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Form 990

Department of the Treasury  
Internal Revenue Service

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)

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

OMB No 1545-0047

2011

Open to Public Inspection

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

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

C Name of organization  
THE WILDERNESS SOCIETY

Doing Business As

Number and street (or P O box if mail is not delivered to street address)Room/suite

1615 M STREET NW

City or town, state or country, and ZIP + 4  
WASHINGTON, DC 200363209

F Name and address of principal officer  
JAMIE WILLIAMS  
1615 M STREET NW  
WASHINGTON,DC 200363209

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status

☒ 501(c)(3) ☐ 501(c) ( ) ◀(insert no ) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW WILDERNESS ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1935

M State of legal domicile DC

Part I	Summary																								
Activities & Governance	<div><div>1</div><div>Briefly describe the organization's mission or most significant activities</div><div>OUR MISSION IS TO PROTECT WILDERNESS AND INSPIRE AMERICANS TO CARE FOR OUR WILD PLACES</div></div>																								
	<div><div>2</div><div>Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets</div></div>																								
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Part II

Signature Block

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

Sign Here

Signature of officer

Thomas F Tepper Jr vice president

2013-05-15

Date

Paid Preparer's Use Only

Preparer's signature

Firm's name (or yours if self-employed), address, and ZIP + 4

DAVID J TRIMNER

BDO USA LLP

8405 GREENSBORO DRIVE 7TH FLOOR

MCLEAN, VA 22102

Date

Check if self-employed ☐

Preparer's taxpayer identification number (see instructions)

EIN ▶

Phone no ▶ (703) 893-0600

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2011)



Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A.	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	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.		No
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II.	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III.		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I.		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? If "Yes," complete Schedule D, Part II.		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III.	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.		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V.	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII.	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional.		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E.		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I.		No
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 ? If "Yes," complete Schedule F, Part II and IV.		No
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 and IV.		No
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.	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.		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.		No
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H.		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements.		

Part 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? <i>If "Yes," complete Schedule I, Parts I and II</i> . . . . .	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? <i>If "Yes," complete Schedule I, Parts I and III</i> . . . . .	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? <i>If "Yes," complete Schedule J</i> . . . . .	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? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i> . . . . .	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	<b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part I</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? <i>If "Yes," complete Schedule L, Part II</i> . . . . .	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? <i>If "Yes," complete Schedule L, Part III</i> . . . . .	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)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i> . . . . .	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> . . . . .	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i> . . . . .	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i> . . . . .	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i> . . . . .	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 "Yes," complete Schedule R, Part I</i> . . . . .	33		No
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i> . . . . .	34		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	35b		No
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i> . . . . .	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? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	38	Yes	

<div>Part V</div> <div>Statements Regarding Other IRS Filings and Tax Compliance</div>			
Check if Schedule O contains a response to any question in this Part V <input type="checkbox"/>			
		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable. .	1a115	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable.	1b0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	
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. .	2a234	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?  Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions).	2bYes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	No
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 or securities account)? .	4a	No
b	If "Yes," enter the name of the foreign country: See instructions for 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?	5a	No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	No
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a	No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	No
d	If "Yes," indicate the number of Forms 8282 filed during the year.	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8	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	
9	Sponsoring organizations maintaining donor advised funds.		
a	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	
10	Section 501(c)(7) organizations. Enter		
a	Initiation fees and capital contributions included on Part VIII, line 12.	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities.	10b	
11	Section 501(c)(12) organizations. Enter		
a	Gross income from members or shareholders.	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them).	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year.	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization allocated to each state.	13a	
b	Enter the aggregate amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans.	13b	
c	Enter the aggregate amount of reserves on hand.	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.  
Check if Schedule O contains a response to any question in this Part VI

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year		
1b	Enter the number of voting members included in line 1a, above, who are independent		
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	Yes
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 governing documents since the prior Form 990 was filed?	4	No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5	No
6	Did the organization have members or stockholders?	6	No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	No
7b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
8a	The governing body?	8a	Yes
8b	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

Section B. Policies

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

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

Section C. Disclosure

17	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 , LA , ME , MD , MA , MI , MN , MS , NH , NJ , NM , NY , NC , ND , OH , OK , OR , PA , RI , SC , TN , UT , VA , WA , WV , WI
18	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 made these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request	
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.	
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization.	THOMAS F TEPPER JR 1615 M STREET NW WASHINGTON,DC 200363209 (202) 833-2300

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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 neither the organization nor any related organizations compensated any current or former officer, director, or trustee

[illegible]



## Part VII

<b>1b</b>	<b>Sub-Total</b>			
<b>c</b>	<b>Total from continuation sheets to Part VII, Section A</b>			
<b>d</b>	<b>Total (add lines 1b and 1c)</b>	2,583,795	0	806,088

**2** Total number of individuals (including but not limited to those listed in Item 1) who received more than \$100,000 of reportable compensation from the organization. ▶ 39

