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Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

Internal	Revenue	Service	► The or	rganızatıon may have to ı	use a copy of	this return to satisfy s	tate reporting	requirements	Inspection
A Fo	r the	2009 cal	endar yea	r, or tax year beginning	10-01-2009	and ending 09-30-2010)	D Fundamental	
_		pplicable	Please	C Name of organization THE WILDERNESS SOCIETY	D Employer Id	entification number			
_	dress ch		use IRS label or	Doing Business As	53-0167933 E Telephone number				
	me cha	_	print or type. See					(202) 833-	
_	tıal retu		Specific Instruc-	Number and street (or P O 1615 M STREET NW	box if mail is no	ot delivered to street addre	ss) Room/suite	G Gross receipts	
_	mınate		tions.						
☐ Am	ended	return		City or town, state or coun WASHINGTON, DC 200363					
App	plication	n pending		·					
				ne and address of princip EADOWS	al officer			ıs a group retur	
			1615 N	M STREET NW			απιιια	ites?	⊤Yes 🔽 No
			WASHI	INGTON,DC 20036320	09		H(b) Are a	l affiliates includ	ded?
——— т Та	x-exem	npt status	▼ 501(c)) (3) ◀ (insert no)	47(a)(1) or \Box	527	_		(see instructions)
			•	RNESSORG			H(c) Grou	ıp exemption nı	illipel F
					_				
		_		tion Trust Association	Other 🟲		L Year of fo	rmation 1935	M State of legal domicile DC
Pa	rt I	Sumn Briefly de		e organization's mission	or most signi	ficant activities			
	-	•		TO PROTECT WILDER	_		TO CARE FO	R OUR WILD P	LACES
ဋ									
쯛									
Governance	2	Check th	nis box ►		ontinued its o	perations or disposed	of more than	25% of its net	assets
	3		•	members of the governing					36
2 ර රෝ	4		_	ndent voting members of		•		. 4	36
Activities &	5			nployees (Part V , line 2a					224
₹ 5	6	Total nu	mber of vo	olunteers (estimate if nec	essary) .			6	0
ď	7a	a Total gross unrelated business revenue from Part VIII, column (C), line				column (C), line 12 .		7	a 0
	ь	Net unre	lated busi	iness taxable income froi	m Form 990-	Γ, line 34		7	b 0
							Prio	or Year	Current Year
a.	8	Contrib	utions and	d grants (Part VIII, line :	1h)			32,536,772	20,347,273
31	9	Progran	m service	revenue (Part VIII, line	2g)		60,400	2,612	
Rayenue	10			me (Part VIII, column (A	• • •	•		-4,351,798	775,166
	11			art VIII, column (A), line			1,293,080	1,883,905	
	12			dd lines 8 through 11 (m	•			29,538,454	23,008,956
	13			ar amounts paid (Part IX,				515,273	900,327
	14	Benefit	s paid to c	or for members (Part IX,	column (A), lii	ne 4)			0
ø	15		s, other co	ompensation, employee b	enefits (Part	IX, column (A), lines 5	i –	16,093,085	16,966,673
Expenses	16a	10)	uonal fund	Iraising fees (Part IX, col	umn (A.) lina	110)		492,130	454,162
⊕ ⊕	Ь			enses (Part IX, column (D), lir		•		432,130	454,102
Ð	17			(Part IX, column (A), line	•	-		11,649,840	11,503,438
	18			A dd lines 13–17 (must e				28,750,328	29,824,600
	19		•	penses Subtract line 18	·			788,126	-6,815,644
<u>የ</u> ያ			<u> </u>			g of Current	End of Year		
Net Assets or Fund Balances						<u> </u>	'ear		
Ass Ba	20			rt X, line 16)				55,497,361	53,152,579
₹ <u>5</u>	21 22		•	Part X, line 26)				6,700,572	6,629,426
	22 13 11	_	ature Blo	nd balances Subtract line	e 21 from fine	20		48,796,789	46,523,153
Г				erjury, I declare that I have ex	amined this retu	rn. including accompanying	schedules and s	tatements, and to	the best of my knowledge
				correct, and complete Declara					
Sigr	.	<u> </u>					2011	03-03	
Her		Signa	ture of office	er			Date	03-03	
		Ashfo	rd Chancello	or Vice President					
			or print nam						
		Preparer's	 5 k		D		Check If	Preparer's ident	
Paid		signature					elf- empolyed • 🔽	(see instructions	s)
	arer's		me (or your	s ARGY WILTSE & ROBINSO	ON PC				
Use (Only	ıf self-em address, a	ployed), and ZIP + 4	•				EIN Þ	
				0100 011211000110 01111	LOOK			Phone no 🕨 (703) 893-0600
May :	the IR	.S discuss	s this retu	MCLEAN, VA 22102 rn with the preparer show	vn above? (se	e instructions)			ΓYes ΓNο

4e

Total program service expenses▶\$

24,135,105

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

The mission of The Wilderness Society is to preserve wilderness and inspire Americans to care for our wild places. Why we're successful. 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 nat

