

COMMITTEE ON NATURAL RESOURCES
113th Congress Disclosure Form
As required by and provided for in House Rule XI, clause 2(g) and
the Rules of the Committee on Natural Resources

Legislative hearing on **H.R. 596 (Gosar)**, *“Public Lands Renewable Energy Development Act of 2013”*, **H.R. 1363 (Labrador)**, *“Exploring for Geothermal Energy on Federal Lands Act”*; and **H.R. 2004 (Simpson)**, *“Geothermal Production Expansion Act of 2013”* / July 29, 2014

For Individuals:

1. Name:

2. Address:

3. Email Address:

4. Phone Number:

* * * * *

For Witnesses Representing Organizations:

1. Name: Chase Huntley

2. Name of Organization(s) You are Representing at the Hearing: The Wilderness Society

3. Business Address:

4. Business Email Address:

5. Business Phone Number:

For all Witnesses

Name/Organization: Chase Huntley/The Wilderness Society

Title/Date of Hearing: Legislative hearing on H.R. 596 (Gosar), "Public Lands Renewable Energy Development Act of 2013", H.R. 1363 (Labrador), "Exploring for Geothermal Energy on Federal Lands Act"; and H.R. 2004 (Simpson), "Geothermal Production Expansion Act of 2013" / July 29, 2014

a. Any training or educational certificates, diplomas or degrees or other educational experiences that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

BA, Government and Philosophy, Claremont McKenna College
MPP, Ford School of Public Policy, University of Michigan
MS, School of Natural Resources and Environment, University of Michigan

b. Any professional licenses, certifications, or affiliations held that are relevant to your qualifications to testify on or knowledge of the subject matter of the hearing.

No

c. Any employment, occupation, ownership in a firm or business, or work-related experiences that relate to your qualifications to testify on or knowledge of the subject matter of the hearing.

- More than 10 years' experience in natural resource management and policy related to energy development on public lands including the following positions and roles:
 - Senior Analyst and Analyst-in-Charge at the Government Accountability Office (GAO)
 - Served as professional staff for House Oversight and Government Reform Subcommittee on Energy and Natural Resources under Chairman Daryl Issa, on detail from GAO
- Currently Senior Director of Government Relations for Energy and Director of the Renewable Energy Initiative at The Wilderness Society

d. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior and U.S. Department of Agriculture that you have received in the current year and previous four years, including the source and the amount of each grant or contract.

| Award date | Award Amount | Sponsor |
|-------------------|---------------------|--------------------------------|
| 4/1/2011 | \$25,000 | National Forest Foundation |
| 4/1/2011 | \$8,400 | National Forest Foundation |
| 6/1/2011 | \$5,000 | U.S. Forest Service |
| 6/17/2011 | \$41,000 | U.S. Fish and Wildlife Service |
| 8/30/2011 | \$22,420 | U.S. Fish and Wildlife Service |
| 10/17/2011 | \$68,813 | U.S. Fish and Wildlife Service |
| 9/8/2011 | \$81,200 | U.S. Fish and Wildlife Service |
| 12/15/2011 | \$2,000 | National Forest Foundation |
| 10/1/2011 | \$34,980 | National Forest Foundation |
| 3/15/2012 | \$10,000 | National Forest Foundation |
| 5/9/2012 | \$5,000 | U.S. Forest Service |
| 5/1/2012 | \$20,400 | U.S. Forest Service |
| 5/17/2012 | \$22,000 | U.S. Forest Service |
| 4/1/2012 | \$10,000 | National Forest Foundation |
| 3/15/2012 | \$12,500 | National Forest Foundation |
| 6/13/2012 | \$19,710 | U.S. Forest Service |
| 6/4/2012 | \$55,000 | U.S. Forest Service |
| 5/23/2012 | \$80,000 | U.S. Forest Service |
| 6/1/2012 | \$30,000 | U.S. Geological Survey |
| 12/15/2012 | \$2,000 | National Forest Foundation |
| 4/1/2013 | \$40,000 | National Forest Foundation |
| 5/17/2013 | \$39,665 | U.S. Forest Service |
| 8/1/2013 | \$35,963 | U.S. Forest Service |
| 3/26/2014 | \$11,000 | U.S. Forest Service |
| 5/5/2014 | \$113,687 | U.S. Forest Service |
| 6/6/2014 | \$35,200 | U.S. Forest Service |
| 6/18/2014 | \$34,999 | U.S. Forest Service |

e. A list of all lawsuits or petitions filed by you against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed.

Case name: **National Trust for Historic Preservation et al v. Suazo**, U.S. District Court of Arizona, #2:13-01973-DGC

Date filed: September 27, 2013

Subject matter: Recreational shooting in Sonoran Desert National Monument

Statutes: National Historic Preservation Act

Case name: **Sierra Club v. Federal Highway Administration**, D.C. District Court, #1:13-cv-00439

Date filed: April 5, 2013

Subject matter: public records regarding Corridor K highway proposal

Statutes: Freedom of Information Act

Case name: **Southern Utah Wilderness Assoc. v. Bureau of Land Management**, U.S. District Court of Utah, #2:13-cv-00047-BCW

Date filed: January 18, 2013
Subject matter: drilling for natural gas
Statutes: National Environmental Policy Act

Case Name: **The Wilderness Society v. Forest Service**, #11-00246 (PAB)
Forum: U.S. District Court of Colorado
Date filed: Jan. 31, 2011
Subject matter: Travel plan for Pike-San Isabel National Forest
Statutes: National Environmental Policy Act

Case name: **Central Sierra Env'tl Resource Center v. USFS**, #10-02172 (FCD)
Forum: U.S. District Court of the Eastern District of California
Date filed: August 12, 2010
Subject matter: Travel plan for Stanislaus National Forest
Statutes: Executive Orders on Off-Road Vehicles
(note: this case has been settled)

f. A list of all federal lawsuits filed against you by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

No

g. Any other information you wish to convey that might aid the Members of the Committee to better understand the context of your testimony.

No

Witnesses Representing Organizations

Name/Organization: Chase Huntley/The Wilderness Society

Title/Date of Hearing: Legislative hearing on H.R. 596 (Gosar), "Public Lands Renewable Energy Development Act of 2013", H.R. 1363 (Labrador), "Exploring for Geothermal Energy on Federal Lands Act"; and H.R. 2004 (Simpson), "Geothermal Production Expansion Act of 2013" / July 29, 2014

h. Any offices, elected positions, or representational capacity held in the organization(s) on whose behalf you are testifying.

No

i. Any federal grants or contracts (including subgrants or subcontracts) from the Department of the Interior and U.S. Department of Agriculture that were received in the current year and previous four years by the organization(s) you represent at this hearing, including the source and amount of each grant or contract for each of the organization(s).

| Award date | Award Amount | Sponsor |
|-------------------|---------------------|--------------------------------|
| 4/1/2011 | \$25,000 | National Forest Foundation |
| 4/1/2011 | \$8,400 | National Forest Foundation |
| 6/1/2011 | \$5,000 | U.S. Forest Service |
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| 6/6/2014 | \$35,200 | U.S. Forest Service |
| 6/18/2014 | \$34,999 | U.S. Forest Service |

j. A list of all lawsuits or petitions filed by the organization(s) you represent at the hearing against the federal government in the current year and the previous four years, giving the name of the lawsuit or petition, the subject matter of the lawsuit or petition, and the federal statutes under which the lawsuits or petitions were filed for each of the organization(s).

Case name: **National Trust for Historic Preservation et al v. Suazo**, U.S. District Court of Arizona, #2:13-01973-DGC

Date filed: September 27, 2013

Subject matter: Recreational shooting in Sonoran Desert National Monument

Statutes: National Historic Preservation Act

Case name: **Sierra Club v. Federal Highway Administration**, D.C. District Court, #1:13-cv-00439

Date filed: April 5, 2013

Subject matter: public records regarding Corridor K highway proposal

Statutes: Freedom of Information Act

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Subject matter: Travel plan for Pike-San Isabel National Forest

Statutes: National Environmental Policy Act

Case name: **Central Sierra Env'tl Resource Center v. USFS**, #10-02172 (FCD)

Forum: U.S. District Court of the Eastern District of California

Date filed: August 12, 2010

Subject matter: Travel plan for Stanislaus National Forest

Statutes: Executive Orders on Off-Road Vehicles

(note: this case has been settled)

k. A list of all federal lawsuits filed against the organization(s) you represent at the hearing by the federal government in the current year and the previous four years, giving the name of the lawsuit, the subject matter of the lawsuit, and the federal statutes under which the lawsuits were filed.

None

l. For tax-exempt organizations and non-profit organizations, copies of the three most recent public IRS Form 990s (including Form 990-PF, Form 990-N, and Form 990-EZ) for each of the organization(s) you represent at the hearing (not including any contributor names and addresses or any information withheld from public inspection by the Secretary of the Treasury under 26 U.S.C. 6104)).

See attached.

PUBLIC DISCLOSURE COPY

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2011

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2011 calendar year, or tax year beginning 10/01, 2011, and ending 09/30, 2012

| | | | |
|---|---|---|---|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization THE WILDERNESS SOCIETY | | D Employer identification number 53-0167933 |
| | Doing Business As | | E Telephone number (202) 833-2300 |
| | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | |
| | 1615 M STREET, N.W. City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036-3209 | | G Gross receipts \$ 28,704,007. |
| F Name and address of principal officer: JAMIE WILLIAMS 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates 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 | | H(c) Group exemption number ▶ | |
| J Website: ▶ WWW.WILDERNESS.ORG | | | |
| 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: 1935 M State of legal domicile: DC | |

Part I Summary

| | | | | | |
|---|---|---------------------------|-------------|--------------|-------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES. | | | | |
| | 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 | 35. | | |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 35. | | |
| | 5 Total number of individuals employed in calendar year 2011 (Part V, line 2a) | 5 | 234. | | |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 210. | | |
| | 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 34 | 7b | 0 | | | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | Prior Year | 21,120,937. | Current Year | 21,136,337. |
| | 9 Program service revenue (Part VIII, line 2g) | | 33,306. | | 53,614. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | | 2,414,531. | | 2,713,262. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | | 1,328,971. | | 959,696. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | | 24,897,745. | | 24,862,909. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | | 378,075. | | 259,862. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | | 0 | | 0 |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | | 18,100,230. | | 17,841,531. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | | 296,064. | | 400,682. |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 3,834,675. | | | | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | | 14,418,249. | | 12,918,028. |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | | 33,192,618. | | 31,420,103. |
| 19 Revenue less expenses. Subtract line 18 from line 12 | | -8,294,873. | | -6,557,194. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year | 45,785,868. | End of Year | 44,865,186. |
| | 21 Total liabilities (Part X, line 26) | | 5,989,065. | | 7,698,293. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | | 39,796,803. | | 37,166,893. |

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 05/15/2013 | | | |
| | Type or print name and title THOMAS F. TRIMMER, JR. VICE PRESIDENT, FINANCE | | | | |
| Paid Preparer Use Only | Print/Type preparer's name DAVID J. TRIMNER | Preparer's si | Date 5/15/2013 | Check <input type="checkbox"/> if self-employed | PTIN P00444822 |
| | Firm's name ▶ BDO USA, LLP | Firm's EIN ▶ 13-5381590 | | | |
| | Firm's address ▶ 8405 GREENSBORO DRIVE, 7TH FLOOR MCLEAN, VA 22102 | Phone no. 703-893-0600 | | | |

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

For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2011)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III X

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 19,531,303. including grants of \$ 231,562.) (Revenue \$ 20,897.)

ATTACHMENT 2

4b (Code:) (Expenses \$ 5,707,493. including grants of \$) (Revenue \$ 32,717.)

ATTACHMENT 3

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.)

(Expenses \$ including grants of \$ 28,300.) (Revenue \$)

4e Total program service expenses ▶ 25,238,796.

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)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? | X | |
| 3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | X | |
| 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? <i>If "Yes," complete Schedule C, Part III</i> | | |
| 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? <i>If "Yes," complete Schedule D, Part I</i> | | X |
| 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | X | |
| 9 Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i> | | X |
| 10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part VI</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part VII</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part VIII</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part IX</i> | X | |
| e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI, XII, and XIII</i> | X | |
| b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional</i> | | X |
| 13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | X |
| 14a Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | | X |
| 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | X |
| 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> | | X |
| 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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i> | X | |
| 18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | X |
| 19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |
| 20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b <i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i> | | |

Part IV Checklist of Required Schedules (continued)

| | | Yes | No |
|------|---|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> | X | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> | X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> | X | |
| 24 a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i> | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25 a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i> | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i> | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i> | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i> | | X |
| 35 a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b | Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> | | X |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. | X | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V. []

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a-14b regarding Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 990, Form 1041, and Form 720.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI. X

Section A. Governing Body and Management

| | | Yes | No |
|----|---|-----|----|
| 1a | Enter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 1a 35 | | |
| b | Enter the number of voting members included in line 1a, above, who are independent. 1b 35 | | |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? | X | |
| 3 | Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? | | X |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | | X |
| 6 | Did the organization have members or stockholders? | | X |
| 7a | Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? | | X |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | | X |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: | | |
| a | The governing body? | X | |
| b | Each committee with authority to act on behalf of the governing body? | X | |
| 9 | Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O | | X |

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

| | | Yes | No |
|---|--|-----|----|
| 10a | Did the organization have local chapters, branches, or affiliates? | | X |
| b | If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? | | |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | X | |
| b | Describe in Schedule O the process, if any, used by the organization to review this Form 990. | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | X | |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | X | |
| c | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done | X | |
| 13 | Did the organization have a written whistleblower policy? | X | |
| 14 | Did the organization have a written document retention and destruction policy? | X | |
| 15 | Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? | | |
| a | The organization's CEO, Executive Director, or top management official | X | |
| b | Other officers or key employees of the organization | X | |
| If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions.) | | | |
| 16a | Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? | | X |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements? | | |

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed **ATTACHMENT 4**
- 18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request
- 19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **THOMAS F. TEPPER JR. 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 202-833-2300**

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

Check if Schedule O contains a response to any question 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 (describe hours for related organizations in Schedule O) | (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) EDWARD A. AMES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (2) JAMES A. BACA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (3) THOMAS A. BARRON GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (4) RICHARD BLUM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (5) DAVID BONDERMAN EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (6) WILLIAM M. BUMPERS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (7) MAJORA CARTER GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (8) BETHINE CHURCH GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (9) BERTRAM J. COHN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (10) WILLIAM J. CRONON EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (11) BRENDA S. DAVIS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (12) CHRISTOPHER J. ELLIMAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (13) JOSEPH H. ELLIS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (14) DAVID J. FIELD EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |

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

| (A) Name and title | (B) Average hours per week (describe hours for related organizations in Schedule O) | (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 | | | |
| (15) GEORGE T. FRAMPTON JR GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (16) JERRY F. FRANKLIN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (17) CAROLINE M GETTY EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (18) REGINALD "FLIP" HAGOOD EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (19) MARCIA KUNSTEL EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (20) KEVIN LUZAK EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (21) MOLLY MCUSIC EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (22) HEATHER KENDALL-MILLER GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (23) SCOTT A. NATHAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (24) JAIME A. PINKHAM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| (25) REBECCA L. ROM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0 | 0 | 0 | |
| 1b Sub-total | | | | | | | 0 | 0 | 0 | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 2,583,795. | 0 | 806,088. | |
| d Total (add lines 1b and 1c) | | | | | | | 2,583,795. | 0 | 806,088. | |

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 **▶ 39**

| | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i> | 3 | X |
| 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? <i>If "Yes," complete Schedule J for such individual</i> | 4 | X |
| 5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i> | 5 | X |

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 |
|----------------------------------|--------------------------------|---------------------|
| ATTACHMENT 5 | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 25**

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

| (A) Name and title | (B) Average hours per week (describe hours for related organizations in Schedule O) | (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 | | | |
| (26) THEODORE ROOSEVELT IV GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (27) PATRICK L. SMITH GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (28) CATHY DOUGLAS STONE GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (29) DOUGLAS W. WALKER EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (30) HANSJORG WYSS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (31) DAVE MATTHEWS GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (32) CRANDALL BOWLES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (33) SARA VERA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (34) CHRISTINA WONG GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (35) MICHAEL MANTELL EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0 | 0 | 0 |
| (36) ASHFORD CHANCELOR VICE PRESIDENT, CFO | 38.00 | | | X | | | | 176,933. | 0 | 56,184. |
| 1b Sub-total | | | | | | | | | | |
| 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 **▶ 39**

| | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 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 | X | |
| 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 | | X |

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 in compensation from the organization **▶**

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

| (A) Name and title | (B) Average hours per week (describe hours for related organizations in Schedule O) | (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 | | | |
| (37) WILLIAM H MEADOWS PRESIDENT | 38.00 | | | X | | | 324,380. | 0 | 97,284. | |
| (38) PAULA YABAR VICE PRESIDENT | 38.00 | | | X | | | 291,800. | 0 | 88,445. | |
| (39) JANE TAYLOR VICE PRESIDENT | 38.00 | | | X | | | 185,000. | 0 | 54,989. | |
| (40) AMY VEDDER SENIOR VP | 38.00 | | | | X | | 233,386. | 0 | 74,333. | |
| (41) SARA BARTH VP, REGIONAL CONSERVATION | 38.00 | | | | X | | 170,647. | 0 | 52,910. | |
| (42) SPENCER PHILLIPS VICE PRESIDENT, RESEARCH | 38.00 | | | | X | | 165,518. | 0 | 52,430. | |
| (43) MELANIE BELLER VICE PRESIDENT | 38.00 | | | | X | | 165,552. | 0 | 50,943. | |
| (44) ANN MORGAN VICE PRESIDENT | 38.00 | | | | | X | 165,234. | 0 | 53,661. | |
| (45) FREDERICK SILBERNAGEL III SVP, FINANCE & ADMINISTRATION | 38.00 | | | | | X | 248,927. | 0 | 76,755. | |
| (46) LESLIE JONES GENERAL COUNCIL | 38.00 | | | | | X | 152,023. | 0 | 49,012. | |
| (47) SHEILA DENNIS ASSOC VP OF DEVELOPMENT | 38.00 | | | | | X | 159,172. | 0 | 51,904. | |
| 1b Sub-total | | | | | | | | | | |
| 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 **▶** 39

| | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 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 | X | |
| 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 | | X |

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 in compensation from the organization **▶**

Part VIII Statement of Revenue

| | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|---|---|----------------------|--|---|---|----------|
| Contributions, Gifts, Grants and Other Similar Amounts | 1a | Federated campaigns | 1a | 83,178. | | | |
| | b | Membership dues | 1b | | | | |
| | c | Fundraising events | 1c | | | | |
| | d | Related organizations | 1d | | | | |
| | e | Government grants (contributions) | 1e | 303,455. | | | |
| | f | All other contributions, gifts, grants, and similar amounts not included above | 1f | 20,749,704. | | | |
| | g | Noncash contributions included in lines 1a-1f: \$ | | 499,423. | | | |
| | h | Total. Add lines 1a-1f | | 21,136,337. | | | |
| Program Service Revenue | 2a | LIBRARY SUBSCRIPTION | Business Code | 900099 | 2,185. | 2,185. | |
| | b | HONORARIA | 900099 | 1,500. | 1,500. | | |
| | c | CONTRACTED SERVICES OF PROGRAM STAFF | 900099 | 20,897. | 20,897. | | |
| | d | ADVOCATE TRIPS | 900099 | 26,560. | 26,560. | | |
| | e | SALE OF PROMOTIONAL MATERIALS | 900099 | 2,472. | 2,472. | | |
| | f | All other program service revenue | | | | | |
| | g | Total. Add lines 2a-2f | | 53,614. | | | |
| Other Revenue | 3 | Investment income (including dividends, interest, and other similar amounts) | | 512,469. | | | 512,469. |
| | 4 | Income from investment of tax-exempt bond proceeds | | 0 | | | |
| | 5 | Royalties | | 51,565. | | | 51,565. |
| | 6a | Gross rents | (i) Real | 90,937. | | | |
| | | | (ii) Personal | | | | |
| | b | Less: rental expenses | | | | | |
| | c | Rental income or (loss) | | 90,937. | | | |
| | d | Net rental income or (loss) | | 90,937. | | | 90,937. |
| | 7a | Gross amount from sales of assets other than inventory | (i) Securities | 6,041,891. | | | |
| | | | (ii) Other | | | | |
| | b | Less: cost or other basis and sales expenses | | 3,841,098. | | | |
| | c | Gain or (loss) | | 2,200,793. | | | |
| d | Net gain or (loss) | | 2,200,793. | | | 2,200,793. | |
| 8a | Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | a | | | | | |
| b | Less: direct expenses | b | | | | | |
| c | Net income or (loss) from fundraising events | | | 0 | | | |
| 9a | Gross income from gaming activities. See Part IV, line 19 | a | | | | | |
| b | Less: direct expenses | b | | | | | |
| c | Net income or (loss) from gaming activities | | | 0 | | | |
| 10a | Gross sales of inventory, less returns and allowances | a | | | | | |
| b | Less: cost of goods sold | b | | | | | |
| c | Net income or (loss) from sales of inventory | | | 0 | | | |
| Miscellaneous Revenue | | | Business Code | | | | |
| 11a | CREDIT CARD ROYALTIES | 900099 | 677,320. | | | 677,320. | |
| b | MAILING LIST RENTAL INCOME | 900099 | 104,563. | | | 104,563. | |
| c | REFUND OF PRIOR YEAR EXPENDITURES | 900099 | 8,943. | | | 8,943. | |
| d | All other revenue | 900099 | 26,368. | | | 26,368. | |
| e | Total. Add lines 11a-11d | | 817,194. | | | | |
| 12 | Total revenue. See instructions | | 24,862,909. | 53,614. | | 3,672,958. | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Check if Schedule O contains a response to any question in this Part IX

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|---|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | 231,562. | 231,562. | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | 28,300. | 28,300. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | 0 | | | |
| 4 Benefits paid to or for members | 0 | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 2,094,101. | 1,485,171. | 474,741. | 134,189. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0 | | | |
| 7 Other salaries and wages | 12,628,701. | 11,150,474. | 527,784. | 950,443. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 838,009. | 709,008. | 50,692. | 78,309. |
| 9 Other employee benefits | 1,206,435. | 1,041,205. | 39,052. | 126,178. |
| 10 Payroll taxes | 1,074,285. | 891,656. | 85,943. | 96,686. |
| 11 Fees for services (non-employees): | | | | |
| a Management | 0 | | | |
| b Legal | 56,062. | 39,825. | 3,427. | 12,810. |
| c Accounting | 192,493. | 136,743. | 11,766. | 43,984. |
| d Lobbying | 0 | | | |
| e Professional fundraising services. See Part IV, line 17 | 400,682. | | | 400,682. |
| f Investment management fees | 206,084. | | 206,084. | |
| g Other | 3,517,375. | 2,783,301. | 239,498. | 494,576. |
| 12 Advertising and promotion | 0 | | | |
| 13 Office expenses | 3,031,194. | 2,038,945. | 147,894. | 844,355. |
| 14 Information technology | 0 | | | |
| 15 Royalties | 0 | | | |
| 16 Occupancy | 3,261,641. | 2,654,140. | 264,979. | 342,522. |
| 17 Travel | 1,135,834. | 999,016. | 87,687. | 49,131. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | 0 | | | |
| 19 Conferences, conventions, and meetings | 0 | | | |
| 20 Interest | 0 | | | |
| 21 Payments to affiliates | 0 | | | |
| 22 Depreciation, depletion, and amortization | 768,384. | 541,174. | 99,146. | 128,064. |
| 23 Insurance | 71,212. | 50,154. | 9,189. | 11,869. |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a MAILING LIST RENTAL ----- | 187,317. | 114,097. | 3,241. | 69,979. |
| b PERSONNEL ACQUISITIONS ----- | 140,037. | 60,450. | 66,205. | 13,382. |
| c MISCELLANEOUS ----- | 243,627. | 198,127. | 18,299. | 27,201. |
| d DUES & SUBSCRIPTIONS ----- | 106,768. | 85,448. | 11,005. | 10,315. |
| e All other expenses ----- | | | | |
| 25 Total functional expenses. Add lines 1 through 24e | 31,420,103. | 25,238,796. | 2,346,632. | 3,834,675. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720) | 0 | | | |

Part X Balance Sheet

| | | (A) Beginning of year | | (B) End of year | |
|-----------------------------|---|---|-------------|--------------------|-------------|
| Assets | 1 | Cash - non-interest-bearing | 850. | 1 | 1,000. |
| | 2 | Savings and temporary cash investments | 46,533. | 2 | -44,835. |
| | 3 | Pledges and grants receivable, net | 4,988,211. | 3 | 2,670,387. |
| | 4 | Accounts receivable, net | 676,761. | 4 | 646,168. |
| | 5 | Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | 0 | 5 | 0 |
| | 6 | Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) | 0 | 6 | 0 |
| | 7 | Notes and loans receivable, net | 0 | 7 | 0 |
| | 8 | Inventories for sale or use | 0 | 8 | 0 |
| | 9 | Prepaid expenses and deferred charges | 519,730. | 9 | 714,253. |
| | 10a | Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 7,931,800. | | |
| | | | | | |
| | b | Less: accumulated depreciation | 6,345,998. | 10c | 1,585,802. |
| | 11 | Investments - publicly traded securities | 28,319,325. | 11 | 29,949,700. |
| | 12 | Investments - other securities. See Part IV, line 11 | 226,995. | 12 | 260,721. |
| | 13 | Investments - program-related. See Part IV, line 11 | 0 | 13 | 0 |
| | 14 | Intangible assets | 0 | 14 | 0 |
| 15 | Other assets. See Part IV, line 11 | 8,859,798. | 15 | 9,081,990. | |
| 16 | Total assets. Add lines 1 through 15 (must equal line 34) | 45,785,868. | 16 | 44,865,186. | |
| Liabilities | 17 | Accounts payable and accrued expenses | 2,383,372. | 17 | 2,581,783. |
| | 18 | Grants payable | 0 | 18 | 0 |
| | 19 | Deferred revenue | 3,257,860. | 19 | 3,414,121. |
| | 20 | Tax-exempt bond liabilities | 0 | 20 | 0 |
| | 21 | Escrow or custodial account liability. Complete Part IV of Schedule D | 0 | 21 | 0 |
| | 22 | Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | 0 | 22 | 0 |
| | 23 | Secured mortgages and notes payable to unrelated third parties | 0 | 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelated third parties | 0 | 24 | 774,000. |
| | 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 | 347,833. | 25 | 928,389. |
| | 26 | Total liabilities. Add lines 17 through 25 | 5,989,065. | 26 | 7,698,293. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | |
| | 27 | Unrestricted net assets | 8,377,625. | 27 | 3,468,386. |
| | 28 | Temporarily restricted net assets | 20,142,603. | 28 | 22,309,728. |
| | 29 | Permanently restricted net assets | 11,276,575. | 29 | 11,388,779. |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| | 30 | Capital stock or trust principal, or current funds | | 30 | |
| | 31 | Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 | Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 | Total net assets or fund balances | 39,796,803. | 33 | 37,166,893. | |
| 34 | Total liabilities and net assets/fund balances. | 45,785,868. | 34 | 44,865,186. | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|---|--|---|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 24,862,909. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 31,420,103. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -6,557,194. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 39,796,803. |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | 3,927,284. |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 37,166,893. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

- 1 Accounting method used to prepare the Form 990: Cash Accrual Other _____
 If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.
- 2a Were the organization's financial statements compiled or reviewed by an independent accountant?
- b Were the organization's financial statements audited by an independent accountant?
- c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
 If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.
- d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both:
 Separate basis Consolidated basis Both consolidated and separate basis
- 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?
- b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

| | Yes | No |
|----|-----|----|
| 2a | | X |
| 2b | X | |
| 2c | X | |
| 3a | | X |
| 3b | | |

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2011

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. ▶ See separate instructions.

Name of the organization

Employer identification number

THE WILDERNESS SOCIETY

53-0167933

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4).
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

| | Yes | No |
|----------|-----|----|
| 11g(i) | | |
| 11g(ii) | | |
| 11g(iii) | | |

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? | | (v) Did you notify the organization in col. (i) of your support? | | (vi) Is the organization in col. (i) organized in the U.S.? | | (vii) Amount of support |
|------------------------------------|----------|---|---|----|--|----|---|----|-------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| (A) | | | | | | | | | |
| (B) | | | | | | | | | |
| (C) | | | | | | | | | |
| (D) | | | | | | | | | |
| (E) | | | | | | | | | |
| Total | | | | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2011

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 117,511,544. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3. | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 117,511,544. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f). | | | | | | 19,254,664. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 98,256,880. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------------------|
| 7 Amounts from line 4 | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 117,511,544. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,304,877. | 2,002,197. | 2,311,578. | 2,091,383. | 1,436,854. | 9,146,889. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATCH. 1 | 19,591. | 70,938. | 113,751. | 23,014. | 35,311. | 262,605. |
| 11 Total support. Add lines 7 through 10 | | | | | | 126,921,038. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 229,089. |
| 13 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 | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | |
|--|----|-------------------------------------|
| 14 Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f)) | 14 | 77.42 % |
| 15 Public support percentage from 2010 Schedule A, Part II, line 14 | 15 | 75.68 % |
| 16a 33 1/3% support test - 2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input checked="" type="checkbox"/> |
| b 33 1/3% support test - 2010. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 17a 10%-facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| b 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | | <input type="checkbox"/> |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | | <input type="checkbox"/> |

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 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) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) 2011 | (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 IV.) | | | | | | |
| 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 2011 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2010 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2011 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2010 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2011. 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 - 2010. 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 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

| DESCRIPTION | 2007 | 2008 | 2009 | 2010 | 2011 | TOTAL |
|--------------------------------|---------------|---------------|----------------|---------------|---------------|----------------|
| REFUND PRIOR YEAR EXPENDITURES | 19,591. | 70,938. | 113,751. | 18,445. | 8,943. | 231,668. |
| OTHER INCOME | | | | 4,569. | 26,368. | 30,937. |
| TOTALS | <u>19,591</u> | <u>70,938</u> | <u>113,751</u> | <u>23,014</u> | <u>35,311</u> | <u>262,605</u> |

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.

2011

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

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 foundation

Check 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2, of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization THE WILDERNESS SOCIETY

Employer identification number
53-0167933

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 |
|------------|-----------------------------------|----------------------------|--|
| 1 | ----- ----- ----- | \$ 1,618,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 2 | ----- ----- ----- | \$ 635,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 3 | ----- ----- ----- | \$ 749,050. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 4 | ----- ----- ----- | \$ 1,390,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 5 | ----- ----- ----- | \$ 1,025,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| | ----- ----- ----- | \$ ----- | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

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

▶ See separate instructions.

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

If the organization answered "Yes" to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes" to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes" to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955. ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| (1) | ----- | | | |
| (2) | ----- | | | |
| (3) | ----- | | | |
| (4) | ----- | | | |
| (5) | ----- | | | |
| (6) | ----- | | | |

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|---|--|---|------------------------------------|--------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|
| 1 a | Total lobbying expenditures to influence public opinion (grass roots lobbying) | 62,598. | | | | | | | | | | | | | |
| b | Total lobbying expenditures to influence a legislative body (direct lobbying) | 199,513. | | | | | | | | | | | | | |
| c | Total lobbying expenditures (add lines 1a and 1b) | 262,111. | | | | | | | | | | | | | |
| d | Other exempt purpose expenditures | 31,157,992. | | | | | | | | | | | | | |
| e | Total exempt purpose expenditures (add lines 1c and 1d) | 31,420,103. | | | | | | | | | | | | | |
| f | Lobbying nontaxable amount. Enter the amount from the following table in both columns. | 1,000,000. | | | | | | | | | | | | | |
| <table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000. | | | | | | | | | | | | | | |
| g | Grassroots nontaxable amount (enter 25% of line 1f) | 250,000. | | | | | | | | | | | | | |
| h | Subtract line 1g from line 1a. If zero or less, enter -0- | 0 | 0 | | | | | | | | | | | | |
| i | Subtract line 1f from line 1c. If zero or less, enter -0- | 0 | 0 | | | | | | | | | | | | |
| j | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|------------|------------|------------|------------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) Total |
| 2 a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 6,000,000. |
| c Total lobbying expenditures | 210,428. | 344,788. | 324,073. | 262,111. | 1,141,400. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| f Grassroots lobbying expenditures | 38,440. | 132,703. | 102,032. | 62,598. | 335,773. |

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For each "Yes" response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. | (a) | | (b) |
|--|-----|----|--------|
| | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | |
| a Volunteers? | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | | | |
| c Media advertisements? | | | |
| d Mailings to members, legislators, or the public? | | | |
| e Publications, or published or broadcast statements? | | | |
| f Grants to other organizations for lobbying purposes? | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i Other activities? | | | |
| j Total. Add lines 1c through 1i | | | |
| 2 a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

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

| | Yes | No |
|--|-----|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | | |

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

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

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A; and Part II-B, line 1. Also, complete this part for any additional information.

