

### See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



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 private foundations)

► Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form

► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

Α Fο	rthe 20	013 cale	endar year, or tax year beginning	10-01-2013 , 2013, and ending 0	9-30-2014			
	ck if app		C Name of organization	, 2013, and ending 0.	30 2014	D Employ	er ident	ification number
	ress cha		THE WILDERNESS SOCIETY			53-01	67933	
┌ Nar	ne chang	ge	Doing Business As			33-01	0733	
Init	ıal return	ì		all is not delivered to street address) Room	/suite	E Telepho	ne numbe	er
_	mınated		1615 M STREET NW				843-94	
_	ended re dication p		City or town, state or province, coun WASHINGTON, DC 200363209	try, and ZIP or foreign postal code				
i VPF	ilication p	pending	F. Name and address of new	armal afficaci	1			39,701,096
			<b>F</b> Name and address of prin JAMIE WILLIAMS 1615 M STREET NW	cipai officer		s this a group ubordinates?	return fo	or ┌Yes <mark>┌</mark> No
			WASHINGTON, DC 200363	3209		Are all subordır ncluded?	ates	Γ Y es Γ No
I Ta	k-exemp	t status	▼ 501(c)(3)	nsert no )			alıst (s	ee instructions)
J W	ebsite:	<b>►</b> ww	/W WILDERNESS ORG		H(c)	Group exemptı	on numl	oer <b>►</b>
<b>K</b> Forn	n of orga	anızatıon	Corporation Trust Association	n	<b>L</b> Year	of formation 193	5 <b>M</b> S	tate of legal domicile DC
Pa	rt I	Sum	mary					
Governance	<u>o</u> 	UR MIS		RNESS AND INSPIRE AMERICAN				
iove.	<b>2</b> C	heck th	nis box 析 if the organization dis	continued its operations or dispose	d of more th	an 25% of its	net ass	ets
	3 N	umber	of voting members of the governi	ng body (Part VI, line 1a)			з	30
Activities &	4 N	umber	of independent voting members o	of the governing body (Part VI, line	1b)		4	30
屋	<b>5</b> To	otal nui	mber of individuals employed in c	alendar year 2013 (Part V, line 2a			5	181
្ន	<b>6</b> ⊤o	otal nui	mber of volunteers (estimate if ne	ecessary)			6	175
•	<b>7a</b> ⊤o	otal uni	related business revenue from Pa	art VIII, column (C), line 12			7a	0
	b N	et unre	lated business taxable income fr	om Form 990-T, line 34			7b	0
						Prior Year		Current Year
O.	8	Contri	butions and grants (Part VIII, lir	ne 1h)		34,840,3	84	28,365,453
Revenue				ne 2g)		62,2		85,291
9.64	10			(A), lines 3, 4, and 7d)	·	2,700,840		1,865,575
	11			lines 5, 6d, 8c, 9c, 10c, and 11e)		909,6	61	1,117,103
				(must equal Part VIII, column (A),	line	38,513,0	90	31,433,422
-	13			IX, column (A), lines 1-3)		313,1	66	557,407
	14	Benefi	ts paid to or for members (Part I)	X, column (A), line 4)			0	0
	15			e benefits (Part IX, column (A), line	s			
Expenses		5-10)				14,446,5		12,899,931
<u>₹</u>				column (A), line 11e)	•	171,9	81	181,454
ភ			ndraising expenses (Part IX, column (D)		-			
	17			ines 11a-11d, 11f-24e)		12,597,3		13,058,075
				t equal Part IX, column (A), line 25		27,529,0	_	26,696,867
<u></u>	19	ĸeven	ue less expenses Subtract line 1	18 from line 12		10,984,0	_	4,736,555
Net Assets or Fund Balances					begin	nning of Currer Year	"	End of Year
55 e	20	Totala	assets (Part X, line 16)			54,784,6	95	61,039,276
A P						5,916,1	_	6,649,284
žĒ	22	Netas	sets or fund balances Subtract I	ine 21 from line 20		48,868,5	81	54,389,992
Unde my kr	nowledg	ties of p		mined this return, including accomplete Declaration of preparer (othe				
	1	<u>.                                    </u>				2015-02-24		
Sign		Signa	ature of officer			2015-03-24 Date		
Here			MAS F TEPPER JR VP FINANCE & ADMINI	ISTRATION				
			or print name and title					
			rint/Type preparer's name	Preparer's signature	Date	Check If	PTIN	24
					1 2045 02 20			
Paid	i	<b>⊢</b>	OHN HUSKINS	,	2015-03-30	self-employed	P010815	
	i pare r	, F			2015-03-30			