2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
3	If "Yes," describe these new services on Schedule O Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
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	WIDDRNESS AND WILD LANDS CONSERVATION Protective Designations. After years of deficated work by Wilderness Society staff and in an enormous victory for carbou, Arctic ecosystems, and the Gwich'in people who depend on the refuge for their subsistence way of life, the U.S. Fish and Wildlife Service finally agreed to undertake a full wilderness view for the coastal plan of the Arctic National Wildlife Refuge. This is an important strict on the strict one on the plan to possible wilderness designation. After such a review the agency can legally recommend to Congress that the land be included in the National Wilderness Preservation System, which would protect it forever Land Stewardship and Restoration. There are \$5.5 million across and monateration undertook a relevance and the Roadless Area Conservation Rule was adopted in 2001 to keep these places in their natural condition. But the previous administration undertook a relevance acrops to the vision of the stage of the
4b	PROGRAM SERVICE - OUTREACH AND EDUCATION One of the most significant and visionary conservation initiatives to emerge from the Obama administration was built around public education, outreach and activism. America's Great Outdoors (AGO) began a national conversation about land conservation, and The Wilderness Society was involved every step of the way. Our goal was to ensure that wild land funding for the acquisition of more green spaces would become high priorities in AGO's final recommendations. We assigned full-time staff to the effort, turned out participants for listening sessions around the country, provided national and regional communications leadership for the entire conservation community, and organized a strong e-communications outreach effort to send reactions back to the AGO staff. Our work generated nearly 40,000 comments to the administration Wilderness Society staff also helped shape the location and/or topic of several of the public hearings. In Los Angeles we helped organize an additional listening session targeted at the San Gabriel Mountains and linked to a proposal to connect a national recreation area to the neighborhoods near East Los Angeles. This process opened the door for many diverse voices to be heard. We also were successful at placing op-eds and stories in the press nationwide, including a piece in the Salt Lake City Tribune by Peter Metcalf, CEO of Black Diamond (a leading outdoors equipment manufacturer), who worked with us to write an op-ed outlining a business person's reasons for wanting to protect wild lands. The Wilderness Society is constantly building partnerships with groups that care about land protection and enjoys the benefit of having hundreds of individuals associated with those groups stand with us on specific issues. Our current alliances include hunters, anglers, and local business associations to name just a few. This year we created a formal, groundbreaking partnerships with the Back Country Horsemen of America. The relationship is a simple proportiunities to e
4c	(Code) (Expenses \$ including grants of \$) (Revenue \$)
	Other was a server of Charles of
4d	Other program services (Describe in Schedule O) (Expenses \$ including grants of \$) (Revenue \$)

art TV	Check	dist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		Νo
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
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? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		Νο
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 U S? <i>If "Yes," complete Schedule F, Part II</i>	15		Νο
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 U S ? If "Yes," complete Schedule F, Part III	16		Νo
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
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? If "Yes," complete Schedule I, Parts I and II	21	Yes	
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? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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? If "Yes," complete Schedule L, Part I	25a		No
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? If "Yes," complete Schedule L, Part I	25b		No
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? If "Yes," complete Schedule L, Part II	26		No
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? If "Yes," complete Schedule L, Part III	27		No
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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		No
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> "Yes," complete Schedule N, Part II	32		No
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</i> "Yes," complete Schedule R, Part I	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		No
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
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? If "Yes," complete Schedule R, Part VI	37		No
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	38	Yes	
		F	orm 99 0) (2009)

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	Diatements Regarding Const. Like I mings and Tax Compilation		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
За	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?	3a		Νο
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νo
Ь	If "Yes," enter the name of the foreign country See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? \cdot .	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
,	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		Νο
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Νο
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
3	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
)	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
.0	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
1	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
.2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7 below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances,	b					
	processes, or changes in Schedule O. See instructions.						
56	ection A. Governing Body and Management		Yes	No			
			Yes	No			
1a	Enter the number of voting members of the governing body 1a 36						
b	Enter the number of voting members that are independent 1b 36	1					
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?	2		No			
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? .	. 3		No			
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No			
6	Does the organization have members or stockholders?	6		No			
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No			
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νo			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following						
а	The governing body?	8a	Yes				
b	Each committee with authority to act on behalf of the governing body?	8b	Yes				
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	9		No			
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)						
			Yes	No			
10a	Does the organization have local chapters, branches, or affiliates?	10a		No			
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b					
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes				
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes				
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes				
13	Does the organization have a written whistleblower policy?	13	Yes				
14 Does the organization have a written document retention and destruction policy?							

С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes		
13	Does the organization have a written whistleblower policy?	13	Yes		
14	Does the organization have a written document retention and destruction policy?	14	Yes		
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?				
а	The organization's CEO, Executive Director, or top management official	15a	Yes		
b	Other officers or key employees of the organization	15b	Yes		

If "Yes" to line a or b, 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 16a Νo **b** If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the

Section C. Disclosure

List the States with which a copy of this Form 990 is required to be filed ►AL, AK, AZ, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY, ${\tt LA} \; , \; {\tt ME} \; , \; {\tt MD} \; , \; {\tt MA} \; , \; {\tt MI} \; , \; {\tt MN} \; , \; {\tt MS} \; , \; {\tt NH} \; , \; {\tt NJ} \; , \; {\tt NM} \; , \; {\tt NY} \; , \; {\tt NC} \; ,$ ND,OH,OK,OR,PA,RI,SC,TN,UT,VA,WA,WV, WI

16b

Section 6104 requires an organization to make its Form 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

Own website Another's website Vpon request

- 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. See Additional Data Table
- 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 NW

WASHINGTON.DC 200363209 (202) 833-2300

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

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. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, or 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 the organization did i	not compen	sate any	y curi	rent	or fo	rmer	ffice	r, dırector, trustee	or key employee	
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

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 -25

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

Section B. Independent Contractors

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
Production Management Group LT 6940 Columbia Gateway Drive COLUMBIA, MD 21046	DIRECT MAIL	764,604
Adams Hussey and Associates 1600 Wilson Blvd 300 ARLINGTON, VA 22209	DIRECT MAIL	418,724
RAFFA ASSOCIATES 1899 L STREET NW STE 900 WASHINGTON, DC 20036	IT CONSULTING	451,666
HBW GROUP 1055 FIRST STREET STE 200 ROCKVILLE, MD 20850	CONSTRUCTION	301,937
MAL WARWICK ASSOCIATES 2550 NINTH STREET STE 103 BERKELEY, CA 94710	DIRECT MAIL	191,101
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 >20

23,008,956

2,612

Total revenue. See Instructions . . .