Part IV Supplemental Information *(continued)*

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No. 1545-0047

2011

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization
THE WILDERNESS SOCIETY

Employer identification number
53-0167933

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|--|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

| | |
|--|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of a certified historic structure |
| <input type="checkbox"/> Preservation of open space | |

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

- 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.
- b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:
- (i) Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- (ii) Assets included in Form 990, Part X ▶ \$ 125,950
- 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:
- a Revenues included in Form 990, Part VIII, line 1 ▶ \$ _____
- b Assets included in Form 990, Part X ▶ \$ _____

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 are a 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 programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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" to 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 XIV 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? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 | 22,295,213. | 21,936,416. | 19,506,098. | 17,545,068. | |
| b Contributions | 891,567. | 722,052. | 505,648. | 1,262,443. | |
| c Net investment earnings, gains, and losses | 3,187,174. | 591,540. | 2,911,045. | 1,186,371. | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 6,208,594. | 954,795. | 986,375. | 487,784. | |
| f Administrative expenses | | | | | |
| g End of year balance | 20,165,360. | 22,295,213. | 21,936,416. | 19,506,098. | |

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a Board designated or quasi-endowment 18.0000 %
- b Permanent endowment 56.0000 %
- c Temporarily restricted endowment 26.0000 %

The percentages in 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:

- (i) unrelated organizations
- (ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | X |
| 3a(ii) | | X |
| 3b | | X |

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. 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 | | 2,832,343. | 2,495,675. | 336,668. |
| d Equipment | | 5,099,457. | 3,850,323. | 1,249,134. |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)). | | | | 1,585,802. |

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) ----- | | |
| (B) ----- | | |
| (C) ----- | | |
| (D) ----- | | |
| (E) ----- | | |
| (F) ----- | | |
| (G) ----- | | |
| (H) ----- | | |
| (I) ----- | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶ | | |

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|--|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶ | | |

Part IX Other Assets. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) ARTWORKS | 125,950. |
| (2) BENEFICIAL INTEREST IN ASSETS | |
| (3) HELD BY OTHERS | 8,956,040. |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶ | 9,081,990. |

Part X Other Liabilities. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) CUSTODIAL FUNDS | 26,030. |
| (3) DEFERRED RENT | 875,534. |
| (4) DEPOSITS | 26,825. |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶ | 928,389. |

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

| | | | |
|----|--|----|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 24,862,909. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 31,420,103. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 | -6,557,194. |
| 4 | Net unrealized gains (losses) on investments | 4 | 2,615,894. |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV.) | 8 | 1,311,390. |
| 9 | Total adjustments (net). Add lines 4 through 8 | 9 | 3,927,284. |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | -2,629,910. |

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | |
|---|---|----|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 28,425,943. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | 2a | 2,615,894. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIV.) | 2d | 1,153,224. |
| e | Add lines 2a through 2d | 2e | 3,769,118. |
| 3 | Subtract line 2e from line 1 | 3 | 24,656,825. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 206,084. |
| b | Other (Describe in Part XIV.) | 4b | |
| c | Add lines 4a and 4b | 4c | 206,084. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 24,862,909. |

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | |
|---|--|----|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 31,055,853. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIV.) | 2d | -158,166. |
| e | Add lines 2a through 2d | 2e | -158,166. |
| 3 | Subtract line 2e from line 1 | 3 | 31,214,019. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 206,084. |
| b | Other (Describe in Part XIV.) | 4b | |
| c | Add lines 4a and 4b | 4c | 206,084. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 31,420,103. |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

ORGANIZATIONS COLLECTIONS OF ART AND HOW THEY FURTHER EXEMPT PURPOSE

FORM 990, SCHEDULE D, PART III, LINE 4

A PORTFOLIO OF 76 ORIGINAL ANSEL ADAMS PHOTOGRAPHS WAS DONATED TO THE SOCIETY IN 1985. THIS COLLECTION CANNOT BE SOLD AND MUST BE DISPLAYED IN A MUSEUM-QUALITY SETTING, OR THE PHOTOGRAPHS MUST BE RETURNED TO THE DONOR. THE APPRAISED VALUE OF THESE PHOTOGRAPHS IS \$1,897,000. DUE TO THE STIPULATIONS RELATED TO THE CUSTODY OF THE PHOTOGRAPHS, THESE ASSETS ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS. THE SOCIETY ALSO OWNS VARIOUS OTHER DONATED ART WORK THAT IS NOT SUBJECT TO DONOR CONDITIONS. THIS COLLECTION INCLUDED 11 ANSEL ADAMS PHOTOGRAPHS VALUED AT THEIR ORIGINAL MARKET VALUE OF \$125,950 AS ASSESSED AT THE TIME OF THEIR DONATION. THIS COLLECTION IS INCLUDED IN OTHER ASSETS ON THE STATEMENTS OF FINANCIAL POSITION.

INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS

FORM 990, SCHEDULE D, PART V, LINE 4

THE SOCIETY MAINTAINS TWO TYPES OF ENDOWMENT FUNDS: GENERAL ENDOWMENT (DONOR-RESTRICTED) AND CAPITAL RESERVES.

GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT TO THE ORGANIZATION.

GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS

Part XIV Supplemental Information (continued)

GOVERNING THEIR USE.

THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS. SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS. WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED.

CAPITAL RESERVES IS A BOARD OF DIRECTORS DESIGNATION SET ASIDE FOR THE FINANCIAL PROTECTION OF THE SOCIETY.

OTHER EXPENSES ON BOOKS NOT ON RETURN

FORM 990, SCHEDULE D, PART XIII, LINE 2D

| | |
|------------------------------------|-----------|
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | (158,166) |
|------------------------------------|-----------|

OTHER RECONCILING ITEMS

FORM 990, SCHEDULE D, PART XI, LINE 8

| | |
|--|-----------|
| CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS | 1,153,224 |
|--|-----------|

| | |
|------------------------------------|---------|
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | 158,166 |
|------------------------------------|---------|

| | |
|-------|-----------|
| ----- | |
| TOTAL | 1,311,390 |

Part XIV Supplemental Information (continued)

FIN 48 FOOTNOTE

FORM 990, SCHEDULE D, PART X, LINE 2

THE SOCIETY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE IRC. THE SOCIETY IS REQUIRED TO PAY FEDERAL AND STATE INCOME TAXES ONLY ON UNRELATED BUSINESS INCOME. MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS AND THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30, 2012. THE THREE PREVIOUS TAX YEARS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES; THERE ARE CURRENTLY NO EXAMINATIONS BEING CONDUCTED.

OTHER RECONCILING ITEMS

FORM 990, SCHEDULE D, PART XII, LINE 2D

| | |
|--|-----------|
| CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS | 1,153,224 |
|--|-----------|

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" to Form 990, Part IV, lines 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. ▶ See separate instructions.

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Fundraising Activities. Complete if the organization answered "Yes" to 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 ten 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 GORDON & SCHWENKMEYER, INC | TELEMKTG | | X | 13,177. | 17,139. | -3,962. |
| 2 YOUR VOICE MEDIA INC. | TELEMKTG | | X | 51,946. | 79,199. | -27,253. |
| 3 SEA CHANGE DIRECT MARKETING | TELEMKTG | | X | 325,635. | 108,000. | 217,635. |
| 4 COMNET MARKETING GROUP, INC. | TELEMKTG | | X | 332,028. | 186,152. | 145,876. |
| 5 VAIL SYSTEMS, INC | TELEMKTG | | X | | 6,097. | -6,097. |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| Total | | | | 722,786. | 396,587. | 326,199. |

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.

AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL,
KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, OH,
OK, OR, PA, RI, SC, TN, UT, VA, WV,

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total events | |
|-----------------|----|---|--------------|------------------|---------------------------------|-----|
| | | (event type) | (event type) | (total number) | (add col. (a) through col. (c)) | |
| Revenue | 1 | Gross receipts | | | | |
| | 2 | Less: Charitable contributions | | | | |
| | 3 | Gross income (line 1 minus line 2) | | | | |
| Direct Expenses | 4 | Cash prizes | | | | |
| | 5 | Noncash prizes | | | | |
| | 6 | Rent/facility costs | | | | |
| | 7 | Food and beverages | | | | |
| | 8 | Entertainment | | | | |
| | 9 | Other direct expenses | | | | |
| | 10 | Direct expense summary. Add lines 4 through 9 in column (d) | | | | () |
| | 11 | Net income summary. Combine line 3, column (d), and line 10 | | | | () |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming | |
|-----------------|---|---|---|---------------------------|---------------------------------|-----|
| | | | | | (add col. (a) through col. (c)) | |
| Revenue | 1 | Gross revenue | | | | |
| Direct Expenses | 2 | Cash prizes | | | | |
| | 3 | Noncash prizes | | | | |
| | 4 | Rent/facility costs | | | | |
| | 5 | Other direct expenses | | | | |
| | 6 | Volunteer labor | Yes _____ % No _____ % | Yes _____ % No _____ % | Yes _____ % No _____ % | |
| | 7 | Direct expense summary. Add lines 2 through 5 in column (d) | | | | () |
| | 8 | Net gaming income summary. Combine line 1, column d, and line 7 | | | | () |

9 Enter the state(s) in which the organization operates gaming activities: _____
 a Is the organization licensed to operate gaming activities in each of these states? Yes No
 b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
 b If "Yes," explain: _____

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service
Name of the organization

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Employer identification number

53-0167933

Part I General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Yes No

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

| 1 | (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| (1) | YOSEMITE CONSERVANCY 155 MONTGOMERY STREET | 94-3058041 | 501(C)(3) | 68,000. | | | | CONSERVATION PROJECT |
| (2) | NEW VENTURE FUND 734 15TH STREET NW STE 600 | 20-5806345 | 501(C)(3) | 25,962. | | | | CONSERVATION PROJECT |
| (3) | THE LAND TRUST FOR THE LITTLE TENNESSEE, INC. P.O. BOX 1148 FRANKLIN, NC 28744 | 56-2142199 | 501(C)(3) | 24,600. | | | | CONSERVATION PROJECT |
| (4) | ROCKY MOUNTAIN WILD 1536 WYNKOOP ST #303 DENVER, CO 80202 | 84-1512852 | 501(C)(3) | 21,500. | | | | CONSERVATION PROJECT |
| (5) | SHEEP MOUNTAIN ALLIANCE PO BOX 389 TELLURIDE, CO 81435 | 84-1294894 | 501(C)(3) | 19,500. | | | | CONSERVATION PROJECT |
| (6) | MONTANA WILDERNESS ASSOCIATION 30 SOUTH EWING HELENA, MT 59601 | 51-0198932 | 501(C)(3) | 15,000. | | | | CONSERVATION PROJECT |
| (7) | MONTANA WILDLIFE FEDERATION PO BOX 1175 HELENA, MT 59624 | 81-0303948 | 501(C)(3) | 15,000. | | | | CONSERVATION PROJECT |
| (8) | FRIENDS OF MAINE'S SEABIRD ISLANDS PO BOX 1231 ROCKLAND, ME 04841 | 55-0809874 | 501(C)(3) | 10,000. | | | | CONSERVATION PROJECT |
| (9) | GREATER YELLOWSTONE COALITION, INC. PO BOX 1874 BOZEMAN, MT 59771 | 81-0414042 | 501(C)(3) | 10,000. | | | | CONSERVATION PROJECT |
| (10) | | | | | | | | |
| (11) | | | | | | | | |
| (12) | | | | | | | | |

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 9
- 3 Enter total number of other organizations listed in the line 1 table

Schedule I (Form 990) (2011)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|--|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP | 4 | 24,000. | | | SEE PART IV |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROCEDURES FOR MONITORING GRANTS

SCHEDULE I, PART I, QUESTION 2

GRANT AND AWARDS TO OTHER ORGANIZATIONS ARE REQUESTED AND MONITORED BY

PROGRAM STAFF. THE PRIMARY CRITERION FOR AN AWARD IS THE RECEIVING

ORGANIZATION WILL USE THE FUNDS FOR ACTIVITIES WHICH SUPPORT THE

SOCIETY'S MISSION. A REQUEST IS SENT TO THE TWS FINANCE DEPARTMENT WITH

THE FOLLOWING INFORMATION: 1) AN OUTLINE OF THE PROPER USE OR

RESTRICTIONS FOR THE USE OF THE FUNDS BY THE RECEIVING ORGANIZATION; 2) A

LIST OF THE RECEIVING ORGANIZATIONS BOARD MEMBERSHIP; 3) ANY KNOWN

OVERLAPPING BOARD OR EMPLOYEE RELATIONSHIPS; 4) A STATEMENT FROM THE TWS

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

STAFF MEMBER STATING THAT THERE EXISTS NO CONFLICT OF INTEREST BETWEEN THE SOCIETY AND THE RECEIVING ORGANIZATION, BETWEEN THE EMPLOYEE OR THEIR FAMILY MEMBERS AND THE RECEIVING ORGANIZATION, OR ANY BOARD MEMBER; 5) A COPY OF THE RECEIVING ORGANIZATION'S ANNUAL BUDGET. REVIEWS ARE DONE BY FINANCE STAFF TO ENSURE THAT GRANTS ARE MADE IN COMPLIANCE WITH THE SOCIETY'S MISSION AND CONFLICT OF INTEREST POLICY. ONCE THE FUNDING IS APPROVED AND ISSUED, PROGRAM STAFF MONITOR THAT THE RECEIVING ORGANIZATION HAS USED THE FUNDS AS AGREED. ON ACCEPTANCE OF PROPOSAL, THE RECEIVING ORGANIZATION MUST SIGN A LETTER OF AGREEMENT, WHICH OUTLINES THE TERMS AND CONDITIONS FOR THE AWARD, RESTRICTIONS PLACED ON THE USE OF

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| | (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

THE FUNDS, INCLUDING LOBBYING RESTRICTIONS, DUE DATES FOR INTERIM AND FINAL NARRATIVES, FINANCIAL REPORTS, AND TANGIBLE SUCCESSES ACHIEVED WITH THE FUNDING, INCLUDING ANY UNEXPECTED CHALLENGES ENCOUNTERED DURING THE GRANT PERIOD. THE NARRATIVE AND ACCOUNTING ARE REVIEWED BY TWS PROGRAM STAFF TO ENSURE PROPER USE AND ACCOMPLISHMENT OF GOALS. WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENTS MAY BE REQUESTED.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (e) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP DESCRIPTION

SCHEDULE I, PART III, LINE 1

THE GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP IS AVAILABLE TO QUALIFIED GRADUATE STUDENTS. IT IS CREATED IN HONOR OF GLORIA BARRON, DEDICATED EDUCATOR AND TIRELESS ADVOCATE FOR WILDERNESS PROTECTION, AND ADMINISTERED BY THE WILDERNESS SOCIETY, A LEADING CONSERVATION ORGANIZATION BASED IN WASHINGTON, D.C. THE SCHOLARSHIP SEEKS TO ENCOURAGE INDIVIDUALS WHO HAVE THE POTENTIAL TO MAKE A SIGNIFICANT POSITIVE DIFFERENCE IN THE LONG TERM PROTECTION OF WILDERNESS IN THE UNITED STATES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director. Explain in Part III.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?
- If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

| | Yes | No |
|-----------|-----|----|
| 1b | X | |
| 2 | X | |
| 4a | X | |
| 4b | X | |
| 4c | | X |
| 5a | | X |
| 5b | | X |
| 6a | | X |
| 6b | | X |
| 7 | | X |
| 8 | | X |
| 9 | | |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---------------------------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| 1 ASHFORD CHANCELOR | (i) 170,188. (ii) 0 (iii) 6,745. | 0 | 0 | 14,155. | 42,029. | 233,117. | |
| 2 WILLIAM H MEADOWS | (i) 315,761. (ii) 0 (iii) 8,619. | 0 | 0 | 19,305. | 77,979. | 421,664. | |
| 3 ANN MORGAN | (i) 163,942. (ii) 0 (iii) 1,292. | 0 | 0 | 13,175. | 40,486. | 218,895. | |
| 4 AMY VEDDER | (i) 225,392. (ii) 5,136. (iii) 2,858. | 0 | 0 | 18,671. | 55,662. | 307,719. | |
| 5 SARA BARTH | (i) 159,047. (ii) 0 (iii) 11,600. | 0 | 0 | 13,632. | 39,278. | 223,557. | |
| 6 SPENCER PHILLIPS | (i) 159,027. (ii) 0 (iii) 6,491. | 0 | 0 | 13,157. | 39,273. | 217,948. | |
| 7 PAULA YABAR | (i) 279,124. (ii) 10,360. (iii) 2,316. | 0 | 0 | 19,514. | 68,931. | 380,245. | |
| 8 FREDERICK SILBERNAGEL I | (i) 240,782. (ii) 0 (iii) 8,145. | 0 | 0 | 19,514. | 59,463. | 327,904. | |
| 9 JANE TAYLOR | (i) 181,178. (ii) 0 (iii) 3,822. | 0 | 0 | 10,246. | 44,743. | 239,989. | |
| 10 MELANIE BELLER | (i) 159,000. (ii) 0 (iii) 6,552. | 0 | 0 | 11,677. | 39,266. | 216,495. | |
| 11 LESLIE JONES | (i) 149,297. (ii) 0 (iii) 2,726. | 0 | 0 | 12,142. | 36,870. | 201,035. | |
| 12 SHEILA DENNIS | (i) 159,172. (ii) 0 (iii) 0 | 0 | 0 | 12,596. | 39,308. | 211,076. | |
| 13 LISA L. LOEHR | (i) 145,223. (ii) 0 (iii) 0 | 0 | 0 | 11,374. | 35,864. | 192,461. | |
| 14 | (i) 0 (ii) 0 (iii) 0 | 0 | 0 | 0 | 0 | 0 | |
| 15 | (i) 0 (ii) 0 (iii) 0 | 0 | 0 | 0 | 0 | 0 | |
| 16 | (i) 0 (ii) 0 (iii) 0 | 0 | 0 | 0 | 0 | 0 | |

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

FORM 990, SCHEDULE J, LINE 4B

THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN, WHICH WAS AUTHORIZED BY

THE COUNCIL, IS ONLY AVAILABLE TO THE SENIOR VICE PRESIDENTS AND THE

PRESIDENT. CURRENTLY, ONLY THE PRESIDENT WILLIAM MEADOWS IS ENROLLED IN THE PLAN.

SEVERANCE AND CHANGE OF CONTROL PAYMENTS

FORM 990, SCHEDULE J, LINE 4A

PAYMENTS RECEIVED IN SEVERANCE OR AS A RESULT OF A CHANGE OF CONTROL:

ASHFORD CHANCELOR 38,041

AMY L. VEDDER 76,083

FREDERICK SILBERNAGEL III 125,000

ANN MORGAN 82,341

LISA L. LOEHR 106,634

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.

OMB No. 1545-0047

2011

**Open To Public
Inspection**

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|-------------------------------|--|--|--|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 42 . | 402,738 . | FMV |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ (ATCH 1) | | 289 . | 125,457 . | |
| 26 Other ▶ () | | | | |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

| | Yes | No |
|--|-----|----|
| 30 a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? | X | |
| 32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | X |
| b If "Yes," describe in Part II. | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

ATTACHMENT 1

SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

| <u>DESCRIPTION</u> | <u>(A) CHECK</u> | <u>(B) NUMBER OF CONTRIBUTIONS</u> | <u>(C) REVENUES REPORTED</u> | <u>(D) METHOD OF DETERMINING</u> |
|------------------------|------------------|--|----------------------------------|--------------------------------------|
| DONATED FLIGHT TICKETS | X | 289. | 125,457. | FMV |
| TOTALS | | <u>289.</u> | <u>125,457.</u> | |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

THE WILDERNESS SOCIETY

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2011

**Open to Public
Inspection**

Employer identification number

53-0167933

AVAILABILITY OF OTHER DOCUMENTS

FORM 990, PART VI, LINE 19

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990S AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

AFTER PREPARATION FOR THE FORM 990 IS COMPLETE, IT IS EXAMINED BY THE VICE PRESIDENT, FINANCE FOR ACCURACY AND COMPLETENESS. THE DOCUMENT IS THEN PRESENTED TO AND REVIEWED BY THE PRESIDENT AND VICE PRESIDENTS OF CONSERVATION, MEMBERSHIP AND DEVELOPMENT, AND FINANCE AND ADMINISTRATION. THE AUDIT COMMITTEE WILL THEN MEET TO INSPECT THE 990. SUBSEQUENT TO THE AUDIT COMMITTEE MEETING, THE 990 IS POSTED ON THE ORGANIZATION'S INTRANET PAGE FOR REVIEW BY THE GOVERNING COUNCIL BEFORE IT IS FILED.

CONFLICTS OF INTEREST

FORM 990, PART VI, LINE 12C

TWS HAS A WRITTEN CONFLICT OF INTEREST POLICY. IT IS REVIEWED ANNUALLY. ALL STAFF, INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, MUST CERTIFY ANNUALLY THAT THEY HAVE READ AND FAMILIARIZED THEMSELVES WITH THE POLICY, AND DISCLOSE ANY POTENTIAL CONFLICTS. STAFF DISCLOSE WHETHER THEY SERVE AS BOARD MEMBERS OR OFFICERS OF ANY OTHER ORGANIZATION WHOSE MISSION AND ACTIVITIES MAY OVERLAP WITH THOSE OF TWS. FURTHER, ALL

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES DISCLOSE ANY RELATED ORGANIZATION RELATIONSHIPS. COMPLETED FORMS ARE REVIEWED AND ANY POTENTIAL CONFLICTS ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO ENFORCE COMPLIANCE WITH THE POLICY. ALL STAFF INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, NOTIFY THE ORGANIZATION IF CIRCUMSTANCES CHANGE THROUGHOUT THE COURSE OF THE FISCAL YEAR AND THE CHANGED CIRCUMSTANCES ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO REMAIN IN COMPLIANCE WITH THE POLICY.

DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15

EXECUTIVE COMPENSATION IS REVIEWED ANNUALLY AT THE WILDERNESS SOCIETY BY AN INDEPENDENT CONSULTING FIRM. THE FIRM REGULARLY PROVIDES EXECUTIVE COMPENSATION STUDIES FOR TAX EXEMPT ENTITIES. THE MARKET ANALYSIS PRICED OUR POSITIONS USING COMPARABLE INDUSTRIES, MATCHED POSITIONS DIRECTLY TO SALARY DATA, AND UTILIZED A 'TOP PAID' ANALYSIS IN THE FINAL REPORT OF MARKET FINDINGS. THE GOVERNING COUNCIL SPECIFICALLY REVIEWS THE COMPENSATION OF "DISQUALIFIED INDIVIDUALS" AND THE VICE PRESIDENT OF FINANCE AND ADMINISTRATION. BASED ON THE MARKET FINDINGS, THE COUNCIL REVIEWS AND APPROVES THE COMPENSATION OF THESE POSITIONS EACH YEAR.

FUNDRAISERS PURSUANT TO AGREEMENTS

FORM 990, SCHEDULE G, PART I, QUESTION 2(B)

TWS USES DIFFERENT TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUNDRAISING CAMPAIGNS. WE EXPECT GAINS FROM VENDORS WHO DO RENEWAL CALLING SUCH AS COMNET AND VENDORS WHO DO APPEALS TO EXISTING MEMBERSHIP

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SUCH AS HARRIS. BOTH PRODUCE SUBSTANTIAL, IMMEDIATE NET INCOME. OTHER
TELEMARKETING VENDORS SUCH AS YOUR VOICE MEDIA WORK ON DIFFERENT
CAMPAIGNS SUCH AS LAPSED REINSTATEMENTS AND SUSTAINER (MONTHLY GIVING)
INVITES WHICH ARE, BY DESIGN, BUDGETED AT AN INITIAL NET LOSS. THEY ARE
INTENDED TO REINSTATE LAPSED DONORS OR RECRUIT MONTHLY CONTRIBUTORS AND
NET INCOME IN FUTURE MONTHS AFTER THE CAMPAIGNS ARE OVER.

FAMILY/BUSINESS RELATIONSHIPS

FORM 990, PART VI, LINE 2

RELATIONSHIP SCHEDULE:

NAME OF OFFICER, DIRECTOR, ETC: DAVID BONDERMAN
NAME OF OTHER PARTY: RICHARD BLUM
TITLE OR ROLE: EXECUTIVE COMMITTEE MEMBER
RELATIONSHIP: BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC: RICHARD BLUM
NAME OF OTHER PARTY: DAVID BONDERMAN
TITLE OR ROLE: GOVERNING COUNCIL MEMBER
RELATIONSHIP: BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC: CAROLINE GETTY
NAME OF OTHER PARTY: MICHAEL MANTELL
TITLE OR ROLE: EXECUTIVE COMMITTEE MEMBER
RELATIONSHIP: BUSINESS RELATIONSHIP

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| Name of the organization THE WILDERNESS SOCIETY | Employer identification number |
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NAME OF OFFICER, DIRECTOR, ETC: MICHAEL MANTELL
NAME OF OTHER PARTY: CAROLINE GETTY
TITLE OR ROLE: EXECUTIVE COMMITTEE MEMBER
RELATIONSHIP: BUSINESS RELATIONSHIP

OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 5

| | |
|--|-----------|
| NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS | 2,615,894 |
| CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS | 1,153,224 |
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | 158,166 |
| | ----- |
| TOTAL | 3,927,284 |

ATTACHMENT 1FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE WILDERNESS SOCIETY IS THE LEADING AMERICAN CONSERVATION ORGANIZATION WORKING TO PROTECT WILD PLACES WITHIN OUR NATION'S PUBLIC LANDS -- THE 618 MILLION ACRES COLLECTIVELY OWNED BY THE AMERICAN PEOPLE AND MANAGED BY OUR GOVERNMENT. FROM WELL-KNOWN ICONS TO HIDDEN GEMS, THESE WILDLANDS PROVIDE US ALL WITH CLEAN AIR AND WATER; ABUNDANT WILDLIFE; HAVENS FOR RECREATION, LEARNING, AND SOLITUDE; AND A FOUNDATION FOR A HEALTHY PLANET. THEY ARE ALSO IMPORTANT SOURCES OF RENEWABLE ENERGY AND VITAL NATURAL RESOURCES WHICH MUST BE MANAGED WISELY.

SINCE ITS FOUNDING IN 1935, THE WILDERNESS SOCIETY HAS LED THE EFFORT TO PERMANENTLY PROTECT AS WILDERNESS 110 MILLION ACRES IN 44 STATES,

Name of the organization

THE WILDERNESS SOCIETY

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ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

FROM RICH HARDWOOD FORESTS IN THE EAST, STUNNING DESERTS IN THE
SOUTHWEST, AND SNOWCAPPED PEAKS IN THE ROCKIES TO OLD-GROWTH FORESTS
IN THE PACIFIC NORTHWEST AND TUNDRA IN ALASKA. FROM THE
REVOLUTIONARY 1964 WILDERNESS ACT TO THE LANDMARK 2009 BILL WHICH
PERMANENTLY PROTECTED MORE THAN TWO MILLION ACRES OF WILDERNESS
ACROSS THE COUNTRY, THE WILDERNESS SOCIETY HAS BEEN AT THE FOREFRONT
OF NEARLY EVERY MAJOR PUBLIC LANDS VICTORY OVER THE PAST 76 YEARS.
OUR WORK HAS PROFOUNDLY IMPROVED THE WAY OUR SHARED NATIONAL LANDS
ARE MANAGED AND ENJOYED.

WE BRING A UNIQUE BREADTH OF EXPERTISE TO PUBLIC LANDS ISSUES: OUR
STAFF ARE RECOGNIZED LEADERS IN THE FIELDS OF NATURAL RESOURCE
SCIENCE, POLICY, ECONOMICS AND OUTREACH. FROM CAPITOL HILL AND
FEDERAL AGENCIES TO COMMUNITIES ACROSS THE NATION, WE WORK
STRATEGICALLY AND COLLABORATIVELY WITH LAND MANAGERS, DECISION-MAKERS
AND OTHER INTERESTED CITIZENS TO FIND COMMON-GROUND SOLUTIONS. THESE
SOLUTIONS - TESTED ON THE GROUND AND EMBODIED IN NATIONAL POLICY --
LEAD TO BETTER PROTECTION, STEWARDSHIP AND RESTORATION OF OUR PUBLIC
LANDS, PRESERVING OUR RICH NATURAL LEGACY FOR CURRENT AND FUTURE
GENERATIONS.

TODAY, WITH MORE THAN 500,000 ACTIVE MEMBERS AND SUPPORTERS, TWS
CONTINUES ITS VITAL MISSION TO PROTECT WILDERNESS AND INSPIRE
AMERICANS TO CARE FOR OUR WILD PLACES.

OUR VALUES

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ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

INTEGRITY BEYOND REPROACH, LEADERSHIP, A PROFOUND APPRECIATION FOR AND RESPONSIBILITY TO OUR MEMBERS, AND A DEEP RESPECT FOR THE NEEDS, VALUES AND TRADITIONS OF LOCAL COMMUNITIES. WE PRIZE WILDERNESS IN ITS OWN RIGHT AND FOR PROVIDING PURE AIR AND WATER, ESSENTIAL HABITAT AND SPIRITUAL RENEWAL. WE ARE COMMITTED TO BUILDING PARTNERSHIPS IN SUPPORT OF WILDERNESS CONSERVATION. WE CELEBRATE AND ENCOURAGE THE DEEP CONNECTIONS BETWEEN PEOPLE AND PLACE FORGED BY SUSTAINABLE RECREATION ON OUR PUBLIC LANDS. WE LEAD PRINCIPLED, EFFECTIVE, ON-THE-GROUND CAMPAIGNS THAT MOBILIZE THE PUBLIC AND LOCAL, STATE AND NATIONAL DECISION-MAKERS TO PROTECT AT RISK WILD PUBLIC LANDS; AND WE WORK TO ENSURE THE IMPLEMENTATION OF SOUND ENERGY DEVELOPMENT.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4A

CONSERVATION PROJECTS

THE WILDERNESS SOCIETY IS OPERATING IN A TIME OF TREMENDOUS CHANGE, AND RARELY HAVE THE STAKES BEEN HIGHER FOR OUR NATION'S NATURAL LEGACY. AMERICA'S PUBLIC LANDS MAY SEEM VAST, BUT THEY'RE NOT LIMITLESS, AND MANY ARE THREATENED. THIS PAST CONGRESS WAS THE FIRST IN OVER 40 YEARS TO ADJOURN WITHOUT PROTECTING AN ACRE OF WILDERNESS. FURTHER CLIMATE CHANGE AND THE INCREASING DEMANDS FOR ENERGY DEVELOPMENT ARE CREATING CHALLENGES FOR PROTECTING AMERICA'S REMAINING WILD LANDS.

THE WILDERNESS SOCIETY HAS A DEEP HISTORY OF PROTECTING THE WILDEST OF OUR PUBLIC LANDS; WE'VE LED ON NEARLY EVERY MAJOR

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ATTACHMENT 2 (CONT'D)

PUBLIC LANDS DECISION OF THE PAST CENTURY, FROM THE 1964 WILDERNESS ACT, RESULTING IN 110 MILLION ACRES OF TRUE WILDERNESS, TO THE PASSAGE OF THE OMNIBUS PUBLIC LANDS BILL OF 2009.