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

## Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Production Management Group LTD 6940 Columbia Gateway Drive 220 COLUMBIA, MD 21046	DIRECT MAIL	859,314
CHAPMAN CUBINE Adams Hussey INC 1600 Wilson Blvd 300 ARLINGTON, VA 22209	DIRECT MAIL	692,031
RAFFA ASSOCIATES 1899 L STREET WASHINGTON, DC 20036	CONSULTING SERVICES	284,393
SECKMAN PRINTING INC 305 ENTERPRISE DRIVE FOREST, VA 24551	DIRECT MAIL	358,106
MERKLE RESPONSE SERVICES 100 JAMISON COURT HAGERSTOWN, MD 21740	DIRECT MAIL	295,155
<b>2</b> Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization <b>25</b>		

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a83,178	21,136,337				
	b	Membership dues . . . . .	1b					
	c	Fundraising events . . . . .	1c					
	d	Related organizations . . . .	1d					
	e	Government grants (contributions)	1e303,455					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f20,749,704					
	g	Noncash contributions included in lines 1a-1f \$ 499,423						
	h	Total. Add lines 1a-1f . . . . .						
Program Service Revenue			Business Code					
	2a	LIBRARY SUBSCRIPTION	900099	2,185	2,185			
	b	HONORARIA	900099	1,500	1,500			
	c	CONTRACTED SERVICES OF PROGRAM STAFF	900099	20,897	20,897			
	d	ADVOCATE TRIPS	900099	26,560	26,560			
	e	SALE OF PROMOTIONAL MATERIALS	900099	2,472	2,472			
	f	All other program service revenue						
	g	Total. Add lines 2a-2f . . . . .		53,614				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts) . . . . .						
				512,469			512,469	
	4	Income from investment of tax-exempt bond proceeds . . .		0				
	5	Royalties . . . . .		51,565			51,565	
	6a	(i) Real		(ii) Personal				
		90,937						
		90,937						
	d	Net rental income or (loss) . . . . .		90,937			90,937	
	7a	(i) Securities		(ii) Other				
		6,041,891						
		3,841,098						
		2,200,793						
	d	Net gain or (loss) . . . . .		2,200,793			2,200,793	
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18 . . . . .						
	a							
	b	Less direct expenses . . . . .						
	c	Net income or (loss) from fundraising events . . .		0				
	9a	Gross income from gaming activities See Part IV, line 19 . . . . .						
	a							
	b	Less direct expenses . . . . .						
	c	Net income or (loss) from gaming activities . . .		0				
	10a	Gross sales of inventory, less returns and allowances . . . . .						
	a							
b	Less cost of goods sold . . . . .							
c	Net income or (loss) from sales of inventory . . .		0					
Miscellaneous Revenue			Business Code					
11a	CREDIT CARD ROYALTIES		900099	677,320			677,320	
b	MAILING LIST RENTAL INCOME		900099	104,563			104,563	
c	REFUND OF PRIOR YEAR EXPENDITURES		900099	8,943			8,943	
d	All other revenue . . . . .			26,368			26,368	
e	Total. Add lines 11a-11d . . . . .			817,194				
12	Total revenue. See Instructions . . . . .			24,862,909	53,614		3,672,958	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns  
All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D)  
Check if Schedule O contains a response to any question in this Part IX

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

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing . . . . .			850	1	1,000
	2	Savings and temporary cash investments . . . . .			46,533	2	-44,835
	3	Pledges and grants receivable, net . . . . .			4,988,211	3	2,670,387
	4	Accounts receivable, net . . . . .			676,761	4	646,168
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L . . . . .			0	5	0
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B). Complete Part II of Schedule L . . . . .			0	6	0
	7	Notes and loans receivable, net . . . . .			0	7	0
	8	Inventories for sale or use . . . . .			0	8	0
	9	Prepaid expenses and deferred charges . . . . .			519,730	9	714,253
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	10a	7,931,800			
	b	Less: accumulated depreciation . . . . .	10b	6,345,998	2,147,665	10c	1,585,802
	11	Investments—publicly traded securities . . . . .			28,319,325	11	29,949,700
	12	Investments—other securities. See Part IV, line 11 . . . . .			226,995	12	260,721
	13	Investments—program-related. See Part IV, line 11 . . . . .			0	13	0
	14	Intangible assets . . . . .			0	14	0
	15	Other assets. See Part IV, line 11 . . . . .			8,859,798	15	9,081,990
	16	Total assets. Add lines 1 through 15 (must equal line 34) . . . . .			45,785,868	16	44,865,186
Liabilities	17	Accounts payable and accrued expenses . . . . .			2,383,372	17	2,581,783
	18	Grants payable . . . . .			0	18	0
	19	Deferred revenue . . . . .			3,257,860	19	3,414,121
	20	Tax-exempt bond liabilities . . . . .			0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .			0	21	0
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L . . . . .			0	22	0
	23	Secured mortgages and notes payable to unrelated third parties . . . . .			0	23	0
	24	Unsecured notes and loans payable to unrelated third parties . . . . .			0	24	774,000
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D . . . . .			347,833	25	928,389
	26	Total liabilities. Add lines 17 through 25 . . . . .			5,989,065	26	7,698,293
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets . . . . .			8,377,625	27	3,468,386
	28	Temporarily restricted net assets . . . . .			20,142,603	28	22,309,728
	29	Permanently restricted net assets . . . . .			11,276,575	29	11,388,779
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds . . . . .				30	
	31	Paid-in or capital surplus, or land, building or equipment fund . . . . .				31	
	32	Retained earnings, endowment, accumulated income, or other funds . . . . .				32	
	33	Total net assets or fund balances . . . . .			39,796,803	33	37,166,893
	34	Total liabilities and net assets/fund balances . . . . .			45,785,868	34	44,865,186