RALEIGH, NC 27609

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

✓ Yes ☐ No

Par		Statement of Progra Theck if Schedule O cont			tIII	
1	Briefly	describe the organization	n's mission			
WO F NAT	RKS STRA IONAL P	TEGICALLY AND COLL	ABORATIVELY WITH DERNESS TO FIND	H POLITICIANS, LAND OUT MORE INFORMAT	OTECT WILD PLACES, THE WI MANAGERS, AND INTERESTE ION ABOUT OUR AMAZING 8 RNESS ORG	D CITIZENS TO LEAD
2	the prio	r Form 990 or 990-EZ?			ar which were not listed on	
		" describe these new ser				
3	service	organization cease cond			onducts, any program	
4	Describ expense		ram service accompli d 501(c)(4) organizat	ions are required to repo	hree largest program services, ort the amount of grants and allo	
4a	(Code	) (Expe	nses \$ 15,700,6	including grants of \$	557,407 ) (Revenue \$	69,993 )
	WILDLAI PROTEC LAST, TI CLIMATI TO IMPA CONNEC ENERGY 20 YEAR EROSIO WIN-WI APPROP	NDS ON FEDERAL PUBLIC LAND TED AREAS FURTHER, WITHI HE PACE AND UNPREDICTABILI E CHANGE DEMANDS THAT WE ACTS WE SEEK WILDERNESS ACTED LANDSCAPES ENERGY DE DEVELOPMENT AWAY FROM C I.S, CREATING AN OVERWHELM N OF REMAINING WILDLANDS N FURTHER, DEVELOPING AN	OS REMAIN UNPROTECTED N A DIFFICULT POLITICAL ITY OF CLIMATE CHANGE N WORK ON A GREATER SC AND OTHER DESIGNATIONS VELOPMENT IS THE PREEN CORE WILDLANDS MORE T ING THREAT TO WILDLANI GUIDING ENERGY DEVELO D IMPLEMENTING POLICY S INCREASES IN THE PROT	IN THE ABSENCE OF PROTEC CLIMATE, A SUSTAINED ATTAC MAKE CONSERVATION MORE CALE MORE QUICKLY TO PROTECT OF THE PROTECTS CORE WILDLECTED STATUS OR MANAGEM	ENT PROTECTIONS APPROXIMATELY 1 CTION THEY FACE DEGRADATION AND CK ON PUBLIC LANDS SEEKS TO DISMA CK ON PUBLIC LANDS SEEKS TO DISMA CK ON PUBLIC LANDS SEEKS TO DISMA CHALLENGING AND ISOLATED PROTECT CECT LARGE, CONNECTED NATURAL SY: PUBLIC LANDS AND THEIR WILD LAND OS - TWS BRINGS THE HIGHEST LEVEL PUBLIC LAND ARE AT RISK TO ENERGY NSE AVOIDANCE" POLICY AND QUID PR S AND CREATING A NET CONSERVATIO ANDS FROM ENERGY DEVELOPMENT, CENT OF WILDLANDS IN THE LARGE LAN	COMPROMISE EXISTING ANTLE THIS AMERICAN LEGACY ED AREAS MORE VULNERABLE STEMS THAT WILL BE RESILIENT VALUES WITHIN LARGE, OF EXPERTISE TO DRIVING TO DEVELOPMENT OVER THE NEXT RO QUO, THERE WILL BE AN BENEFIT WILL PRODUCE A GUIDES DEVELOPMENT TO
4b	AND LOO THE PEO ISSUES, MEANIN THAT CO	CAL AUDIENCES TO PROTECT NOPLE, NOT WITH PLACES WILE ON-THE-GROUND WILDERNE GFUL COALITIONS TO ADVOCA	ORS THE AMERICAN PUBL WILD PLACES PROVIDES A DERNESS IS LACKING RELE SS SUPPORT IS NEUTRAL, TE FOR PROTECTING A CO K TO PROMOTE OUTDOOR	UNIQUE PLATFORM TO RE-EN VANCE TO NEW AND EMERGII AT BEST WE LOOK TO INSPIR INTINUUM THAT INCLUDES UI EDUCATION, RECREATION AI	) (Revenue \$ ON COUPLED WITH THE ABILITY TO RE GAGE OUR CITIZENS IN OUR WILDERI NG AUDIENCES, CONTRIBUTING TO DI SE MORE AMERICANS TO CARE FOR OU RBAN GREEN SPACE, WILDERNESS, AN ND ACCESS TO THE OUTDOORS FOR T INTINUUM	NESS ROOTS - BEGINNING WITH MINISHED PASSION FOR OUR JR WILD PLACES AND BUILD D THE TRAILS AND CORRIDORS
4c	(Code	) (Expe	nses \$	including grants of \$	) (Revenue \$	)
4d	Other (Exper	program services (Desci uses \$	nbe in Schedule O) including grant	rs of \$	) (Revenue \$	)
		program service expenses			, y	,