THIS PAST SPRING, WE WELCOMED JAMIE WILLIAMS TO THE WILDERNESS SOCIETY AS OUR NEW PRESIDENT. HAVING WORKED FOR NEARLY 20 YEARS WITH THE NATURE CONSERVANCY, WHERE HE LED ITS MONTANA PROGRAM, LANDSCAPE CONSERVATION FOR NORTH AMERICA AND YAMPA RIVER WORK, JAMIE HELPED DEVELOP THE LARGE-LANDSCAPE FOCUS WITHIN THE OBAMA ADMINISTRATION'S AMERICA'S GREAT OUTDOORS INITIATIVE AND SPEARHEADED CRITICAL EFFORTS TO SECURE CONSERVATION FUNDING IN CONGRESS FOR PLACES LIKE MONTANA'S BLACKFOOT VALLEY. A FORMER NOLS INSTRUCTOR AND WHITEWATER RIVER GUIDE, JAMIE BROUGHT A WEALTH OF EXPERIENCE TO THE WILDERNESS SOCIETY.

TOGETHER WE ARE MEETING THE CHALLENGES OF TODAY—BELOW ARE SOME SNAPSHOTS OF OUR CONSERVATION ACCOMPLISHMENTS OVER THE PAST YEAR: FORT ORD AND CHIMNEY ROCK NATIONAL MONUMENTS — RESPONDING TO GRASSROOTS CALLS FOR THE PROTECTION OF PRICELESS HISTORIC AND CULTURAL TREASURES AND THEIR SURROUNDING LANDS, PRESIDENT OBAMA USED HIS AUTHORITY UNDER THE ANTIQUITIES ACT AND DESIGNATED TWO NEW NATIONAL MONUMENTS ENCOMPASSING EXTENSIVE SURROUNDING WILDLANDS. FORT ORD, A HISTORIC ARMY BASE, CONTAINS SOME OF THE LAST UNDEVELOPED NATURAL LANDS ON CALIFORNIA'S MONTEREY PENINSULA. CHIMNEY ROCK, COVERING 4,700 ACRES IN THE SAN JUAN NATIONAL FOREST IN COLORADO, HOLDS RUINS OF THOUSAND-YEAR-OLD STRUCTURES BUILT BY THE ANCESTORS OF MODERN PUEBLOAN INDIANS. THE ANTIQUITIES ACT

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ATTACHMENT 2 (CONT'D)

ALLOWS THE PRESIDENT TO PROTECT AMERICA'S SPECIAL PLACES, AND THE NEW MONUMENTS WERE UNDERPINNED BY DIVERSE AND BIPARTISAN LOCAL SUPPORT, ORGANIZED IN SEVERAL INSTANCES WITH HELP FROM THE WILDERNESS SOCIETY.

WESTERN ARCTIC RESERVE, ALASKA - IN DECEMBER, THE BUREAU OF LAND MANAGEMENT HEEDED THE WILDERNESS SOCIETY'S SOUND SCIENCE WHEN IT ANNOUNCED THAT IT WOULD PROTECT 11 MILLION ACRES - FIVE TIMES THE SIZE OF YELLOWSTONE NATIONAL PARK - IN THE RESERVE, INCLUDING CRITICAL CARIBOU HABITAT AND BIRD NESTING AREAS LIKE TESHEKPUK LAKE AND THE UTUKOK UPLANDS. THE MANAGEMENT PLAN, THE FIRST COMPLETED SINCE BLM TOOK OVER MANAGEMENT OF THE NATIONAL PETROLEUM RESERVE-ALASKA IN THE 1970S, ALLOWS FOR OIL DEVELOPMENT IN AREAS LESS IMPORTANT TO WILDLIFE. TOGETHER WITH THE BLM, THE STATE OF ALASKA, CONOCOPHILLIPS, THE NORTH SLOPE BOROUGH AND AUDUBON ALASKA, THE WILDERNESS SOCIETY SPENT SEVERAL YEARS GATHERING AND ASSEMBLING SCIENTIFIC DATA THAT HELPED DECISION-MAKERS UNDERSTAND HOW WILDLIFE USE SOME OF THE RESERVE'S MOST IMPORTANT AREAS.

UPPER HOBACK RIVER BASIN, WYOMING - AFTER A SEVEN-YEAR STRUGGLE, THE WILDERNESS SOCIETY HELPED WYOMING CITIZENS SAVE THIS WILD PART OF THE WYOMING RANGE, IN THE SOUTHERN REACHES OF THE GREATER YELLOWSTONE ECOSYSTEM, FROM IMMINENT NATURAL GAS FRACKING AND DEVELOPMENT. AS PART OF A STRONG CONSERVATION COALITION, WE CREATED THE ENVIRONMENT FOR A HISTORIC AGREEMENT FOR THE GAS LEASES TO BE BOUGHT OUT BY OUR CONSERVATION PARTNER, THE TRUST FOR PUBLIC LAND, AND THEN WE HELPED RAISE MORE THAN \$8 MILLION TO FUND

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ATTACHMENT 2 (CONT'D)

THE LEASE BUY-OUT BEFORE THE DECEMBER 31 DEADLINE.

ROADLESS AREA CONSERVATION RULE - A SERIES OF LEGAL CHALLENGES INTENDED TO UNDO THE ROADLESS RULE WAS HALTED FOR GOOD WHEN THE U.S. SUPREME COURT DECIDED NOT TO HEAR THE FINAL APPEAL. THE ROADLESS RULE, APPROVED BY PRESIDENT CLINTON IN 2001 TO PROTECT LARGE BLOCKS OF ROADLESS FOREST, WILL KEEP 49 MILLION ACRES OF NATIONAL FOREST LAND FROM WASHINGTON STATE TO NORTH CAROLINA WILD AND UNBROKEN WHILE CONTINUING TO GIVE AMERICANS ACCESS TO SOME OF THE COUNTRY'S BEST HUNTING, FISHING, HIKING AND OTHER RECREATION AREAS. FOR MORE THAN A DECADE, THE WILDERNESS SOCIETY HAS BEEN A LEADER IN THE CAMPAIGN TO PROTECT ROADLESS AREAS AND UPHOLD THE ROADLESS RULE.

STEPHEN MATHER WILDERNESS, WASHINGTON - IN SEPTEMBER, 3,559 ACRES KNOWN AS THUNDER CREEK VALLEY WERE ADDED TO THE STEPHEN MATHER WILDERNESS IN THE NORTH CASCADES NATIONAL PARK COMPLEX. WHEN STEPHEN MATHER WAS DESIGNATED A WILDERNESS AREA BY CONGRESS THROUGH THE WASHINGTON PARKS WILDERNESS ACT OF 1988, IT CAME WITH THE PROVISION THAT OTHER ADJACENT LANDS COULD BE ADDED TO IT IN FUTURE. LAST YEAR, AFTER SEATTLE CITY LIGHT ABANDONED ITS ONE-TIME PLANS TO DEVELOP THUNDER CREEK FOR HYDROPOWER PRODUCTION, THE DOOR WAS OPENED FOR FORMER INTERIOR SECRETARY KEN SALAZAR TO MAKE THIS ADMINISTRATIVE DESIGNATION PROTECTING THUNDER CREEK VALLEY, WITH FULL WILDERNESS SOCIETY ENCOURAGEMENT.

WILDERNESS BILLS IN THE BALANCE - MORE THAN 25 WILDERNESS BILLS, MANY CRAFTED WITH THE WILDERNESS SOCIETY AND LOCAL SUPPORT,

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ATTACHMENT 2 (CONT'D)

REMAINED BEFORE CONGRESS IN 2012, BUT LEGISLATORS FAILED TO ACT ON ANY OF THEM. FROM THE MAINE COASTAL ISLANDS WILDERNESS ACT, TO THE CENTRAL IDAHO ECONOMIC DEVELOPMENT AND RECREATION ACT, TO THE COLUMBINE-HONDO WILDERNESS ACT IN NEW MEXICO, MANY OF THESE BILLS CARRY BIPARTISAN SUPPORT, BUT THEY STILL COULD NOT GENERATE CONGRESSIONAL ACTION. THE 112TH CONGRESS BECAME THE FIRST IN MORE THAN 40 YEARS THAT FAILED TO PROTECT A SINGLE WILDERNESS AREA.

BLM'S SOLAR PLAN - IN SEPTEMBER, CULMINATING THREE YEARS OF WORK, THE BUREAU OF LAND MANAGEMENT RELEASED ITS SOLAR PROGRAMMATIC ENVIRONMENTAL IMPACT STATEMENT, THE FIRST-EVER ROADMAP FOR LARGE-SCALE SOLAR ENERGY DEVELOPMENT ON BLM LANDS IN ARIZONA, CALIFORNIA, COLORADO, NEVADA, NEW MEXICO AND UTAH. THE WILDERNESS SOCIETY, PARTICULARLY OUR 2011 "SMART SOLAR" REPORT, WAS INSTRUMENTAL IN HELPING SET THE PLAN THAT WILL GUIDE SOLAR ENERGY DEVELOPMENT TOWARD 300,000 ACRES OF LOW-CONFLICT ZONES ON PUBLIC LANDS AND AWAY FROM MORE THAN 78 MILLION ACRES OF CULTURALLY AND ENVIRONMENTALLY SENSITIVE AREAS. THE NEW ROADMAP IS A WIN FOR BOTH CLEAN ENERGY AND WILDLANDS PROTECTION.

PINNACLES NATIONAL PARK, CALIFORNIA - PINNACLES NATIONAL MONUMENT, NEAR SOLEDAD IN CENTRAL CALIFORNIA, WAS UPGRADED TO BECOME THE NATION'S 59TH NATIONAL PARK AFTER THE SENATE PASSED BIPARTISAN LEGISLATION CHAMPIONED BY REPRESENTATIVE SAM FARR AND SENATOR BARBARA BOXER. SINCE 2003, THE MONUMENT, WHICH WAS CREATED BY PRESIDENT THEODORE ROOSEVELT IN 1908, HAS BEEN PART OF THE CALIFORNIA CONDOR RECOVERY PROGRAM, HARBORING 30 OF THE ENDANGERED

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ATTACHMENT 2 (CONT'D)

BIRDS. NAMED FOR THE FINGERLIKE VOLCANIC SPIRES AND CRAGS THAT TOWER ABOVE OAK SAVANNAS AND CHAPARRAL, PINNACLES IS HOME TO BOBCATS, BATS, THREATENED SALAMANDERS AND THE CALIFORNIA RED-LEGGED FROG. WHILE THE NATIONAL PARK DESIGNATION PASSED CONGRESS, ITS PROPOSED WILDERNESS PROTECTIONS DID NOT. WEST-WIDE ENERGY CORRIDORS - THREE YEARS AFTER THE WILDERNESS SOCIETY AND MORE THAN A DOZEN CONSERVATION GROUPS AND ONE COLORADO COUNTY FILED A LAWSUIT CHALLENGING A PLAN THAT WOULD HAVE PLACED TRANSMISSION LINES AND ENERGY INFRASTRUCTURE THROUGH IMPORTANT WILDLANDS ACROSS THE WEST, A LEGAL AGREEMENT WAS FILED IN FEDERAL COURT IN SAN FRANCISCO REQUIRING THE PLAN'S REVISION. THE BUREAU OF LAND MANAGEMENT, U.S. FOREST SERVICE AND DEPARTMENT OF ENERGY, WORKING WITH CONSERVATIONISTS AND COUNTY OFFICIALS, WILL REVISE THE WEST-WIDE ENERGY CORRIDORS PLAN TO FACILITATE RENEWABLE ENERGY AND AVOID ENVIRONMENTALLY SENSITIVE AREAS, PREVENTING A WEB OF PIPELINES AND POWER LINES FROM BEING BUILT AND GUIDING DEVELOPMENT TO MORE APPROPRIATE LANDS THAT ALSO SUPPORT CLEAN ENERGY.

CLIMATE CHANGE ADAPTATION - IN CALIFORNIA'S SIERRA NEVADA, MONTANA, IDAHO AND THE NORTHERN FOREST OF MAINE AND NEW HAMPSHIRE, THE WILDERNESS SOCIETY HAS BEEN GATHERING AND ANALYZING SCIENTIFIC DATA ON ECOSYSTEM CHANGE AND WILDLIFE HABITAT NEEDS NECESSARY TO HELP OUR WILD FORESTS ADAPT TO A CHANGING CLIMATE. WE CAN THEN TARGET THOSE TRACTS MOST VITAL TO RECONNECT FRAGMENTED FOREST. IN MAINE, THIS WORK HAS HELPED US LEAD THE CAMPAIGN FOR A PROPOSED NEW NATIONAL WILDLIFE REFUGE, THE NATION'S FIRST THAT WILL BE

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ATTACHMENT 2 (CONT'D)

DESIGNED AND MANAGED EXPLICITLY TO HELP PLANT AND ANIMAL SPECIES ADAPT TO CLIMATE CHANGE.

GREAT OUTDOORS WEEK - DURING GREAT OUTDOORS AMERICA WEEK (GO AMERICA WEEK) IN JUNE, WE SAW A DIVERSE GROUP OF OVER 200 ADVOCATES AND OUTDOOR INDUSTRY COMMUNITY MEMBERS FROM AROUND THE COUNTRY COME TO WASHINGTON TO PARTICIPATE IN MORE THAN 300 MEETINGS WITH LAWMAKERS AND ADMINISTRATION OFFICIALS AND LOBBY FOR THE CONSERVATION OF AMERICA'S PUBLIC LANDS. GO AMERICA WEEK ALSO HIGHLIGHTED THE IMPORTANCE OF OUR PUBLIC LANDS TO TODAY'S YOUTH-THE EVENT HOSTED OVER 100 YOUTH PARTICIPANTS, HOSTED BOTH A FULL DAY SERVICE PROJECT WITH INTERIOR DEPARTMENT AND STUDENT CONSERVATION ORGANIZATION AND A YOUTH DAY AT EPA WITH DIRECTOR JACKSON. GO WEEK SHOWS THE GREAT INITIATIVE AND PASSION DIVERSE ORGANIZATIONS, INDIVIDUALS AND BUSINESSES AROUND THE COUNTRY HAVE FOR THE PRESERVATION OF OUR WILDLANDS.

IN ADDITION TO PROTECTING WILDERNESS, THE WILDERNESS SOCIETY IS DEDICATED TO GROWING OUR CONSTITUENCY AND INSPIRING AMERICANS TO CARE FOR OUR WILD PLACES. WE CONTINUE TO DRIVE STRONG STAKEHOLDER AND SUPPORTER ENGAGEMENTS THROUGH MULTI-CHANNEL OUTREACH.

ATTACHMENT 3

FORM 990, PART III - PROGRAM SERVICE, LINE 4B

PUBLIC EDUCATION

THE WILDERNESS SOCIETY IS THE LEADING AMERICAN CONSERVATION ORGANIZATION WORKING TO PROTECT WILD PLACES WITHIN OUR NATION'S

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ATTACHMENT 3 (CONT'D)

PUBLIC LANDS -- THE 618 MILLION ACRES COLLECTIVELY OWNED BY THE AMERICAN PEOPLE AND MANAGED BY OUR GOVERNMENT. FROM WELL-KNOWN ICONS TO HIDDEN GEMS, THESE WILDLANDS PROVIDE US ALL WITH CLEAN AIR AND WATER; ABUNDANT WILDLIFE; HAVENS FOR RECREATION, LEARNING, AND SOLITUDE; AND A FOUNDATION FOR A HEALTHY PLANET. THEY ARE ALSO IMPORTANT SOURCES OF RENEWABLE ENERGY AND VITAL NATURAL RESOURCES WHICH MUST BE MANAGED WISELY.

TODAY, WITH MORE THAN 500,000 ACTIVE MEMBERS AND SUPPORTERS, TWS CONTINUES ITS VITAL MISSION TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES. BY USING ONLINE AND TRADITIONAL OUTREACH, WE'VE BEEN GROWING OUR BASE OF SUPPORT. THE FOLLOWING SUMMARY OF OUR ACTIVITIES HIGHLIGHTS SOME OF THIS WORK. BUILDING SUPPORT THROUGH DIGITAL CHANNELS - THIS WAS A BIG YEAR FOR DIGITAL COMMUNICATIONS AT THE WILDERNESS SOCIETY.

HIGHLIGHTING THE YEAR WAS THE LAUNCH OF THE COMPLETELY OVERHAULED WEB SITE IN AUGUST 2012. THIS LAUNCH AFFORDED THE ORGANIZATION TO REFOCUS ITS EXTERNAL DIGITAL COMMUNICATIONS ON PROVIDING OUTREACH FOR ONLINE DONATIONS, ADVOCACY AND GENERAL NEWS RELATED TO OUR PROGRAMS. IT FEATURES A SIMPLE CONTENT MANAGEMENT SYSTEM THAT STREAMLINES PUBLISHING AND ALLOWS RAPID RESPONSES AND ITERATIONS FOR BREAKING NEWS AND INFORMATION. ENHANCEMENT CONTINUED ON THE SITE INTO THE WINTER WITH AN INCREASE OF DIGITAL STORYTELLING

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ATTACHMENT 3 (CONT'D)

TECHNIQUES INCLUDING INTERACTIVE MAPS, TIMELINES, PHOTO GALLERIES AND VIDEOS. ADDITIONALLY, WORK HAS BEGUN ON MAKING THE SITE WORK ACROSS ALL PLATFORMS- COMPUTER, TABLET AND MOBILE DEVICES FOR AN OPTIMIZED EXPERIENCE.

ON THE SOCIAL MEDIA FRONT, OUR FACEBOOK FAN BASE GREW TO OVER 34,000 FANS AS WE CONTINUE TO ENGAGE THIS GROWING AUDIENCE AND DYNAMIC PLATFORM. OUR TWITTER FOLLOWING INCREASED TO OVER 21,000 FOLLOWERS, AS DID THE FREQUENCY OF OUR TWEETS AS THIS EXPANDING OUTLET REACHES NEW AUDIENCES, INCLUDING MANY JOURNALISTS AND POLICY MAKERS. LOOK FOR THE DIGITAL TEAM TO EXPAND INTO INSTAGRAM AND PINTEREST IN THE COMING MONTHS IN THE EVER EXPANDING QUEST TO REACH OUR CONSTITUENTS.

CONTINUING TO BOLSTER OUR ADVOCACY EFFORTS, THE DIGITAL TEAM CONTINUES TO USE ONLINE ADVOCACY TO SEND LETTERS TO MEMBERS OF CONGRESS, THE PRESIDENT AND OTHER DECISION-MAKERS IN ORDER TO GIVE THE PEOPLE A VOICE ON IMPORTANT LEGISLATION. MANY CAMPAIGNS CREDIT THE DIGITAL OUTREACH FOR SWAYING POLICYMAKERS.

THE WILD DAYS OF SUMMER - THE WILDERNESS SOCIETY LAUNCHED AN INTEGRATED MARKETING CAMPAIGN CALLED THE WILD DAYS OF SUMMER THAT PROMOTED DIFFERENT WILDERNESS EXPERIENCES USING RADIO PUBLIC SERVICE ANNOUNCEMENTS, EMAILS, FACEBOOK AND TWITTER OUTREACH, ONLINE ENGAGEMENTS AND BLOG OUTREACH. THE CAMPAIGN INCLUDED A

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ATTACHMENT 3 (CONT'D)

DONATED MILLION DOLLAR RADIO ADVERTISING CAMPAIGN THAT RAN ON ALL 111 ENTERCOM STATIONS. THE SPOTS FEATURED BETTY WHITE, DAVE MATTHEWS AND WENDIE MALICK URGING AMERICANS TO JOIN WITH THE WILDERNESS SOCIETY TO CHERISH AND PROTECT WILDERNESS. THE WILD DAYS OF SUMMER MARKETING CAMPAIGN WON A 2012 GOLD MARCOM AWARD OUT OF A FIELD OF 6,000 ENTRIES. SPONSORED BY THE ASSOCIATION OF MARKETING AND COMMUNICATION PROFESSIONALS, THE AWARD RECOGNIZES OUTSTANDING CREATIVE ACHIEVEMENTS--THE LARGEST COMPETITION OF ITS KIND IN THE WORLD. THE WILD DAYS OF SUMMER DROVE NEARLY 300,000 PEOPLE TO OUR WEBSITE TO LEARN ABOUT OUR WORK. ENGAGING CELEBRITIES TO GIVE VOICE TO WILDERNESS - OUR CELEBRITY SUPPORTERS CONTINUE TO GIVE VOICE TO OUR CONSERVATION EFFORTS, AND ENCOURAGE INDIVIDUALS TO JOIN THE WILDERNESS SOCIETY. THE WILDERNESS SOCIETY WAS A MAIN NON-PROFIT PARTNER ON THE DAVE MATTHEWS BAND TOUR; WE HAD A BOOTH AT 44 SHOWS DURING THE TOUR, AND GAINED OVER 1,300 NEW WILDERNESS SOCIETY SUPPORTERS. IN ADDITION TO THE WILD DAYS OF SUMMER RADIO SPOTS, WE PRODUCED :30 PUBLIC SERVICE ANNOUNCEMENTS FEATURING BETTY WHITE AND WENDIE MALICK WHICH RAN ON HULU, TV LAND AND THROUGH MULTIPLE MEDIA OUTLETS. FOR MORE INFORMATION ABOUT OUR ACCOMPLISHMENTS AND THE PLACES WE WORK TO PROTECT VISIT WWW.WILDERNESS.ORG.

ATTACHMENT 4

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ATTACHMENT 4 (CONT'D)FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 5990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

| <u>NAME AND ADDRESS</u> | <u>DESCRIPTION OF SERVICES</u> | <u>COMPENSATION</u> |
|---|--------------------------------|---------------------|
| PRODUCTION MANAGEMENT GROUP LTD 6940 COLUMBIA GATEWAY DRIVE #220 COLUMBIA, MD 21046 | DIRECT MAIL | 859,314. |
| CHAPMAN CUBINE ADAMS HUSSEY INC. 1600 WILSON BLVD., #300 ARLINGTON, VA 22209 | DIRECT MAIL | 692,031. |
| RAFFA & ASSOCIATES 1899 L STREET WASHINGTON, DC 20036 | CONSULTING SERVICES | 284,393. |
| SECKMAN PRINTING, INC. 305 ENTERPRISE DRIVE FOREST, VA 24551 | DIRECT MAIL | 358,106. |
| MERKLE RESPONSE SERVICES 100 JAMISON COURT HAGERSTOWN, MD 21740 | DIRECT MAIL | 295,155. |
| TOTAL COMPENSATION | | <u>2,488,999.</u> |

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2010, or tax year beginning 10/01, 2010, and ending 09/30, 20 11
For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

2010

Department of the Treasury
Internal Revenue Service

▶ See instructions on back.

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THE WILDERNESS SOCIETY

53-0167933

Part I Type of Return and Return Information (Whole Dollars Only)

Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

| | | |
|--|--|---------------------|
| 1a Form 990 check here ▶ <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) . . . | 1b <u>24897745.</u> |
| 2a Form 990-EZ check here ▶ <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b _____ |
| 3a Form 1120-POL check here ▶ <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b _____ |
| 4a Form 990-PF check here ▶ <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b _____ |
| 5a Form 8868 check here ▶ <input type="checkbox"/> | b Balance due (Form 8868, line 3c) | 5b _____ |

Part II Declaration of Officer

6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.

If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2010 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here ▶ *Arleford Chumelun* 5/3/12 ▶ VP-FINANCE
Signature of officer Date Title

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

| | | | | | |
|-----------------------|---|-----------------------|---|---|------------------------------------|
| ERO's Use Only | ERO's signature ▶ <u><i>[Signature]</i></u> | Date <u>5-11-2012</u> | Check if also paid preparer <input checked="" type="checkbox"/> | Check if self-employed <input type="checkbox"/> | ERO's SSN or PTIN <u>P00444822</u> |
| | Firm's name (or yours if self-employed), address, and ZIP code ▶ <u>ARGY, WILTSE & ROBINSON, P.C.</u> | | | | EIN <u>54-1586993</u> |
| | <u>8405 GREENSBORO DRIVE, 7TH FLOOR</u> | <u>MCLEAN</u> | <u>VA 22102</u> | Phone no. <u>703-893-0600</u> | |

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge.

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

Return of Organization Exempt From Income Tax

2010

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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

A For the 2010 calendar year, or tax year beginning 10/01, 2010, and ending 09/30, 2011

| | | | |
|---|--|---|---|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization THE WILDERNESS SOCIETY | | D Employer identification number 53-0167933 |
| | Doing Business As | | E Telephone number (202) 833-2300 |
| | Number and street (or P.O. box if mail is not delivered to street address) | Room/suite | |
| | City or town, state or country, and ZIP + 4 WASHINGTON, DC 20036-3209 | | G Gross receipts \$ 29,657,640. |
| F Name and address of principal officer: WILLIAM H. MEADOWS 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates 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.WILDERNESS.ORG | |
| 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: 1935 | M State of legal domicile: DC |

Part I Summary

| | | | | |
|---|---|---|---------------------|-------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: OUR MISSION IS TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES. | | | |
| | 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 | 35. | |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 35. | |
| | 5 Total number of individuals employed in calendar year 2010 (Part V, line 2a) | 5 | 250. | |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 0. | |
| | 7a Total gross unrelated business revenue from Part VIII, column (C), line 12 | 7a | 0. | |
| b Net unrelated business taxable income from Form 990-T, line 34 | 7b | 0. | | |
| Revenue | | Prior Year | Current Year | |
| | 8 Contributions and grants (Part VIII, line 1h) | 20,347,273. | 21,120,937. | |
| | 9 Program service revenue (Part VIII, line 2g) | 2,612. | 33,306. | |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 775,166. | 2,414,531. | |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 1,883,905. | 1,328,971. | |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 23,008,956. | 24,897,745. | |
| | Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 900,327. | 378,075. |
| | | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| | | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 16,966,673. | 18,100,230. |
| | | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 454,162. | 296,064. |
| b Total fundraising expenses (Part IX, column (D), line 25) | | 4,084,637. | | |
| 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) | 11,503,438. | 14,418,249. | | |
| 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 29,824,600. | 33,192,618. | | |
| 19 Revenue less expenses. Subtract line 18 from line 12 | -6,815,644. | -8,294,873. | | |
| Net Assets or Fund Balances | | Beginning of Current Year | End of Year | |
| | 20 Total assets (Part X, line 16) | 53,152,579. | 45,785,868. | |
| | 21 Total liabilities (Part X, line 26) | 6,629,426. | 5,989,065. | |
| 22 Net assets or fund balances. Subtract line 21 from line 20. | 46,523,153. | 39,796,803. | | |

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 _____ |
| | Type or print name and title _____ |
| Paid Preparer Use Only | Print/Type preparer's name: <u>David Trimmer</u> Preparer's signature: <u>[Signature]</u> Date: _____ Check if self-employed: <input type="checkbox"/> PTIN: _____ |
| | Firm's name: <u>ARGY, WILTSE & ROBINSON, P.C.</u> Firm's EIN: _____ |
| | Firm's address: <u>8405 GREENSBORO DRIVE, 7TH FLOOR MCLEAN, VA 22102</u> Phone no.: <u>703-893-0600</u> |

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

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|--|--|---|
| Type or print File by the due date for filing your return. See instructions. | Name of exempt organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
| | Number, street, and room or suite no. If a P.O. box, see instructions. 1615 M STREET, N.W. | |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036-3209 | |

Enter the Return code for the return that this application is for (file a separate application for each return)

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 990-EZ | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

- The books are in the care of ▶ ASHFORD CHANCELOR

Telephone No. ▶ 202 833-2300 FAX No. ▶ 202 429-3959

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____ . If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until 05/15, 2012, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

▶ calendar year 20____ or

▶ tax year beginning 10/01, 2010, and ending 09/30, 2011.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

| | |
|--|--------------|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a \$ |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b \$ |
| c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c \$ |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EC and Form 8879-EO for payment instructions.

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

ATTACHMENT 1

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? Yes No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes No

If "Yes," describe these changes on Schedule O.

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses.

Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 21,081,328. including grants of \$ 378,075.) (Revenue \$ 30,175.)

ATTACHMENT 2

4b (Code:) (Expenses \$ 5,736,014. including grants of \$) (Revenue \$ 3,131.)

ATTACHMENT 3

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ► 26,817,342.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows 1-20b detailing various organizational requirements and reporting obligations.

Part IV Checklist of Required Schedules (continued)

| | Yes | No |
|---|-----|----|
| 21 Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i> | X | |
| 22 Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i> | X | |
| 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i> | X | |
| 24 a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25.</i> | | X |
| b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25 a Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i> | | X |
| b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i> | | X |
| 26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II.</i> | | X |
| 27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III.</i> | | X |
| 28 Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV.</i> | | X |
| 29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M.</i> | X | |
| 30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i> | | X |
| 31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i> | | X |
| 32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i> | | X |
| 33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i> | | X |
| 34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1.</i> | | X |
| 35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? | | X |
| a Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | |
| 36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i> | | X |
| 37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i> | | X |
| 38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O. | X | |

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V.