Part XI Reconciliation of Net Assets

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

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

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		No
b	Were the organization's financial statements audited by an independent accountant?	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	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 separate basis, consolidated basis, or both <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		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		

SCHEDULE A  
(Form 990 or 990EZ)

Department of the Treasury  
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

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

OMB No 1545-0047

2011

Open to Public  
Inspection

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

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box )

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E )

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II )

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☒

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II )

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II )

9

☐

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III )

10

☐

An organization organized and operated exclusively to test for public safety Se**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h  

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?  

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

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

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

Part II

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 or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

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

Section B. Total Support

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

12 Gross receipts from related activities, etc (See instructions )

12229,089

13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2011 (line 6 column (f) divided by line 11 column (f))	14	77 416 %
15 Public Support Percentage for 2010 Schedule A, Part II, line 14	15	75 685 %

16a 33 1/3% support test—2011. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2010. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

b 10%-facts-and-circumstances test—2010. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization

18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions

Part IIIPart III

Support Schedule for Organizations Described in IRC 509(a)(2)  
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public Support (Subtract line 7c from line 6.)						

Section B. Total Support						
Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support (Add lines 9, 10c, 11 and 12.)						
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and <b>stop here</b>						

Section C. Computation of Public Support Percentage		
15 Public Support Percentage for 2011 (line 8 column (f) divided by line 13 column (f))	15	
16 Public support percentage from 2010 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage		
17 Investment income percentage for 2011 (line 10c column (f) divided by line 13 column (f))	17	
18 Investment income percentage from 2010 Schedule A, Part III, line 17	18	
19a 33 1/3% support tests—2011. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		
b 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization		
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		



**Part IV** **Supplemental Information.** 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. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Explanation

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Political Campaign and Lobbying Activities

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

▶ Complete if the organization is described below.

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

OMB No 1545-0047

2011

Open to Public Inspection

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

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

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

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

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

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

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

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

- 1

Provide a description of the organization's direct and indirect political campaign activities on behalf of or in opposition to candidates for public office in Part IV
- 2

Political expenditures ▶ \$
- 3

Volunteer hours

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

- 1

Enter the amount of any excise tax incurred by the organization under section 4955 ▶ \$
- 2

Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$
- 3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? ☐ Yes ☐ No
- 4a

Was a correction made? ☐ Yes ☐ No
- b

If "Yes," describe in Part IV

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

- 1

Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶ \$
- 2

Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities ▶ \$
- 3

Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶ \$
- 4

Did the filing organization file **Form 1120-POL** for this year? ☐ Yes ☐ No
- 5

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

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

Part II-A

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

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

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

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

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

Part II-B

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

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

Part III-A

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

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

Part III-B

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

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

Part IV

Supplemental Information

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

Identifier	Return Reference	Explanation
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SCHEDULE D  
(Form 990)

Supplemental Financial Statements

Department of the Treasury  
Internal Revenue Service

OMB No 1545-0047

2011

Open to Public Inspection

Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b

Attach to Form 990. See separate instructions.

Name of the organization  
THE WILDERNESS SOCIETY

Employer identification number  
53-0167933

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

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?	
	<div>Yes</div> <div>No</div>	
6	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	
	<div>Yes</div> <div>No</div>	

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

1

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

☐ Preservation of land for public use (e g , recreation or pleasure)

☐ Preservation of an historically importantly land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

2

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
a	Total number of conservation easements
b	Total acreage restricted by conservation easements
c	Number of conservation easements on a certified historic structure included in (a)
d	Number of conservation easements included in (c) acquired after 8/17/06

3

Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year

4

Number of states where property subject to conservation easement is located

5

Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

Yes

No

6

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

7

Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year

\$

8

Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

Yes

No

9

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

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

1a

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

b

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

(i)

Revenues included in Form 990, Part VIII, line 1

\$

0

(ii)