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

А	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to	-		(D).	
	ot include amounts reported on lines 6b, b, 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	893,327	893,327		
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22	7,000	7,000		
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	1,632,556	1,080,817	260,435	291,304
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	12,192,741	10,664,011	501,165	1,027,565
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,102,412	948,074	55,121	99,217
9	Other employee benefits	1,104,856	1,003,730	24,190	76,936
10	Payroll taxes	934,108	803,333	46,705	84,070
11	Fees for services (non-employees)				
а	Management	0	0	0	0
b	Legal	44,832	31,382	5,380	8,070
c	Accounting	166,751	116,725	20,011	30,015
d	Lobbying	0	0	0	0
e	Professional fundraising See Part IV, line 17	454,162			454,162
f	Investment management fees	180,296	0	180,296	0
g	Other	3,816,430	3,055,300	173,350	587,780
12	Advertising and promotion	0	0	0	0
13	Office expenses	2,871,686	1,973,346	133,469	764,871
14	Information technology	0	0	0	0
15	Royalties	0	0	0	0
16	Occupancy	2,188,135	1,812,086	153,205	222,844
17	Travel	1,288,405	1,073,911	132,456	82,038
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
21	Payments to affiliates	0	0	-	0
22	Depreciation, depletion, and amortization	746,347	519,927		134,175
23 24	Insurance	66,767	46,512	8,252	12,003
	total expenses shown on line 25 below)				
а	MAILING LIST RENTAL	70,855	37,508	1,345	32,002
b	PERSONNEL ACQUISITIONS	156,451	111,589	18,193	26,669
c	MISCELLANEOUS	186,631	137,118	17,852	31,661
d	DUES & SUBSCRIPTIONS	117,172	96,194	10,256	10,722
е	ALLOWANCE -UNCERTAIN PLEDGES	-397,320	-276,785	-49,107	-71,428
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	29,824,600	24,135,105	1,784,819	3,904,676
26	Joint costs. Check here ▶				
	campaign and fundraising solicitation	3,380,316	1,569,586	365,868	1,444,862

Pa	rt X	Balance Sheet					
					(A)		(B)
	Ι.				Beginning of year	_	End of year
	1	Cash—non-interest-bearing				1	570.050
	2	Savings and temporary cash investments	•		1,442,778	\vdash	579,859
	3	Pledges and grants receivable, net	•		18,270,550		10,389,628
	4	Accounts receivable, net			1,443,517	4	795,727
	5	Receivables from current and former officers, directors, trustees highest compensated employees Complete Part II of	, key	employees, and			
		Schedule L				5	
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of		4958(f)(1)) and			
		Schedule L				6	
ssets	7	Notes and loans receivable, net				7	_
8	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			436,241	9	773,218
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	7,024,590			
	ь	Less accumulated depreciation	10b	5,012,203	2,334,293	10c	2,012,387
	11	Investments—publicly traded securities			26,143,227	11	31,058,533
	12	Investments—other securities See Part IV, line 11	217,986	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			5,208,769	15	7,316,232
	16	Total assets. Add lines 1 through 15 (must equal line 34)	55,497,361	16	53,152,579		
	17	Accounts payable and accrued expenses .	2,904,544	17	3,282,265		
	18	Grants payable		18			
	19	Deferred revenue	3,495,372	19	3,196,300		
	20	Tax-exempt bond liabilities				20	
es es	21	Escrow or custodial account liability Complete Part IV of Schedul	eD.			21	
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified					
<u> </u>		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			300,656	25	150,861
	26	Total liabilities. Add lines 17 through 25			6,700,572	26	6,629,426
-S		Organizations that follow SFAS 117, check here 🕨 🔽 and comp	lete li	nes 27			
Ð		through 29, and lines 33 and 34.					
an	27	Unrestricted net assets			8,325,742	27	8,071,667
<u>е</u>	28	Temporarily restricted net assets			29,206,478	28	27,131,089
Fund Balance	29	Permanently restricted net assets			11,264,569	29	11,320,397
₫		Organizations that do not follow SFAS 117, check here 🕨 🦵 an	d com	plete			
ō		lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other fu	nds			32	
Net	33	Total net assets or fund balances			48,796,789	33	46,523,153
	34	Total liabilities and net assets/fund balances			55,497,361	34	53,152,579

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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	2c	Yes	
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 consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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?	3a		No
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	3b		

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Name of the organization THE WILDERNESS SOCIETY

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.

Inspection **Employer identification number**

53-0167933

	rt I			blic Charity Stat						ructions	
The	rganı	zatıon ıs	not a private	e foundation because	ıtıs (Forlı	nes 1 throu	gh 11, check	only one box)		
1	Γ	A churc	h, conventio	on of churches, or as:	sociation of	churches s e	ection 170(b))(1)(A)(i).			
2	\sqcap	A schoo	ol described	ın section 170(b)(1)	(A)(ii). (Att	ach Schedu	le E)				
3	Γ	A hospi	tal or a coop	perative hospital serv	vice organiza	atıon descrıl	oed in sectio i	n 170(b)(1)(<i>A</i>	A)(iii).		
4	Γ			organization operate y, and state	ed in conjunc	ction with a l	nospital desc	rıbed ın secti	ion 170(b)(1)((A)(iii). Ent	er the
5	Г	_	•	erated for the benefit A)(iv). (Complete Pa	_	or universit	y owned or op	perated by a ç	jovernmental	unıt descril	 ped in
6	Г			local government or		al unit descr	ıbed ın secti o	on 170(b)(1)((A)(v).		
7	<u> </u>	An orga describ	inization tha ed in	t normally receives a	a substantia					n the genera	al public
8	Γ			described in section		(vi) (Com	plete Part II)			
9	Γ	An orga receipts its supp	An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross eccipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses incoursed by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.)								
10	Г	•			•			•	•		
11		An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 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 f g	ı	other the section of the ocheck the Since A	nan foundation 509(a)(2) rganization r his box ugust 17, 2 g persons?	ox, I certify that the open managers and other eccurred a written detection of the companization of the companizat	er than one of termination f ation accept	or more publ from the IRS ted any gift	icly supporte that it is a T or contributio	ed organizatio Type I, Type I on from any of	ons described II or Type III f the	ın section 5	organization,
				ectly or indirectly co	•			persons descr	ribed in (ii)	11-/:	Yes No
				governing body of the r of a person describ			LIOII			11g(i	
			•	ed entity of a person	• • •		20402			11g(ii	+
h				g information about t						11g(iii	<u> </u>
	(i) Name suppo rganız	e of rted	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section	(iv) Is the organizat col (i) lis your gove docume	e Ion In ted In Irning	(v) Did you no organiza col (i) o suppo	otify the tion in f your	(vi) Is the organizati col (i) orga in the U	on in anized	(vii) A mount of support?
				(see instructions))	Yes	No	Yes	No	Yes	No	1
											1
Tota	Ī										

Support Schedule for Organizations Described in IRC 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.)