Table with columns for question number, description, and Yes/No checkboxes. Includes questions 1a through 14b regarding Form 1096, Form W-2G, backup withholding, Form W-3, unrelated business income, foreign accounts, prohibited tax shelter transactions, annual gross receipts, deductible contributions, and 501(c)(7), (12), (19), and (29) organizations.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (35), 1b (35), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 4
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you make these available. Check all that apply. [X] Own website [] Another's website [X] Upon request
19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ASHFORD CHANCELOR 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 202-833-2300

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

Check if Schedule O contains a response to any question in this Part VII X

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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 (describe hours for related organizations in Schedule O) | (C) Position (check all that apply) | | | | | | (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) EDWARD A. AMES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (2) JAMES A. BACA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (3) THOMAS A. BARRON GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (4) RICHARD BLUM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (5) DAVID BONDERMAN EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (6) WILLIAM M. BUMPERS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (7) MAJORA CARTER GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (8) BETHINE CHURCH GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (9) BERTRAM J. COHN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (10) WILLIAM J. CRONON EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (11) BRENDA S. DAVIS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (12) CHRISTOPHER J. ELLIMAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (13) JOSEPH H. ELLIS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (14) DAVID J. FIELD EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (15) GEORGE T. FRAMPTON JR GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (16) JERRY F. FRANKLIN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |

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

| (A) Name and title | (B) Average hours per week (describe hours for related organizations in Schedule O) | (C) Position (check all that apply) | | | | | | (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 | | | |
| (17) CAROLINE M GETTY EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (18) REGINALD "FLIP" HAGOOD EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (19) MARCIA KUNSTEL EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (20) KEVIN LUZAK EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (21) MOLLY MCUSIC EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (22) HEATHER KENDALL-MILLER GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (23) SCOTT A. NATHAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (24) JAIME A. PINKHAM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (25) REBECCA L. ROM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (26) THEODORE ROOSEVELT IV GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (27) PATRICK L. SMITH GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (28) CATHY DOUGLAS STONE GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| 1b Sub-total | | | | | | | 0. | 0. | 0. | |
| c Total from continuation sheets to Part VII, Section A ATTACHMENT 5 | | | | | | | 1,775,824. | 0. | 526,370. | |
| d Total (add lines 1b and 1c) | | | | | | | 1,775,824. | 0. | 526,370. | |

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **▶ 26**

| | Yes | No |
|---|-----|----|
| 3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | | X |
| 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 | X | |
| 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 | | X |

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.

| (A) Name and business address | (B) Description of services | (C) Compensation |
|----------------------------------|--------------------------------|---------------------|
| ATTACHMENT 6 | | |
| | | |
| | | |
| | | |
| | | |

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **▶ 21**

Part VIII Statement of Revenue

| | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512, 513, or 514 | |
|---|--|--|-------------|----------------------|--|---|---|--|
| Contributions, gifts, grants and other similar amounts | 1a Federated campaigns | 1a | 71,564. | | | | | |
| | b Membership dues | 1b | | | | | | |
| | c Fundraising events | 1c | | | | | | |
| | d Related organizations | 1d | | | | | | |
| | e Government grants (contributions) . . | 1e | 58,966. | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above . | 1f | 20,990,407. | | | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | | 675,320. | | | | | |
| | h Total. Add lines 1a-1f | | | 21,120,937. | | | | |
| Program Service Revenue | | Business Code | | | | | | |
| | 2a LIBRARY SUBSCRIPTION | | 900099 | 2,431. | 2,431. | | | |
| | b HONORARIA | | 900099 | 700. | 700. | | | |
| | c CONFERENCE ATTENDANCE | | 900099 | 19,700. | 19,700. | | | |
| | d CONTRACTED SERVICES OF PROGRAM STAFF | | 900099 | 10,475. | 10,475. | | | |
| | e _____ | | | | | | | |
| | f All other program service revenue | | | | | | | |
| g Total. Add lines 2a-2f | | | 33,306. | | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | | 788,007. | | | 788,007. | |
| | 4 Income from investment of tax-exempt bond proceeds . . . | | | 0. | | | | |
| | 5 Royalties | | | 0. | | | | |
| | 6a Gross Rents | (i) Real | | | | | | |
| | | (ii) Personal | | | | | | |
| | | | 22,110. | | | | | |
| | b Less: rental expenses | | | | | | | |
| | c Rental income or (loss) | | | 22,110. | | | | |
| | d Net rental income or (loss) | | | | 22,110. | | 22,110. | |
| | 7a Gross amount from sales of assets other than inventory | (i) Securities | | | | | | |
| | | (ii) Other | | | | | | |
| | | | 6,386,419. | | | | | |
| | | b Less: cost or other basis and sales expenses | | | 4,759,895. | | | |
| | c Gain or (loss) | | | 1,626,524. | | | | |
| | d Net gain or (loss) | | | | 1,626,524. | | 1,626,524. | |
| 8a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | a | | | | | | | |
| | b Less: direct expenses | b | | | | | | |
| | c Net income or (loss) from fundraising events | | | 0. | | | | |
| 9a Gross income from gaming activities. See Part IV, line 19 | a | | | | | | | |
| | b Less: direct expenses | b | | | | | | |
| | c Net income or (loss) from gaming activities | | | 0. | | | | |
| 10a Gross sales of inventory, less returns and allowances | a | | | | | | | |
| | b Less: cost of goods sold | b | | | | | | |
| | c Net income or (loss) from sales of inventory | | | 0. | | | | |
| Miscellaneous Revenue | | Business Code | | | | | | |
| 11a REFUND PRIOR YEAR EXPENDITURES | | 900099 | 18,445. | | | 18,445. | | |
| b CREDIT CARD ROYALTIES | | 900099 | 1,115,908. | | | 1,115,908. | | |
| c MAILING LIST RENTAL INCOME | | 900099 | 164,887. | | | 164,887. | | |
| d All other revenue | | 900099 | 7,621. | | | 7,621. | | |
| e Total. Add lines 11a-11d | | | 1,306,861. | | | | | |
| 12 Total revenue. See instructions | | | 24,897,745. | 33,306. | 0. | 3,743,502. | | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21 | 363,775. | 363,775. | | |
| 2 Grants and other assistance to individuals in the U.S. See Part IV, line 22 | 14,300. | 14,300. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16 | 0. | 0. | | |
| 4 Benefits paid to or for members | 0. | 0. | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,215,391. | 624,455. | 125,438. | 465,498. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | 0. | 0. | 0. | 0. |
| 7 Other salaries and wages | 13,710,033. | 12,385,797. | 631,713. | 692,523. |
| 8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions). | 813,284. | 737,554. | 39,033. | 36,697. |
| 9 Other employee benefits | 1,174,890. | 1,046,313. | 66,920. | 61,657. |
| 10 Payroll taxes | 1,186,632. | 1,032,031. | 63,843. | 90,758. |
| 11 Fees for services (non-employees): | | | | |
| a Management | 0. | 0. | 0. | 0. |
| b Legal | 43,351. | 30,779. | 2,601. | 9,971. |
| c Accounting | 188,938. | 164,376. | 9,447. | 15,115. |
| d Lobbying | 0. | 0. | 0. | 0. |
| e Professional fundraising services. See Part IV, line 17 | 296,064. | | | 296,064. |
| f Investment management fees | 188,308. | 0. | 188,308. | 0. |
| g Other | 4,174,862. | 3,130,221. | 300,077. | 744,564. |
| 12 Advertising and promotion | 0. | 0. | 0. | 0. |
| 13 Office expenses | 3,551,122. | 2,389,526. | 182,512. | 979,084. |
| 14 Information technology | 0. | 0. | 0. | 0. |
| 15 Royalties | 0. | 0. | 0. | 0. |
| 16 Occupancy | 3,075,320. | 2,468,290. | 253,596. | 353,434. |
| 17 Travel | 1,766,239. | 1,409,021. | 276,855. | 80,363. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | 0. | 0. | 0. | 0. |
| 19 Conferences, conventions, and meetings | 0. | 0. | 0. | 0. |
| 20 Interest | 0. | 0. | 0. | 0. |
| 21 Payments to affiliates | 0. | 0. | 0. | 0. |
| 22 Depreciation, depletion, and amortization | 758,213. | 535,209. | 93,256. | 129,748. |
| 23 Insurance | 56,484. | 39,871. | 6,947. | 9,666. |
| 24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24f. If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O.) | | | | |
| a MAILING LIST RENTAL | 152,641. | 89,144. | 5,292. | 58,205. |
| b PERSONNEL ACQUISITIONS | 132,727. | 94,537. | 15,888. | 22,302. |
| c MISCELLANEOUS | 233,530. | 185,321. | 18,543. | 29,666. |
| d DUES & SUBSCRIPTIONS | 96,514. | 76,822. | 10,370. | 9,322. |
| e ----- | | | | |
| f All other expenses ----- | | | | |
| 25 Total functional expenses. Add lines 1 through 24f | 33,192,618. | 26,817,342. | 2,290,639. | 4,084,637. |
| 26 Joint Costs. Check here <input checked="" type="checkbox"/> if following SOP 98-2 (ASC 958-720). Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation | 3,778,885. | 1,485,705. | 888,361. | 1,404,819. |

Part X Balance Sheet

| | | (A) Beginning of year | | (B) End of year |
|---|--|--------------------------|-------------|--------------------|
| Assets | 1 Cash - non-interest-bearing | 0. | 1 | 850. |
| | 2 Savings and temporary cash investments | 579,859. | 2 | 46,533. |
| | 3 Pledges and grants receivable, net | 10,389,628. | 3 | 4,988,211. |
| | 4 Accounts receivable, net | 795,727. | 4 | 676,761. |
| | 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | |
| | 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) | | 6 | |
| | 7 Notes and loans receivable, net | | 7 | |
| | 8 Inventories for sale or use | | 8 | |
| | 9 Prepaid expenses and deferred charges | 773,218. | 9 | 519,730. |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 7,729,404. | | |
| | b Less: accumulated depreciation | 10b 5,581,739. | | |
| | | 2,012,387. | 10c | 2,147,665. |
| | 11 Investments - publicly traded securities | 31,058,533. | 11 | 28,319,325. |
| | 12 Investments - other securities. See Part IV, line 11 | 226,995. | 12 | 226,995. |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | |
| | 14 Intangible assets | | 14 | |
| 15 Other assets. See Part IV, line 11 | 7,316,232. | 15 | 8,859,798. | |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 53,152,579. | 16 | 45,785,868. | |
| Liabilities | 17 Accounts payable and accrued expenses | 3,282,265. | 17 | 2,383,372. |
| | 18 Grants payable | | 18 | |
| | 19 Deferred revenue | 3,196,300. | 19 | 3,257,860. |
| | 20 Tax-exempt bond liabilities | | 20 | |
| | 21 Escrow or custodial account liability. Complete Part IV of Schedule D | | 21 | |
| | 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | |
| | 24 Unsecured notes and loans payable to unrelated third parties | | 24 | |
| | 25 Other liabilities. Complete Part X of Schedule D | 150,861. | 25 | 347,833. |
| | 26 Total liabilities. Add lines 17 through 25. | 6,629,426. | 26 | 5,989,065. |
| Net Assets or Fund Balances | Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | |
| | 27 Unrestricted net assets | 8,071,667. | 27 | 8,377,625. |
| | 28 Temporarily restricted net assets | 27,131,089. | 28 | 20,142,603. |
| | 29 Permanently restricted net assets | 11,320,397. | 29 | 11,276,575. |
| | Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34. | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | |
| 33 Total net assets or fund balances | 46,523,153. | 33 | 39,796,803. | |
| 34 Total liabilities and net assets/fund balances | 53,152,579. | 34 | 45,785,868. | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|----------|--|----------|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 24,897,745. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 33,192,618. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -8,294,873. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 46,523,153. |
| 5 | Other changes in net assets or fund balances (explain in Schedule O) | 5 | 1,568,523. |
| 6 | Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B)) | 6 | 39,796,803. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

| | | Yes | No |
|-----------|---|-----|----|
| 1 | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? | | X |
| 2b | Were the organization's financial statements audited by an independent accountant? | X | |
| 2c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X | |
| d | If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | X |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits. | | |

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2010

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. ▶ See separate instructions.

| | |
|---|---|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Other
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| | Yes | No |
|--|----------|----|
| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | 11g(i) | |
| (ii) A family member of a person described in (i) above? | 11g(ii) | |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? | 11g(iii) | |

h Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? | | (v) Did you notify the organization in col. (i) of your support? | | (vi) Is the organization in col. (i) organized in the U.S.? | | (vii) Amount of support |
|------------------------------------|----------|---|---|----|--|----|---|----|-------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| (A) | | | | | | | | | |
| (B) | | | | | | | | | |
| (C) | | | | | | | | | |
| (D) | | | | | | | | | |
| (E) | | | | | | | | | |
| Total | | | | | | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2010

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

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 31,040,501. | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 127,415,708. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 31,040,501. | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 127,415,708. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f), | | | | | | 24,026,863. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 103,388,845. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (f) Total |
|---|-------------|-------------|-------------|-------------|-------------|--------------|
| 7 Amounts from line 4 | 31,040,501. | 22,370,225. | 32,536,772. | 20,347,273. | 21,120,937. | 127,415,708. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 1,247,073. | 1,304,877. | 2,002,197. | 2,311,578. | 2,091,383. | 8,957,108. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) . ATCH 1 | 4,376. | 19,591. | 70,938. | 113,751. | 23,014. | 231,670. |
| 11 Total support. Add lines 7 through 10 | | | | | | 136,604,486. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 224,614. |
| 13 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 ▶ <input type="checkbox"/> | | | | | | |

Section C. Computation of Public Support Percentage

| | | |
|---|----|--------|
| 14 Public support percentage for 2010 (line 6, column (f) divided by line 11, column (f)) | 14 | 75.68% |
| 15 Public support percentage from 2009 Schedule A, Part II, line 14 | 15 | 79.07% |
| 16a 33 1/3% support test - 2010. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input checked="" type="checkbox"/> | | |
| b 33 1/3% support test - 2009. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 17a 10%-facts-and-circumstances test - 2010. If the organization did not check a box on line 13, 16a or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| b 10%-facts-and-circumstances test - 2009. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ▶ <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ▶ <input type="checkbox"/> | | |

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 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) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (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) 2006 | (b) 2007 | (c) 2008 | (d) 2009 | (e) 2010 | (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 IV.) | | | | | | |
| 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 2010 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2009 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|--|-----------|---|
| 17 Investment income percentage for 2010 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2009 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2010. 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 - 2009. 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 Supplemental Information. Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

| DESCRIPTION | 2006 | 2007 | 2008 | 2009 | 2010 | TOTAL |
|--------------------------------|---------------|----------------|----------------|-----------------|----------------|-----------------|
| REFUND PRIOR YEAR EXPENDITURES | 4,376. | 19,591. | 70,938. | 113,751. | 18,445. | 227,101. |
| OTHER INCOME | | | | | 4,569. | 4,569. |
| TOTALS | <u>4,376.</u> | <u>19,591.</u> | <u>70,938.</u> | <u>113,751.</u> | <u>23,014.</u> | <u>231,670.</u> |

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

2010

Name of the organization
THE WILDERNESS SOCIETY

Employer identification number
53-0167933

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 foundation

Check 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **THE WILDERNESS SOCIETY**

Employer identification number
53-0167933

Part I Contributors (see instructions)

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
|------------|-----------------------------------|--------------------------------|---|
| 1 | ----- ----- ----- | \$ 1,688,306. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 2 | ----- ----- ----- | \$ 795,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 3 | ----- ----- ----- | \$ 550,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 4 | ----- ----- ----- | \$ 380,386. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 5 | ----- ----- ----- | \$ 445,938. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 6 | ----- ----- ----- | \$ 120,114. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

Name of organization **THE WILDERNESS SOCIETY**

Employer identification number
53-0167933

Part II Noncash Property (see instructions)

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------|---|--|-------------------|
| 6 | 1 SH BRKA | \$ 120,114. | 11/22/2010 |
| | | | |
| | | | |
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SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities
For Organizations Exempt From Income Tax Under section 501(c) and section 527

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization is described below.**

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

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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

- 1 Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| (1) | ----- | | | |
| (2) | ----- | | | |
| (3) | ----- | | | |
| (4) | ----- | | | |
| (5) | ----- | | | |
| (6) | ----- | | | |

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group.
B Check if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|--|---|---|--|--------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|
| 1 a | Total lobbying expenditures to influence public opinion (grass roots lobbying) | 102,032. | | | | | | | | | | | | | |
| b | Total lobbying expenditures to influence a legislative body (direct lobbying) | 222,041. | | | | | | | | | | | | | |
| c | Total lobbying expenditures (add lines 1a and 1b) | 324,073. | | | | | | | | | | | | | |
| d | Other exempt purpose expenditures | 32,868,545. | | | | | | | | | | | | | |
| e | Total exempt purpose expenditures (add lines 1c and 1d) | 33,192,618. | | | | | | | | | | | | | |
| f | Lobbying nontaxable amount. Enter the amount from the following table in both columns. | 1,000,000. | | | | | | | | | | | | | |
| <table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000. | | | | | | | | | | | | | | |
| g | Grassroots nontaxable amount (enter 25% of line 1f) | 250,000. | | | | | | | | | | | | | |
| h | Subtract line 1g from line 1a. If zero or less, enter -0- | | | | | | | | | | | | | | |
| i | Subtract line 1f from line 1c. If zero or less, enter -0- | | | | | | | | | | | | | | |
| j | If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
 (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|--|------------|------------|------------|------------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2007 | (b) 2008 | (c) 2009 | (d) 2010 | (e) Total |
| 2 a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| b Lobbying ceiling amount (150% of line 2a, column (e)) | | | | | 6,000,000. |
| c Total lobbying expenditures | 330,519. | 210,428. | 344,788. | 324,073. | 1,209,808. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| f Grassroots lobbying expenditures | 236,930. | 38,440. | 132,703. | 102,032. | 510,105. |

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

Table with 3 main columns: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation... 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?

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

Table with 3 columns: Question, Yes, No. Rows include: 1 Were substantially all (90% or more) dues received nondeductible by members? 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? 3 Did the organization agree to carryover lobbying and political expenditures from the prior year?

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

Table with 3 columns: Question, Yes, No. Rows include: 1 Dues, assessments and similar amounts from members 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Part IV Supplemental Information

Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Part II-B, line 1i. Also, complete this part for any additional information.

Series of horizontal dashed lines for providing supplemental information.

Part IV Supplemental Information *(continued)*

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No. 1545-0047

2010

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.**

▶ **Attach to Form 990. ▶ See separate instructions.**

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|--|------------------------------|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | <input type="checkbox"/> Yes <input type="checkbox"/> No | |

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

| | |
|--|--|
| <input type="checkbox"/> Preservation of land for public use (e.g., recreation or education) | <input type="checkbox"/> Preservation of an historically important land area |
| <input type="checkbox"/> Protection of natural habitat | <input type="checkbox"/> Preservation of a certified historic structure |
| <input type="checkbox"/> Preservation of open space | |

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2 a |
| b Total acreage restricted by conservation easements | 2 b |
| c Number of conservation easements on a certified historic structure included in (a) | 2 c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2 d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and 170(h)(4)(B)(ii)? Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

| | | |
|--|------------|----------|
| (i) Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ | 0. |
| (ii) Assets included in Form 990, Part X | ▶ \$ _____ | 125,950. |

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

| | | |
|--|------------|----|
| a Revenues included in Form 990, Part VIII, line 1 | ▶ \$ _____ | 0. |
| b Assets included in Form 990, Part X | ▶ \$ _____ | 0. |

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 are a 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 programs
- e Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV.

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" to 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 XIV 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? Yes No

b If "Yes," explain the arrangement in Part XIV.

Part V Endowment Funds. Complete if organization answered "Yes" to 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 | 21,936,416. | 19,506,098. | 17,545,068. | | |
| b Contributions | 722,052. | 505,648. | 1,262,443. | | |
| c Net investment earnings, gains, and losses | 591,540. | 2,911,045. | 1,186,371. | | |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 954,795. | 986,375. | 487,784. | | |
| f Administrative expenses | | | | | |
| g End of year balance | 22,295,213. | 21,936,416. | 19,506,098. | | |

2 Provide the estimated percentage of the year end balance held as:

- a Board designated or quasi-endowment ▶ 37.6000 %
- b Permanent endowment ▶ 50.6000 %
- c Term endowment ▶ 11.8000 %

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i) unrelated organizations
- (ii) related organizations

| | Yes | No |
|--------|-----|----|
| 3a(i) | | X |
| 3a(ii) | | X |
| 3b | | X |

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

| Description of investment | (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 | | 2,824,176. | 2,316,202. | 507,974. |
| d Equipment | | 4,905,228. | 3,265,537. | 1,639,691. |
| e Other | | | | |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c). ▶ | | | | 2,147,665. |

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|--|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other _____ | | |
| (A) _____ | | |
| (B) _____ | | |
| (C) _____ | | |
| (D) _____ | | |
| (E) _____ | | |
| (F) _____ | | |
| (G) _____ | | |
| (H) _____ | | |
| (I) _____ | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.) | | |

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|--|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) | | |

Part IX Other Assets. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) ARTWORKS | 125,950. |
| (2) BENEFICIAL INTEREST IN ASSETS | |
| (3) HELD BY OTHERS | 8,733,848. |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | 8,859,798. |

Part X Other Liabilities. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Amount |
|---|------------|
| (1) Federal income taxes | |
| (2) CUSTODIAL FUNDS | 36,030. |
| (3) DEFERRED RENT | 311,803. |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 347,833. |

2. FIN 48 (ASC 740) Footnote. In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740).

Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements

| | | | |
|----|--|----|-------------|
| 1 | Total revenue (Form 990, Part VIII, column (A), line 12) | 1 | 24,897,745. |
| 2 | Total expenses (Form 990, Part IX, column (A), line 25) | 2 | 33,192,618. |
| 3 | Excess or (deficit) for the year. Subtract line 2 from line 1 | 3 | -8,294,873. |
| 4 | Net unrealized gains (losses) on investments | 4 | -1,410,217. |
| 5 | Donated services and use of facilities | 5 | |
| 6 | Investment expenses | 6 | |
| 7 | Prior period adjustments | 7 | |
| 8 | Other (Describe in Part XIV.) | 8 | 2,978,741. |
| 9 | Total adjustments (net). Add lines 4 through 8 | 9 | 1,568,524. |
| 10 | Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 | 10 | -6,726,349. |

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | |
|---|---|----|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 25,021,301. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | 2a | -1,410,217. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIV.) | 2d | 1,722,081. |
| e | Add lines 2a through 2d | 2e | 311,864. |
| 3 | Subtract line 2e from line 1 | 3 | 24,709,437. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 188,308. |
| b | Other (Describe in Part XIV.) | 4b | |
| c | Add lines 4a and 4b | 4c | 188,308. |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 | 24,897,745. |

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | |
|---|--|----|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 31,747,650. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIV.) | 2d | -1,256,660. |
| e | Add lines 2a through 2d | 2e | -1,256,660. |
| 3 | Subtract line 2e from line 1 | 3 | 33,004,310. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 188,308. |
| b | Other (Describe in Part XIV.) | 4b | |
| c | Add lines 4a and 4b | 4c | 188,308. |
| 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 | 33,192,618. |

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, line 8; Part XII, lines 2d and 4b; and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

SEE PAGE 5

Part XIV Supplemental Information (continued)

ORGANIZATIONS COLLECTIONS OF ART AND HOW THEY FURTHER EXEMPT PURPOSE
FORM 990, SCHEDULE D, PART III, LINE 4

A PORTFOLIO OF 76 ORIGINAL ANSEL ADAMS PHOTOGRAPHS WAS DONATED TO THE
SOCIETY IN 1985. THIS COLLECTION CANNOT BE SOLD AND MUST BE DISPLAYED IN
A MUSEUM-QUALITY SETTING, OR THE PHOTOGRAPHS MUST BE RETURNED TO THE
DONOR. THE APPRAISED VALUE OF THESE PHOTOGRAPHS IS \$3,468,000. DUE TO
THE STIPULATIONS RELATED TO THE CUSTODY OF THE PHOTOGRAPHS, THESE ASSETS
ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS. THE SOCIETY ALSO OWNS
VARIOUS OTHER DONATED ART WORK THAT IS NOT SUBJECT TO DONOR CONDITIONS.
THIS COLLECTION INCLUDED 11 ANSEL ADAMS PHOTOGRAPHS VALUES AT THEIR
ORIGINAL MARKET VALUE OF \$125,950 AS ASSESSED AT THE TIME OF THEIR
DONATION, THIS COLLECTION IS INCLUDED IN OTHER ASSETS ON THE STATEMENTS
OF FINANCIAL POSITION.

INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS
FORM 990, SCHEDULE D, PART V, LINE 4

THE SOCIETY MAINTAINS TWO TYPES OF ENDOWMENT FUNDS: GENERAL ENDOWMENT
(DONOR-RESTRICTED) AND CAPITAL RESERVES.

GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE
DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT
TO THE ORGANIZATION.

GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE
ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR
AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS

Part XIV Supplemental Information (continued)

GOVERNING THEIR USE.

THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS. SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS. WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED.

CAPITAL RESERVES IS A BOARD OF DIRECTORS DESIGNATION SET ASIDE FOR THE FINANCIAL PROTECTION OF THE SOCIETY.

OTHER EXPENSES ON RETURN BUT NOT ON BOOKS

FORM 990, SCHEDULE D, PART XIII, LINE 2D

| | |
|------------------------------------|-------------|
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | (1,256,660) |
|------------------------------------|-------------|

OTHER RECONCILING ITEMS

FORM 990, SCHEDULE D, PART XI, LINE 8

| | |
|--|-----------|
| CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS | 1,722,081 |
|--|-----------|

| | |
|------------------------------------|-----------|
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | 1,256,660 |
|------------------------------------|-----------|

| | |
|-------|-----------|
| TOTAL | 2,978,741 |
|-------|-----------|

Part XIV Supplemental Information (continued)

OTHER RECONCILING ITEMS

FORM 990, SCHEDULE D, PART XII, LINE 2D

CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 1,722,081

FIN 48 FOOTNOTE

FORM 990, SCHEDULE D, PART X, LINE 2

THE SOCIETY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE IRC. MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS. IN ACCORDANCE WITH GAAP, THE SOCIETY HAS CONCLUDED THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30, 2011. TAX YEARS FOR YEARS ENDING SEPTEMBER 30, 2008 THROUGH 2011 ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES; THERE ARE NO EXAMINATIONS BEING CONDUCTED.

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" to Form 990, Part IV, lines 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. ▶ See separate instructions.

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Fundraising Activities. Complete if the organization answered "Yes" to 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 ten 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 GORDON & SCHWENKMEYER, INC | TELEMKTG | | X | 53,447. | 58,278. | -4,831. |
| 2 YOUR VOICE MEDIA INC. | TELEMKTG | | X | 85,124. | 80,180. | 4,944. |
| 3 TELEFUND, INC | TELEMKTG | | X | 54,240. | 51,538. | 2,702. |
| 4 COMNET MARKETING GROUP, INC. | TELEMKTG | | X | 214,075. | 73,802. | 140,273. |
| 5 HARRIS DIRECT | TELEMKTG | | X | 27,709. | 20,812. | 6,897. |
| 6 SHARE GROUP, INC. | TELEMKTG | | X | 39,622. | 11,454. | 28,168. |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| Total | | | | 474,217. | 296,064. | 178,153. |

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.

AL, AK, AZ, AR, CA, CO, CT, DE, DC, FL, GA, GU, HI, ID, IL, IN,
IA, KS, KY, LA, ME, MD, MA, MI, MN, MS, MO, MT, NE, NV, NH, NJ, NM, NY, NC, ND, OH,
OK, OR, PA, RI, SC, SD, TN, TX, UT, VT, VA, WA, WV, WI, WY,

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other Events | (d) Total events |
|-----------------|---|--------------|--------------|------------------|---------------------------------|
| | | (event type) | (event type) | (total number) | (add col. (a) through col. (c)) |
| Revenue | 1 Gross receipts | | | | |
| | 2 Less: Charitable contributions | | | | |
| | 3 Gross income (line 1 minus line 2). | | | | |
| Direct Expenses | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | | | | |
| | 9 Other direct expenses | | | | |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) ▶ | | | | () |
| | 11 Net income summary. Combine line 3, column (d), and line 10 ▶ | | | | () |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/Instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
|-----------------|--|-------------------|---|-------------------|--|
| | | | | | |
| Revenue | 1 Gross revenue | | | | |
| Direct Expenses | 2 Cash prizes | | | | |
| | 3 Noncash prizes | | | | |
| | 4 Rent/facility costs | | | | |
| | 5 Other direct expenses | | | | |
| | 6 Volunteer labor | Yes _____ % No | Yes _____ % No | Yes _____ % No | |
| | 7 Direct expense summary. Add lines 2 through 5 in column (d) ▶ | | | | () |
| | 8 Net gaming income summary. Combine line 1, column d, and line 7 ▶ | | | | () |

9 Enter the state(s) in which the organization operates gaming activities: _____
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

| | | |
|-------------------------------|------------|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ _____

Address ▶ _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ _____ and the amount of gaming revenue retained by the third party ▶ \$ _____
- c If "Yes," enter name and address of the third party:

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

Director/officer Employee Independent contractor

- 17 Mandatory distributions:
 - a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
 - b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ \$ _____

Part IV Supplemental Information. Complete this part to provide the explanation required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? Yes No
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Part II can be duplicated if additional space is needed

| 1 | (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|------|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| (1) | BIODIVERSITY CONSERVATION ALLIANCE P.O. BOX 1512 LARAMIE, WY 82073 | 83-0308354 | 501(C)(3) | 23,000. | | | | CONSERVATION PROJECT |
| (2) | CENTER FOR NATIVE ECOSYSTEMS 1536 WYNKOOP STREET, STE 301 | 84-1512852 | 501(C)(3) | 36,800. | | | | CONSERVATION PROJECT |
| (3) | FRIENDS OF NEVADA WILDERNESS P.O. BOX 9754 RENO, NV 89507 | 88-0211763 | 501(C)(3) | 7,500. | | | | CONSERVATION PROJECT |
| (4) | HELLS CANYON PRESERVATION COUNCIL P.O. BOX 2768 LAGRAMDE, OR 97850-7768 | 93-0999442 | 501(C)(3) | 10,000. | | | | CONSERVATION PROJECT |
| (5) | NEVADA WILDERNESS PROJECT 8550 WHITE FIR STREET RENO, NV 89523 | 88-0442530 | 501(C)(3) | 7,500. | | | | CONSERVATION PROJECT |
| (6) | IDAHO CONSERVATION LEAGUE 710 N 6TH STREET BOISE, ID 83702 | 82-6042478 | 501(C)(3) | 7,500. | | | | CONSERVATION PROJECT |
| (7) | OREGON NATURAL DESERT ASSOCIATION 33 NW IRVING AVENUE BEND, OR 97701 | 94-3098621 | 501(C)(3) | 7,500. | | | | CONSERVATION PROJECT |
| (8) | ROCKY MOUNTAIN FRONT WEED ROUNDTABLE INC. P.O. BOX 663 CHOTEAU, MT 56722 | 27-2846730 | 501(C)(3) | 10,000. | | | | CONSERVATION PROJECT |
| (9) | SHEEP MOUNTAIN ALLIANCE 225 E GALENA TELLURIDE, CO 81435 | 84-1294894 | 501(C)(3) | 18,400. | | | | CONSERVATION PROJECT |
| (10) | WILDERNESS WORKSHOP THIRD STREET CENTER, SUITE 27 | 74-1900412 | 501(C)(3) | 40,000. | | | | CONSERVATION PROJECT |
| (11) | WORLD MEDIA FOUNDATION LIVING ON EARTH, 20 HOLLAND ST, STE 408 | 04-3150786 | 501(C)(3) | 10,000. | | | | CONSERVATION PROJECT |
| (12) | YOSEMITE FUND 155 MONTGOMERY STREET, STE 1104 | 94-3058041 | 501(C)(3) | 140,310. | | | | CONSERVATION PROJECT |

- 2** Enter total number of section 501(c)(3) and government organizations **12.**
- 3** Enter total number of other organizations **0.**

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2010)

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|--|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP | 2. | 10,000. | | | SEE PART IV |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PROCEDURES FOR MONITORING GRANTS

SCHEDULE I, PART I, QUESTION 2

GRANT AND AWARDS TO OTHER ORGANIZATIONS ARE REQUESTED AND MONITORED BY

PROGRAM STAFF. THE PRIMARY CRITERION FOR AN AWARD IS THE RECEIVING

ORGANIZATION WILL USE THE FUNDS FOR ACTIVITIES WHICH SUPPORT THE

SOCIETY'S MISSION. A REQUEST IS SENT TO THE TWS FINANCE DEPARTMENT WITH

THE FOLLOWING INFORMATION: 1) AN OUTLINE OF THE PROPER USE OR

RESTRICTIONS FOR THE USE OF THE FUNDS BY THE RECEIVING ORGANIZATION; 2) A

LIST OF THE RECEIVING ORGANIZATIONS BOARD MEMBERSHIP; 3) ANY KNOWN

OVERLAPPING BOARD OR EMPLOYEE RELATIONSHIPS; 4) A STATEMENT FROM THE TWS

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

STAFF MEMBER STATING THAT THERE EXISTS NO CONFLICT OF INTEREST BETWEEN THE SOCIETY AND THE RECEIVING ORGANIZATION, BETWEEN THE EMPLOYEE OR THEIR FAMILY MEMBERS AND THE RECEIVING ORGANIZATION, OR ANY BOARD MEMBER; 5) A COPY OF THE RECEIVING ORGANIZATION'S ANNUAL BUDGET. FINANCE REVIEWS THE INFORMATION TO ENSURE MISSION COMPLIANCE, THAT THERE ARE NO CONFLICTS OF INTEREST, AND THAT CONFLICTS OF INTEREST OR OVERLAPPING CONTROL. ONCE THE FUNDING IS APPROVED AND ISSUED, PROGRAM STAFF MONITOR THAT THE RECEIVING ORGANIZATION HAS USED THE FUNDS AS AGREED. ON ACCEPTANCE OF PROPOSAL, THE RECEIVING ORGANIZATION MUST SIGN A LETTER OF AGREEMENT, WHICH OUTLINES THE TERMS AND CONDITIONS FOR THE AWARD, RESTRICTIONS

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

PLACED ON THE USE OF THE FUNDS, INCLUDING LOBBYING, AND DUE DATES FOR INTERIM AND FINAL NARRATIVE (TANGIBLE SUCCESSES ACHIEVED WITH FUNDING, UNEXPECTED CHALLENGES ENCOUNTERED, AND FUTURE INITIATIVES IN THE ARE FUNDED) AND FINANCIAL ACCOUNTING. THE NARRATIVE AND ACCOUNTING ARE REVIEWED BY TWS PROGRAM STAFF TO ENSURE PROPER USE AND ACCOMPLISHMENT OF GOALS. WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENTS MAY BE REQUESTED.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|---------------------------------|--------------------------|--------------------------|-----------------------------------|---|--|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| 5 | | | | | |
| 6 | | | | | |
| 7 | | | | | |

Part IV Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information.

GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP DESCRIPTION

SCHEDULE I, PART III, LINE 1

THE GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP IS AVAILABLE TO QUALIFIED GRADUATE STUDENTS. IT IS CREATED IN HONOR OF GLORIA BARRON, DEDICATED EDUCATOR AND TIRELESS ADVOCATE FOR WILDERNESS PROTECTION, AND ADMINISTERED BY THE WILDERNESS SOCIETY, A LEADING CONSERVATION ORGANIZATION BASED IN WASHINGTON, D.C. THE SCHOLARSHIP SEEKS TO ENCOURAGE INDIVIDUALS WHO HAVE THE POTENTIAL TO MAKE A SIGNIFICANT POSITIVE DIFFERENCE IN THE LONG TERM PROTECTION OF WILDERNESS IN THE UNITED STATES.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2010

Open to Public Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment from the organization or a related organization?
- b** Participate in, or receive payment from, a supplemental nonqualified retirement plan?
- c** Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization?
- b** Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

| | Yes | No |
|-----------|-----|----|
| 1b | X | |
| 2 | X | |
| 4a | | X |
| 4b | X | |
| 4c | | X |
| 5a | | X |
| 5b | | X |
| 6a | | X |
| 6b | | X |
| 7 | | X |
| 8 | | X |
| 9 | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2010

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

| (A) Name | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported in prior Form 990 or Form 990-EZ |
|----------------------------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|--|
| | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| 1 ASHFORD CHANCELOR | (i) 164,585. | 0. | 8,212. | 13,808. | 37,239. | 223,844. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 2 WILLIAM H MEADOWS | (i) 306,496. | 0. | 6,197. | 20,586. | 69,349. | 402,628. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 3 SHEILA DENNIS | (i) 162,830. | 0. | 0. | 12,814. | 36,842. | 212,486. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 4 ANN MORGAN | (i) 160,102. | 0. | 0. | 12,852. | 36,225. | 209,179. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 5 AMY VEDDER | (i) 226,750. | 0. | 1,500. | 18,260. | 51,305. | 297,815. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 6 LESLIE JONES | (i) 147,657. | 0. | 0. | 11,732. | 33,409. | 192,798. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 7 SARA BARTH | (i) 160,130. | 0. | 0. | 12,737. | 36,842. | 209,709. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 8 SPENCER PHILLIPS | (i) 149,925. | 0. | 0. | 11,888. | 33,922. | 195,735. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 9 PAULA YABAR | (i) 278,776. | 0. | 2,664. | 13,483. | 63,077. | 358,000. | 0. |
| | (ii) 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| 10 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 11 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 12 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 13 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 14 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 15 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |
| 16 | (i) --- | --- | --- | --- | --- | --- | --- |
| | (ii) --- | --- | --- | --- | --- | --- | --- |

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN

FORM 990, SCHEDULE J, LINE 4B

THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN, WHICH WAS AUTHORIZED BY

THE COUNCIL, IS ONLY AVAILABLE TO THE SENIOR VICE PRESIDENTS AND THE

PRESIDENT. CURRENTLY, ONLY THE PRESIDENT WILLIAM MEADOWS IS ENROLLED IN

THE PLAN.

**SCHEDULE M
(Form 990)**

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

OMB No. 1545-0047

2010

**Open To Public
Inspection**

Name of the organization
THE WILDERNESS SOCIETY

Employer identification number
53-0167933

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|-------------------------------|--|--|--|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 54 . | 627,459 . | FMV |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ (ATCH 1) | | 1 . | 47,861 . | |
| 26 Other ▶ () | | | | |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

| | Yes | No |
|---|-----|----|
| 30 a During the year, did the organization receive by contribution any property reported in Part I, line 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? | X | |
| 32 a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | X |
| b If "Yes," describe in Part II. | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2010)

Part II **Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.ATTACHMENT 1SCHEDULE M, PART I - OTHER NONCASH CONTRIBUTIONS

| <u>DESCRIPTION</u> | <u>(A) CHECK</u> | <u>(B) NUMBER OF CONTRIBUTIONS</u> | <u>(C) REVENUES REPORTED</u> | <u>(D) METHOD OF DETERMINING</u> |
|------------------------|------------------|------------------------------------|------------------------------|----------------------------------|
| DONATED FLIGHT TICKETS | X | 1. | 47,861. | FMV |
| TOTALS | | <u>1.</u> | <u>47,861.</u> | |

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

THE WILDERNESS SOCIETY

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

2010

**Open to Public
Inspection**

Employer identification number

53-0167933

AVAILABILITY OF OTHER DOCUMENTS

FORM 990, PART VI, LINE 19

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990'S AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990 REVIEW PROCESS

FORM 990, PART VI, LINE 11B

AFTER PREPARATION FOR THE FORM 990 IS COMPLETE, IT IS EXAMINED BY THE VICE PRESIDENT, FINANCE FOR ACCURACY AND COMPLETENESS. THE DOCUMENT IS THEN PRESENTED TO AND REVIEWED BY THE PRESIDENT AND VICE PRESIDENTS OF CONSERVATION, MEMBERSHIP AND DEVELOPMENT, AND FINANCE AND ADMINISTRATION. THE AUDIT COMMITTEE WILL THEN MEET TO INSPECT THE 990. SUBSEQUENT TO THE AUDIT COMMITTEE MEETING, THE 990 IS POSTED ON THE ORGANIZATION'S INTRANET PAGE FOR REVIEW BY THE GOVERNING COUNCIL BEFORE IT IS FILED.

CONFLICTS OF INTEREST

FORM 990, PART VI, LINE 12C

TWS HAS A WRITTEN CONFLICT OF INTEREST POLICY. IT IS REVIEWED ANNUALLY. ALL STAFF, INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES MUST CERTIFY ANNUALLY THAT THEY HAVE READ AND FAMILIARIZED THEMSELVES WITH THE POLICY, AND DISCLOSE ANY POTENTIAL CONFLICTS. STAFF DISCLOSE WHETHER THEY SERVE AS BOARD MEMBERS OR OFFICERS OF ANY OTHER ORGANIZATION WHOSE MISSION AND ACTIVITIES MAY OVERLAP WITH THOSE OF TWS. FURTHER, ALL

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES DISCLOSE ANY RELATED ORGANIZATION RELATIONSHIPS. COMPLETED FORMS ARE REVIEWED AND ANY POTENTIAL CONFLICTS ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO ENFORCE COMPLIANCE WITH THE POLICY. ALL STAFF INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, NOTIFY THE ORGANIZATION IF CIRCUMSTANCES CHANGE THROUGHOUT THE COURSE OF THE FISCAL YEAR AND THE CHANGED CIRCUMSTANCES ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO REMAIN IN COMPLIANCE WITH THE POLICY.

DETERMINING COMPENSATION

FORM 990, PART VI, LINE 15

EXECUTIVE COMPENSATION IS REVIEWED ANNUALLY AT THE WILDERNESS SOCIETY BY AN INDEPENDENT CONSULTING FIRM. THE FIRM REGULARLY PROVIDES EXECUTIVE COMPENSATION STUDIES FOR TAX EXEMPT ENTITIES. THE MARKET ANALYSIS PRICED OUR POSITIONS USING COMPARABLE INDUSTRIES, MATCHED POSITIONS DIRECTLY TO SALARY DATA, AND UTILIZED A 'TOP PAID' ANALYSIS IN THE FINAL REPORT OF MARKET FINDINGS. THE GOVERNING COUNCIL SPECIFICALLY REVIEWS THE COMPENSATION OF "DISQUALIFIED INDIVIDUALS" AND THE VICE PRESIDENT OF FINANCE AND ADMINISTRATION. BASED ON THE MARKET FINDINGS, THE COUNCIL REVIEWS AND APPROVES THE COMPENSATION OF THESE POSITIONS EACH YEAR.

OTHER CHANGES IN NET ASSETS

FORM 990, PART XI, LINE 5

| | |
|--|-------------|
| NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS | (1,410,217) |
| CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS | 1,722,081 |
| UNCOLLECTIBLE ALLOWANCE ADJUSTMENT | 1,256,660 |

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ROUNDING (1)

TOTAL 1,568,523

FUNDRAISERS PURSUANT TO AGREEMENTS

FORM 990, SCHEDULE G, PART I, QUESTION 2(B)

TWS USES DIFFERENT TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUNDRAISING CAMPAIGNS. WE EXPECT GAINS FROM VENDORS WHO DO RENEWAL CALLING SUCH AS SHARE AND VENDORS WHO DO APPEALS TO EXISTING MEMBERSHIP SUCH AS HARRIS. BOTH PRODUCE SUBSTANTIAL, IMMEDIATE NET INCOME. OTHER TELEMARKETING VENDORS WORK ON DIFFERENT CAMPAIGNS SUCH AS LAPSED REINSTATEMENTS AND SUSTAINER (MONTHLY GIVING) INVITES WHICH ARE, BY DESIGN, BUDGETED AT AN INITIAL NET LOSS. THEY ARE INTENDED TO REINSTATE LAPSED DONORS OR RECRUIT MONTHLY CONTRIBUTORS AND NET INCOME IN FUTURE MONTHS AFTER THE CAMPAIGNS ARE OVER.

FAMILY/BUSINESS RELATIONSHIPS

FORM 990, PART VI, LINE 2

RELATIONSHIP SCHEDULE:

NAME OF OFFICER, DIRECTOR, ETC: DAVID BONDERMAN
 NAME OF OTHER PARTY: RICHARD BLUM
 TITLE OR ROLE: EXECUTIVE COMMITTEE MEMBER
 RELATIONSHIP: BUSINESS RELATIONSHIP

NAME OF OFFICER, DIRECTOR, ETC: RICHARD BLUM

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

NAME OF OTHER PARTY: DAVID BONDERMAN
 TITLE OR ROLE: GOVERNING COUNCIL MEMBER
 RELATIONSHIP: BUSINESS RELATIONSHIP

ATTACHMENT 1

FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE MISSION OF THE WILDERNESS SOCIETY IS TO PROTECT WILDERNESS AND
 INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES.

WHY WE'RE EFFECTIVE

WE WORK TO PRESERVE THE WILDEST AND MOST ECOLOGICALLY IMPORTANT
 LANDSCAPES IN THE COUNTRY, THE 623 MILLION ACRES OF WILD PUBLIC LANDS
 THAT BELONG TO EVERY AMERICAN; WE DEVELOP, ANALYZE AND APPLY THE BEST
 AVAILABLE SCIENCE TO DETERMINE WHERE AND HOW WE WILL WORK; AND WE
 ADVOCATE NATIONAL POLICIES THAT WILL ENSURE THE HEALTH AND VIABILITY
 OF OUR PUBLIC LANDS AND WATERS IN PERPETUITY. WE ACHIEVE LASTING,
 MEASURABLE RESULTS ON A LANDSCAPE SCALE THROUGH THE DESIGNATION OF
 NEW WILDERNESS AREAS (WILDERNESS PROHIBITS MECHANICAL DEVICES, HUMAN
 STRUCTURES, RESOURCE EXTRACTION AND ALL ACTIVITIES HARMFUL TO THE
 LAND), BY ACHIEVING OTHER TYPES OF LAND DESIGNATIONS TO PROTECT
 PLANTS AND ANIMALS, AND BY FORGING ALLIANCES WITH GROUPS OF LOCAL
 STAKEHOLDERS WHO WILL WORK WITH US TO DEVELOP CREATIVE, HUMANE
 SOLUTIONS FOR THE STEWARDSHIP AND RESTORATION OF OUR SHARED NATURAL
 HERITAGE. TO DATE, THE WILDERNESS SOCIETY'S WORK HAS RESULTED IN A
 TOTAL OF 109 MILLION ACRES OF WILDERNESS PERMANENTLY PROTECTED WITHIN

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

THE NATIONAL WILDERNESS PRESERVATION SYSTEM.

OUR BACKGROUND

FOUNDED IN 1935 AND NOW WITH MORE THAN 500,000 ACTIVE MEMBERS AND SUPPORTERS NATIONWIDE, THE WILDERNESS SOCIETY IS THE LEADING PUBLIC LANDS CONSERVATION ORGANIZATION IN THE UNITED STATES. OUR GOAL IS TO MAKE CERTAIN THIS COUNTRY'S PUBLICLY OWNED LANDS-ITS NATIONAL PARKS, NATIONAL FORESTS, NATIONAL WILDLIFE REFUGES AND THE WIDE OPEN SPACES MANAGED BY THE BUREAU OF LAND MANAGEMENT IN THE WEST-REMAIN INTACT AND AVAILABLE FOR THE AMERICAN PEOPLE TO ENJOY.

OUR VALUES

INTEGRITY BEYOND REPROACH, LEADERSHIP, A PROFOUND APPRECIATION OF AND RESPONSIBILITY TO OUR MEMBERS, AND A DEEP RESPECT FOR THE NEEDS, VALUES AND TRADITIONS OF LOCAL COMMUNITIES. WE PRIZE WILDERNESS IN ITS OWN RIGHT AND FOR PROVIDING PURE AIR AND WATER, ESSENTIAL HABITAT FOR DIVERSE PLANT AND ANIMAL SPECIES, AND SPIRITUAL RENEWAL. WE ARE COMMITTED TO BUILDING PARTNERSHIPS AND TO SHARING SOUND ECONOMIC, SCIENTIFIC, LEGAL AND POLICY INFORMATION IN SUPPORT OF WILDERNESS CONSERVATION WITH THOSE PARTNERS. WE LEAD PRINCIPLED, EFFECTIVE, ON-THE-GROUND CAMPAIGNS THAT MOBILIZE THE PUBLIC AND LOCAL, STATE AND NATIONAL DECISION-MAKERS TO PROTECT VULNERABLE WILD PLACES BEFORE DAMAGE CAN OCCUR. WE CELEBRATE AND ENCOURAGE THE DEEP CONNECTIONS BETWEEN PEOPLE AND PLACE FORGED BY SUSTAINABLE RECREATION ON THE

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 1 (CONT'D)FORM 990, PART III, LINE 1 - ORGANIZATION'S MISSION

PUBLIC LANDS. WE ENSURE THAT RESOURCE EXTRACTION, ENERGY DEVELOPMENT, AND OTHER POTENTIALLY HARMFUL ACTIVITIES OCCUR ONLY IN APPROPRIATE, NON-WILDERNESS PLACES AND IN A MANNER THAT BEST CONSERVES THE LAND AND ITS RESOURCES.

ATTACHMENT 2FORM 990, PART III - PROGRAM SERVICE, LINE 4A

THE WILDERNESS SOCIETY IS OPERATING IN AN ERA OF TREMENDOUS CHANGE, AND RARELY HAVE THE STAKES EVER BEEN HIGHER FOR OUR NATION'S NATURAL LEGACY. POLITICS, ECONOMICS, AND CLIMATE CHANGE ARE COMPLICATING THE ENVIRONMENTAL PICTURE AND MULTIPLYING THE CHALLENGES WE FACE.

WHEN IT COMES TO OUR WILDERNESS PROTECTION WORK, PROGRESS IS ALWAYS AN EBB AND FLOW. THE OMNIBUS PUBLIC LAND MANAGEMENT ACT OF 2009 CREATED MORE THAN TWO MILLION ACRES OF NEW WILDERNESS, AND SINCE THAT TIME TWS HAS BEEN LEADING THE EFFORT TO BUILD THE PIPELINE WITH DOZENS OF NEW WILDERNESS PROPOSALS THAT AWAIT PASSAGE.

THE EXAMPLES HIGHLIGHTED BELOW REPRESENT ONLY A SMALL PORTION OF THE ORGANIZATION'S OUTSTANDING ACHIEVEMENTS DURING THE PAST TWELVE MONTHS, DIVIDED INTO TWO SECTIONS CALLED "WILDERNESS AND WILD LANDS CONSERVATION" AND "OUTREACH AND COMMUNICATIONS." THIS DIVISION MIRRORS THE TWO HALVES OF THE WILDERNESS SOCIETY'S

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

ATTACHMENT 2 (CONT'D)

MISSION STATEMENT: "TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES." IF YOU WOULD LIKE MORE INFORMATION ON ANY OF THESE ISSUES OR OUR REGIONAL CAMPAIGNS, PLEASE VISIT OUR WEB SITE [WWW.WILDERNESS.ORG].

WILDERNESS AND WILD LANDS CONSERVATION

MORE THAN 200 PEOPLE CAME TO DC IN SEPTEMBER TO PARTICIPATE IN GREAT OUTDOORS AMERICA WEEK. INVOLVING A TREMENDOUS COALITION OF VOICES, THE EVENT SUCCEEDED IN NOT ONLY ESTABLISHING A VISIBLE PRESENCE ON CAPITOL HILL TO ADVOCATE FOR PUBLIC LAND CONSERVATION, ACCESS, AND FUNDING, BUT ALSO ENGAGING A NUMBER OF SENATORS, REPRESENTATIVES, AND ADMINISTRATION OFFICIALS TO EMPOWER THEIR LEADERSHIP ON OUR ISSUES.

ON OCT. 17, THE BLM RELEASED A FINAL RESOURCE MANAGEMENT PLAN AND RECORD OF DECISION FOR THE LITTLE SNAKE REGION THAT PROTECTS THE VERMILLION BASIN. WHILE THERE IS STILL WORK TO BE DONE - AROUND 90% OF THE RESOURCE AREA REMAINS OPEN TO OIL AND GAS DRILLING - THE PLAN IS A HUGE IMPROVEMENT.

AFTER YEARS OF BATTLES, THE 10TH CIRCUIT U.S. COURT OF APPEALS ISSUED A UNANIMOUS AND FORCEFUL DECISION UPHOLDING THE 2001 ROADLESS AREA CONSERVATION RULE. THE OCT. 21 RULING BARS LOGGING AND ROADBUILDING ON SOME 49 MILLION ACRES OF UNDEVELOPED - BUT

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 2 (CONT'D)

UNPROTECTED - NATIONAL FOREST LANDS. WHILE WE STILL HAVE A WAYS TO GO TO RESTORE PROTECTION FOR THE EXEMPTED ROADLESS AREAS IN IDAHO, THIS IS A HUGE VICTORY.

THE HOUSE NATURAL RESOURCES COMMITTEE'S SUBCOMMITTEE ON NATIONAL PARKS, FORESTS AND PUBLIC LANDS RECENTLY HELD A HEARING IN LATE OCTOBER ON SIX WILDERNESS BILLS THAT WOULD INCREASE PROTECTIONS FOR MORE THAN 100,000 ACRES OF WILD LANDS IN WASHINGTON, OREGON, CALIFORNIA, NEW MEXICO, AND MICHIGAN.

FORT MONROE IN HAMPTON, VA WAS OFFICIALLY DESIGNATED AS THE NATION'S NEWEST NATIONAL MONUMENT ON NOV. 1. WHILE TWS USUALLY WORKS TO PROTECT WILDLANDS, THIS CIVIL WAR FORT IS SPECIAL TO US, BOTH FOR ITS HISTORIC VALUE AND SURROUNDING WETLANDS, AND BECAUSE IT IS THE FIRST NATIONAL MONUMENT TO BE CREATED BY PRESIDENT OBAMA USING THE ANTIQUITIES ACT OF 1906 - AN IMPORTANT AND BIPARTISAN PRESIDENTIAL CONSERVATION TOOL. THE PRESIDENT'S ACTIONS ARE A WELCOME SIGN, AS THERE ARE OTHER UNPROTECTED WILDLANDS THAT MAY BENEFIT FROM NATIONAL MONUMENT DESIGNATION.

ON NOV. 14, INTERIOR SECRETARY KEN SALAZAR ANNOUNCED THE DESIGNATION OF FOUR NEW WILDLIFE REFUGES THAT SPAN FIVE STATES - KANSAS, NORTH DAKOTA, SOUTH DAKOTA, PENNSYLVANIA, AND CALIFORNIA - AND DIVERSE ECOSYSTEMS. REFUGE DESIGNATION FOR THESE CRITICAL LANDS AND WATERS WILL PROTECT THEM AS IMPORTANT PIECES OF

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 2 (CONT'D)

AMERICA'S NATURAL HERITAGE FOR THE ECONOMIC BENEFIT AND
RECREATIONAL ENJOYMENT OF GENERATIONS TO COME.

ATTACHMENT 3FORM 990, PART III - PROGRAM SERVICE, LINE 4B

WE CONTINUE TO DRIVE STRONG STAKEHOLDER AND SUPPORTER ENGAGEMENTS
THROUGH MULTI-CHANNEL OUTREACH. THE FOLLOWING ARE JUST A FEW
EXAMPLES FROM 2011:

ONE OF TWS' LEGISLATIVE GOALS IS ITS WORK IN CALIFORNIA'S SAN
GABRIEL MOUNTAINS AROUND THE NATIONAL RECREATION AREA DESIGNATION.
IN MID-OCTOBER THE NATIONAL PARKS SERVICE RELEASED A DRAFT REPORT
OF THE SAN GABRIEL MOUNTAINS AND WATERSHED SPECIAL RESOURCE STUDY.
THIS WAS A SIGNIFICANT VICTORY AS NPS RESPONDED TO THOUSANDS OF
COMMENTS TWS HELPED GENERATE AND INTRODUCED A NEW 'ALTERNATIVE D';
THAT REFLECTED OUR CONSERVATION VISION OF A MORE AMBITIOUS
NATIONAL RECREATION AREA THAT WOULD MAXIMIZE BENEFITS FOR THE
MOUNTAIN RANGE AS WELL AS SURROUNDING COMMUNITIES EXTENDING ALONG
THE URBAN SAN GABRIEL RIVER AND INCORPORATING A STATE PARK. WITH
OUR SAN GABRIEL MOUNTAINS FOREVER COALITION PARTNERS, TWS TURNED
OUT APPROXIMATELY 500 SUPPORTERS TO THE PUBLIC HEARINGS. THE
MEETINGS REFLECTED THE DIVERSITY OF THE SURROUNDING COMMUNITIES,
YOUNG CHILDREN WITH THEIR FAMILIES, LOCAL MAYORS AND BUSINESS
OWNERS.

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 3 (CONT'D)

TWS HAS ALSO LAUNCHED THE SOUTHERN APPALACHIAN WILDERNESS STEWARDS PROGRAM. IN OUR FIRST 12 MONTHS SAWS GENERATED OVER 1,500 HOURS OF VOLUNTEER SERVICE IN OVER 10 DIFFERENT WILDERNESS AREAS OF THE SOUTHERN APPALACHIANS. THE PROGRAM HELPED RESTORE OVER 25 MILES OF WILDERNESS TRAILS, TRAINED AND CERTIFIED OVER 25 NEW VOLUNTEERS THROUGH OUR WILDERNESS TRAILS STEWARDSHIP CONFERENCE, AND HOSTED WORK CREWS FROM 4 DIFFERENT UNIVERSITY PROGRAMS. IT ALSO ENGAGED OVER 100 NEW WILDERNESS STEWARDS AND GATHERED DATA ACROSS 10 WILDERNESS AREAS AS PART OF THE USFS CHIEF'S CHALLENGE PROGRAM IN ANTICIPATION OF THE 50TH ANNIVERSARY OF THE WILDERNESS ACT. IMPORTANTLY, SAWS ALSO CONVERTED ACTIVE OPPOSITION TO THE TENNESSEE WILDERNESS ACT OF 2011 INTO A NEUTRAL OR SUPPORTING POSITION.

OUR ORGANIZATION ALSO PLAYED A KEY ROLE IN MOBILIZING AGAINST ADDITIONAL DRILLING ON PUBLIC LANDS IN 2011. TWS DID OUTREACH AND WITH KEY STAKEHOLDERS ON CAPITOL HILL, AS WELL AS WORK DRIVING THE SUCCESSFUL MESSAGING AROUND THESE ISSUES, INCLUDING PUBLIC EDUCATION EFFORTS. EFFORTS IN CONGRESS TO EXPAND DRILLING ON PUBLIC LANDS WERE DEFEATED IN 2011.

IN APRIL OF 2011 THE WILDERNESS SOCIETY LAUNCHED A NATIONAL

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

ATTACHMENT 3 (CONT'D)

MARKETING CAMPAIGN CALLED MY WILDERNESS. HIGHLIGHTING PERSONAL STORIES, EXPERIENCES AND MEMORIES OF SPECIAL PLACES, THE CAMPAIGN DIRECTLY CONNECTS WITH THE SECOND HALF OF OUR MISSION-TO INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES. IN ADDITION TO INSPIRING AMERICANS, THE CAMPAIGN IS DESIGNED TO BRING OUR BRAND ESSENCE TO LIFE, ENGAGE NEW AUDIENCES, GROW OUR MEMBER AND SUPPORTER BASE, ENHANCE OUR SOCIAL MARKETING COMMUNITY AND INCREASE WEBSITE VISITATION. STORIES HAVE INCLUDED A WILDLIFE PHOTOGRAPHER AND WILDERNESS MOM PLAYING WITH HER CHILDREN IN THE SNOW IN MILL CREEK, MONTANA; THE POEM "FOREST" BY DAVE MATTHEWS; A GROUP OF DIVERSE URBAN YOUTH EXPLORING THE NORTH CASCADES AND BETTY WHITE REMINISCING ABOUT HER SOUL PLACE IN THE HIGH SIERRAS.

TO DATE THE CAMPAIGN HAS GENERATED OVER 140,000 ENGAGEMENTS INCLUDING CONTEST ENTRIES, PLEDGES, DOWNLOADS AND USER GENERATED CONTENT SUBMISSIONS. USER GENERATED CONTENT SUBMISSIONS HAVE INCLUDED PHOTOS, POEMS, STORIES AND CAMPFIRE RECIPES. CLOSE TO 15,000 NEW INDIVIDUALS HAVE SIGNED UP FOR WILD ALERTS. THE VIDEOS HAVE RUN ON TV LAND, TRANSWORLD SNOWBOARDING, DISCOVERY CHANNEL AND FUEL TV AMONG OTHERS.

THE WILDERNESS SOCIETY'S PUBLIC COMMUNICATIONS INCLUDES A HIGHLY

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 3 (CONT'D)

RESPECTED WEBSITE, MEMBERSHIP NEWSLETTERS PUBLISHED THREE TIMES A YEAR, TARGETED E-NEWSLETTERS AND ACTION EMAILS AND A VIBRANT SOCIAL MEDIA NETWORK REACHING MORE THAN 35,000 SUPPORTERS ON TWITTER AND FACEBOOK. WE HAD APPROXIMATELY 440,000 EMAIL SUBSCRIBERS LAST YEAR WHO RECEIVED WEEKLY TARGETED EMAILS ON A RANGE OF ISSUES LINKED TO CAMPAIGNS, LEGISLATION, LOCAL CONSERVATION QUESTIONS AND LAND-AGENCY POLICIES. OUR ADVOCACY EMAILS FREQUENTLY GENERATED TENS OF THOUSANDS OF RESPONSES TO DECISION-MAKERS EACH MONTH, ADVANCING OUR LOCAL AND NATIONAL ADVOCACY WORK.

OUR RECRUITMENT CAMPAIGNS, TARGETED SEARCH ENGINE MARKETING CAMPAIGNS AND SOCIAL MEDIA CAMPAIGNS INCREASED OUR WEBSITE TRAFFIC FROM 42,000 MONTHLY VISITORS TO 57,000 MONTHLY VISITORS. WE CONTINUED TO SEE SEARCH ENGINE TRAFFIC GROWTH BY DEVELOPING NEW CONTENT TO ATTRACT NEW AUDIENCES. OUR FACEBOOK ENGAGEMENT GREW FROM 3,660 INTERACTIONS (LIKES AND COMMENTS) IN 2010 TO 18,000 IN 2011, NEARLY 400% IN GROWTH. IN ADDITION, THE WILDERNESS SOCIETY INITIATED A WEBSITE REDESIGN PROJECT TO IMPROVE THE USER EXPERIENCE FOR ITS WEBSITE VISITORS, WITH TENTATIVE LAUNCH IN SUMMER 2012.

ATTACHMENT 4

FORM 990, PART VI, LINE 17 - STATES

AL, AK, AZ, AR, CA, CO, CT,

FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI,

MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA,

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

ATTACHMENT 4 (CONT'D)

FORM 990, PART VI, LINE 17 - STATES

RI, SC, TN, UT, VA, WA, WV, WI,

ATTACHMENT 5

PART VII - CONTINUATION OF OFFICERS, DIRECTORS, TRUSTEES,
KEY EMPLOYEES AND HIGHEST COMPENSATED EMPLOYEES

(1)=IND.TRUSTEE/DIR. (2)=INS.TRUSTEE (3)=OFFICER (4)=KEY EMP. (5)=HIGHEST COMP. (6)=FORMER

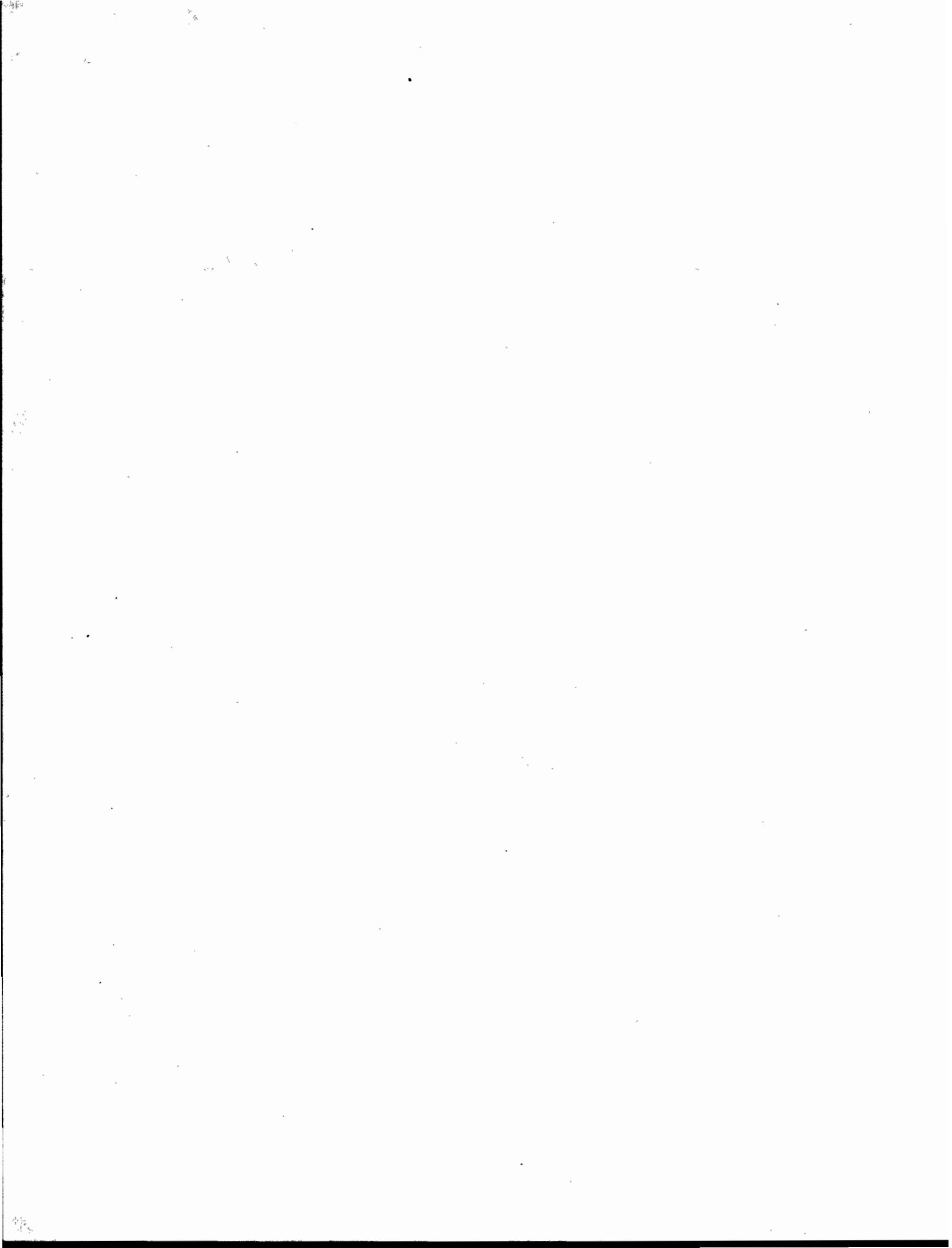
| (A) NAME AND TITLE | (B) HOURS | (C) POSITION | | | | | | COMPENSATION FROM | | |
|--|-----------|--------------|-----|-----|-----|-----|----------|-------------------|---------------|-----------|
| | | (1) | (2) | (3) | (4) | (5) | (6) | (D) ORG. | (E) REL. ORG. | (F) OTHER |
| 29 DOUGLAS W. WALKER EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 30 HANSJORG WYSS EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 31 DAVE MATTHEWS GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 32 CRANDALL BOWLES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 33 SARA VERA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 34 CHRISTINA WONG GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 35 MICHAEL MANTELL EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 36 DAVID GETCHES EXECUTIVE COMMITTEE MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| 37 ASHFORD CHANCELOR VICE PRESIDENT, CFO | 38.00 | | X | | | | 172,797. | 0. | | 51,047. |
| 38 WILLIAM H MEADOWS PRESIDENT | 38.00 | | X | | | | 312,693. | 0. | | 89,935. |
| 39 AMY VEDDER SENIOR VP | 38.00 | | | X | | | 228,250. | 0. | | 69,565. |
| 40 PAULA YABAR VICE PRESIDENT | 38.00 | | | X | | | 281,440. | 0. | | 76,560. |
| 41 SHEILA DENNIS ASSISTANT VP, DEVELOPMENT | 38.00 | | | | X | | 162,830. | 0. | | 49,656. |
| 42 ANN MORGAN VICE PRESIDENT | 38.00 | | | | X | | 160,102. | 0. | | 49,077. |
| 43 LESLIE JONES VICE PRESIDENT | 38.00 | | | | X | | 147,657. | 0. | | 45,141. |
| 44 SARA BARTH VP, REGIONAL CONSERVATION | 38.00 | | | | X | | 160,130. | 0. | | 49,579. |
| 45 SPENCER PHILLIPS VICE PRESIDENT, RESEARCH | 38.00 | | | | X | | 149,925. | 0. | | 45,810. |

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ATTACHMENT 6

990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

| <u>NAME AND ADDRESS</u> | <u>DESCRIPTION OF SERVICES</u> | <u>COMPENSATION</u> |
|---|--------------------------------|---------------------|
| PRODUCTION MANAGEMENT GROUP LTD 6940 COLUMBIA GATEWAY DRIVE #220 COLUMBIA, MD 21046 | DIRECT MAIL | 909,297. |
| CHAPMAN CUBINE ADAMS HUSSEY INC. 1600 WILSON BLVD., #300 ARLINGTON, VA 22209 | DIRECT MAIL | 594,482. |
| RAFFA & ASSOCIATES 1899 L. STREET NW STE 900 WASHINGTON, DC 20036 | IT CONSULTING | 466,013. |
| SECKMAN PRINTING, INC. 305 ENTERPRISE DRIVE FOREST, VA 24551 | DIRECT MAIL | 388,449. |
| MERKLE RESPONSE SERVICES 100 JAMISON COURT HAGERSTOWN, MD 21740 | DIRECT MAIL | 287,258. |
| TOTAL COMPENSATION | | <u>2,645,499.</u> |



TAX RETURN FILING INSTRUCTIONS

PUBLIC DISCLOSURE COPY
FEDERAL FORM 990

FOR THE YEAR ENDING
SEPTEMBER 30, 2011

| | |
|---|--|
| Prepared for | THE WILDERNESS SOCIETY 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 |
| Prepared by | ARGY, WILTSE & ROBINSON, P.C. 8405 GREENSBORO DRIVE, 7 TH FLOOR MCLEAN, VA 22102 |
| Amount due or refund | NOT APPLICABLE |
| Make check payable to | NOT APPLICABLE |
| Mail tax return and check (if applicable) to | N/A |
| Return must be mailed on or before | N/A |
| Special Instructions | <p>THE RETURN SHOULD BE SIGNED AND DATED.</p> <p>FEDERAL LAW REQUIRES THAT A COPY OF THE THREE PRECEDING YEARS 990 BE AVAILABLE FOR PUBLIC INSPECTION DURING REGULAR BUSINESS HOURS BY ANY INDIVIDUAL AT THE PRINCIPAL OFFICE OF SUCH ORGANIZATION AND, IF SUCH ORGANIZATION REGULARLY MAINTAINS 1 OR MORE REGIONAL OR DISTRICT OFFICES HAVING 3 OR MORE EMPLOYEES, AT EACH SUCH REGIONAL OR DISTRICT OFFICE, AND UPON REQUEST OF AN INDIVIDUAL MADE AT SUCH PRINCIPAL OFFICE OR SUCH A REGIONAL OR DISTRICT OFFICE, A COPY OF SUCH ANNUAL RETURN, REPORTS, AND EXEMPT STATUS APPLICATION MATERIALS OR SUCH NOTICE MATERIALS SHALL BE PROVIDED TO SUCH INDIVIDUAL WITHOUT CHARGE OTHER THAN A REASONABLE FEE FOR ANY REPRODUCTION AND MAILING COSTS. THE REQUEST DESCRIBED MUST BE MADE IN PERSON OR IN WRITING. IF SUCH REQUEST IS MADE IN PERSON, SUCH COPY SHALL BE PROVIDED IMMEDIATELY AND, IF MADE IN WRITING, SHALL BE PROVIDED WITHIN 30 DAYS. PLEASE CONTACT OUR OFFICE WITH ANY QUESTIONS THAT YOU MAY HAVE CONCERNING PUBLIC DISCLOSURE REQUIREMENTS.</p> |

Schedule of Contributors

▶ Attach to Form 990, 990-EZ, or 990-PF.