Assets included in Form 990, Part X

\$

125,950

2

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

a

Revenues included in Form 990, Part VIII, line 1

\$

0

b

Assets included in Form 990, Part X

\$

0

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

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒ Public exhibition

b

☒ Scholarly research

c

☐ Preservation for future generations

d

☐ Loan or exchange programs

e

☐ Other

4

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

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes ☒ No

**Part IV Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes ☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
<div><div>c</div><div>Beginning balance</div></div>	
<div><div>d</div><div>Additions during the year</div></div>	
<div><div>e</div><div>Distributions during the year</div></div>	
<div><div>f</div><div>Ending balance</div></div>	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes ☐ No

b

If "Yes," explain the arrangement in Part XIV

**Part V Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
<div><div>1a</div><div>Beginning of year balance . . . . .</div></div>	22,295,213	21,936,416	19,506,098	17,545,068	
<div><div>b</div><div>Contributions . . . . .</div></div>	891,567	722,052	505,648	1,262,443	
<div><div>c</div><div>Investment earnings or losses . . . . .</div></div>	3,187,174	591,540	2,911,045	1,186,371	
<div><div>d</div><div>Grants or scholarships . . . . .</div></div>					
<div><div>e</div><div>Other expenditures for facilities and programs . . . . .</div></div>	6,208,594	954,795	986,375	487,784	
<div><div>f</div><div>Administrative expenses . . . . .</div></div>					
<div><div>g</div><div>End of year balance . . . . .</div></div>	20,165,360	22,295,213	21,936,416	19,506,098	

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 18 000 %

b

Permanent endowment ▶ 56 000 %

c

Term endowment ▶ 26 000 %

3a

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

(i)

unrelated organizations . . . . .

(ii)

related organizations . . . . .

b

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

	Yes	No
<div><div>3a(i)</div></div>		No
<div><div>3a(ii)</div></div>		No
<div><div>3b</div></div>		No

4

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<div><div>1a</div><div>Land . . . . .</div></div>				
<div><div>b</div><div>Buildings . . . . .</div></div>				
<div><div>c</div><div>Leasehold improvements . . . . .</div></div>		2,832,343	2,495,675	336,668
<div><div>d</div><div>Equipment . . . . .</div></div>		5,099,457	3,850,323	1,249,134
<div><div>e</div><div>Other . . . . .</div></div>				
<div><div>Total.</div><div>Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)</div></div>				1,585,802



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

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

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

Part XIV	Supplemental Information
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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

Identifier	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 \$1,897,000 DUE TO THE STIPULATIONS RELATED TO THE CUSTODY OF THE PHOTOGRAPHS, THESE ASSETS ARE NOT INCLUDED IN THE FINANCIAL STATEMENTS THE SOCIETY ALSO OWNS VARIOUS OTHER DONATED ART WORK THAT IS NOT SUBJECT TO DONOR CONDITIONS THIS COLLECTION INCLUDED 11 ANSEL ADAMS PHOTOGRAPHS VALUED AT THEIR ORIGINAL MARKET VALUE OF \$125,950 AS ASSESSED AT THE TIME OF THEIR DONATION THIS COLLECTION IS INCLUDED IN OTHER ASSETS ON THE STATEMENTS OF FINANCIAL POSITION
INTENDED USE OF THE ORGANIZATION'S ENDOWMENT FUNDS	FORM 990, SCHEDULE D, PART V, LINE 4	THE SOCIETY MAINTAINS TWO TYPES OF ENDOWMENT FUNDS GENERAL ENDOWMENT (DONOR-RESTRICTED) AND CAPITAL RESERVES GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT TO THE ORGANIZATION GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS GOVERNING THEIR USE THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED CAPITAL RESERVES IS A BOARD OF DIRECTORS DESIGNATION SET ASIDE FOR THE FINANCIAL PROTECTION OF THE SOCIETY
OTHER EXPENSES ON BOOKS NOT ON RETURN	FORM 990, SCHEDULE D, PART XIII, LINE 2D	UNCOLLECTIBLE ALLOWANCE ADJUSTMENT (158,166)
OTHER RECONCILING ITEMS	FORM 990, SCHEDULE D, PART XI, LINE 8	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 1,153,224 UNCOLLECTIBLE ALLOWANCE ADJUSTMENT 158,166 ----- TOTAL 1,311,390
FIN 48 FOOTNOTE	FORM 990, SCHEDULE D, PART X, LINE 2	THE SOCIETY IS EXEMPT FROM FEDERAL INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) AND IS NOT A PRIVATE FOUNDATION UNDER SECTION 509(A) OF THE IRC THE SOCIETY IS REQUIRED TO PAY FEDERAL AND STATE INCOME TAXES ONLY ON UNRELATED BUSINESS INCOME MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS AND THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30,2012 THE THREE PREVIOUS TAX YEARS ARE SUBJECT TO EXAMINATION BY TAXING AUTHORITIES, THERE ARE CURRENTLY NO EXAMINATIONS BEING CONDUCTED
OTHER RECONCILING ITEMS	FORM 990, SCHEDULE D, PART XII, LINE 2D	CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 1,153,224