S	ection A. Public Support			,			
	endar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	35,689,04	4 31,040,501	22,370,225	32,536,772	20,347,273	141,983,815
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	35,689,04	4 31,040,501	22,370,225	32,536,772	20,347,273	141,983,815
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						23,217,922
6	(f) Public Support. Subtract line 5						
U	from line 4						118,765,893
S	ection B. Total Support						
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	beginning in) A mounts from line 4	35,689,044	1,247,073	22,370,225	32,536,772	20,347,273	141,983,815
8	Gross income from interest,	00,000,000				20,0,20	
-	dividends, payments received on securities loans, rents, royalties and income from similar	988,356	1,247,073	1,304,877	2,002,197	2,311,578	7,854,081
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	159,562	4,376	19,591	70,938	113,751	368,218
11	Total support (Add lines 7 through 10)						150,206,114
12	Gross receipts from related activiti		•			12	267,566
13	First Five Years If the Form 990 is check this box and stop here	for the organızat	ıon's fırst, second,	, thırd, fourth, or fı	fth tax year as a !	501(c)(3) organı:	zation, ▶┌
S	ection C. Computation of Pub						
14	Public Support Percentage for 2009	9 (line 6 column	(f) divided by line	11 column (f))		14	79 069 %
15	Public Support Percentage for 2008	8 Schedule A , Pa	art II, line 14			15	80 175 %
	33 1/3% support test—2009. If the and stop here. The organization qua	alıfıes as a public	ly supported orga	nızatıon		,	►✓
Ь	33 1/3% support test—2008. If the box and stop here. The organization	-			a, and line 15 is 3	33 1/3% or more,	check this ►
17a	10%-facts-and-circumstances test- is 10% or more, and if the organiza in Part IV how the organization mee	—2009. If the org tion meets the "	janization did not c facts and circumst	heck a box on lin ances" test, chec	k this box and st	op here. Explain	ted
b	organization 10%-facts-and-circumstances test- 15 is 10% or more, and if the organ						► I
18	Explain in Part IV how the organiza supported organization Private Foundation If the organizat				-		▶ □
	instructions		,	, ,	,		▶ □

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support				1	T	ı
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(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						
3	purpose Gross receipts from activities that				+		
3	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	A mounts included on lines 1, 2, and 3 received from disqualified						
	persons				1		
ь	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						
с	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	from line 6)						
	ction B. Total Support		1			1	Γ
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources						
ь	Unrelated business taxable						
	ıncome (less section 511 taxes)						
	from businesses acquired after						
_	June 30, 1975 Add lines 10a and 10b						
c 11	Net income from unrelated						
11	business activities not included						
	ın lıne 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,						
14	11 and 12) First Five Years If the Form 990 is for	or the organizat	lon's first, second	L third fourth or	l fifth tax vear as a	1 a 501(c)(3) organ	l uzation
	check this box and stop here	or the organizat		., 4,	men tax your as t	(c)(c) c.gu.	▶ ┌
	ction C. Computation of Publ						
15	Public Support Percentage for 2009	(line 8 column	(f) divided by line	13 column (f))		15	
16	Public support percentage from 200	8 Schedule A , F	art III, line 15			16	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ge			
17	Investment income percentage for 2	009 (line 10c c	olumn (f) dıvıded	by line 13 columi	n (f))	17	
18	Investment income percentage from	2008 Schedule	A, Part III, line 1	L 7		18	
19a	33 1/3% support tests—2009. If the	organization di	d not check the b	ox on line 14, and	d line 15 is more	than 33 1/3% and	d line 17 is not
	more than 33 1/3%, check this box a	ind stop here. T					
L	organization 33 1/3% support tests—2008. If the	► C	d not chastes here	on line 14 amilion	100 and line 4	5 ic mara +ha= 22	1/20/2 and line
b	שר בו בע suppoit tests—zouo. If the	organization (I	и посепеска вох	OILLINE TH OLINE	= ⊥⊃a, anu nne 1(us more man 33	1/370 and ine

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **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. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Schedule A (Form 990 or 990-EZ) 2009

DLN: 93493073005051

OMB No 1545-0047

Open to Public Inspection

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

Political Campaign and Lobbying Activities

► 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),

- ◆ 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

	ction 501(c)(4), (5), or (6) organime of the organization	zations Complete Part III		Employer iden	tification number
THE	WILDERNESS SOCIETY			52.0167022	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(53-0167933 c) or is a section 527	organization.
	-				
1 2		ganization's direct and indirect po	olitical campaign ac	tivities in Part IV	
3	Political expenditures Volunteer hours			•	\$
•	volunteer nours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	Enter the amount of any excis	e tax incurred by the organization	under section 495!	5 ▶	\$
2	Enter the amount of any excis	e tax incurred by organization ma	nagers under sectio	n 4955 >	\$
3	If the organization incurred a s	section 4955 tax, did it file Form	4720 for this year?		┌ Yes ┌ No
4a	Was a correction made?				┌ Yes ┌ No
Ь	If "Yes," describe in Part IV				
Par	t I-C Complete if the or	ganization is exempt und	er section 501(c) except section 501	L(c)(3).
1		ended by the filing organization fo		•	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed t	o other organization	s for section 527 ▶-	\$
3	Total exempt function expend	tures Add lines 1 and 2 Enter ho	ere and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file	Form 1120-POL for this year?			┌ Yes
5	were made For each organizat contributions received that we	nd employer identification numbe tion listed, enter the amount paid tre promptly and directly delivered nittee (PAC) If additional space i	from the filing organ d to a separate polit	ızatıon's funds Also enter t ıcal organızatıon, such as a	he amount of political
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) an	d filed Form 5768	(election				
	Check If the filing organization belongs to a							
В	Check If the filing organization checked bo	x A and "limited control" provisions apply						
	Limits on Lobbying E (The term "expenditures" means a		(a) Filing O rganization's Totals	(b) A ffiliated Group Totals				
1a	Total lobbying expenditures to influence public o	ppinion (grass roots lobbying)	132,703					
b	Total lobbying expenditures to influence a legisl	atıve body (dırect lobbyıng)	212,085					
c	Total lobbying expenditures (add lines 1a and 1	b)	344,788					
d	Other exempt purpose expenditures	29,479,812						
е	Total exempt purpose expenditures (add lines 1	c and 1d)	29,824,600					
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	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 lir	ne 1f)	250,000					
h	Subtract line 1g from line 1a If zero or less, ent	er -0-						
i	Subtract line 1f from line 1c If zero or less, ente	er - 0 -						

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.)