2010

Name of the organization
 THE WILDERNESS SOCIETY

Employer identification number
 53-0167933

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 foundation

Check 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3 % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization **THE WILDERNESS SOCIETY**

Employer identification number
53-0167933

Part I Contributors (see instructions)

| (a) No. | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
|------------|-----------------------------------|--------------------------------|---|
| 1 | ----- ----- ----- | \$ 1,688,306. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 2 | ----- ----- ----- | \$ 795,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 3 | ----- ----- ----- | \$ 550,000. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 4 | ----- ----- ----- | \$ 380,386. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 5 | ----- ----- ----- | \$ 445,938. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| 6 | ----- ----- ----- | \$ 120,114. | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

Name of organization **THE WILDERNESS SOCIETY**

Employer identification number
53-0167933

Part II Noncash Property (see instructions)

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|---------------------------|--|--|----------------------|
| 6 | 1 SH BRKA | \$ 120,114. | 11/22/2010 |
| | | | |
| | | | |
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| | | | |
| | | | |
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| | | | |

TAX RETURN FILING INSTRUCTIONS

PUBLIC DISCLOSURE COPY
FEDERAL FORM 990

FOR THE YEAR ENDING
SEPTEMBER 30, 2010

| | |
|---|---|
| Prepared for | THE WILDERNESS SOCIETY 1615 M STREET, N.W. WASHINGTON, DC 20036-3209 |
| Prepared by | ARGY, WILTSE & ROBINSON, P.C. 8405 GREENSBORO DRIVE, 7 th FLOOR MCLEAN, VA 22102 |
| Amount due or refund | NOT APPLICABLE |
| Make check payable to | NOT APPLICABLE |
| Mail tax return and check (if applicable) to | N/A |
| Return must be mailed on or before | N/A |
| Special Instructions | FEDERAL LAW REQUIRES THAT A COPY OF THE THREE PRECEDING YEARS 990 BE AVAILABLE FOR PUBLIC INSPECTION DURING REGULAR BUSINESS HOURS BY ANY INDIVIDUAL AT THE PRINCIPAL OFFICE OF SUCH ORGANIZATION AND, IF SUCH ORGANIZATION REGULARLY MAINTAINS 1 OR MORE REGIONAL OR DISTRICT OFFICES HAVING 3 OR MORE EMPLOYEES, AT EACH SUCH REGIONAL OR DISTRICT OFFICE, AND UPON REQUEST OF AN INDIVIDUAL MADE AT SUCH PRINCIPAL OFFICE OR SUCH A REGIONAL OR DISTRICT OFFICE, A COPY OF SUCH ANNUAL RETURN, REPORTS, AND EXEMPT STATUS APPLICATION MATERIALS OR SUCH NOTICE MATERIALS SHALL BE PROVIDED TO SUCH INDIVIDUAL WITHOUT CHARGE OTHER THAN A REASONABLE FEE FOR ANY REPRODUCTION AND MAILING COSTS. THE REQUEST DESCRIBED MUST BE MADE IN PERSON OR IN WRITING. IF SUCH REQUEST IS MADE IN PERSON, SUCH COPY SHALL BE PROVIDED IMMEDIATELY AND, IF MADE IN WRITING, SHALL BE PROVIDED WITHIN 30 DAYS. PLEASE CONTACT OUR OFFICE WITH ANY QUESTIONS THAT YOU MAY HAVE CONCERNING PUBLIC DISCLOSURE REQUIREMENTS. |

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

2012

Department of the Treasury
Internal Revenue Service

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

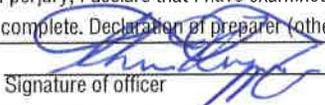
Open to Public Inspection

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

A For the 2012 calendar year, or tax year beginning OCT 1, 2012 and ending SEP 30, 2013

| | | | |
|---|--|--|---|
| B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending | C Name of organization THE WILDERNESS SOCIETY Doing Business As | | D Employer identification number 53-0167933 |
| | Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1615 M STREET, N.W. | | E Telephone number (800) 843-9453 |
| | City, town, or post office, state, and ZIP code WASHINGTON, DC 20036-3209 | | G Gross receipts \$ 42,362,144. |
| | F Name and address of principal officer: THOMAS F. TEPPER JR SAME AS C ABOVE | | H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions) H(c) Group exemption number ▶ |
| 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.WILDERNESS.ORG | | | |
| 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: 1935 |
| | | | M State of legal domicile: DC |

| Part I Summary | | Prior Year | Current Year |
|--|--|--|----------------------------|
| Activities & Governance | 1 Briefly describe the organization's mission or most significant activities: THE MISSION OF THE WILDERNESS SOCIETY IS TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR | | |
| | 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 | 33 |
| | 4 Number of independent voting members of the governing body (Part VI, line 1b) | 4 | 33 |
| | 5 Total number of individuals employed in calendar year 2012 (Part V, line 2a) | 5 | 213 |
| | 6 Total number of volunteers (estimate if necessary) | 6 | 210 |
| | 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 34 | 7b | 0. | |
| Revenue | 8 Contributions and grants (Part VIII, line 1h) | 21,136,337. | 34,840,384. |
| | 9 Program service revenue (Part VIII, line 2g) | 53,614. | 62,205. |
| | 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) | 2,713,262. | 2,700,840. |
| | 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) | 959,696. | 909,661. |
| | 12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) | 24,862,909. | 38,513,090. |
| Expenses | 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3) | 259,862. | 313,166. |
| | 14 Benefits paid to or for members (Part IX, column (A), line 4) | 0. | 0. |
| | 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) | 17,841,531. | 14,446,564. |
| | 16a Professional fundraising fees (Part IX, column (A), line 11e) | 400,682. | 171,981. |
| | b Total fundraising expenses (Part IX, column (D), line 25) ▶ 4,211,554. | | |
| | 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) | 12,918,028. | 12,597,341. |
| | 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) | 31,420,103. | 27,529,052. |
| 19 Revenue less expenses. Subtract line 18 from line 12 | -6,557,194. | 10,984,038. | |
| Net Assets or Fund Balances | 20 Total assets (Part X, line 16) | Beginning of Current Year 44,865,186. | End of Year 54,784,695. |
| | 21 Total liabilities (Part X, line 26) | 7,698,293. | 5,916,114. |
| | 22 Net assets or fund balances. Subtract line 21 from line 20 | 37,166,893. | 48,868,581. |

| | | | |
|---|---|-------------------------|--|
| 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 04/01/2014 |
| | THOMAS F. TEPPER JR, VP FINANCE & ADMINISTRATION Type or print name and title | | |
| Paid Preparer Use Only | Print/Type preparer's name JOHN HUSKINS | Preparer's signature | Date |
| | Firm's name ▶ JOHNSON LAMBERT LLP | Firm's EIN ▶ 52-1446779 | Check if self-employed <input type="checkbox"/> PTIN P01081531 |
| | Firm's address ▶ 700 SPRING FOREST ROAD, STE 115 RALEIGH, NC 27609 | Phone no. 919-719-6400 | |

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

Exempt Organization Declaration and Signature for Electronic Filing

For calendar year 2012, or tax year beginning OCT 1, 2012, and ending SEP 30, 2013

2012

Department of the Treasury
Internal Revenue Service

For use with Forms 990, 990-EZ, 990-PF, 1120-POL, and 8868

| | |
|--|---|
| Name of exempt organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|---|

Part I Type of Return and Return Information (Whole Dollars Only)

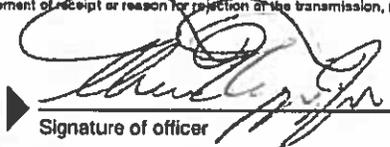
Check the box for the type of return being filed with Form 8453-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a below and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

| | | | | |
|-----------------------------|-------------------------------------|--|----|----------|
| 1a Form 990 check here | <input checked="" type="checkbox"/> | b Total revenue, if any (Form 990, Part VIII, column (A), line 12) | 1b | 38513090 |
| 2a Form 990-EZ check here | <input type="checkbox"/> | b Total revenue, if any (Form 990-EZ, line 9) | 2b | |
| 3a Form 1120-POL check here | <input type="checkbox"/> | b Total tax (Form 1120-POL, line 22) | 3b | |
| 4a Form 990-PF check here | <input type="checkbox"/> | b Tax based on investment income (Form 990-PF, Part VI, line 5) | 4b | |
| 5a Form 8868 check here | <input type="checkbox"/> | b Balance due (Form 8868, Part I, line 3c or Part II, line 8c) | 5b | |

Part II Declaration of Officer

- 6 I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment.
- If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/990-PF (as specifically identified in Part I above) to the selected state agency(ies).

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2012 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgment of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

| | | | |
|-----------|---|--------------------|----------------------------------|
| Sign Here |  Signature of officer | 04/04/2014 Date | VICE PRESIDENT, FINANCE Title |
|-----------|---|--------------------|----------------------------------|

Part III Declaration of Electronic Return Originator (ERO) and Paid Preparer (see instructions)

I declare that I have reviewed the above organization's return and that the entries on Form 8453-EO are complete and correct to the best of my knowledge. If I am only a collector, I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The organization officer will have signed this form before I submit the return. I will give the officer a copy of all forms and information to be filed with the IRS, and have followed all other requirements in Pub. 4163, Modernized e-file (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of perjury I declare that I have examined the above organization's return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge.

| | | | | | |
|----------------|---|----------------|--|--|--|
| ERO's Use Only | ERO's signature  | Date 4/1/14 | Check if also paid preparer <input checked="" type="checkbox"/> | Check if self-employed <input type="checkbox"/> | ERO's SSN or PTIN P01081531 |
| | Firm's name (or yours if self-employed), address, and ZIP code JOHNSON LAMBERT LLP 700 SPRING FOREST ROAD, SUITE 115 RALEIGH, NC 27609 | | | | EIN 52-1446779 Phone no. (919) 719-6400 |

Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (if based on all information of which the preparer has any knowledge).

| | | | | | |
|------------------------|----------------------------|--|------|---|---------------------------|
| Paid Preparer Use Only | Print/Type preparer's name | Preparer's signature | Date | Check <input type="checkbox"/> if self-employed | PTIN P01081531 |
| | Firm's name | JOHNSON LAMBERT LLP | | | Firm's EIN |
| | Firm's address | 700 SPRING FOREST ROAD, STE 115 RALEIGH, NC 27609 | | | Phone no. 919-719-6400 |

Product: Exempt

Category:

Name: THE WILDERNESS SOCIETY

IRS Center: Ogden

e-Postmark: 4/1/2014 7:41:21 AM

FEIN: 53-0167933

Notification:

Fiscal Year 10/1/2012

Fiscal Year9/30/2013

Begin Date:

End Date:

| DCN | Date | Type Of Activity | Submission ID | Refund/(Due) | Updated By |
|-----|----------|--|----------------------|--------------|------------|
| | 4/1/2014 | Upload Started | | | |
| | 4/1/2014 | Released for Transmission - Validation in Progress | | | System |
| | 4/1/2014 | Ready to transmit - Validation Complete | | | |
| | 4/1/2014 | Transmitted to FD | 56370820140910327e02 | | |
| | 4/1/2014 | Accepted by FD on 4/1/2014 | | | |

Application for Extension of Time To File an Exempt Organization Return

OMB No. 1545-1709

▶ **File a separate application for each return.**

- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** and check this box **X**
- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** (on page 2 of this form).

Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868.

Electronic filing (e-file) . You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, which must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/efile and click on *e-file for Charities & Nonprofits*.

Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed).

A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete

Part I only

All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

| | | |
|--|--|--|
| Type or print | Name of exempt organization or other filer, see instructions. THE WILDERNESS SOCIETY | Employer identification number (EIN) or 53-0167933 |
| File by the due date for filing your return. See instructions. | Number, street, and room or suite no. If a P.O. box, see instructions. 1615 M STREET, N.W. | Social security number (SSN) |
| | City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20036-3209 | |

Enter the Return code for the return that this application is for (file a separate application for each return) 01

| Application Is For | Return Code | Application Is For | Return Code |
|--|-------------|--------------------------|-------------|
| Form 990 or Form 990-EZ | 01 | Form 990-T (corporation) | 07 |
| Form 990-BL | 02 | Form 1041-A | 08 |
| Form 4720 (individual) | 03 | Form 4720 | 09 |
| Form 990-PF | 04 | Form 5227 | 10 |
| Form 990-T (sec. 401(a) or 408(a) trust) | 05 | Form 6069 | 11 |
| Form 990-T (trust other than above) | 06 | Form 8870 | 12 |

THOMAS TEPPER

- The books are in the care of ▶ **1615 M STREET, N.W. - WASHINGTON, DC 20036-3209**

Telephone No. ▶ **(800)843-9453**

FAX No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension is for.

1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until **MAY 15, 2014**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:
▶ calendar year _____ or
▶ tax year beginning **OCT 1, 2012**, and ending **SEP 30, 2013**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return
 Change in accounting period

| | | | |
|--|-----------|----|----|
| 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions. | 3a | \$ | 0. |
| b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit. | 3b | \$ | 0. |
| c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions. | 3c | \$ | 0. |

Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions.

LHA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev. 1-2013)

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III [X]

1 Briefly describe the organization's mission: THE WILDERNESS SOCIETY IS THE LEADING AMERICAN CONSERVATION ORGANIZATION WORKING TO PROTECT WILD PLACES WITHIN OUR NATION'S PUBLIC LANDS THE 618 MILLION ACRES COLLECTIVELY OWNED BY THE AMERICAN PEOPLE AND MANAGED BY OUR GOVERNMENT. FROM WELL-KNOWN ICONS TO HIDDEN GEMS,

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? [] Yes [X] No If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ 17,258,531. including grants of \$ 313,166.) (Revenue \$ 4,175.) THE WILDERNESS SOCIETY HAS A DEEP HISTORY OF PROTECTING OUR WILDEST PUBLIC LANDS; WE'VE LED ON NEARLY EVERY MAJOR PUBLIC LANDS DECISION SINCE 1935, FROM THE 1964 WILDERNESS ACT TO THE PASSAGE OF THE OMNIBUS PUBLIC LANDS BILL OF 2009.

IN FISCAL YEAR 2013 WE MADE IMPORTANT PROGRESS ON OUR THREE MAJOR PRIORITIES: PROTECTING WILDLANDS, GUIDING ENERGY DEVELOPMENT IN A WAY THAT BOTH PROTECTS OUR WILDEST PLACES AND SUPPORTS RENEWABLE ENERGY, AND STRENGTHENING PUBLIC SUPPORT FOR PROTECTING AMERICA'S REMARKABLE PUBLIC LANDS.

WE HAD CONSERVATION VICTORIES FROM ALASKA TO NEW MEXICO, WHERE WE WON

4b (Code:) (Expenses \$ 3,994,281. including grants of \$) (Revenue \$ 58,030.) THE WILDERNESS SOCIETY IS THE LEADING AMERICAN CONSERVATION ORGANIZATION WORKING TO PROTECT WILD PLACES WITHIN OUR NATION'S PUBLIC LANDS -- THE 618 MILLION ACRES COLLECTIVELY OWNED BY THE AMERICAN PEOPLE AND MANAGED BY OUR GOVERNMENT. FROM WELL-KNOWN ICONS TO HIDDEN GEMS, THESE WILDLANDS PROVIDE US ALL WITH CLEAN AIR AND WATER; ABUNDANT WILDLIFE; HAVENS FOR RECREATION, LEARNING, AND SOLITUDE; AND A FOUNDATION FOR A HEALTHY PLANET. THEY ARE ALSO IMPORTANT SOURCES OF RENEWABLE ENERGY AND VITAL NATURAL RESOURCES WHICH MUST BE MANAGED WISELY.

TODAY, WITH MORE THAN 500,000 ACTIVE MEMBERS AND SUPPORTERS, TWS CONTINUES ITS VITAL MISSION TO PROTECT WILDERNESS AND INSPIRE AMERICANS

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O.) (Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 21,252,812.

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)? <i>If "Yes," complete Schedule A</i> | X | |
| 2 | Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? | X | |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i> | | X |
| 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? <i>If "Yes," complete Schedule C, Part II</i> | X | |
| 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? <i>If "Yes," complete Schedule C, Part III</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part I</i> | | X |
| 7 | Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i> | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part IV</i> | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part VI</i> | X | |
| 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? <i>If "Yes," complete Schedule D, Part VII</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part VIII</i> | | X |
| 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? <i>If "Yes," complete Schedule D, Part IX</i> | X | |
| e | Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 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)? <i>If "Yes," complete Schedule D, Part X</i> | X | |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i> | X | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i> | | X |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i> | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | | X |
| 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? <i>If "Yes," complete Schedule F, Parts I and IV</i> | | X |
| 15 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? <i>If "Yes," complete Schedule F, Parts II and IV</i> | | X |
| 16 | Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? <i>If "Yes," complete Schedule F, Parts III and IV</i> | | X |
| 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? <i>If "Yes," complete Schedule G, Part I</i> | X | |
| 18 | Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i> | | X |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i> | | X |
| 20a | Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i> | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | | |

Part IV Checklist of Required Schedules (continued)

| | | Yes | No |
|-----|--|-----|----|
| 21 | Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i> | X | |
| 22 | Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i> | X | |
| 23 | Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i> | X | |
| 24a | Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25</i> | | X |
| b | Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? | | |
| c | Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds? | | |
| d | Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? | | |
| 25a | Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| b | Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i> | | X |
| 26 | Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i> | | X |
| 27 | Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i> | | X |
| 28 | Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions): | | |
| a | A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| b | A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| c | An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i> | | X |
| 29 | Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> | X | |
| 30 | Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> | | X |
| 31 | Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> | | X |
| 32 | Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> | | X |
| 33 | Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i> | | X |
| 34 | Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i> | | X |
| 35a | Did the organization have a controlled entity within the meaning of section 512(b)(13)? | | X |
| b | If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | |
| 36 | Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> | | X |
| 37 | Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i> | | X |
| 38 | Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? | X | |

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Input box for Schedule O response

Main table with columns for question number, description, sub-questions (1a-1b, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7d, 7e-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, 14a-14b), Yes, and No. Includes values like 101, 0, 213 and various 'X' marks.

Part VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (33), 1b (33), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 3 columns: Question, Yes, No. Rows include: 10a (X), 10b, 11a (X), 11b, 12a (X), 12b (X), 12c (X), 13 (X), 14 (X), 15a (X), 15b (X), 16a (X), 16b.

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: THOMAS TEPPER - (800) 843-9453 1615 M STREET, N.W., WASHINGTON, DC 20036-3209

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

Check if Schedule O contains a response to any question 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

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 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) DOUGLAS W. WALKER CHAIR | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (2) MOLLY MCUSIC VICE CHAIR | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (3) WILLIAM J. CRONON VICE CHAIR | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (4) KEVIN LUZAK TREASURER | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (5) MARCIA KUNSTEL SECRETARY | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (6) DAVID BONDERMAN AT-LARGE | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (7) HANSJORG WYSS AT-LARGE | 2.00 | X | | X | | | | 0. | 0. | 0. |
| (8) BRENDA S. DAVIS GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (9) EDWARD A. AMES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (10) JAMES A. BACA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (11) THOMAS A. BARRON GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (12) RICHARD BLUM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (13) CRANDALL C. BOWLES GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (14) WILLIAM M. BUMPERS GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (15) BETHINE CHURCH GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (16) BERTRAM J. COHN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |
| (17) WILL COLEMAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | | 0. | 0. | 0. |

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below 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 | | | |
| (18) CHRISTOPHER J. ELLIMAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (19) DAVID J. FIELD GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (20) GEORGE T. FRAMPTON, JR. GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (21) JERRY F. FRANKLIN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (22) CAROLINE M. GETTY GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (23) REGINALD "FLIP" HAGOOD GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (24) HEATHER KENDALL-MILLER GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (25) MICHAEL A. MANTELL GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (26) DAVE MATTHEWS GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| 1b Sub-total | | | | | | | 0. | 0. | 0. | |
| c Total from continuation sheets to Part VII, Section A | | | | | | | 2,240,878. | 0. | 325,960. | |
| d Total (add lines 1b and 1c) | | | | | | | 2,240,878. | 0. | 325,960. | |

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 **38**

| | Yes | No |
|--|-----|----|
| 3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual | X | |
| 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 | X | |
| 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 | | X |

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 |
|--|--------------------------------|---------------------|
| PRODUCTION MANAGEMENT GROUP LTD, 6940 COLUMBIA GATEWAY DR, STE 220, COLUMBIA, MD | DIRECT MAIL | 905,700. |
| CHAPMAN CUBINE ADAMS HUSSEY INC, 1600 WILSON BLVD, STE 300, ARLINGTON, VA 22209 | DIRECT MAIL | 589,657. |
| MERKLE RESPONSE SERVICES 100 JAMISON CT, HAGERSTOWN, MD 21740 | DIRECT MAIL | 334,295. |
| SMS DIRECT, INC, 8641 VIRGINIA MEADOWS DR, MANASSAS, VA 20109 | DIRECT MAIL | 194,916. |
| PACIFIC BUILDING PARTNERS LLC, 575 MADISON AVE, 24TH FL, NEW YORK, NY 10022 | INVESTMENT MANAGEMENT | 194,418. |

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 **18**

SEE PART VII, SECTION A CONTINUATION SHEETS

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

| (A) Name and title | (B) Average hours per week (list any hours for related organizations below line) | (C) Position (check all that apply) | | | | | | (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 | | | |
| (27) SCOTT A. NATHAN GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (28) JAIME A. PINKHAM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (29) REBECCA L. ROM GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (30) THEODORE ROOSEVELT IV GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (31) PATRICK L. SMITH GOVERNING COUNCIL MEMBER (TO JAN '13) | 2.00 | X | | | | | 0. | 0. | 0. | |
| (32) CATHY DOUGLAS STONE GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (33) SARA VERA GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (34) CHRISTINA WONG GOVERNING COUNCIL MEMBER | 2.00 | X | | | | | 0. | 0. | 0. | |
| (35) WILLIAM MEADOWS PRESIDENT (TO MAR '13) | 40.00 | | | X | | | 272,063. | 0. | 36,582. | |
| (36) JAMES WILLIAMS PRESIDENT | 40.00 | | | X | | | 186,959. | 0. | 17,983. | |
| (37) PAULA WOLFERSERDER YABAR VP, MEMBERSHIP & DEVELOPMENT (TO MAR '13) | 40.00 | | | X | | | 278,776. | 0. | 19,694. | |
| (38) THOMAS F. TEPPER JR. VP, FINANCE & ADMIN (FROM DEC '12) | 40.00 | | | X | | | 3,757. | 0. | 0. | |
| (39) JANE TAYLOR VP, MARKING & COMM (TO JUL '13) | 40.00 | | | | X | | 181,410. | 0. | 22,090. | |
| (40) SPENCER PHILLIPS SR DIRECTOR, ECONOMICS (TO SEP '13) | 40.00 | | | | X | | 169,713. | 0. | 35,851. | |
| (41) MELANIE BELLER VP, POLICY & GOVERNMENT AFFAIRS (TO '13) | 40.00 | | | | X | | 169,152. | 0. | 21,339. | |
| (42) SARA BARTH DEPUTY VP, CONSERVATION | 40.00 | | | | X | | 162,786. | 0. | 36,130. | |
| (43) KATHARINE THOMAS VP, MARKETING & COMM | 40.00 | | | | | X | 132,565. | 0. | 12,443. | |
| (44) JESLIE JONES GENERAL COUNSEL | 40.00 | | | | | X | 149,297. | 0. | 19,535. | |
| (45) STEPHANIE TAYLOR STEWART SENIOR MAJOR GIFTS OFFICER | 40.00 | | | | | X | 139,421. | 0. | 26,678. | |
| (46) ROBERT EKEY SR DIRECTOR, ENERGY CAMPAIGN | 40.00 | | | | | X | 118,516. | 0. | 38,129. | |
| Total to Part VII, Section A, line 1c | | | | | | | | | | |

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII

| | | | (A) | (B) | (C) | (D) | |
|--|---|---|----------------------|------------------------------------|----------------------------|---|--|
| | | | Total revenue | Related or exempt function revenue | Unrelated business revenue | Revenue excluded from tax under sections 512, 513, or 514 | |
| Contributions, Gifts, Grants and Other Similar Amounts | 1 a Federated campaigns | 1a 103,199. | | | | | |
| | b Membership dues | 1b | | | | | |
| | c Fundraising events | 1c | | | | | |
| | d Related organizations | 1d | | | | | |
| | e Government grants (contributions) | 1e 126,592. | | | | | |
| | f All other contributions, gifts, grants, and similar amounts not included above | 1f 34,610,593. | | | | | |
| | g Noncash contributions included in lines 1a-1f: \$ | 887,279. | | | | | |
| | h Total. Add lines 1a-1f | | 34,840,384. | | | | |
| | Program Service Revenue | 2 a ADVOCATE TRIPS | Business Code 900099 | 46,000. | 46,000. | | |
| b HONORARIA | | 900099 | 10,000. | 10,000. | | | |
| c CONTRACTED SERVICES | | 900099 | 4,175. | 4,175. | | | |
| d LIBRARY SUBSCRIPTION | | 900099 | 1,632. | 1,632. | | | |
| e PROMOTIONAL ITEMS | | 900099 | 398. | 398. | | | |
| f All other program service revenue | | | | | | | |
| g Total. Add lines 2a-2f | | | 62,205. | | | | |
| Other Revenue | 3 Investment income (including dividends, interest, and other similar amounts) | | 624,189. | | | 624,189. | |
| | 4 Income from investment of tax-exempt bond proceeds | | | | | | |
| | 5 Royalties | | 104,559. | | | 104,559. | |
| | 6 a Gross rents | (i) Real | 614,761. | | | | |
| | | (ii) Personal | | | | | |
| | | b Less: rental expenses | 0. | | | | |
| | | c Rental income or (loss) | 614,761. | | | | |
| | d Net rental income or (loss) | | 614,761. | | | 614,761. | |
| | 7 a Gross amount from sales of assets other than inventory | (i) Securities | 5,876,491. | | | | |
| | | (ii) Other | 49,214. | | | | |
| | | b Less: cost or other basis and sales expenses | 3,785,777. | 63,277. | | | |
| | | c Gain or (loss) | 2,090,714. | -14,063. | | | |
| | d Net gain or (loss) | | 2,076,651. | | | 2,076,651. | |
| | 8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18 | a | | | | | |
| | b Less: direct expenses | b | | | | | |
| c Net income or (loss) from fundraising events | | | | | | | |
| 9 a Gross income from gaming activities. See Part IV, line 19 | a | | | | | | |
| b Less: direct expenses | b | | | | | | |
| c Net income or (loss) from gaming activities | | | | | | | |
| 10 a Gross sales of inventory, less returns and allowances | a | | | | | | |
| b Less: cost of goods sold | b | | | | | | |
| c Net income or (loss) from sales of inventory | | | | | | | |
| Miscellaneous Revenue | | Business Code | | | | | |
| 11 a MAILING LIST | 900099 | 98,991. | | | | 98,991. | |
| b CREDIT CARD ROYALTIES | 900099 | 73,747. | | | | 73,747. | |
| c MISCELLANEOUS | 900099 | 17,603. | | | | 17,603. | |
| d All other revenue | | | | | | | |
| e Total. Add lines 11a-11d | | 190,341. | | | | | |
| 12 Total revenue. See instructions. | | 38,513,090. | 62,205. | 0. | | 3,610,501. | |

