Form **990-EZ**

Department of the Treasury

Internal Revenue Service

Short Form

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code
(except black lung benefit trust or private foundation)

Sponsoring organizations of donor edvised funds and controlling organizations as defined in section
512(b)(13) must file Form 990. All other organizations with gross receipts less than \$1,000,000 and total
assets less than \$2,500,000 at the end of the year may use this form.

▶ The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-1150 2008

Open to Public Inspection

A	For the	2008 calend	ar year,	, or tax	year b	eginning	Juz	ne /	, 2008	, and end	ding		DX 3			09
В	Check if a	pplicable:	Please	C Nan	ne of org	anization	Dag	\sim 1.0	7)	` /	1				entification	
	Address o	change	use IRS	Vin	sto [Vara 1	Vallbu	Andukoo	n L	9020X1	_	ŀ	94	60	18142	20
	Name cha	ne change print or Number and street (or P.O. box, if mail is not delivered to street address) Room/suite E Telep									phone number					
	invital retu											2523	<i>חער</i>			
	Terminatio	on	See Consider						<u> </u>				40	5) 0	- 3 2 0 1	
	Amended	l return	Specific instruc-	1 9/1			ountry, and			2.3			F Group	Exem	ption	
	Applicatio	on pending	tions.		<u>use</u>	rtino,	CH	9501	9 - 40	30			Numb	er .	, ▶	
	• Secti	ion 501(c)(3)	organiza	ations :	and 49	47(a)(1) no	nexempt	charitable trust	s must e	attach	G	Acco	unting me	thod:	Cash	Accrual
			a con	npleted	l Sched	lule A (Fo	rm 990 or	990-EZ).			l	Other	(specify)	•		
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	Websit	to b	un/s	SCV	IAS.C	DRG-					"				nedule B (F	
•		zation type (c					1 46	no.) 🔲 4947(n)/1) or	☐ 5 27			Z, or 990		ioddio D (i	Oiii 000,
_											<u> </u>			<u>`</u>		
								ing organization			pts a	re non	nally not i	more t	han \$25,000	0. A return is
								ure to file a com							· /	
-								1,000,000 or mon						▶\$	654,	559
Р	art I	Revenue,	, Expe	nses,	and (Change	<u>s in Net</u>	Assets or Fu	<u>ınd Ba</u>	lances	(See	the	instruct	ions 1		
	1	Contribution	ns, aifts	s. grant	ts, and	similar ar	nounts red	ceived						1	_265	435
	2		. •					ees and contra	acts .					2	12	060
	3	Membersh									•	•		3		0
	4	Investment	•		1556551	IIGIIW					•	• •		4	.79	080
	_			-					• • •	5a	2	11 S	-			
	5a							entory	• • •	5b			616			
	b	Less: cost				•									()	8061>
0	С							ry (Subtract line						5c	100	0 1001 /
Ž	6	Special events	and acti	ivities (co	xmplete a	pplicable pa	arts of Scheo	tule G). If any amou	nt is from	gaming, ch	neck h	nere 🕨	· 📙			
Revenue	а	Gross reve	nue (no	ot inclu	uding \$:		of contrib	utions							
æ	ŀ	reported o	-		_					6a						
	ь	Less: direc		-						6b						
	c							tivities (Subtrac	t line 6	o from lir	ne 6a	a) .		6c		
	7a	Gross sale	-							7a	6		63			
	1	Less: cost		•	-	i Gluiii S a	iid ailowe			7b	0	29 3				
	b					 .a. af inva	nton (Sui	btract line 7b f	rom line		· · ·			7c		447
	ြင	Other reve				40	riiory (Sui	Diract line 7D i	10111 11110	ra, .	-	• •		8		666
	8	Total reve	nue (ue	dd line	2012			and 8				•		9	285	627
_	 									· · · · · ·	<u></u>	<u>· ·</u> ·	• • •	10		150
	10	Grants and Benefits pa	simile t	ır ame	uets p	nd (attac	n schedu	le)			•			11		726
	11	Benefits pa	aid to c	or forth	hembe	rs-	<u>- 181</u> .				•				169	
9	12	Salaries, o	ther do)@pens	sation,	and emp	loyerober	nefits			•			12		
enses	13	Profession	al fees	Bulg o	theripa	iyrhents)	o indepe	ndent contract	ors .					13		
Ä	14	Professional fees and other payments to independent contractors Occupancy, rent ratifities, and maintenance							14		<u> </u>					
Ŵ	15	Printing, p	ublicati	ons, p	ostage	tand shi	piping.	· · · · ·				· W	Cime	15		7 888
	16	Other expe	enses (describ	place	144	UNDIPS I	Lepra JEan	Trivel,	Mas E	Guip	Ren I	LEE)	16	2	
	17	Total expe	enses.	Add lin	nes 10	through	<u>16 . ′ .</u>		<u> </u>	<u> </u>	<u>··</u>	<u> </u>	<u> </u>	17	26.	
9	18	Excess or	(deficit)) for th	ıe year	(Subtrac	t line 17 1	from line 9).						18		2447
Net Assets	19	Net assets	or fur	nd bala	ances a	at beginn	ning of ye	ear (from line 2	27, colu	mn (A)) (mus	t agre	e with		, ,	a 75 31
Ą		and of you	r figur	o ropo	rtad on	nrior ve	ar'e rotu	m)					_	19	1/2	9/84
et et	20	Other char	nges in	net as	ssets o	r fund ba	ılances (a	ttach explanati	on Ins	<i>૯૨૧ (૨૪૫) દેશ</i>	OSS(ęs M	TUR.	20	<u></u>	3 709 2
Z	21	Net assets	or tun	na balai	nces a	t ena or	year. Con	ndine lines 18	mrougn	20	•	• • _	–	21		8522
Р	art II	Balance	Sheet	s. If To	otal ass	sets on li	ne 25, co	lumn (B) are \$	2,500,00	00 or mo	re, fi	le For	m 990 ir	nsteac	of Form	990-EZ.
			(S	See the	e instru	ctions fo	r Part II.)		-			(A) Be	ginning of y	ear	(B) End o	of year
22	2 Casi	h, savings, a	•									111	12 45			2/99
23		d and buildi			/	4					L		L	5 2		Ø
24		er assets (de		$\rightarrow \mathcal{I}$	rventoi	y-19	117: E	quip-net.	349)		•	29 92			9 466
25		al assets .				10. C 1		, ,			L	11		0 2		21665