SCHEDULE G  
(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information Regarding  
Fundraising or Gaming Activities

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization  
THE WILDERNESS SOCIETY

Employer identification number  
53-0167933

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1

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

a

☒

Mail solicitations

e

☒

Solicitation of non-government grants

b

☒

Internet and e-mail solicitations

f

☒

Solicitation of government grants

c

☒

Phone solicitations

g

☐

Special fundraising events

d

☒

In-person solicitations

2a

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes

☐ No

b

If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Gordon Schwenkmeyer Inc 360 N SEPULVEDA BLVD 1055  EL SEGUNDO, CA 90245	TELEMKTG		No	13,177	17,139	-3,962
Your Voice Media Inc 685 MARKET STREET SUITE 570  SAN FRANCISCO, CA 94105	TELEMKTG		No	51,946	79,199	-27,253
SEA CHANGE DIRECT MARKETING 416 DUNCAN STREET APT 7  SAN FRANCISCO, CA 941311966	TELEMKTG		No	325,635	108,000	217,635
COMNET MARKETING group inc 1214 STOWE AVENUE  MEDFORD, OR 97501	TELEMKTG		No	332,028	186,152	145,876
VAIL SYSTEMS INC 570 LAKE COOK ROAD  DEERFIELD, IL 600155612	TELEMKTG		No		6,097	-6,097
Total . . . . . ▶				722,786	396,587	326,199

3

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

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

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.

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

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

		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
Revenue	1	Gross revenue . . . . .			
	2	Cash prizes . . . . .			
	3	Non-cash prizes . . . . .			
	4	Rent/facility costs . . . . .			
	5	Other direct expenses . . . . .			
Direct Expenses	6	Volunteer labor . . . . . <input type="checkbox"/> Yes ..... <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	<input type="checkbox"/> Yes ..... <input type="checkbox"/> No	
	7	Direct expense summary Add lines 2 through 5 in column (d) . . . . . ▶			( )
	8	Net gaming income summary Combine lines 1 and 7 in column (d) . . . . . ▶			

9 Enter the state(s) in which the organization operates gaming activities \_\_\_\_\_

a Is the organization licensed to operate gaming activities in each of these states? . . . . . ☐ Yes ☐ No

b If "No," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? . . . . . ☐ Yes ☐ No

b If "Yes," Explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

- 11

Does the organization operate gaming activities with nonmembers?

Yes

No
- 12

Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?

Yes

No

13

Indicate the percentage of gaming activity operated in

a	The organization's facility	13a
b	An outside facility	13b

14

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

Name

Address

15a

Does the organization have a contract with a third party from whom the organization receives gaming revenue?

Yes

No

b

If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$

c

If "Yes," enter name and address

Name

Address

16

Gaming manager information

Name

Gaming manager compensation

\$

Description of services provided

Director/officer

Employee

Independent contractor

17

Mandatory distributions

a

Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?

Yes

No

b

Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$

Part IV

Complete this part to provide additional information for responses to question on Schedule G (see instructions.)

Identifier	ReturnReference	Explanation
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Name of the organization  
THE WILDERNESS SOCIETY

Employer identification number  
53-0167933

Part I General Information on Grants and Assistance

1

Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . .

☒ Yes ☐ No

2

Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed . . . . . ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)YOSEMITE CONSERVANCY155 MONTGOMERY STREET SAN FRANCISCO,CA 94104	94-3058041	501(C)(3)	68,000				Conservation Project
(2)NEW VENTURE FUND 734 15TH STREET NW STE 600 WASHINGTON,DC 20005	20-5806345	501(C)(3)	25,962				Conservation Project
(3)THE LAND TRUST FOR THE LITTLE TENNESSEEINCPOBOX 1148 FRANKLIN,NC 28744	56-2142199	501(C)(3)	24,600				Conservation Project
(4)ROCKY MOUNTAIN WILD1536 WYNKOOP ST 303 DENVER,CO 80202	84-1512852	501(C)(3)	21,500				Conservation Project
(5)SHEEP MOUNTAIN ALLIANCEPO BOX 389 TELLURIDE,CO 81435	84-1294894	501(C)(3)	19,500				Conservation Project
(6)MONTANA WILDERNESS ASSOCIATION30 SOUTH EWING HELENA,MT 59601	51-0198932	501(C)(3)	15,000				Conservation Project
(7)MONTANA WILDLIFE FEDERATIONPO BOX 1175 HELENA,MT 59624	81-0303948	501(C)(3)	15,000				Conservation Project
(8)FRIENDS OF MAINE'S SEABIRD ISLANDSPO BOX 1231 ROCKLAND,ME 04841	55-0809874	501(C)(3)	10,000				Conservation Project
(9)GREATER YELLOWSTONE COALITION INCPO BOX 1874 BOZEMAN,MT 59771	81-0414042	501(C)(3)	10,000				Conservation Project

2

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . .

9

3

Enter total number of other organizations listed in the line 1 table . . . . .

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)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP	4	24,000			SEE PART IV

Part IV

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

Identifier	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 REVIEWS ARE DONE BY FINANCE STAFF TO ENSURE THAT GRANTS ARE MADE IN COMPLIANCE WITH THE SOCIETY'S MISSION AND CONFLICT OF INTEREST POLICY ONCE THE FUNDING IS APPROVED AND ISSUED, PROGRAM STAFF MONITOR THAT THE RECEIVING ORGANIZATION HAS USED THE FUNDS AS AGREED ON ACCEPTANCE OF PROPOSAL, THE RECEIVING ORGANIZATION MUST SIGN A LETTER OF AGREEMENT, WHICH OUTLINES THE TERMS AND CONDITIONS FOR THE AWARD, RESTRICTIONS PLACED ON THE USE OF THE FUNDS, INCLUDING LOBBYING RESTRICTIONS, DUE DATES FOR INTERIM AND FINAL NARRATIVES, FINANCIAL REPORTS, AND TANGIBLE SUCCESSES ACHIEVED WITH THE FUNDING, INCLUDING ANY UNEXPECTED CHALLENGES ENCOUNTERED DURING THE GRANT PERIOD THE NARRATIVE AND ACCOUNTING ARE REVIEWED BY TWS PROGRAM STAFF TO ENSURE PROPER USE AND ACCOMPLISHMENT OF GOALS WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENTS MAY BE REQUESTED
GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP DESCRIPTION	SCHEDULE I, PART III, LINE 1	THE GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP IS AVAILABLE TO QUALIFIED GRADUATE STUDENTS IT IS CREATED IN HONOR OF GLORIA BARRON, DEDICATED EDUCATOR AND TIRELESS ADVOCATE FOR WILDERNESS PROTECTION, AND ADMINISTERED BY THE WILDERNESS SOCIETY, A LEADING CONSERVATION ORGANIZATION BASED IN WASHINGTON, D C THE SCHOLARSHIP SEEKS TO ENCOURAGE INDIVIDUALS WHO HAVE THE POTENTIAL TO MAKE A SIGNIFICANT POSITIVE DIFFERENCE IN THE LONG TERM PROTECTION OF WILDERNESS IN THE UNITED STATES

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 organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
YOSEMITE CONSERVANCY155 MONTGOMERY STREET SAN FRANCISCO, CA 94104	94-3058041	501(C)(3)	68,000				Conservation Project
NEW VENTURE FUND 734 15TH STREET NW STE 600 WASHINGTON, DC 20005	20-5806345	501(C)(3)	25,962				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE LAND TRUST FOR THE LITTLE TENNESSEEINC POBOX 1148 FRANKLIN, NC 28744	56-2142199	501(C)(3)	24,600				Conservation Project
ROCKY MOUNTAIN WILD1536 WYNKOOP ST 303 DENVER, CO 80202	84-1512852	501(C)(3)	21,500				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) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHEEP MOUNTAIN ALLIANCEPO BOX 389 TELLURIDE, CO 81435	84-1294894	501(C)(3)	19,500				Conservation Project
MONTANA WILDERNESS ASSOCIATION30 SOUTH EWING HELENA, MT 59601	51-0198932	501(C)(3)	15,000				Conservation Project



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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
MONTANA WILDLIFE FEDERATIONPO BOX 1175 HELENA, MT 59624	81-0303948	501(C)(3)	15,000				Conservation Project
FRIENDS OF MAINE'S SEABIRD ISLANDSPO BOX 1231 ROCKLAND, ME 04841	55-0809874	501(C)(3)	10,000				Conservation Project

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

<b>(a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC Code section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance
GREATER YELLOWSTONE COALITION INCPO BOX 1874 BOZEMAN, MT 59771	81-0414042	501(C)(3)	10,000				Conservation Project

Schedule J  
(Form 990)

Compensation Information

OMB No 1545-0047

2011

Open to Public Inspection

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

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

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization  
THE WILDERNESS SOCIETY

Employer identification number  
53-0167933

Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div><div><input type="checkbox"/> Tax idemnification and gross-up payments</div><div><input type="checkbox"/> Health or social club dues or initiation fees</div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision 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		
	<div><div><input type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div><div><input checked="" type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	Yes
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	Yes
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	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		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	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 accrued 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
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9	

**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) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

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

**Part III**   **Supplemental Information**

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

Identifier	Return Reference	Explanation
SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN	FORM 990, SCHEDULE J, LINE 4B	THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN, which was authorized by the Council, IS only available to the senior vice presidents and THE PRESIDENT. CURRENTLY, Only THE PRESIDENT WILLIAM MEADOWS is enrolled in the plan.
SEVERANCE AND CHANGE OF CONTROL PAYMENTS	FORM 990, SCHEDULE J, LINE 4A	Payments received in severance or as a result of a change of control: ASHFORD CHANCELORE 38,041; AMY L. VEDDER 76,083; FREDERICK SILBERNAGEL III 125,000; ANN MORGAN 82,341; LISA L. LOEHR 106,634.