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response to any question in this Part IX X

| Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII. | (A) Total expenses | (B) Program service expenses | (C) Management and general expenses | (D) Fundraising expenses |
|--|-----------------------|---------------------------------|--|-----------------------------|
| 1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 | 297,166. | 297,166. | | |
| 2 Grants and other assistance to individuals in the United States. See Part IV, line 22 | 16,000. | 16,000. | | |
| 3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 | | | | |
| 4 Benefits paid to or for members | | | | |
| 5 Compensation of current officers, directors, trustees, and key employees | 1,569,448. | 1,239,253. | 86,975. | 243,220. |
| 6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) | | | | |
| 7 Other salaries and wages | 10,217,769. | 8,074,848. | 554,036. | 1,588,885. |
| 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) | 530,215. | 415,780. | 34,567. | 79,868. |
| 9 Other employee benefits | 1,247,318. | 978,111. | 81,319. | 187,888. |
| 10 Payroll taxes | 881,814. | 691,493. | 57,490. | 132,831. |
| 11 Fees for services (non-employees): | | | | |
| a Management | | | | |
| b Legal | 40,322. | 31,302. | 3,357. | 5,663. |
| c Accounting | 164,450. | 127,662. | 13,693. | 23,095. |
| d Lobbying | | | | |
| e Professional fundraising services. See Part IV, line 17 | 171,981. | | | 171,981. |
| f Investment management fees | 219,119. | | 219,119. | |
| g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.) | 3,912,310. | 3,170,634. | 340,071. | 401,605. |
| 12 Advertising and promotion | | | | |
| 13 Office expenses | 2,692,683. | 1,817,279. | 202,695. | 672,709. |
| 14 Information technology | | | | |
| 15 Royalties | | | | |
| 16 Occupancy | 3,398,231. | 2,819,928. | 258,390. | 319,913. |
| 17 Travel | 1,054,551. | 812,175. | 84,448. | 157,928. |
| 18 Payments of travel or entertainment expenses for any federal, state, or local public officials | | | | |
| 19 Conferences, conventions, and meetings | | | | |
| 20 Interest | 23,719. | 16,701. | 2,823. | 4,195. |
| 21 Payments to affiliates | | | | |
| 22 Depreciation, depletion, and amortization | 632,665. | 442,054. | 85,167. | 105,444. |
| 23 Insurance | 61,752. | 43,533. | 8,140. | 10,079. |
| 24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.) | | | | |
| a MAILING LIST RENTAL | 146,747. | 96,533. | 10,607. | 39,607. |
| b DUES AND SUBSCRIPTIONS | 107,398. | 77,756. | 7,708. | 21,934. |
| c PERSONNEL ACQUISITIONS | 64,960. | 29,379. | 4,746. | 30,835. |
| d STAFF DEVELOPMENT | 46,250. | 32,566. | 5,504. | 8,180. |
| e All other expenses | 32,184. | 22,659. | 3,831. | 5,694. |
| 25 Total functional expenses. Add lines 1 through 24e | 27,529,052. | 21,252,812. | 2,064,686. | 4,211,554. |
| 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input checked="" type="checkbox"/> X if following SOP 98-2 (ASC 958-720) | 3,483,834. | 912,023. | 1,896,764. | 675,047. |

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

| | | (A) Beginning of year | | (B) End of year | |
|---|--|--------------------------|-------------|--------------------|--|
| Assets | 1 Cash - non-interest-bearing | 1,000. | 1 | 713. | |
| | 2 Savings and temporary cash investments | -44,835. | 2 | 2,547,309. | |
| | 3 Pledges and grants receivable, net | 2,670,386. | 3 | 11,605,993. | |
| | 4 Accounts receivable, net | 646,169. | 4 | 491,744. | |
| | 5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L | | 5 | | |
| | 6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L | | 6 | | |
| | 7 Notes and loans receivable, net | | 7 | | |
| | 8 Inventories for sale or use | | 8 | | |
| | 9 Prepaid expenses and deferred charges | 714,253. | 9 | 810,932. | |
| | 10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D | 10a 7,612,149. | | | |
| | b Less: accumulated depreciation | 10b 6,490,381. | 10c | 1,121,768. | |
| | 11 Investments - publicly traded securities | 29,949,700. | 11 | 30,034,588. | |
| | 12 Investments - other securities. See Part IV, line 11 | 260,721. | 12 | 247,105. | |
| | 13 Investments - program-related. See Part IV, line 11 | | 13 | | |
| | 14 Intangible assets | | 14 | | |
| | 15 Other assets. See Part IV, line 11 | 9,081,990. | 15 | 7,924,543. | |
| 16 Total assets. Add lines 1 through 15 (must equal line 34) | 44,865,186. | 16 | 54,784,695. | | |
| Liabilities | 17 Accounts payable and accrued expenses | 2,581,783. | 17 | 1,552,654. | |
| | 18 Grants payable | | 18 | | |
| | 19 Deferred revenue | 3,414,121. | 19 | 3,255,549. | |
| | 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 current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L | | 22 | | |
| | 23 Secured mortgages and notes payable to unrelated third parties | | 23 | | |
| | 24 Unsecured notes and loans payable to unrelated third parties | 774,000. | 24 | 0. | |
| | 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 | 928,389. | 25 | 1,107,911. | |
| | 26 Total liabilities. Add lines 17 through 25 | 7,698,293. | 26 | 5,916,114. | |
| Net Assets or Fund Balances | Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34. | | | | |
| | 27 Unrestricted net assets | 3,468,386. | 27 | 2,923,655. | |
| | 28 Temporarily restricted net assets | 22,309,728. | 28 | 34,466,955. | |
| | 29 Permanently restricted net assets | 11,388,779. | 29 | 11,477,971. | |
| | Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34. | | | | |
| | 30 Capital stock or trust principal, or current funds | | 30 | | |
| | 31 Paid-in or capital surplus, or land, building, or equipment fund | | 31 | | |
| | 32 Retained earnings, endowment, accumulated income, or other funds | | 32 | | |
| 33 Total net assets or fund balances | 37,166,893. | 33 | 48,868,581. | | |
| 34 Total liabilities and net assets/fund balances | 44,865,186. | 34 | 54,784,695. | | |

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

| | | | |
|----|--|----|-------------|
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 38,513,090. |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 27,529,052. |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | 10,984,038. |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)) | 4 | 37,166,893. |
| 5 | Net unrealized gains (losses) on investments | 5 | 1,796,797. |
| 6 | Donated services and use of facilities | 6 | |
| 7 | Investment expenses | 7 | |
| 8 | Prior period adjustments | 8 | |
| 9 | Other changes in net assets or fund balances (explain in Schedule O) | 9 | -1,079,148. |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) | 10 | 48,868,580. |

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

| | | Yes | No |
|----|---|-----|----|
| 1 | Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O. | | |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | | X |
| 2b | Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis | X | |
| 2c | If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O. | X | |
| 3a | As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? | | X |
| 3b | If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits | | |

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization **THE WILDERNESS SOCIETY** Employer identification number **53-0167933**

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 11, 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.)
- 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 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.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 11 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 that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III - Functionally integrated d Type III - Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

| | Yes | No |
|--|----------|----|
| (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? | 11g(i) | |
| (ii) A family member of a person described in (i) above? | 11g(ii) | |
| (iii) A 35% controlled entity of a person described in (i) or (ii) above? | 11g(iii) | |
- h Provide the following information about the supported organization(s).

| (i) Name of supported organization | (ii) EIN | (iii) Type of organization (described on lines 1-9 above or IRC section (see instructions)) | (iv) Is the organization in col. (i) listed in your governing document? | | (v) Did you notify the organization in col. (i) of your support? | | (vi) Is the organization in col. (i) organized in the U.S.? | | (vii) Amount of monetary support |
|------------------------------------|----------|---|---|----|--|----|---|----|----------------------------------|
| | | | Yes | No | Yes | No | Yes | No | |
| | | | | | | | | | |
| | | | | | | | | | |
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| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Total | | | | | | | | | |

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------|
| 1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 34,840,384. | 129,981,703. |
| 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf | | | | | | |
| 3 The value of services or facilities furnished by a governmental unit to the organization without charge | | | | | | |
| 4 Total. Add lines 1 through 3 | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 34,840,384. | 129,981,703. |
| 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) | | | | | | 30,421,367. |
| 6 Public support. Subtract line 5 from line 4. | | | | | | 99,560,336. |

Section B. Total Support

| Calendar year (or fiscal year beginning in) ▶ | (a) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (f) Total |
|--|-------------|-------------|-------------|-------------|-------------|--------------------------|
| 7 Amounts from line 4 | 32,536,772. | 20,347,273. | 21,120,937. | 21,136,337. | 34,840,384. | 129,981,703. |
| 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources | 2,002,197. | 2,311,578. | 2,091,383. | 1,436,853. | 1,516,247. | 9,358,258. |
| 9 Net income from unrelated business activities, whether or not the business is regularly carried on | | | | | | |
| 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) | 70,938. | 113,751. | 23,014. | 35,311. | 17,603. | 260,617. |
| 11 Total support. Add lines 7 through 10 | | | | | | 139,600,578. |
| 12 Gross receipts from related activities, etc. (see instructions) | | | | | 12 | 221,516. |
| 13 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 | | | | | | <input type="checkbox"/> |

Section C. Computation of Public Support Percentage

| | | | |
|---|---------------------------------------|-------|---|
| 14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f)) | 14 | 71.32 | % |
| 15 Public support percentage from 2011 Schedule A, Part II, line 14 | 15 | 77.42 | % |
| 16a 33 1/3% support test - 2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | ▶ <input checked="" type="checkbox"/> | | |
| b 33 1/3% support test - 2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization | ▶ <input type="checkbox"/> | | |
| 17a 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | ▶ <input type="checkbox"/> | | |
| b 10% -facts-and-circumstances test - 2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization | ▶ <input type="checkbox"/> | | |
| 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions | ▶ <input type="checkbox"/> | | |

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 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) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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) 2008 | (b) 2009 | (c) 2010 | (d) 2011 | (e) 2012 | (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 IV.) | | | | | | |
| 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 2012 (line 8, column (f) divided by line 13, column (f)) | 15 | % |
| 16 Public support percentage from 2011 Schedule A, Part III, line 15 | 16 | % |

Section D. Computation of Investment Income Percentage

| | | |
|---|-----------|---|
| 17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f)) | 17 | % |
| 18 Investment income percentage from 2011 Schedule A, Part III, line 17 | 18 | % |

19a 33 1/3% support tests - 2012. 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 - 2011. 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

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.

OMB No. 1545-0047

2012

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

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 foundation

Check 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, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution 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 a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to 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. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$ _____

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not 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 Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2012)

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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 |
|------------|-----------------------------------|----------------------------|--|
| <u>1</u> | _____ _____ _____ | \$ <u>12,500,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| <u>2</u> | _____ _____ _____ | \$ <u>1,390,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| <u>3</u> | _____ _____ _____ | \$ <u>1,388,655.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| <u>4</u> | _____ _____ _____ | \$ <u>1,250,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| <u>5</u> | _____ _____ _____ | \$ <u>1,206,234.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| <u>6</u> | _____ _____ _____ | \$ <u>715,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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 | <hr/> <hr/> <hr/> <hr/> | \$ <u>700,000.</u> | Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |
| _____ | <hr/> <hr/> <hr/> <hr/> | \$ _____ | Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.) |

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

Part II Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed.

| (a) No. from Part I | (b) Description of noncash property given | (c) FMV (or estimate) (see instructions) | (d) Date received |
|------------------------------|--|--|----------------------|
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |
| _____ | _____ _____ _____ _____ | \$ _____ | _____ |

| | |
|--|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|---|

Part III *Exclusively* religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this information once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
|--|---------------------|---|-------------------------------------|
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |
| (a) No. from Part I | (b) Purpose of gift | (c) Use of gift | (d) Description of how gift is held |
| | | | |
| (e) Transfer of gift | | | |
| Transferee's name, address, and ZIP + 4 | | Relationship of transferor to transferee | |
| | | | |

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2012

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

▶ **See separate instructions.**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax), or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

| | |
|---|---|
| Name of organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

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

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.
- 2 Political expenditures ▶ \$ _____
- 3 Volunteer hours _____

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$ _____
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶ \$ _____
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b ▶ \$ _____
- 4 Did the filing organization file **Form 1120-POL** for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

| (a) Name | (b) Address | (c) EIN | (d) Amount paid from filing organization's funds. If none, enter -0-. | (e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-. |
|----------|-------------|---------|---|--|
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
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| | | | | |
| | | | | |

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule C (Form 990 or 990-EZ) 2012

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

| Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.) | | (a) Filing organization's totals | (b) Affiliated group totals | | | | | | | | | | | | |
|---|--|---|--|--------------------|-------------------------------|---|--|---|--|--|---|-------------------|--------------|--|--|
| 1 a Total lobbying expenditures to influence public opinion (grass roots lobbying) | | 19,264. | | | | | | | | | | | | | |
| b Total lobbying expenditures to influence a legislative body (direct lobbying) | | 139,725. | | | | | | | | | | | | | |
| c Total lobbying expenditures (add lines 1a and 1b) | | 158,989. | | | | | | | | | | | | | |
| d Other exempt purpose expenditures | | 27,370,063. | | | | | | | | | | | | | |
| e Total exempt purpose expenditures (add lines 1c and 1d) | | 27,529,052. | | | | | | | | | | | | | |
| f Lobbying nontaxable amount. Enter the amount from the following table in both columns. | | 1,000,000. | | | | | | | | | | | | | |
| <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table> | | If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | Not over \$500,000 | 20% of the amount on line 1e. | Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | Over \$17,000,000 | \$1,000,000. | | |
| If the amount on line 1e, column (a) or (b) is: | The lobbying nontaxable amount is: | | | | | | | | | | | | | | |
| Not over \$500,000 | 20% of the amount on line 1e. | | | | | | | | | | | | | | |
| Over \$500,000 but not over \$1,000,000 | \$100,000 plus 15% of the excess over \$500,000. | | | | | | | | | | | | | | |
| Over \$1,000,000 but not over \$1,500,000 | \$175,000 plus 10% of the excess over \$1,000,000. | | | | | | | | | | | | | | |
| Over \$1,500,000 but not over \$17,000,000 | \$225,000 plus 5% of the excess over \$1,500,000. | | | | | | | | | | | | | | |
| Over \$17,000,000 | \$1,000,000. | | | | | | | | | | | | | | |
| g Grassroots nontaxable amount (enter 25% of line 1f) | | 250,000. | | | | | | | | | | | | | |
| h Subtract line 1g from line 1a. If zero or less, enter -0- | | 0. | | | | | | | | | | | | | |
| i Subtract line 1f from line 1c. If zero or less, enter -0- | | 0. | | | | | | | | | | | | | |
| j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? | | | <input type="checkbox"/> Yes <input type="checkbox"/> No | | | | | | | | | | | | |

4-Year Averaging Period Under Section 501(h)
(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

| Lobbying Expenditures During 4-Year Averaging Period | | | | | |
|---|------------|------------|------------|------------|------------|
| Calendar year (or fiscal year beginning in) | (a) 2009 | (b) 2010 | (c) 2011 | (d) 2012 | (e) Total |
| 2a Lobbying nontaxable amount | 1,000,000. | 1,000,000. | 1,000,000. | 1,000,000. | 4,000,000. |
| b Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 6,000,000. |
| c Total lobbying expenditures | 344,788. | 324,073. | 262,111. | 158,989. | 1,089,961. |
| d Grassroots nontaxable amount | 250,000. | 250,000. | 250,000. | 250,000. | 1,000,000. |
| e Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 1,500,000. |
| f Grassroots lobbying expenditures | 132,703. | 102,032. | 62,598. | 19,264. | 316,597. |

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

| For each "Yes," response to lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity. | (a) | | (b) |
|--|-----|----|--------|
| | Yes | No | Amount |
| 1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: | | | |
| a Volunteers? | | | |
| b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? .. | | | |
| c Media advertisements? | | | |
| d Mailings to members, legislators, or the public? | | | |
| e Publications, or published or broadcast statements? | | | |
| f Grants to other organizations for lobbying purposes? | | | |
| g Direct contact with legislators, their staffs, government officials, or a legislative body? | | | |
| h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | | |
| i Other activities? | | | |
| j Total. Add lines 1c through 1i | | | |
| 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | | |
| b If "Yes," enter the amount of any tax incurred under section 4912 | | | |
| c If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | | |
| d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | |

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

| | Yes | No |
|--|----------|----|
| 1 Were substantially all (90% or more) dues received nondeductible by members? | 1 | |
| 2 Did the organization make only in-house lobbying expenditures of \$2,000 or less? | 2 | |
| 3 Did the organization agree to carry over lobbying and political expenditures from the prior year? | 3 | |

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

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

Part IV Supplemental Information

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

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**

▶ **Attach to Form 990. ▶ See separate instructions.**

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

| | (a) Donor advised funds | (b) Funds and other accounts |
|---|-------------------------|--|
| 1 Total number at end of year | | |
| 2 Aggregate contributions to (during year) | | |
| 3 Aggregate grants from (during year) | | |
| 4 Aggregate value at end of year | | |
| 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

Preservation of land for public use (e.g., recreation or education) Preservation of an historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

| | Held at the End of the Tax Year |
|--|---------------------------------|
| a Total number of conservation easements | 2a |
| b Total acreage restricted by conservation easements | 2b |
| c Number of conservation easements on a certified historic structure included in (a) | 2c |
| d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register | 2d |

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ _____

4 Number of states where property subject to conservation easement is located ▶ _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶ _____

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1

(ii) Assets included in Form 990, Part X

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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 are a 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 programs
- 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" to 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? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to 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 | 16,711,871. | 13,916,517. | 13,864,750. | 12,433,120. | 11,581,361. |
| b Contributions | 89,192. | 112,204. | 5,000. | 55,828. | 153,172. |
| c Net investment earnings, gains, and losses | 3,016,745. | 3,203,142. | 591,539. | 1,880,177. | 1,186,371. |
| d Grants or scholarships | | | | | |
| e Other expenditures for facilities and programs | 589,468. | 519,992. | 544,772. | 504,375. | 487,784. |
| f Administrative expenses | | | | | |
| g End of year balance | 19,228,340. | 16,711,871. | 13,916,517. | 13,864,750. | 12,433,120. |

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 59.69 %
- c Temporarily restricted endowment 40.31 %

The percentages in 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"/> |

b If "Yes" to 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. 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 | | 2,840,780. | 2,619,589. | 221,191. |
| d Equipment | | 4,622,936. | 3,828,555. | 794,381. |
| e Other | | 148,433. | 42,237. | 106,196. |
| Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) | | | | 1,121,768. |

Part VII Investments - Other Securities. See Form 990, Part X, line 12.

| (a) Description of security or category (including name of security) | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) Financial derivatives | | |
| (2) Closely-held equity interests | | |
| (3) Other | | |
| (A) | | |
| (B) | | |
| (C) | | |
| (D) | | |
| (E) | | |
| (F) | | |
| (G) | | |
| (H) | | |
| (I) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) | | |

Part VIII Investments - Program Related. See Form 990, Part X, line 13.

| (a) Description of investment type | (b) Book value | (c) Method of valuation: Cost or end-of-year market value |
|---|----------------|---|
| (1) | | |
| (2) | | |
| (3) | | |
| (4) | | |
| (5) | | |
| (6) | | |
| (7) | | |
| (8) | | |
| (9) | | |
| (10) | | |
| Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) | | |

Part IX Other Assets. See Form 990, Part X, line 15.

| (a) Description | (b) Book value |
|---|----------------|
| (1) ARTWORKS | 125,950. |
| (2) BENEFICIAL INTEREST | 7,798,593. |
| (3) | |
| (4) | |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) | 7,924,543. |

Part X Other Liabilities. See Form 990, Part X, line 25.

| 1. (a) Description of liability | (b) Book value |
|---|----------------|
| (1) Federal income taxes | |
| (2) CUSTODIAL FUND | 26,030. |
| (3) DEFERRED RENT | 1,052,356. |
| (4) DEPOSITS | 29,525. |
| (5) | |
| (6) | |
| (7) | |
| (8) | |
| (9) | |
| (10) | |
| (11) | |
| Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) | 1,107,911. |

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

| | | | |
|----------|--|-----------|-------------|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 | 40,104,831. |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | | |
| a | Net unrealized gains on investments | 2a | 1,796,797. |
| b | Donated services and use of facilities | 2b | |
| c | Recoveries of prior year grants | 2c | |
| d | Other (Describe in Part XIII.) | 2d | |
| e | Add lines 2a through 2d | 2e | 1,796,797. |
| 3 | Subtract line 2e from line 1 | 3 | 38,308,034. |
| 4 | Amounts included on Form 990, Part VIII, line 12, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 219,119. |
| b | Other (Describe in Part XIII.) | 4b | -14,063. |
| c | Add lines 4a and 4b | 4c | 205,056. |
| 5 | Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.) | 5 | 38,513,090. |

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

| | | | |
|----------|---|-----------|-------------|
| 1 | Total expenses and losses per audited financial statements | 1 | 28,403,143. |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | | |
| a | Donated services and use of facilities | 2a | |
| b | Prior year adjustments | 2b | |
| c | Other losses | 2c | |
| d | Other (Describe in Part XIII.) | 2d | |
| e | Add lines 2a through 2d | 2e | 0. |
| 3 | Subtract line 2e from line 1 | 3 | 28,403,143. |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | | |
| a | Investment expenses not included on Form 990, Part VIII, line 7b | 4a | 219,119. |
| b | Other (Describe in Part XIII.) | 4b | -1,093,210. |
| c | Add lines 4a and 4b | 4c | -874,091. |
| 5 | Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.) | 5 | 27,529,052. |

Part XIII Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 4: A PORTFOLIO OF 76 ORIGINAL ANSEL ADAMS PHOTOGRAPHS WAS

DONATED TO THE SOCIETY IN 1985. THIS COLLECTION CANNOT BE SOLD AND MUST

BE DISPLAYED IN A MUSEUM-QUALITY SETTING, OR THE PHOTOGRAPHS MUST BE

RETURNED TO THE DONOR. THE APPRAISED VALUE OF THESE PHOTOGRAPHS IS

\$1,897,000. DUE TO THE STIPULATIONS RELATED TO THE CUSTODY OF THE

PHOTOGRAPHS, THESE ASSETS ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS.

THE SOCIETY ALSO OWNS VARIOUS OTHER DONATED ART WORK THAT IS NOT SUBJECT

TO DONOR CONDITIONS. THIS COLLECTOIN INCLUDED 11 ANSEL ADAMS PHOTOGRAPHS

Part XIII Supplemental Information (continued)

VALUED AT THEIR ORIGINAL MARKET VALUE OF \$125,950 AS ASSESSED AT THE TIME OF THEIR DONATION. THIS COLLECTION IS INCLUDED IN OTHER ASSETS ON THE STATEMENTS OF FINANCIAL POSITION.

PART V, LINE 4: THE SOCIETY MAINTAINS TWO TYPES OF ENDOWMENT FUNDS: GENERAL ENDOWMENT (DONOR-RESTRICTED) AND CAPITAL RESERVES.

GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT TO THE ORGANIZATION.

GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS GOVERNING THEIR USE.

THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS. SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS. WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED.

PART X, LINE 2: MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS AND THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30, 2013.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

Part XIII Supplemental Information (continued)

LOSS ON DISPOSAL -14,063.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

LOSS ON DISPOSAL -14,063.

CHANGE IN BEN INT -693,126.

PLEDGE ALLOWANCE -386,021.

TOTAL TO SCHEDULE D, PART XII, LINE 4B -1,093,210.

SCHEDULE G
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

**Supplemental Information Regarding
Fundraising or Gaming Activities**

OMB No. 1545-0047

2012

**Open To Public
Inspection**

**Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ▶ See separate instructions.**

Name of the organization **THE WILDERNESS SOCIETY** Employer identification number **53-0167933**

Part I Fundraising Activities. Complete if the organization answered "Yes" to 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
- 2 a** 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 ten 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 | | | |
| SEA CHANGE DIRECT MARKETING LLC - 7409 BIRCH AVE, TAKMOA | TELEMARKETING | | X | 96,476. | 24,000. | 72,476. |
| COMNET MARKETING GROUP INC - 1214 STOWE AVE, MEDFORD, OR | TELEMARKETING | | X | 79,948. | 55,183. | 24,765. |
| DONOR SERVICES GROUP LLC - 6715 SUNSET BLVD, HOLLYWOOD, | TELEMARKETING | | X | 70,685. | 88,596. | -17,911. |
| YOUR VOICE MEDIA INC - 685 MARKET ST, STE 570, SAN | TELEMARKETING | | X | 11,192. | 27,672. | -16,480. |
| GORDON & SCHWENKMEYER INC - 360 N SEPULVEDA BLVD, EL | TELEMARKETING | | X | 5,383. | 7,887. | -2,504. |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| Total | | | | 263,684. | 203,338. | 60,346. |

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.
AK, AL, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, MA, MD, ME, MI, MN, MS, MO, NC, ND, NH, NJ, NM, NY
OH, OK, OR, PA, RI, SC, TN, UT, AR, VA, WA, WI, WV

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

| | | (a) Event #1 | (b) Event #2 | (c) Other events | (d) Total events (add col. (a) through col. (c)) |
|-----------------|---|--------------|--------------|------------------|--|
| | | (event type) | (event type) | (total number) | |
| Revenue | 1 Gross receipts | | | | |
| | 2 Less: Contributions | | | | |
| | 3 Gross income (line 1 minus line 2) | | | | |
| Direct Expenses | 4 Cash prizes | | | | |
| | 5 Noncash prizes | | | | |
| | 6 Rent/facility costs | | | | |
| | 7 Food and beverages | | | | |
| | 8 Entertainment | | | | |
| | 9 Other direct expenses | | | | |
| | 10 Direct expense summary. Add lines 4 through 9 in column (d) | | | | () |
| | 11 Net income summary. Combine line 3, column (d), and line 10 | | | | |

Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

| | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) |
|--|---|---|---|------------------|---|
| | | 1 Gross revenue | | | |
| Direct Expenses | 2 Cash prizes | | | | |
| | 3 Noncash prizes | | | | |
| | 4 Rent/facility costs | | | | |
| | 5 Other direct expenses | | | | |
| 6 Volunteer labor | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | <input type="checkbox"/> Yes _____ % <input type="checkbox"/> No | | |
| 7 Direct expense summary. Add lines 2 through 5 in column (d) | | | | () | |
| 8 Net gaming income summary. Combine line 1, column d, and line 7 | | | | | |

9 Enter the state(s) in which the organization operates gaming activities: _____
a Is the organization licensed to operate gaming activities in each of these states? Yes No
b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? Yes No
b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? Yes No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? Yes No
- 13 Indicate the percentage of gaming activity operated in:

| | | |
|------------|--|---|
| 13a | | % |
| 13b | | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

- 15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No
- b If "Yes," enter the amount of gaming revenue received by the organization ► \$ _____ and the amount of gaming revenue retained by the third party ► \$ _____.
- c If "Yes," enter name and address of the third party:

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

- Director/officer Employee Independent contractor

17 Mandatory distributions:

- a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No
- b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$ _____

Part IV Supplemental Information. Complete this part to provide the explanations required by Part I, line 2b, columns (iii) and (v), and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SEA CHANGE DIRECT MARKETING LLC

(I) ADDRESS OF FUNDRAISER: 7409 BIRCH AVE, TAKMOA PARK, MD 20912

(I) NAME OF FUNDRAISER: COMNET MARKETING GROUP INC

(I) ADDRESS OF FUNDRAISER: 1214 STOWE AVE, MEDFORD, OR 97501

(I) NAME OF FUNDRAISER: DONOR SERVICES GROUP LLC

Part IV Supplemental Information (continued)

(I) ADDRESS OF FUNDRAISER: 6715 SUNSET BLVD, HOLLYWOOD, CA 90028

(I) NAME OF FUNDRAISER: YOUR VOICE MEDIA INC

(I) ADDRESS OF FUNDRAISER: 685 MARKET ST, STE 570, SAN FRANCISCO, CA 94105

(I) NAME OF FUNDRAISER: GORDON & SCHWENKMEYER INC

(I) ADDRESS OF FUNDRAISER: 360 N SEPULVEDA BLVD, EL SEGUNDO, CA 90245

SCHEDULE G, PART I, LINE 2B, COLUMN (V): TWS USES DIFFERENT
TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUNDRAISING CAMPAIGNS. WE
EXPECT GAINS FROM VENDORS WHO DO REVEWAL CALLING SOCH AS COMNET AND
VENDORS WHO DO APPEALS TO EXISTING MEMBERSHIP SUCH AS HARRIS. BOTH
PRODUCE SUBSTANTIAL, IMMEDIATE NET INCOME. OTHER TELEMARKETING VENDORS
SUCH AS YOUR VOICE MEDIA WORK ON DIFFERENT CAMPAIGNS SUCH AS LAPSED
REINSTATEMENTS AND SUSTAINER (MONTHLY GIVING) INVITES WHICH ARE, BY
DESIGN, BUDGETED AT AN INITIAL NET LOSS. THEY ARE INTENDED TO REINSTATE
LAPSED DONORS OR RECRUIT MONTHLY CONTRIBUTORS AND NET INCOME IN FUTURE
MONTHS AFTER THE CAMPAIGNS ARE OVER.