20	3 Tota	al liabilities			<u> </u>		s tax or)	<u> </u>	· · ·		962		<u>3143</u> >
27					s (line :	27 of col	umn (B) 🛭	nust agree wit	h line 21	l)		1/0	29 78	24 2	7 / 0	18522
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	art III Statement of Program Service Accon	plishments (See the insti	ructions for Part I	II.)	m	Expenses
Wh	nat.is the organization's primary exempt purpose?	ducation + Holdocary	of Sirds +D	Mabitals	ànd	uired for 501(c)(3) (4) organizations
De:	scribe what was achieved in carrying out the organiz	ation's exempt purposes/In	a clear and conci	ise manner,	and	4947(a)(1) trusts;
des	scribe the services provided, the number of persons be	nefited, or other relevant info	imation for each pi	ogram title.	optic	onal for others.)
28	Contract to the state of the st					
	See alluched noies					
	(Grants \diamondsuit) If this amount inc	udes foreign grants, check	here	. ▶ ⊔.	28a	
29						
	(Grants \$ /50) If this amount inc	udes foreign grants, check	here	. ▶ □	29a	
30	***************************************					
			*			
		udes foreign grants, check	here	. ▶ 🗆	30a	
31	Other program services (attach schedule)					
		udes foreign grants, check	here	. ▶ 🛄	31a	
<u> 32</u>	Total program service expenses (add lines 28a t		<u> </u>	, , . ▶	32	176 796
P	art IV List of Officers, Directors, Trustees, and Key	Employees. List each one eve	n if not compensate	d. (See the ins	tructio	ns for Part IV.)
	(a) Name and address	(b) Title and average hours per week	(c) Compensation	(d) Contribution		(e) Expense account and
	(a) Name and address	devoted to position	(If not paid, enter -0)	employee benefit deferred compen	sation	other allowances
	Deborah Thompson 95014	14hrs			٠	d
ء2ء	2221 McClellan Rd Cupertino CA	Tresident				
	Robert Hirt 95014	Vice President		<i>-</i>		
2	2221 Mc Clellan Rd Cuperting CA	3 hrs	U	,	0	U
	Tran Leighton 95014	Secretary				
رد	221 Mr. Callan Rd Purertino CA	3 600			e	e
	Potor Latourrette gran	Treasurer				
2:	2221 McClellan Rd Cupertino CA	3 hrs	0		0	JE JE
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5 2	1221 McClellan Rd Cupertino M	All has	68.850)	E	Ø
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Par	Other Information (Note the statement requirements in the instructions for Part VI.)			
			Yes	No
33	Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity	33		X
34	Were any changes made to the organizing or governing documents but not reported to the IRS? If "Yes," attach a conformed copy of the changes	34		X
35	If the organization had income from business activities, such as those reported on lines 2, 6a, and 7a (among others), but not reported on Form 990-T, attach a statement explaining your reason for not reporting the income on Form 990-T.		_	
а	Did the organization have unrelated business gross income of \$1,000 or more or section 6033(e) notice, reporting, and proxy tax requirements?	35a		X
b	If "Yes," has it filed a tax return on Form 990-T for this year?	35b		<u> </u>
36	Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," complete applicable parts of Schedule N	36		X
	Enter amount of political expenditures, direct or indirect, as described in the instructions. Did the organization file Form 1120-POL for this year?	37b		Ž.
	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 unpaid at the start of the period covered by this return? If "Yes," complete Schedule L, Part II and enter the total amount involved	38a	-	X
39	Section 501(c)(7) organizations. Enter:	1		
	Initiation fees and capital contributions included on line 9			
	Gross receipts, included on line 9, for public use of club facilities]		
	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶; section 4912 ▶; section 4955 ▶			
b	Section 501(c)(3) and (4) organizations. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," complete Schedule L. Part I	40b	-	X
С	Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Enter amount of tax on line 40c reimbursed by the organization			1
е	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	40e		X
41 42a	List the states with which a copy of this return is filed. ►)Q5 Q4	23 -40	747 30
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)?	42b	Yes	No X
	If "Yes," enter the name of the foreign country: ► See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
С	At any time during the calendar year, did the organization maintain an office outside of the U.S.?	42c		LX
43	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041 - Check here			▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year ▶ 43			
			Yes	No
44	Did the organization maintain any donor advised funds? If "Yes," Form 990 must be completed instead of Form 990-EZ	44		Χ.
45 	Is any related organization a controlled entity of the organization within the meaning of section 512(b)(13)? If "Yes," Form 990 must be completed instead of Form 990-EZ	45	_	X
	F	orm 99 ()-EZ	(2008)