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period							
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total		
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000		
ь	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000		
c	Total lobbying expenditures	331,812	330,519	210,428	344,788	1,217,547		
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000		
е —	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000		
f	Grassroots lobbying expenditures	85,766	236,930	38,440	132,703	493,839		

che	dule C (Form 990 or 990-EZ) 200						Page 3
Pa	rt II-B Complete if the or (election under se	rganization is exempt under ection 501(h)).	section 501(c)(3) and has I				
			-	(;	a)	(b)
				Yes	No	A mo	unt
1		anization attempt to influence foreign t to influence public opinion on a legis					
а	Volunteers?						
b	Paid staff or management (includ	e compensation in expenses reported	l on lines 1c through 1i)?				
c	Media advertisements?						
d	Mailings to members, legislators	, or the public?					
е	Publications, or published or broa	adcast statements?					
f	Grants to other organizations for	lobbying purposes?					
g	Direct contact with legislators, th	neır staffs, government officials, or a l	egislative body?				
h	Rallies, demonstrations, seminar	s, conventions, speeches, lectures, c	rany sımılar means?				
i	Other activities? If "Yes," descri	ibe in Part IV					
j	Total lines 1c through 1i						
2a	Did the activities in line 1 cause	the organization to be not described	n section 501(c)(3)?				
Ь	If "Yes," enter the amount of any	tax incurred under section 4912					
c	If "Yes," enter the amount of any	tax incurred by organization manage	rs under section 4912				
d	If the filing organization incurred	a section 4912 tax, did it file Form 4	720 for this year?				
Par	t III-A Complete if the or 501(c)(6).	ganization is exempt under	section 501(c)(4), section !	501(c)(5), o		
	W					Yes	s No
1		nore) dues received nondeductible by			-	2	
2	=	n-house lobbying expenditures of \$2,0			-	3	
3		ryover lobbying and political expendit		-01/-	\(\(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		
2611	501(c)(6) if BOTH	rganization is exempt under Part III-A, lines 1 and 2 are					ion
	answered "Yes".						
1	Dues, assessments and similar a			1			
2	expenses for which the section 5	bbbying and political expenditures (do 27(f) tax was paid).	o not include amounts of political				
a	Current year	(. , para).		2a			
ь	Carryover from last year			2b			
c	Total			2c			
3	Aggregate amount reported in se	ction 6033(e)(1)(A) notices of nonde	ductible section 162(e) dues	3			
4	If notices were sent and the amo	unt on line 2c exceeds the amount or	line 3, what portion of the excess				
	does the organization agree to ca political expenditure next year?	arryover to the reasonable estimate o	f nondeductible lobbying and	4			
5	Taxable amount of lobbying and p	political expenditures (see instruction	ıs)	5			
Pä	rt IV Supplemental Info	ormation					
	mplete this part to provide the des o, complete this part for any addit	criptions required for Part I-A, line 1, ional information	Part I-B, line 4, Part I-C, line 5, an	d Part	II-B, lıne	11	
	Ident if ier	Return Reference	Explana	t ion			

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As Filed Data

DLN: 93493073005051

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Supplemental Financial Statements

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

Open to Public

Internal Revenue Service Inspection ► Attach to Form 990. ► See separate instructions. **Employer identification number** Name of the organization THE WILDERNESS SOCIETY 53-0167933 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 Total number at end of year Aggregate contributions to (during year) 3 Aggregate grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised □ No funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may 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 Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-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 Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located **-**__ Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? 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. If the organization elected, as permitted under SFAS 116, 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 If the organization elected, as permitted under SFAS 116, 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 0 125,950 (ii) Assets included in Form 990, Part X 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 relating to these items 0 Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	Organizations Maintaining Co	ollections of Art	, His	torical Tre	easu	res, or O	the	r Similar As	sets	(continued
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	e following th	nat ar	e a significa	ant u	ise of its collec	ion	
а	▼ Public exhibition		d	Loan o	rexcl	nange progr	ams	;		
ь	Scholarly research		e	┌ Other						
С	Preservation for future generations									
4	Provide a description of the organization's content XIV	ollections and expla	ın hov	v they further	the c	rganızatıon	's e>	xempt purpose	n	
5	During the year, did the organization solicit assets to be sold to raise funds rather than			•					┌ Yes	√ No
Pai	rt IV Escrow and Custodial Arrang					answere	d "Y	es" to Form 9	90,	
	Part IV, line 9, or reported an ar			•						
1a	Is the organization an agent, trustee, custoo included on Form 990, Part X?				ions d	or other ass	ets	not	┌ Yes	⊢ No
b	If "Yes," explain the arrangement in Part XI	V and complete the	follow	ing table		г		T		
						-	_	An	nount	
С 	Beginning balance					-	1c			
d	Additions during the year					-	1d			
e	Distributions during the year					-	1e			
f	Ending balance					L	1f			
2a	Did the organization include an amount on F		e 21?						│ Yes	☐ No
	If "Yes," explain the arrangement in Part XI\			1 113 4						
Рa	rt V Endowment Funds. Complete	(a)Current Year		wered "Yes)Prior Year				rt IV, line 10. I)Three Years Back	(e)For	ır Years Back
1a	Beginning of year balance	19,506,098	(12	17,545,068	+ • •	wo rears back	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	THICC TCGTS BUCK	(6)100	ii rears back
ь	Contributions	505,648		1,262,443			+			
c	Investment earnings or losses	2,911,045		1,186,371			\top			
d	Grants or scholarships									
e	Other expenditures for facilities	986,375		487,784						
	and programs						+			
f	Administrative expenses	21.026.416		10 506 000			+			
g	End of year balance	21,936,416		19,506,098						
2	Provide the estimated percentage of the year	25 222 24	a S							
а	Board designated or quasi-endowment 🕨	36 800 % %								
b	Permanent endowment ► 51 600 % %)								
С	Term endowment ► 11 600 % %									
3a	Are there endowment funds not in the posse organization by	ssion of the organiz	ation t	that are held	and a	dministere	d for	the	Ye	s No
	(i) unrelated organizations							3a(No
	(ii) related organizations							3a(No
b	If "Yes" to 3a(II), are the related organization	ns listed as require	d on S	chedule R?				3)	Νο
4	Describe in Part XIV the intended uses of th									
Par	t VI Investments—Land, Building	s, and Equipme	nt. S	<u>ee Form 99</u> T	0, Pa	art X, line	<u> 10.</u>			
	Description of investment			(a) Cost or o basis (investin		(b)Cost or o basis (othe		(c) Accumulated depreciation	(d)	Book value
1a	Land		•							
b	Buildings		•							
	Leasehold improvements					2,662	,161	2,124,50	08	537,65
	Equipment					4,362	,429	2,887,69	95	1,474,73
е	Other									