THE AMOUNT PAID TO OR RETAINED BY FUNDRAISERS REFLECTS BOTH REIMBURSEMENT
FOR EXPENSES AND FEES FOR FUNDRAISING SERVICES.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**

**Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.**

OMB No. 1545-0047

2012

**Open to Public
Inspection**

Name of the organization

THE WILDERNESS SOCIETY

**Employer identification number
53-0167933**

Part I General Information on Grants and Assistance

- 1** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? **Yes** **No**
- 2** Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

| 1 (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|----------------|--------------------------------------|---------------------------------|--|--|---|---|
| WYOMING OUTDOOR COUNCIL 262 LINCOLN STREET LANDERS, WY 82520 | 83-0259411 | 501(C)3 | 41,499. | 0. | | | CONSERVATION PROJECT |
| YOSEMITE FOUNDATION 155 MONTGOMERY STREET SUITE 1104 SAN FRANCISCO, CA 94104 | 94-3058041 | 501(C)3 | 40,000. | 0. | | | CONSERVATION PROJECT |
| WEST VIRGINIA WILDERNESS COALITION 120 W. WASHINGTON STREET SUITE 5 LEWISBURG, WV 24901 | 45-4359741 | 501(C)3 | 26,988. | 0. | | | CONSERVATION PROJECT |
| THE LAND TRUST FOR THE LITTLE TENNESSEE, INC. - PO BOX 1148 - FRANKLIN, NC 28744 | 56-2142199 | 501(C)3 | 25,000. | 0. | | | CONSERVATION PROJECT |
| BACKCOUNTRY HUNTERS & ANGLERS 823 E. 8TH STREET MOLALLA, OR 97038 | 20-1037177 | 501(C)3 | 20,000. | 0. | | | CONSERVATION PROJECT |
| MONTANA WILDERNESS ASSOCIATION 30 SOUTH EWING HELENA, MT 59601 | 51-0198932 | 501(C)3 | 15,000. | 0. | | | CONSERVATION PROJECT |

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **19.**
- 3** Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2012)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|---|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| WILDLANDS CPR PO BOX 7516 MISSOULA, MT 59807 | 81-0512261 | 501(C)3 | 10,520. | 0. | | | CONSERVATION PROJECT |
| FRIENDS OF MAINE'S SEABIRD ISLANDS PO BOX 1231 ROCKLAND, ME 04841 | 55-0809874 | 501(C)3 | 10,000. | 0. | | | CONSERVATION PROJECT |
| VIRGINIA WILDERNESS COMMITTEE 423 SHEEP CREEK LANE FAIRFIELD, VA 24435 | 31-1641293 | 501(C)3 | 10,000. | 0. | | | CONSERVATION PROJECT |
| NEW MEXICO WILDLIFE FEDERATION 121 CARDENAS DR NE ALBUQUERQUE, NM 87108 | 85-0160947 | 501(C)3 | 10,000. | 0. | | | CONSERVATION PROJECT |
| FRIENDS OF NEVADA WILDERNESS P.O. BOX 9754 RENO, NV 89507 | 88-0211763 | 501(C)3 | 10,000. | 0. | | | CONSERVATION PROJECT |
| GREATER YELLOWSTONE COALITION, P.O. BOX 1874 BOZEMAN, MT 59771 | 81-0414042 | 501(C)3 | 10,000. | 0. | | | CONSERVATION PROJECT |
| AMERICAN RIVERS - MT 1101 14TH STREET NW STE 1400 WASHINGTON, DC 20005 | 23-7305963 | 501(C)3 | 8,500. | 0. | | | CONSERVATION PROJECT |
| CENTER FOR SIERRA NEVADA CONSERVATION - PO BOX 603 - GEORGETOWN, CA 95634 | 68-0108508 | 501(C)3 | 7,500. | 0. | | | CONSERVATION PROJECT |
| BARK P.O. BOX 12065 PORTLAND, OR 97212 | 93-1263288 | 501(C)3 | 7,000. | 0. | | | CONSERVATION PROJECT |

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)

| (a) Name and address of organization or government | (b) EIN | (c) IRC section if applicable | (d) Amount of cash grant | (e) Amount of non-cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of non-cash assistance | (h) Purpose of grant or assistance |
|--|------------|-------------------------------|--------------------------|-----------------------------------|---|--|------------------------------------|
| HELLS CANYON PRESERVATION COUNCIL P.O. BOX 2768 LAGRANDE, OR 97850 | 93-0999442 | 501(C)3 | 7,000. | 0. | | | CONSERVATION PROJECT |
| NATURE'S BEST PHOTOGRAPHY FUND 11411 SUNSET HILLS ROAD RESTON, VA 20190 | 27-0222344 | 501(C)3 | 6,000. | 0. | | | CONSERVATION PROJECT |
| CENTRAL SIERRA ENVIRONMENTAL RESOURCE CENTER - P.O. BOX 396 - TWIN HARTE, CA 95383 | 77-0279240 | 501(C)3 | 5,500. | 0. | | | CONSERVATION PROJECT |
| TROUT UNLIMITED 1300 NORTH 17TH STREET, STE# 500 ARLINGTON, VA 22209 | 38-1612715 | 501(C)3 | 5,000. | 0. | | | CONSERVATION PROJECT |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Part III can be duplicated if additional space is needed.

| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of non-cash assistance | (e) Method of valuation (book, FMV, appraisal, other) | (f) Description of non-cash assistance |
|--|--------------------------|--------------------------|-----------------------------------|---|--|
| GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP | 4 | 16,000. | 0. | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

SCHEDULE I, PART I, LINE 2: GRANT AND AWARDS TO OTHER ORGANIZATIONS ARE REQUESTED AND MONITORED BY PROGRAM STAFF. THE PRIMARY CRITERION FOR AN AWARD IS THE RECEIVING ORGANIZATION WILL USE THE FUNDS FOR ACTIVITIES WHICH SUPPORT THE SOCIETY'S MISSION. A REQUEST IS SENT TO THE TWS FINANCE DEPARTMENT WITH THE FOLLOWING INFORMATION: 1) AN OUTLINE OF THE PROPER USE OR RESTRICTIONS FOR THE USE OF THE FUNDS BY THE RECEIVING ORGANIZATION; 2) A LIST OF THE RECEIVING ORGANIZATIONS BOARD MEMBERSHIP; 3) ANY KNOWN OVERLAPPING BOARD OR EMPLOYEE RELATIONSHIPS; 4) A STATEMENT FROM THE TWS STAFF MEMBER STATING THAT THERE EXISTS NO CONFLICT OF INTEREST BETWEEN THE

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

2012

Open to Public Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Part I Questions Regarding Compensation

| | Yes | No | | | | | | | | |
|--|---|--|---|--|--|---|---|--|--|--|
| <p>1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.</p> <table border="0"> <tr> <td><input type="checkbox"/> First-class or charter travel</td> <td><input type="checkbox"/> Housing allowance or residence for personal use</td> </tr> <tr> <td><input checked="" type="checkbox"/> Travel for companions</td> <td><input type="checkbox"/> Payments for business use of personal residence</td> </tr> <tr> <td><input type="checkbox"/> Tax indemnification and gross-up payments</td> <td><input type="checkbox"/> Health or social club dues or initiation fees</td> </tr> <tr> <td><input type="checkbox"/> Discretionary spending account</td> <td><input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)</td> </tr> </table> | <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use | <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence | <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees | <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) | | |
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use | | | | | | | | | |
| <input checked="" type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence | | | | | | | | | |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees | | | | | | | | | |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef) | | | | | | | | | |
| <p>b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain</p> | 1b | X | | | | | | | | |
| <p>2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?</p> | 2 | X | | | | | | | | |
| <p>3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.</p> <table border="0"> <tr> <td><input type="checkbox"/> Compensation committee</td> <td><input checked="" type="checkbox"/> Written employment contract</td> </tr> <tr> <td><input checked="" type="checkbox"/> Independent compensation consultant</td> <td><input checked="" type="checkbox"/> Compensation survey or study</td> </tr> <tr> <td><input type="checkbox"/> Form 990 of other organizations</td> <td><input checked="" type="checkbox"/> Approval by the board or compensation committee</td> </tr> </table> | <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract | <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study | <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee | | | | |
| <input type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract | | | | | | | | | |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study | | | | | | | | | |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee | | | | | | | | | |
| <p>4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:</p> <p>a Receive a severance payment or change-of-control payment?</p> <p>b Participate in, or receive payment from, a supplemental nonqualified retirement plan?</p> <p>c Participate in, or receive payment from, an equity-based compensation arrangement?</p> <p>If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.</p> | 4a | X | | | | | | | | |
| | 4b | X | | | | | | | | |
| | 4c | X | | | | | | | | |
| <p>Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.</p> <p>5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 5a or 5b, describe in Part III.</p> | 5a | X | | | | | | | | |
| | 5b | X | | | | | | | | |
| <p>6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:</p> <p>a The organization?</p> <p>b Any related organization?</p> <p>If "Yes" to line 6a or 6b, describe in Part III.</p> | 6a | X | | | | | | | | |
| | 6b | X | | | | | | | | |
| <p>7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III</p> | 7 | X | | | | | | | | |
| <p>8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III</p> | 8 | X | | | | | | | | |
| <p>9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?</p> | 9 | | | | | | | | | |

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

| (A) Name and Title | | (B) Breakdown of W-2 and/or 1099-MISC compensation | | | (C) Retirement and other deferred compensation | (D) Nontaxable benefits | (E) Total of columns (B)(i)-(D) | (F) Compensation reported as deferred in prior Form 990 |
|---|------|--|-------------------------------------|-------------------------------------|--|-------------------------|---------------------------------|---|
| | | (i) Base compensation | (ii) Bonus & incentive compensation | (iii) Other reportable compensation | | | | |
| (1) WILLIAM MEADOWS PRESIDENT (TO MAR '13) | (i) | 272,063. | 0. | 0. | 19,719. | 16,863. | 308,645. | 49,043. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (2) JAMES WILLIAMS PRESIDENT | (i) | 186,959. | 0. | 0. | 2,025. | 15,958. | 204,942. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (3) PAULA WOLFERSERDER YABAR VP, MEMBERSHIP & DEVELOPMENT (TO MAR '13) | (i) | 278,776. | 0. | 0. | 19,666. | 28. | 298,470. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (4) JANE TAYLOR VP, MARKING & COMM (TO JUL '13) | (i) | 181,410. | 0. | 0. | 14,231. | 7,859. | 203,500. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (5) SPENCER PHILLIPS SR DIRECTOR, ECONOMICS (TO SEP '13) | (i) | 169,713. | 0. | 0. | 11,338. | 24,513. | 205,564. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (6) MELANIE BELLER VP, POLICY & GOVERNMENT AFFAIRS (TO MAR '13) | (i) | 169,152. | 0. | 0. | 13,480. | 7,859. | 190,491. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (7) SARA BARTH DEPUTY VP, CONSERVATION | (i) | 162,786. | 0. | 0. | 13,470. | 22,660. | 198,916. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (8) JESLIE JONES GENERAL COUNSEL | (i) | 149,297. | 0. | 0. | 11,676. | 7,859. | 168,832. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (9) STEPHANIE TAYLOR STEWART SENIOR MAJOR GIFTS OFFICER | (i) | 127,110. | 0. | 12,311. | 11,114. | 15,564. | 166,099. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (10) ROBERT EKEY SR DIRECTOR, ENERGY CAMPAIGN | (i) | 122,704. | 0. | 4,188. | 9,427. | 24,513. | 160,832. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| (11) ASHFORD CHANCELLOR VP, FINANCE & ADMIN (TO JUL '12) | (i) | 105,210. | 0. | 54,489. | 10,026. | 9,720. | 179,445. | 0. |
| | (ii) | 0. | 0. | 0. | 0. | 0. | 0. | 0. |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |
| | (i) | | | | | | | |
| | (ii) | | | | | | | |

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINES 4A-B:

THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN, WHICH WAS AUTHORIZED BY THE COUNCIL, IS ONLY AVAILABLE TO THE SENIOR VICE PRESIDENTS AND THE PRESIDENT. CURRENTLY, ONLY FORMER PRESIDENT WILLIAM MEADOWS IS ENROLLED IN THE PLAN.

SEVERANCE PAYMENTS:

ASHFORD CHANCELOR \$ 38,040

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2012

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ **Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.**
▶ **Attach to Form 990.**

Name of the organization **THE WILDERNESS SOCIETY** Employer identification number **53-0167933**

Part I Types of Property

| | (a) Check if applicable | (b) Number of contributions or items contributed | (c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g | (d) Method of determining noncash contribution amounts |
|--|----------------------------|---|--|---|
| 1 Art - Works of art | | | | |
| 2 Art - Historical treasures | | | | |
| 3 Art - Fractional interests | | | | |
| 4 Books and publications | | | | |
| 5 Clothing and household goods | | | | |
| 6 Cars and other vehicles | | | | |
| 7 Boats and planes | | | | |
| 8 Intellectual property | | | | |
| 9 Securities - Publicly traded | X | 51 | 850,089. | RESALE VALUE |
| 10 Securities - Closely held stock | | | | |
| 11 Securities - Partnership, LLC, or trust interests | | | | |
| 12 Securities - Miscellaneous | | | | |
| 13 Qualified conservation contribution - Historic structures | | | | |
| 14 Qualified conservation contribution - Other | | | | |
| 15 Real estate - Residential | | | | |
| 16 Real estate - Commercial | | | | |
| 17 Real estate - Other | | | | |
| 18 Collectibles | | | | |
| 19 Food inventory | | | | |
| 20 Drugs and medical supplies | | | | |
| 21 Taxidermy | | | | |
| 22 Historical artifacts | | | | |
| 23 Scientific specimens | | | | |
| 24 Archeological artifacts | | | | |
| 25 Other ▶ (TRAVEL) | X | 2 | 37,190. | COMPARISON |
| 26 Other ▶ () | | | | |
| 27 Other ▶ () | | | | |
| 28 Other ▶ () | | | | |

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement **29**

| | Yes | No |
|---|-----|----|
| 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? | | X |
| b If "Yes," describe the arrangement in Part II. | | |
| 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? | X | |
| 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? | | X |
| b If "Yes," describe in Part II. | | |
| 33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II. | | |

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2012)

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No. 1545-0047

2012

Open to Public
Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

OUR WILD PLACES.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

THESE WILDLANDS PROVIDE US ALL WITH CLEAN AIR AND WATER; ABUNDANT

WILDLIFE; HAVENS FOR RECREATION, LEARNING, AND SOLITUDE; AND A

FOUNDATION FOR A HEALTHY PLANET. THEY ARE ALSO IMPORTANT SOURCES OF

RENEWABLE ENERGY AND VITAL NATURAL RESOURCES WHICH MUST BE MANAGED

WISELY.

SINCE ITS FOUNDING IN 1935, THE WILDERNESS SOCIETY HAS LED THE EFFORT

TO PERMANENTLY PROTECT AS WILDERNESS 110 MILLION ACRES IN 44 STATES,

FROM RICH HARDWOOD FORESTS IN THE EAST, STUNNING DESERTS IN THE

SOUTHWEST, AND SNOWCAPPED PEAKS IN THE ROCKIES TO OLD-GROWTH FORESTS IN

THE PACIFIC NORTHWEST AND TUNDRA IN ALASKA. FROM THE REVOLUTIONARY 1964

WILDERNESS ACT TO THE LANDMARK 2009 BILL WHICH PERMANENTLY PROTECTED

MORE THAN TWO MILLION ACRES OF WILDERNE

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

NEW PROTECTION FOR MILLIONS OF ACRES OF SPECTACULAR SCENERY, RICH

WILDLIFE HABITAT AND LARGE LANDSCAPES THAT NOW HAVE A BETTER CHANCE OF

BEING RESILIENT TO CLIMATE CHANGE. WITH THE OBAMA ADMINISTRATION'S

DECISION TO PROTECT 11 MILLION ACRES OF SPECIAL AREAS IN THE WESTERN

ARCTIC'S NATIONAL PETROLEUM RESERVE-ALASKA, WE ALSO MADE CRITICAL

PROGRESS TOWARD PUTTING CONSERVATION ON EQUAL GROUND WITH ENERGY

DEVELOPMENT.

| | |
|---|---|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|---|---|

THIS YEAR ALSO MARKED THE LAUNCH OF OUR CONSTITUENCY BUILDING CAMPAIGN TO INSPIRE MORE AMERICANS TO CARE FOR OUR WILD PLACES, AN AMBITIOUS EFFORT TO BUILD THE NEXT GENERATION OF WILDERNESS SUPPORTERS AND CHAMPIONS.

BELOW ARE SOME OF OUR CONSERVATION ACCOMPLISHMENTS:

- NEW NATIONAL MONUMENTS: PRESIDENT OBAMA PROTECTED FIVE NEW NATIONAL MONUMENTS IN MARCH 2013 THAT CELEBRATE THE DIVERSITY OF AMERICA'S NATURAL AND CULTURAL HERITAGE. THE WILDERNESS SOCIETY PLAYED A KEY ROLE IN THE EFFORT TO ENSURE THE DESIGNATION OF THESE MONUMENTS. THE LARGEST OF THESE DESIGNATIONS WAS THE PROTECTION OF THE RIO GRANDE DEL NORTE NATIONAL MONUMENT IN NORTHERN NEW MEXICO, WHICH INCLUDES ROUGHLY 240,000 ACRES OF PUBLIC LAND AND IS A HOME TO WILDLIFE, A RECREATION HAVEN AND A VITAL SOURCE OF WATER FOR SURROUNDING COMMUNITIES. THE PRESIDENT ALSO DESIGNATED PUBLIC LANDS IN THE BEAUTIFUL SAN JUAN ISLANDS AS A NATIONAL MONUMENT IN WASHINGTON STATE, THE HARRIET TUBMAN NATIONAL MONUMENT IN MARYLAND, THE CHARLES YOUNG BUFFALO SOLDIERS NATIONAL MONUMENT IN OHIO, AND HISTORIC SITES IN DELAWARE.

- 11 MILLION ACRES PROTECTED IN THE NATIONAL PETROLEUM RESERVE-ALASKA: IN FEBRUARY THE OBAMA ADMINISTRATION PROTECTED 11 MILLION ACRES OF SPECIAL AREAS IN THE WESTERN ARCTIC'S NATIONAL PETROLEUM RESERVE-ALASKA. THAT DECISION WAS A VICTORY FOR TWS AND FOR CONSERVATION IN A UNIQUELY BEAUTIFUL PART OF THE WORLD. RESEARCH LED BY TWS HELPED THE ADMINISTRATION CHOOSE AN APPROACH THAT PROTECTS VITAL HABITAT FOR CARIBOU AND NESTING WATERFOWL WHILE STILL ALLOWING INDUSTRY

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
|--|--|

ACCESS TO 72 PERCENT OF THE RESERVE'S ECONOMICALLY RECOVERABLE OIL.

THIS DECISION IS ALSO A MODEL FOR LANDSCAPE-SCALE PLANNING AND FOR MOVING TOWARD PUTTING CONSERVATION ON EQUAL GROUND WITH ENERGY DEVELOPMENT.

- VICTORY IN THE TEANAWAY RIVER VALLEY: TWS PLAYED A CRITICAL ROLE IN A MAJOR WILD LANDS VICTORY IN WASHINGTON STATE IN 2013. ON JUNE 30, 2013 GOVERNOR JAY INSLEE SIGNED INTO LAW A BILL THAT WILL CONSERVE THE PICTURESQUE TEANAWAY RIVER VALLEY, EAST OF SEATTLE. THIS EFFORT ACQUIRED 50,000 ACRES IN THE TEANAWAY RIVER VALLEY TO ENSURE CONSERVATION OF IMPORTANT LANDS IN THE UPPER YAKIMA RIVER BASIN THAT WILL EQUALLY BENEFIT FISH, WILDLIFE, FARMS AND FAMILIES. THIS IS THE LARGEST SINGLE LAND ACQUISITION IN WASHINGTON STATE IN THE PAST 45 YEARS, AND THIS VICTORY WOULD NOT HAVE HAPPENED WITHOUT THE INSPIRING WORK AND VISION OF TWS STAFF.

- THE ARCTIC NATIONAL WILDLIFE REFUGE SAFE FOR ANOTHER YEAR: THE WILDERNESS SOCIETY PLAYED A LEADING ROLE IN THE EFFORTS TO PROTECT THE ARCTIC NATIONAL WILDLIFE REFUGE COASTAL PLAIN FROM OIL AND GAS DEVELOPMENT IN 2013 BY WORKING WITH LOCAL AND NATIONAL PARTNERS TO ENSURE THAT THREATENING CONGRESSIONAL LEGISLATION AIMING TO OPEN THE REFUGE'S COASTAL PLAIN TO OIL AND GAS DEVELOPMENT DID NOT PASS, AND FEDERAL DECISION-MAKERS REJECTED AN ALASKA STATE PERMIT REQUEST TO PURSUE SEISMIC TESTING AND MORE THAN 10 EXPLORATION WELLS IN THE COASTAL PLAIN. ADDITIONALLY, THE WILDERNESS SOCIETY CONTINUED TO URGE THE ADMINISTRATION TO INCLUDE STRONG WILDERNESS RECOMMENDATIONS FOR THE COASTAL PLAIN AND OTHER PARTS OF THE REFUGE IN ITS REVISED MANAGEMENT PLAN FOR THE ARCTIC REFUGE.

| | |
|--|--|
| Name of the organization THE WILDERNESS SOCIETY | Employer identification number 53-0167933 |
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- GREAT OUTDOORS AMERICA WEEK: MORE THAN 275 PEOPLE CAME TO DC IN JUNE TO PARTICIPATE IN GREAT OUTDOORS AMERICA WEEK. INVOLVING A TREMENDOUS COALITION OF VOICES, THE EVENT SUCCEEDED IN NOT ONLY ESTABLISHING A VISIBLE PRESENCE ON CAPITOL HILL TO ADVOCATE FOR PUBLIC LAND CONSERVATION, ACCESS, AND FUNDING, BUT ALSO ENGAGING A NUMBER OF SENATORS, REPRESENTATIVES, AND ADMINISTRATION OFFICIALS TO EMPOWER THEIR LEADERSHIP ON OUR ISSUES.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS:
TO CARE FOR OUR WILD PLACES. BY USING ONLINE AND TRADITIONAL OUTREACH, WE'VE BEEN GROWING OUR BASE OF SUPPORT. THE FOLLOWING SUMMARY OF OUR ACTIVITIES HIGHLIGHTS SOME OF THIS WORK.

- IN 2011 SOUTHERN APPALACHIAN WILDERNESS STEWARDS (SAWS) BECAME A PROGRAM OF THE WILDERNESS SOCIETY. THE SAWS PROGRAM WAS STARTED TO ADDRESS WILDERNESS OPPOSITION AND STEWARDSHIP NEEDS ACROSS FIVE NATIONAL FORESTS (CHEROKEE, CHATTAHOOCHEE, NANTAHALA, PISGAH, AND SUMTER) IN 22 WILDERNESS AREAS. IN 2013 THE PROGRAM ANNOUNCED FUTURE EXPANSION TO INCLUDE WORK IN THE GEORGE WASHINGTON AND JEFFERSON NATIONAL FORESTS IN VIRGINIA, INCLUDING 23 ADDITIONAL WILDERNESS AREAS. SINCE 2011 THE SAWS PROGRAM GENERATED THOUSANDS OF VOLUNTEER SERVICE HOURS IN MORE THAN 20 DIFFERENT WILDERNESS AREAS OF THE SOUTHERN APPALACHIANS AND CREATED NEW SEASONAL JOBS IN LOCAL COMMUNITIES. THE PROGRAM HELPED RESTORE MORE THAN 125 MILES OF WILDERNESS TRAILS, TRAINED AND CERTIFIED MORE THAN 200 VOLUNTEERS THROUGH OUR WILDERNESS SKILLS INSTITUTE, AND HOSTED WORK CREWS FROM 10 DIFFERENT UNIVERSITY PROGRAMS. THE SAWS PROGRAM ALSO ENGAGED MORE THAN 250 NEW WILDERNESS

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STEWARDS AND GATHERED DATA ACROSS 22 WILDERNESS AREAS AS PART OF THE USFS CHIEF'S CHALLENGE PROGRAM IN ANTICIPATION OF THE 50TH ANNIVERSARY OF THE WILDERNESS ACT.

- IN THE SPRING OF 2013 THE WILDERNESS SOCIETY LAUNCHED AN INTEGRATED MARKETING CAMPAIGN TITLED "GO OUTSIDE AND PLAY!" UTILIZING AN INTEGRATED SERIES OF EMAIL MESSAGES, DIRECT MAIL, WEB CONTENT, VIDEO AND ENGAGEMENTS DEPLOYED, THE CAMPAIGN ASKED PEOPLE TO GET OUTSIDE ONTO PUBLIC LANDS, AND TO JOIN WITH THE WILDERNESS SOCIETY TO PROTECT OUR WILD PLACES. IT ALSO CARRIED A CHILD-CENTRIC THEME OF PLAYING OUTDOORS AS ESSENTIAL TO CHILDREN'S DEVELOPMENT AND IN CREATING THE NEXT GENERATION OF CONSERVATIONISTS. THE CAMPAIGN FEATURED AUTHOR RICHARD LOUV, ACTRESS WENDIE MALICK AND PARTNER ORGANIZATIONS THE CHILDREN & NATURE NETWORK, AMERICAN HEART ASSOCIATION, THE AD COUNCIL AND OUTDOOR ALLIANCE FOR KIDS. ADDITIONALLY, THE SUCCESSFUL MY WILDERNESS SERIES CONTINUED WITH STORIES AND VIDEOS FROM T.A. BARRON CONNECTING WITH ROCKY MOUNTAIN NATIONAL PARK AND PROFESSIONAL SNOWBOARDER JEREMY JONES EXPERIENCING THE HIGH SIERRAS.

- ON THE ROAD WITH DAVE MATTHEWS AND THE DREAMING TREE WINES: WE HOSTED A BOOTH IN THE ECO-VILLAGE WITH DREAMING TREE WINES AT 45 DAVE MATTHEWS BAND CONCERTS FROM MID-MAY THROUGH MID-SEPTEMBER. AT THE BOOTH WE EDUCATED CONCERT GOERS ABOUT THE WILDERNESS SOCIETY AND OUR CONSERVATION EFFORTS. WE ASKED INDIVIDUALS TO SHOW THEIR SUPPORT FOR THE PRESERVATION OF OUR WILDLANDS BY WEARING AN "I LIKE IT WILD" BUTTON AND PLEDGE TO "KEEP IT WILD WITH THE WILDERNESS SOCIETY."

- THE WILDERNESS SOCIETY'S PUBLIC COMMUNICATIONS INCLUDES A HIGHLY

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VISUAL WEBSITE, MEMBERSHIP NEWSLETTERS PUBLISHED THREE TIMES A YEAR, TARGETED E-NEWSLETTERS AND ACTION EMAILS AND A VIBRANT SOCIAL MEDIA NETWORK REACHING MORE THAN 100,000 SUPPORTERS ON TWITTER, FACEBOOK, YOUTUBE & PINTEREST. WE HAD APPROXIMATELY 500,000 EMAIL SUBSCRIBERS LAST YEAR WHO RECEIVED TARGETED EMAILS ON A RANGE OF ISSUES LINKED TO CAMPAIGNS, LEGISLATION, LOCAL CONSERVATION QUESTIONS AND LAND-AGENCY POLICIES. OUR ADVOCACY EMAILS FREQUENTLY GENERATED TENS OF THOUSANDS OF RESPONSES TO DECISION-MAKERS EACH MONTH, ADVANCING OUR LOCAL AND NATIONAL ADVOCACY WORK.

- OUR RECRUITMENT CAMPAIGNS, TARGETED SEARCH ENGINE MARKETING CAMPAIGNS, ALERT CAMPAIGNS AND SOCIAL MEDIA OUTREACH INCREASED OUR WEBSITE TRAFFIC TO ROUGHLY 125,000 MONTHLY VISITORS WHILE CONTINUING TO EXPAND REACH TO NEW AUDIENCES AND CREATING ROBUST ORIGINAL CONTENT TO DRIVE ENGAGEMENT DEEPER AND WIDER ACROSS THE SITE. WE CONTINUED TO SEE SEARCH ENGINE TRAFFIC GROWTH BY DEVELOPING NEW CONTENT TO ATTRACT NEW AUDIENCES AND OPTIMIZING OUR GOOGLE GRANTS PROGRAM TO CREATE ROBUST LANDING PAGES FOR HIGHLY SEARCHED TERMS. OUR FACEBOOK ENGAGEMENT HAS SEEN TREMENDOUS GROWTH WITH MANY POSTS REACHING 70-80,000 PERSONS AND THE AVERAGE DAILY POST REACHING OVER 15,000 USERS. IN ADDITION, THE WILDERNESS SOCIETY MADE ITS WEBSITE PLATFORM AGNOSTIC BY COMPLETING A RESPONSIVE DESIGN SITE IN MARCH OF 2013. TWITTER CONTINUES TO BE AN IMPORTANT OUTLET WITH OVER 40,000 FOLLOWERS INCLUDING MANY KEY LEGISLATORS, JOURNALISTS AND DECISION MAKERS WHO RELY ON THE PLATFORM FOR INFORMATION.

- TO DATE THE DIGITAL CHANNELS HAVE GENERATED OVER HUNDREDS OF THOUSANDS OF ENGAGEMENTS ACROSS ALL CHANNELS INCLUDING COMMENTS,

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PLEDGES, DOWNLOADS AND USER GENERATED EXPANSION ACROSS ALL PLATFORMS INCLUDING RETWEETS, FACEBOOK COMMENTS, ACTION ALERTS.

FOR MORE INFORMATION ABOUT OUR ACCOMPLISHMENTS AND THE PLACES WE WORK TO PROTECT VISIT WWW.WILDERNESS.ORG

FORM 990, PART VI, SECTION A, LINE 2: DAVID BONDERMAN AND RICHARD BLUM ARE RELATED THROUGH A BUSINESS RELATIONSHIP.

CAROLINE GETTY AND MICHAEL MANTELL ARE RELATED THROUGH A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11: AFTER PREPARATION OF FORM 990 IS COMPLETE, IT IS EXAMINED BY THE VICE PRESIDENT, FINANCE FOR ACCURACY AND COMPLETENESS. THE DOCUMENT IS THEN PRESENTED TO AND REVIEWED BY THE PRESIDENT AND VICE PRESIDENT OF CONSERVATION, MEMBERSHIP AND DEVELOPMENT, AND FINANCE AND ADMINISTRATION. THE AUDIT COMMITTEE WILL THEN MEET TO INSPECT FORM 990. SUBSEQUENT TO THE AUDIT COMMITTEE MEETING, FORM 990 IS POSTED ON THE ORGANIZATION'S INTRANET PAGE FOR REVIEW BY THE GOVERNING COUNCIL BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C: TWS HAS A WRITTEN CONFLICT OF INTEREST POLICY. IT IS REVIEWED ANNUALLY. ALL STAFF, INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, MUST CERTIFY ANUALLY THAT THEY HAVE READ AND FAMILIARIZED THEMSELVES WITH THE POLICY, AND DISCLOSE ANY POTENTIAL CONFLICTS. STAFF DISCLOSE WHETHER THEY SERVE AS BOARD MEMBERS OR OFFICERS OF ANY OTHER ORGANIZATION WHOSE MISSION AND ACTIVITIES MAY OVERLAP WITH THOSE OF TWS. FURTHER, ALL OFFICERS, DIRECTORS, TRUSTEES AND KEY

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EMPLOYEES DISCLOSE ANY RELATED ORGANIZATION RELATIONSHIPS. COMPLETED FORMS ARE REVIEWED AND ANY POTENTIAL CONFLICTS ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO ENFORCE COMPLIANCE WITH THE POLICY. ALL STAFF INCLUDING OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES, NOTIFY THE ORGANIZATION IF CIRCUMSTANCES CHANGE THROUGH THE COURSE OF THE FISCAL YEAR AND THE CHANGED CIRCUMSTANCES ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO REMAIN IN COMPLIANCE WITH THE POLICY.

FORM 990, PART VI, SECTION B, LINE 15: EXECUTIVE COMPENSATION IS REVIEWED ANNUALLY AT THE WILDERNESS SOCIETY BY AN INDEPENDANT CONSULTING FIRM. THE FIRM REGULARLY PROVIDES EXECUTIVE COMPENSATION STUDIES FOR TAX EXEMPT ENTITIES. THE MARKET ANALYSIS PRICED OUR POSITIONS USING COMPARABLE INDUSTRIES, MATCHED POSITIONS DIRECTLY TO SALARY DATA, AND UTILIZED A 'TOP PAID' ANALYSIS IN THE FINAL REPORT OF MARKET FINDINGS. THE GOVERNING COUNCIL SPECIFICALLY REVIEWS THE COMPENSATION OF "DISQUALIFIED INDIVIDUALS" AND THE VICE PRESIDENT OF FINANCE AND ADMINISTRATION. BASED ON THE MARKET FINDINGS, THE COUNCIL REVIEWS AND APPROVES THE COMPENSATION OF THESE POSITIONS EACH YEAR.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:
AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, LA, ME, MD, MA, MI, MN, MS, NH, NJ, NM, NY, NC, ND, OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

FORM 990, PART VI, SECTION C, LINE 18: THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE. FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART VI, SECTION C, LINE 19: THE ORGANIZATION MAKES ITS

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FINANCIAL STATEMENTS AND FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE.

FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

TEMPS:

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| PROGRAM SERVICE EXPENSES | 85,293. |
| MANAGEMENT AND GENERAL EXPENSES | 7,003. |
| FUNDRAISING EXPENSES | 8,270. |
| TOTAL EXPENSES | 80,566. |

VOLUNTEER EXPENSES:

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| PROGRAM SERVICE EXPENSES | 88,716. |
| MANAGEMENT AND GENERAL EXPENSES | 9,515. |
| FUNDRAISING EXPENSES | 11,237. |
| TOTAL EXPENSES | 109,468. |

WRITING/ EDITING:

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| PROGRAM SERVICE EXPENSES | 63,658. |
| MANAGEMENT AND GENERAL EXPENSES | 6,828. |
| FUNDRAISING EXPENSES | 8,063. |
| TOTAL EXPENSES | 78,549. |

DIRECT MAIL:

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| PROGRAM SERVICE EXPENSES | 427,937. |
| MANAGEMENT AND GENERAL EXPENSES | 45,899. |
| FUNDRAISING EXPENSES | 54,204. |
| TOTAL EXPENSES | 528,040. |

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PRODUCTION/ DESIGN:

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| PROGRAM SERVICE EXPENSES | 102,401. |
| MANAGEMENT AND GENERAL EXPENSES | 10,983. |
| FUNDRAISING EXPENSES | 12,971. |
| TOTAL EXPENSES | 126,355. |

PHOTOGRAPHY:

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| PROGRAM SERVICE EXPENSES | 24,130. |
| MANAGEMENT AND GENERAL EXPENSES | 2,588. |
| FUNDRAISING EXPENSES | 3,056. |
| TOTAL EXPENSES | 29,774. |

COMPUTER SERVICE:

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| PROGRAM SERVICE EXPENSES | 808,995. |
| MANAGEMENT AND GENERAL EXPENSES | 86,770. |
| FUNDRAISING EXPENSES | 102,471. |
| TOTAL EXPENSES | 998,236. |

CONSULTANTS:

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| PROGRAM SERVICE EXPENSES | 1,589,504. |
| MANAGEMENT AND GENERAL EXPENSES | 170,485. |
| FUNDRAISING EXPENSES | 201,333. |
| TOTAL EXPENSES | 1,961,322. |
| TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A | 3,912,310. |

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

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| PLEDGE ALLOWANCE | -386,022. |
| CHANGE IN BENEFICIAL INTEREST | -693,126. |