Form **990-EZ** (2008)

Part	Section 501(c)(3) organizations only and complete the tables for lines 50 a		organizations mu	ist answer questi	ons 46-49
47 D 48 Is 49a D b If 50 C	pid the organization engage in direct or indirect property andidates for public office? If "Yes," complete Strict the organization engage in lobbying activities the organization operating a school as described the organization make any transfers to an exercise," was the related organization(s) a section complete this table for the five highest compensation received more than \$100,000 of compensations.	schedule C, Part I	edule C, Part II ii)? If "Yes," compled organization?	ete Schedule E .	Yes No 46 X 47 X 48 X 49a X 49b v employees) who
	(a) Name and address of each employee paid more than \$100,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
	None				
	umber of other employees paid over \$100,000 ▶				
51 C	complete this table for the five highest compensation from the organization. If there is no	ated independent contrac	tors who each rec	eived more than \$1	00,000 of
	(a) Name and address of each independent contractor	paid more than \$100,000	(b) T ₁	/pe of service	(c) Compensation
Total n Sign Here	Under penalties of perjury, I declare that I have examinand belief, it is true, correct, and complete. Declarate Signature of officer Type or print name and title	ned this return, including accommon of preparer (other than office	er) is based on all infon		er has any knowledge.
Paid	Preparer's	Date	Check if self-	Preparer's Identifying	Number (See instructions)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2008