2,012,387

Part VIII Investments—Other Securities. See	Form 990, Part X, line 1.	
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation
Financial derivatives		Cost or end-of-year market value
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)		
Part VIII Investments—Program Related. Se	e Form 990, Part X, line	
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of the of year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	•	
Part IX Other Assets. See Form 990, Part X, II	ne 15.	
(a) Descri	ption	(b) Book value
<u>A RT WO RKS</u>		125,950
HELD BY OTHERS		7,190,282
Total. (Column (b) should equal Form 990, Part X, col.(B) line		7,316,232
Part X Other Liabilities. See Form 990, Part X		
1 (a) Description of Liability	(b) A mount	
Federal Income Taxes	0	
CUSTODIAL FUNDS	26,030	
DEFERRED RENT	105,378	
CAPITAL LEASE OBLIGATION	19,453	
Total (Column (h) chould occup! Form 2002, Part V = 1/22 1 - 25 2		
Total. (Column (b) should equal Form 990, Part X, col (B) line 25) ▶	150,861	

Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemer	ıts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	23,008,956
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	29,824,600
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-6,815,644
4	Net unrealized gains (losses) on investments	4	1,845,768
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	2,696,239
9	Total adjustments (net) Add lines 4 - 8	9	4,542,007
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	-2,273,637
Par	t XIII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er R	
1	Total revenue, gains, and other support per audited financial statements	1	27,891,565
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	4,542,007
3	Subtract line 2e from line 1	3	23,349,558
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 180,296		
b	Other (Describe in Part XIV)		
C	Add lines 4a and 4b	4c	-340,602
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	23,008,956
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per	
1	Total expenses and losses per audited financial statements	1	30,165,202
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
ь	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV) 2d 520,898		
e	Add lines 2a through 2d	2e	520,898
3	Subtract line 2e from line 1	3	29,644,304
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a 180,296		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	180,296
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	29,824,600
Pa	rt 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, 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

Ident if ier	Return Reference	Explanation
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	
RECONCILIATION OF EXPENSES	FORM 990, SCHEDULE D, PART XIII, LINE 2D	LOSS ON DISPOSAL OF FIXED ASSETS = -520,898
RECONCILIATION OF NET ASSETS	FORM 990, SCHEDULE D, PART XI, LINE 8	OTHER ADJUSTMENTS CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS = 2,696,239
RECONCILIATION OF REVENUE	FORM 990, SCHEDULE D, PART XII, LINE 2D & 4B	LINE 2D OTHER CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS = 2,696,239 LINE 4B OTHER LOSS ON DISPOSAL OF FIXED ASSETS = -520,898
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, 2010 TAX YEARS FOR YEARS ENDING SEPTEMBER 30, 2007 THROUGH 2010 ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES, THERE ARE NO EXAMINATIONS BEING CONDUCTED

SCHEDULE G (Form 990 or 990-EZ)

Name of the organization

THE WILDERNESS SOCIETY

Supplemental Information Regarding Fundraising or Gaming Activities

Inspection

2009 Open to Public

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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.

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.

- Indicate whether the organization raised funds through any of the following activities. Check all that apply
- Mail solicitations
- ▼ Internet and e-mail solicitations
- Phone solicitations
- In-person solicitations

- Solicitation of non-government grants
- Solicitation of government grants
- Special fundraising events
- 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 Form 990-EZ filers are not required to complete this table

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 activities?

(i) Name of Individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions? Yes No		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
Gordon Schwenkmeyer Inc Telemark	TELEMKTG		No	135,741	112,285	23,456	
Your Voice Media Inc Telemarketing	TELEMKTG		No	13,771	59,087	-45,316	
Telefund Inc Telemarketing	TELEMKTG		No	13,488	37,557	-24,069	
Direct Advantage Marketing Telemark	TELEMKTG		No	182,493	124,465	58,028	
Tele Response Center Inc Telemarke	TELEMKTG		No	0	12,670	-12,670	
COMNET MARKETING TELEMARKETING	TELEMKTG		No	125,231	86,906	38,325	
CONVENANT CALLS LLC TELEMARKETING	TELEMKTG		No	0	8,331	-8,331	
DONOR SERVICES GROUP TELEMARKETING	TELEMKTG		No	15,585	6,882	8,703	
SDA TELEMARKETING	TELEMKTG		No	11,280	5,978	5,302	
Total			>	497,589	454,161	43,428	

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

A L, A K, A Z, A R, 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 reporte more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.								ted
			(a) Event #1	(b) Event #2	(c) O ther Events (total number)	(d) To	otal Eve ol (a) th ol (c))	
Revenue	1 2 3	Gross receipts Less Charitable contributions Gross income (line 1 minus line 2)	(event type)		(total number)			
	4	Cash prizes						
Ses	5 6	Non-cash prizes				+		
Expenses	7	Food and beverages						
Direct B	8	Entertainment						
ឨ	9	Other direct expenses .				<u> </u>		
	10 11	Direct expense summary Add line Net income summary Combine lii			. 			
Par	t III		ganızatıon answered		irt IV, line 19, or repo	rted mo	re thar	1
Revenue			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add co	otal gam I (a) th ol (c))	
	1 (Gross revenue						
Ses	2 (Cash prizes				<u> </u>		
Expenses	s 1	Non-cash prizes				<u> </u>		
Direct E	4 F	Rent/facility costs						
<u></u>	5 (Other direct expenses						
	6 \	Volunteer labor	∀es	│	Г Yes			
		Direct expense summary Add lines			.			
	8	Net gaming income summary Com	bine lines 1, column d, a	ind line 7	<u> . .</u>		Yes	No
9 a	Is th	er the state(s) in which the organiza ne organization licensed to operate				· 9a		
Ь		lo," Explain				_		
10a b		e any of the organization's gaming l es," Explain	ıcenses revoked, suspe	nded or terminated during	the tax year?	10a	3	
11		s the organization operate gaming a					.	
12		ne organization a grantor, beneficia ied to administer charitable gaming				. .,		