SCHEDULE M  
(Form 990)

Department of the Treasury  
Internal Revenue Service

NonCash Contributions

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

OMB No 1545-0047

2011

Open to Public Inspection

Name of the organization  
THE WILDERNESS SOCIETY

Employer identification number  
53-0167933

Part I

Types of Property

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

29

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

30a

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? . . . . .

30a

Yes

No

b

If "Yes," describe the arrangement in Part II

31

Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

31

Yes

32a

Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? . . . . .

32a

No

b

If "Yes," describe in Part II

33

If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II

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

Cat No 51227J

Schedule M (Form 990) 2011

**Part III**

**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
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SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury  
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2011

Open to Public  
Inspection

Name of the organization THE WILDERNESS SOCIETY	Employer identification number  53-0167933
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Identifier	Return Reference	Explanation
AVAILABILITY OF OTHER DOCUMENTS	FORM 990, PART VI, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990S AVAILABLE TO THE PUBLIC ON ITS WEBSITE. THE FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.



Identifier	Return Reference	Explanation
FORM 990 REVIEW PROCESS	FORM 990, PART VI, LINE 11B	AFTER PREPARATION FOR THE FORM 990 IS COMPLETE, IT IS EXAMINED BY THE VICE PRESIDENT, FINANCE FOR ACCURACY AND COMPLETENESS THE DOCUMENT IS THEN PRESENTED TO AND REVIEWED BY THE PRESIDENT AND VICE PRESIDENTS OF CONSERVATION, MEMBERSHIP AND DEVELOPMENT, AND FINANCE AND ADMINISTRATION THE AUDIT COMMITTEE WILL THEN MEET TO INSPECT THE 990 SUBSEQUENT TO THE AUDIT COMMITTEE MEETING, THE 990 IS POSTED ON THE ORGANIZATION'S INTRANET PAGE FOR REVIEW BY THE GOVERNING COUNCIL BEFORE IT IS FILED

Identifier	Return Reference	Explanation
CONFLICTS OF INTEREST	FORM 990, PART VI, LINE 12C	TWS HAS A WRITTEN CONFLICT OF INTEREST POLICY IT IS REVIEWED ANNUALLY ALL STAFF, INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, MUST CERTIFY ANNUALLY THAT THEY HAVE READ AND FAMILIARIZED THEMSELVES WITH THE POLICY, AND DISCLOSE ANY POTENTIAL CONFLICTS STAFF DISCLOSE WHETHER THEY SERVE AS BOARD MEMBERS OR OFFICERS OF ANY OTHER ORGANIZATION WHOSE MISSION AND ACTIVITIES MAY OVERLAP WITH THOSE OF TWS FURTHER, ALL 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

Identifier	Return Reference	Explanation
DETERMINING COMPENSATION	FORM 990, PART VI, LINE 15	EXECUTIVE COMPENSATION IS REVIEWED ANNUALLY AT THE WILDERNESS SOCIETY BY AN INDEPENDENT CONSULTING FIRM. THE FIRM REGULARLY PROVIDES EXECUTIVE COMPENSATION STUDIES FOR TAX EXEMPT ENTITIES. THE MARKET ANALYSIS PRICED OUR POSITIONS USING COMPARABLE INDUSTRIES, MATCHED POSITIONS DIRECTLY TO SALARY DATA, AND UTILIZED A 'TOP PAID' ANALYSIS IN THE FINAL REPORT OF MARKET FINDINGS. THE GOVERNING COUNCIL SPECIFICALLY REVIEWS THE COMPENSATION OF "DISQUALIFIED INDIVIDUALS" AND THE VICE PRESIDENT OF FINANCE AND ADMINISTRATION. BASED ON THE MARKET FINDINGS, THE COUNCIL REVIEWS AND APPROVES THE COMPENSATION OF THESE POSITIONS EACH YEAR.