Open to Public

Inspection

Name	Loft ON	he organization	Valley A.	ydybon Go	iety				Employe 94	er identifica 608/	tion num 442	_	
Pa	t I	Reason	for Public Cl	narity Status (All or	ganizati	ons mus	t compl	ete this	part.) (s	ee instru	ctions)		
The 1 2 3 4		A church, co A school de A hospital o A medical re	onvention of chuscribed in section a cooperative esearch organization	ndation because it is: urches, or association on 170(b)(1)(A)(ii). (At hospital service organation operated in contents:	of churc tach Sch nization d	hes desc edule E.) lescribed	ribed in a	section 1 on 170(b)	170(b)(1)((1)(A)(iii).	. (Attach		-	
5	hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit des section 170(b)(1)(A)(iv). (Complete Part II.)									escrit	ed in		
6				remment or governme	ental unit	describe	d in sec t	ion 170(b)(1)(A)(v).			
7		An organization that normally receives a substantial part of its support from a governmental unit or from the ger described in section 170(b)(1)(A)(vi). (Complete Part II.)								the gen	eral p	oublic	
8 9		A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.)								of its			
10 11	_	An organiza purposes of	tion organized a	nd operated exclusive and operated exclusive blicly supported organ at describes the type	vely for ti nizations	he benef describe	it of, to i	oerform ton 509(a	the functi)(1) or se	ions of, o	or to ca (a)(2). S	my o	ut the
•		persons other	this box, I cer	tify that the organization managers and othe	tion is no		lled direc	tty or inc	directly b	y one or		fisqua	alified
f		organization	, check this box								III sup	porti:	ng 🗆
9		_		the organization acce	epted any	gift or c	ontribution	on from a	any of the	•			
		following pe		- indianath, anatumb	عام سمطفاء			.	المحمدات ما	h	I	Yes	No
				r indirectly controls, enting body of the sup				ın persor	is descri	bea in (ii)	11g(i)		
			-	erson described in (i) a	-	90.120.10	•••				11g(ii)		
				of a person described		(ii) above	?				11g(iii)		
h		Provide the	following inform	ation about the organ	izations 1	the organ	ization s	upports.					
		of supported anization	tion (described on I above or IRC		(iii) Type of organization (described on lines 1-9 in col. (i) ti above or IRC section (see instructions))		ur the organization in		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount support		of
					Yes	No	Yes	No	Yes	No			
		·											
					1				}				
					· · · · · · · · · · · · · · · · · · ·	<u> </u>							
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						<u></u>			 		<u> </u>		
									1				
P-8-													