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
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?	,	
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		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Director/officer I Employee I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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Schedule I

(Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

DLN: 93493073005051 OMB No 1545-0047

Employer identification number

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

Inspect ion

THE WILDERNESS SOCIETY						53-0167933	
1 Does the organization maintain the selection criteria used to av 2 Describe in Part IV the organization	records to substanti vard the grants or as	ate the amount of the sistance?					√ Yes
Part II Grants and Other A Form 990, Part IV, Im Part IV and Schedule	e 21 for any recip	ient that received n	nore than \$5,000. Ch	eck this box if no one	recipient receive	ed more than \$5,000	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 50 3 Enter total number of other orga						· · · ·	15

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. Use Schedule I-1 (Form 990) if additional space is needed.

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
BARRON SCHOLARSHIPS	1	7,000		воок	
See Addıtıonal Data Table					
	•				<u> </u>

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

Ident if ier	Return Reference	Explanation
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 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 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 ACCOMPLISHMENT OF GOALS WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENT OF GOALS WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENT OF GOALS WHERE APPROPRIATE, A MORE DETAILED
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Software ID:

Software Version:

EIN: 53-0167933

Name: THE WILDERNESS SOCIETY

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of (b) EIN (c) IRC Code section (d) Amount of cash (e) Amount of non- (f) Method of (g) Description of (h) Purpose of grant

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
Arizona Wilderness Coalition PO Box 40340 Tucson, AZ 85717	20-0412328	501(C)(3)	7,000				Conservation Project
Badlands Conservation Alliance801 N 10th St Bismarck,ND 58501	45-0461922	501(C)(3)	7,500				Conservation Project
Biodiversity Conservation AlliANCEPO Box 1512 Laramie, WY 82073	83-0308354	501(C)(3)	23,000				Conservation Project
Center for Biological DiversitYPO Box 710 Tucson, AZ 85702	85-0420285	501(C)(3)	9,000				Conservation Project
Center for Native Ecosystems1536 Wynkoop Street Ste 301 Denver, CO 80202	84-1512852	501(C)(3)	36,800				Conservation Project
National Audubon Society Inc225 Varick Street 7th Floor New York, NY 10014	13-1624102	501(C)(3)	14,000				Conservation Project
Nevada Wilderness Project John Wallin - NWP 8550 White Fi Reno, NV 89523	88-0442530	501(C)(3)	7,500				Conservation Project
New Mexico Wilderness AlliancePO Box 25464 Albuquerque, NM 87125	85-0457916	501(C)(3)	12,500				Conservation Project
Ohio Wilderness League214 N 4th St PO Box 4560 Ironton, OH 45638	27-0543372	501(C)(3)	6,500				Conservation Project
Partnership Project Inc1615 M St NW Washington, DC 20036	52-2192070	501(C)(4)	6,000				Conservation Project

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
Sheep Mountain AlliancePO Box 389 Telluride, CO 81435	84-1294894	501(C)(3)	23,400				Conservation Project	
Southern Appalachian Forest Co46 Haywood Street Ste 323 Asheville, NC 28801	30-0066360	501(C)(3)	18,500				Conservation Project	
Virginia Wilderness Committee423 Sheep Creek Lane Fairfield, VA 24435	31-1641293	501(C)(4)	6,000				Conservation Project	
WildEarth Guardians 312 Montezuma Avenue Santa Fe, NM 87501	85-0406306	501(C)(3)	6,500				Conservation Project	
Wilderness WorkshopPO Box 1442 Carbondale, CO 81623	74-1900412	501(C)(3)	140,000				Conservation Project	
Wildlands Center For PreventiO nPO Box 7516 Missoula, MT 59807	81-0512261	. 501(C)(3)	6,000				Conservation Project	
Yosemite Fund155 Montgomery Street Ste 1104 San Francisco, CA 94104	94-3058041	. 501(C)(3)	494,109				Conservation Project	

DLN: 93493073005051

Employer identification number

OMB No 1545-0047

Open to Public

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Inspection

THE	WILDERNESS SOCIETY			
	53-0167933			
Pa	rt I Questions Regarding Compensation		l	T
			Yes	Νo
1a	Check the appropiate 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			
	First-class or charter travel Housing allowance or residence for personal use			
	▼ Travel for companions			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b	Yes	
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?	2	Yes	
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 Compensation committee Written employment contract			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	Form 990 of other organizations 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			
а	Receive a severance payment or change-of-control payment?	4a		Νo
ь	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only 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			
а	The organization?	5a		Νo
b	Any related organization?	5b		Νo
	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			
а	The organization?	6a		Νo
b	Any related organization?	6b		Νo
	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	7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		No
٥	If "Vac" to line 9, did the organization also follow the rebuttable procumption procedure described in Pegulations		i	

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space 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

			(2 /						
(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	C compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & ıncentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
A SHFORD CHANCELOR	(I) (II)	159,940 0	0	8,816 0	12,795 0	4 1,207 0	222,758 0		
WILLIAM H MEADOWS	(I) (II)	286,547 0	0	7,311 0	22,924 0	73,827 0	390,609 0		
JERRY GREENBERG	(I) (II)	176,713 0	0	5,287 0	14,137 0	45,529 0	241,666 0		
SHEILA DENNIS	(I) (II)	166,753 0	0	0	13,340 0	42,963 0	223,056 0		
ANN MORGAN	(I) (II)	152,998 0	0	1,379 0	12,240 0	39,419 0	206,036		
AMY VEDDER	(I) (II)	219,068 0	0	2,582 0	17,525 0	56,441 0	295,616 0		
LESLIE JONES	(I) (II)	139,289 0	0	0	11,143 0	35,887 0	186,319 0		
LISA LOEHR	(I) (II)	136,246 0	0	0	10,900 0	35,103 0	182,249 0		
SARA BARTH	(I) (II)	128,170 0	0	0	10,254 0	33,022 0	171,446 0		
SPENCER PHILLIPS	(I) (II)	136,476 0	0	0	10,918 0	35,162 0	182,556 0		
STEPHANIE TAYLOR	(I) (II)	135,209 0	0	0	10,817 0	34,836 0	180,862 0		
DONALD J BARRY	(I) (II)	0	0	114,327 0	0	29,456 0	143,783 0		