Identifier	Return Reference	Explanation
FUNDRAISERS PURSUANT TO AGREEMENTS	FORM 990, SCHEDULE G, PART I, QUESTION 2(B)	TWS USES DIFFERENT TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUNDRAISING CAMPAIGNS WE EXPECT GAINS FROM VENDORS WHO DO RENEWAL CALLING SUCH AS COMNET AND VENDORS WHO DO APPEALS TO EXISTING MEMBERSHIP SUCH AS HARRIS BOTH PRODUCE SUBSTANTIAL, IMMEDIATE NET INCOME. OTHER TELEMARKETING VENDORS SUCH AS YOUR VOICE MEDIA WORK ON DIFFERENT CAMPAIGNS SUCH AS LAPSED REINSTATEMENTS AND SUSTAINER (MONTHLY GIVING) INVITES WHICH ARE, BY DESIGN, BUDGETED AT AN INITIAL NET LOSS THEY ARE INTENDED TO REINSTATE LAPSED DONORS OR RECRUIT MONTHLY CONTRIBUTORS AND NET INCOME IN FUTURE MONTHS AFTER THE CAMPAIGNS ARE OVER

Identifier	Return Reference	Explanation
FAMILY/BUSINESS RELATIONSHIPS	FORM 990, PART VI, LINE 2	RELATIONSHIP SCHEDULE NAME OF OFFICER, DIRECTOR, ETC DAVID BONDERMAN NAME OF OTHER PARTY RICHARD BLUM TITLE OR ROLE EXECUTIVE COMMITTEE MEMBER RELATIONSHIP BUSINESS RELATIONSHIP NAME OF OFFICER, DIRECTOR, ETC RICHARD BLUM NAME OF OTHER PARTY DAVID BONDERMAN TITLE OR ROLE GOVERNING COUNCIL MEMBER RELATIONSHIP BUSINESS RELATIONSHIP NAME OF OFFICER, DIRECTOR, ETC CAROLINE GETTY NAME OF OTHER PARTY MICHAEL MANTELL TITLE OR ROLE EXECUTIVE COMMITTEE MEMBER RELATIONSHIP BUSINESS RELATIONSHIP NAME OF OFFICER, DIRECTOR, ETC MICHAEL MANTELL NAME OF OTHER PARTY CAROLINE GETTY TITLE OR ROLE EXECUTIVE COMMITTEE MEMBER RELATIONSHIP BUSINESS RELATIONSHIP

Identifier	Return Reference	Explanation
OTHER CHANGES IN NET ASSETS	FORM 990, PART XI, LINE 5	NET UNREALIZED GAINS (LOSSES) ON INVESTMENTS 2,615,894 CHANGE IN VALUE OF SPLIT INTEREST AGREEMENTS 1,153,224 UNCOLLECTIBLE ALLOWANCE ADJUSTMENT 158,166 ----- TOTAL 3,927,284

Additional Data

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
EDWARD A AMES GOVERNING COUNCIL MEMBER	2 0	X						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	X						0	0	0
WILLIAM M BUMPERS EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
MAJORA CARTER GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
BETHINE CHURCH GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
BERTRAM J COHN GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
WILLIAM J CRONON EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
BRENDA S DAVIS Executive Committee Member	2 0	X						0	0	0
CHRISTOPHER J ELLIMAN GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
JOSEPH H ELLIS EXECUTIVE COMMITTEE 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
CAROLINE M GETTY EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
REGINALD FLIP HAGOOD EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
MARCIA KUNSTEL EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
KEVIN LUZAK EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
MOLLY MCUSIC EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
HEATHER KENDALL-MILLER GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
SCOTT A NATHAN GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
JAIME A PINKHAM GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
REBECCA L ROM GOVERNING COUNCIL MEMBER	2 0	X						0	0	0

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

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
THEODORE ROOSEVELT IV GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
PATRICK L SMITH GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
CATHY DOUGLAS STONE GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
DOUGLAS W WALKER EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
HANSJORG WYSS EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
DAVE MATTHEWS GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
CRANDALL BOWLES GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
SARA VERA GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
CHRISTINA WONG GOVERNING COUNCIL MEMBER	2 0	X						0	0	0
MICHAEL MANTELL EXECUTIVE COMMITTEE MEMBER	2 0	X						0	0	0
ASHFORD CHANCELOR VICE PRESIDENT, CFO	38 0			X				176,933	0	56,184
WILLIAM H MEADOWS PRESIDENT	38 0			X				324,380	0	97,284
PAULA YABAR VICE PRESIDENT	38 0			X				291,800	0	88,445
JANE TAYLOR VICE PRESIDENT	38 0			X				185,000	0	54,989
AMY VEDDER SENIOR VP	38 0				X			233,386	0	74,333
SARA BARTH VP, REGIONAL CONSERVATION	38 0				X			170,647	0	52,910
SPENCER PHILLIPS VICE PRESIDENT, RESEARCH	38 0				X			165,518	0	52,430
MELANIE BELLER VICE PRESIDENT	38 0				X			165,552	0	50,943
ANN MORGAN VICE PRESIDENT	38 0					X		165,234	0	53,661
FREDERICK SILBERNAGEL III SVP, FINANCE & ADMINISTRATION	38 0					X		248,927	0	76,755
LESLIE JONES GENERAL COUNCIL	38 0					X		152,023	0	49,012
SHEILA DENNIS ASSOC VP OF DEVELOPMENT	38 0					X		159,172	0	51,904
LISA L LOEHR VP OF OPERATIONS	38 0					X		145,223	0	47,238