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Sec	tion A. Public Support						
	ilendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	191 153	183440	219275	638540	265 435	1497843
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	34 398				41 823	•
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 6	The value of services or facilities furnished by a governmental unit to the organization without charge	225551	225 743	253177	685 190	307258	1697519
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 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
С	Add lines 7a and 7b						
8	Public support (Subtract line 7c from line 6.)	225 551	225 743	253177	685 790	307 258	1697579
Sec	tion B. Total Support					· · · · · · · · · · · · · · · · · · ·	
Ce	alendar year (or fiscal year beginning in) 🕨	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	22-5551	225749	253/77	685 790	207258	1697 519
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	20234	24123	39 974	53722	35080	173 133
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
C	Add lines 10a and 10b	20234	24/23	39974	53722	25080	173 133
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 IV.)	506	65	1871	159	166	3267
13	Total support. (Add lines 9, 10c, 11, and 12.)	246291	249931	295022	739671	<i>3430</i> 04	1873919
14	First five years. If the Form 990 is for organization, check this box and stop	the organization		nd, third, fourti	h, or fifth tax y	ear as a section	on 501(c)(3) ▶ □
Sec	tion C. Computation of Public Su	pport Perce	ntage			,	-
15	Public support percentage for 2008 (lin				(f)	15 4	10,6 %
16	Public support percentage from 2007			7g 26.5.	 	16	870 %
Sec	tion D. Computation of Investme						0.0 %
17	Investment income percentage for 200	8 (line 10c, co	lumn (f) divide	d by line 13, c	olumn (f)) .	17	9,2 % 3.0 %
18	Investment income percentage from 20	007 Schedule /	A, Part IV-A, li	ne 27h (<i>Q(CU!)</i>	u/eø		
19a	17 is not more than 331/3 %, check this b	oox and <mark>stop h</mark> e	e re. The organ	ization qualifies	s as a publicly :	supported orga	anization ► 🖾
b	331/3 % support tests—2007. If the organine 18 is not more than 331/3 %, check this	nization did not is box and stop	check a box or here. The orga	n line 14 or line Inization qualifie	19a, and line 1 s as a publicly	6 is more than supported orga	331/3 %, and Inization ► 🖾
20	Private foundation. If the organization	did not check	a box on line	14, 19a, or 19b	o, check this b	ox and see ins	tructions ▶ 🔲

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, lin	Schedwe a (F	-om 990 or 990-E2) 2008	rage w
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		L. Wite:	*******
		TO /10/5	
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SANTA CLARA VALLEY AUDUBON SOCIETY

EIN 94 6081420

D303530

NOTES To Tax Return 990, June 1, 2008 to May 31, 2009

Form 990 Part I, Line 5a

Gross Amount from Sale of Assets

Mutual Fund Investments Purchased and Sold

Sales Proceeds

311,555

Cost of Sales <u>-339,616</u>

-28,061

Form 990 Part I Line 8 Sale of Assets - Other than Inventory

Part | Line 10 Grants Paid

150

A low-income high school student was provided a tuition grant for a Young Audubon Canoe Trip in the Elkhorn Slough, a trip to visit the bird habitat.

Form 990 Part III Statement of Program Service Accomplishments

a - Newsletter - The Society produces a bi-monthly newsletter - the "Avocet" sent to over 3500 members. The newsletter provides members with information volunteer opportunities and birding activities and give information on local and natural environmental issues with emphasis on birds and bird habitats. (Grants - 0) 30,424 b - Environmental Education - The Society makes classroom presentations to about 900 students each year. It sponsors Wildlife Education day events at Park HQ with about450 attendees and escorts children's groups to wetlands for over 950 children. It leads about 100 field trips to local habitats, holds monthly lecture meetings, operates a nature shop for its members and makes classroom presentations to about 1,000 children.

(Grants \$ 150)

107,442

c - Conservation and Environmental Action - The Society contributes volunteer services and support to a variety of environmental activities including a bluebird recovery and nest box program, burrowing owl protection, and citizen science projects such as the annual Christmas Bird Count. The Society supports environmental advocacy and the legal defense of environmental laws particularly in respect to creeks and wetlands habitats.

(Grants - 0)

38,930

Total Program Expense

176,796

Form 990 Part V

Other Information

Line 35

Other business activities

The Society maintains a nature shop which provides environmental materials and books primarily to members. The net profit from this activity was \$ 447.00. This

is an integral part of our purpose to educate members and the community on birds, bird habitats, and other environmental issues.

Fprm 990-EZ, Schedule A

Part III, Line 12 Other Income in Prior Year

For the Year 2005/2006

Recovery of Overhead Cost - Mitigation Settlement

161

Miscellaneous

1,871

1,710

Other Years, only miscellany