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

Ident if ier	Return Reference	Explanation
,	QUESTIONS REGARDING COMPENSATION	AUTO ALLOWANCES & SPOUSAL TRAVEL ARE INCLUDED ON THE EMPLOYEE'S W-2 AS COMPENSATION

Schedule J (Form 990) 2009

DLN: 93493073005051

NonCash Contributions

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

OMB No 1545-0047

Open to Public Inspection

Name of the organization THE WILDERNESS SOCIETY

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

53-0167933

D-	rt I Types of Property				33-0107333			
r e	TCT Types of Property	(a) Check If	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line	(d Method of de reven	etermi	nıng	
		applicable		1 g				
	Art—Works of art							
	Art—Historical treasures .							
	Art—Fractional Interests							
4								
5	Clothing and household goods							
6	Cars and other vehicles							
7	•							
	Intellectual property							
	Securities—Publicly traded .	X	48	563,721	FMV			
	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	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	O ther ▶ ()							
26	O ther ▶()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization compl				29			1
							Yes	No
30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it			
	must hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the enti	re holdıng p	eriod?			30a		No
Ь	If "Yes," describe the arrangeme	ent in Part 1	I					
31	Does the organization have a gif	tacceptand	ce policy that requires the r	eview of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or use contributions?	· ·	-	to solicit, process, or sell i	non-cash	32a		No
ь	If "Yes," describe in Part II							
33	If the organization did not report describe in Part II	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

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.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

OMB No 1545-0047

SCHEDULE 0

(Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Open to Public Inspection

Name of the organization THE WILDERNESS SOCIETY

Employer identification number

53-0167933

11	<u> </u>	
ldentifier	Return Reference	Explanation
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 11	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 SENIOR VICE PRESIDENTS OF CONSERVATION, MEMBERSHIP AND DEVELOPMENT AND FINANCE AND ADMINISTRATION AND INTERNAL LEGAL COUNSEL 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 12	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 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 BASED ON THE MARKET FINDINGS, THE COUNCIL REVIEWS AND APPROVES THE COMPENSATION OF THESE POSITIONS EACH YEAR THE MEMBERS OF THE GOVERNING COUNCIL ARE INDEPENDENT OF THE WILDERNESS SOCIETY THE COMPENSATION PROCESS IS CONDUCTED ANNUALLY
FUNDRAISERS PURSUANT TO AGREEMENTS	FORM 990, SCHEDULE G, PART I, QUESTION 2 (B)	TWS USES DIFFERENT TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUND RAISING 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

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
MAILING LIST RENTAL	70,855	37,508	1,345	32,002
PERSONNEL ACQUISITIONS	156,451	111,589	18,193	26,669
MISCELLANEOUS	186,631	137,118	17,852	31,661
DUES & SUBSCRIPTIONS	117,172	96,194	10,256	10,722
ALLOWANCE - UNCERTAIN PLEDGES	-397,320	-276,785	-49,107	-71,428

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours		tion (that a	ched)			(D) Reportable compensation from the		(F) Estimated amount of other compensation
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099-	from the organization and related organizations
REBECCA L ROM EXECUTIVE COMMITTEE MEMBER	2 0	×						0	0	0
THEODORE ROOSEVELT IV GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
PATRICK L SMITH EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
CATHY DOUGLAS STONE GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
DOUGLAS W WALKER EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
HANSJORG WYSS EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
DAVE MATTHEWS GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
CRANDALL BOWLES GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
SARA VERA GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
CHRISTINA WONG GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
MICHAEL MANTELL GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
ASHFORD CHANCELOR VICE PRESIDENT	37 5			х				168,756	0	54,002
WILLIAM H MEADOWS PRESIDENT	37 5			х				293,858	0	96,751
FRED SILBERNAGEL SVP FOR FINANCE & ADMIN	37 5			х				0	0	0
JERRY GREENBERG VICE PRESIDENT	37 5				х			182,000	0	59,666
SHEILA DENNIS VICE PRESIDENT	37 5				x			166,753	0	56,303
ANN MORGAN VICE PRESIDENT	37 5				x			154,377	0	51,659
AMY VEDDER SENIOR VP	37 5				х			221,650	0	73,966
LESLIE JONES VICE PRESIDENT	37 5					Х		139,289	0	47,030
LISA LOEHR VICE PRESIDENT, OPERATIONS	37 5					Х		136,246	0	46,003
SARA BARTH VP, REGIONAL CONSERVATION	37 5					Х		128,170	0	43,276
SPENCER PHILLIPS VICE PRESIDENT, RESEARCH	37 5					Х		136,476	0	46,080
STEPHANIE TAYLOR ASSISTANT VP, DEVELOPMENT	37 5					Х		135,209	0	45,653
DONALD J BARRY EXECUTIVE VICE PRESIDENT	0 0						x	114,327	0	29,456

Software ID: Software Version:

EIN: 53-0167933

Name: THE WILDERNESS SOCIETY

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	Posi t	tion (hat a	(che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
EDWARD A AMES GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
JAMES A BACA GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
THOMAS A BARRON GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
RICHARD BLUM GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
DAVID BONDERMAN EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
WILLIAM M BUMPERS EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
MAJORA CARTER GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
BETHINE CHURCH GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
BERTRAM J COHN GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
WILLIAM J CRONON GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
BRENDA S DAVIS Executive Committee Member	2 0	Х						0	0	0
CHRISTOPHER J ELLIMAN GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
JOSEPH H ELLIS GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
DAVID J FIELD EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
GEORGE T FRAMPTON JR GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
JERRY F FRANKLIN GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
DAVID GETCHES EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
CAROLINE M GETTY EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
REGINALD FLIP HAGOOD GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
MARCIA KUNSTEL EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
KEVIN LUZAK EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
MOLLY MCUSIC EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
HEATHER KENDALL MILLER GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0
SCOTT A NATHAN EXECUTIVE COMMITTEE MEMBER	2 0	Х						0	0	0
JAIME A PINKHAM GOVERNING COUNCIL MEMBER	2 0	Х						0	0	0