture & Fixtures	6/30/00	10,975	0
27	Furniture & Fixtures	6/30/01	9,156	0
28	Furniture & Fixtures	6/30/02	20,940	0
29	Furniture & Fixtures	6/30/03	32,111	0
30	Furniture & Fixtures	6/30/04	6,505	0
31	Furniture & Fixtures	6/30/05	5,346	0
32	Furniture & Fixtures	6/30/06	1,173	0
33	Furniture & Fixtures	6/30/07	1,090	0
34	Furniture & Fixtures	6/30/08	21,024	0
35	Furniture & Fixtures	6/30/09	2,027	0
36	ATV	6/30/09	10,193	0
37	AJE	7/01/05	1,883	0
38	Dell Computer	6/30/13	1,559	0
40	John Deere Tractor	6/30/16	62,704	8,467
41	Ag-Meier Sprayer	6/30/16	2,559	354
42	Kawasaki Mule Hstn Mtrsports	6/30/16	12,821	2,923
43	Kawasaki Mule Hstn Mtrsports	6/30/16	12,279	2,848
44	Pontoon Boat and Other vehicles	6/30/92	37,532	0
45	Pontoon Boat and Other vehicles	6/30/93	5,179	0
46	Pontoon Boat and Other vehicles	6/30/95	1,063	0
47	Pontoon Boat and Other vehicles	6/30/08	6,504	0
48	Pontoon Boat and Other vehicles	6/30/12	9,322	0
49	Pontoon Boat and Other vehicles	6/30/13	11,000	0
50	Pontoon Boat and Other vehicles	6/30/13	4,857	0
51	Pontoon Boat and Other vehicles	6/30/14	11,380	0
58	Shop Tools	6/30/91	1,000	0
59	Shop Tools	6/30/92	669	0
60	Shop Tools	6/30/93	196	0
61	Shop Tools	6/30/96	50	0
62	Shop Tools	6/30/97	288	0
66	Education Building	9/24/18	48,935	1,254
67	NgN Design	10/19/18	11,381	291
68	Education Building	11/02/18	6,437	165
69	NgN Design	11/05/18	14,445	370
70	NgN Design	11/27/18	8,900	228
71	Telephone Cables	1/02/19	1,360	35
72	EZ Dock of TX - Kayak Launch	2/14/19	14,911	382
73	Kayak Trailer	2/15/19	4,502	115
74	NgN Design-Electrical Outlets	2/19/19	475	12
75	NgN Design-Kaneka Refurb	3/07/19	5,985	153
76	EZ Dock-Telescoping pilings	4/08/19	990	25
77	NgN Design-Kaneka Build Refurb	5/03/19	6,010	154
78	NgN Design	5/04/19	4,957	128
79	Confluence Outdoor	9/20/19	1,901	49
80	Golf Carts	7/30/19	18,500	6,290
81	Golf Carts	10/30/19	18,620	7,076
82	Golf Carts	11/22/19	18,500	7,030
83	Office Furniture-Kaneka Bldg	4/08/19	3,929	922
84	Lighting-Kaneka Bldg	4/08/19	1,441	338
85	Aquarium-Kaneka Bldg	4/11/19	3,999	939
86	Library Shelves	11/06/19	5,067	1,396
87	Trodent Pontoons	10/11/19	40,242	15,292

Form **990****Two Year Comparison Report****2018 & 2019**

For calendar year 2019, or tax year beginning

, ending

Name

Taxpayer Identification Number

Armand Bayou Nature Center Inc**23-7403757**

		2018	2019	Differences
Revenue	1. Contributions, gifts, grants	1. 244,829	589,536	344,707
	2. Membership dues and assessments	2. 43,090	45,710	2,620
	3. Government contributions and grants	3. 288,220	103,545	-184,675
	4. Program service revenue	4. 224,821	268,354	43,533
	5. Investment income	5. 1,382	1,702	320
	6. Proceeds from tax exempt bonds	6.		
	7. Net gain or (loss) from sale of assets other than inventory	7.		
	8. Net income or (loss) from fundraising events	8. 87,441	24,856	-62,585
	9. Net income or (loss) from gaming	9.		
	10. Net gain or (loss) on sales of inventory	10.		
	11. Other revenue	11. 4,466		-4,466
	12. Total revenue. Add lines 1 through 11	12. 894,249	1,033,703	139,454
Expenses	13. Grants and similar amounts paid	13.		
	14. Benefits paid to or for members	14.		
	15. Compensation of officers, directors, trustees, etc.	15. 104,669		-104,669
	16. Salaries, other compensation, and employee benefits	16. 445,930	535,257	89,327
	17. Professional fundraising fees	17. 38,500		-38,500
	18. Other professional fees	18. 37,633	43,068	5,435
	19. Occupancy, rent, utilities, and maintenance	19. 24,891		-24,891
	20. Depreciation and Depletion	20. 27,435	131,541	104,106
	21. Other expenses	21. 178,608	219,231	40,623
	22. Total expenses. Add lines 13 through 21	22. 857,666	929,097	71,431
	23. Excess or (Deficit). Subtract line 22 from line 12	23. 36,583	104,606	68,023
Other Information	24. Total exempt revenue	24. 894,249	1,033,703	139,454
	25. Total unrelated revenue	25.		
	26. Total excludable revenue	26. 230,669	270,056	39,387
	27. Total assets	27. 684,327	900,287	215,960
	28. Total liabilities	28. 48,785	38,635	-10,150
	29. Retained earnings	29. 635,542	861,652	226,110
	30. Number of voting members of governing body	30. 32	31	
	31. Number of independent voting members of governing body	31. 32	31	
	32. Number of employees	32. 34	35	
	33. Number of volunteers	33. 200		

Federal Statements

Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)

Description	Total Expenses	Program Service	Management & General	Fund Raising
Other Fees	\$ 28,948	\$	\$ 28,948	\$
Program Services	14,120	14,120		
Other Fees	\$ 43,068	\$ 14,120	\$ 28,948	\$ 0
Total				

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
Supplies	\$ 3,566	\$	\$ 3,566	\$
Facility Cost	2,103		2,103	
Total	\$ 5,669	\$ 0	\$ 5,669	\$ 0

Federal Statements

Schedule A, Part II, Line 1(e) (continued)

Description	Amount
Commissioner Adrian Garcia	\$ 85,000
Cash Contribution	\$ 738,791
Total	<u><u>823,791</u></u>

Schedule A, Part II, Line 12 - Current year

Description	Amount
Taxable Interest on Savings and Temporary Cash Investments	\$ 1,702
Program Services	268,354
Gala	137,002
Space Rental	
Total	<u><u>407,058</u></u>