art TV	Check	list of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	110
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)? 😼	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	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? <i>If "Yes," complete Schedule C, Part III</i>	5		No
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	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		Νo
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV.	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	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	11a	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	11b		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	11c		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	11d	Yes	
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	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	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year?  If "Yes," complete Schedule D, Parts XI and XII	12a	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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		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, Parts I and IV.	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Νο
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>	16		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 (see instructions)	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part $I$	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
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? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>99</b> 0	(2013)

аı	Statements Regarding Other 1R5 Fillings and Tax Compliance			_
	Check if Schedule O contains a response or note to any line in this Part V		Yes	l No
3	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable   1a   135		163	140
	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	<b>1</b> c	Yes	
3	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			
)	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)	2b	Yes	
1	Did the organization have unrelated business gross income of \$1,000 or more during the year?	За		No
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
1	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
)	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			
ı	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
	2. 105, to fine 54 of 55, and the organization meriorin 0000-1.	5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a		N
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	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		N
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year			
	74   1   1   1   1   1   1   1   1   1			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		N ·
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
	Sponsoring organizations maintaining donor advised funds.	⊢ٿ		
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12   10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them )			
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
	<b>Note.</b> See the instructions for additional information the organization must report on Schedule O	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
	Enter the amount of reserves on hand			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Se	ection 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	30			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O				
b	Enter the number of voting members included in line 1a, above, who are independent	30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relation other officer, director, trustee, or key employee?		2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under to supervision of officers, directors or trustees, or key employees to a management company or other	the direct	3		No
4	Did the organization make any significant changes to its governing documents since the prior Forn	T T	4	Yes	
_		· : , }		163	
5	Did the organization become aware during the year of a significant diversion of the organization's a	ssets'.	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 a more members of the governing body?	ippoint one or	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members or persons other than the governing body?	, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertake year by the following	n during the			
а	The governing body?		8a	Yes	
	Each committee with authority to act on behalf of the governing body?		8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be organization's mailing address? If "Yes," provide the names and addresses in Schedule O		9	100	 No
50	ection B. Policies (This Section B requests information about policies not required by			io Code	
36	ection b. Foncies (This Section B requests information about policies not required by	ine likernar Ko	111375	Yes	No
	D. 1.1.	ſ	40	165	
	Did the organization have local chapters, branches, or affiliates?		10a		No_
	affiliates, and branches to ensure their operations are consistent with the organization's exempt po	urposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing both the form?	ody before filing	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990 .				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests the rise to conflicts?	at could give	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If in Schedule O how this was done	"Yes," describe	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 approv			103	
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?	_	΄, Ι	
	The organization's CEO, Executive Director, or top management official		15a	Yes	
b	Other officers or key employees of the organization		15b	Yes	
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)		Į	l	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrar taxable entity during the year?	-	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate participation in joint venture arrangements under applicable federal tax law, and take steps to safe organization's exempt status with respect to such arrangements?	guard the	16b		
Se	ection C. Disclosure				
17	List the States with which a copy of this Form 990 is required to be filed AK, AL, AR, CA, CO, MA, MD, ME, MI, MN, OK, OR, PA, RI, SC, 1	,MS,MO,NC,	ND,N	IM , NY	
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 99 (3)s only) available for public inspection. Indicate how you made these available. Check all that applicable of the control of the con				
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, c interest policy, and financial statements available to the public during the tax year	onflict of			
20	State the name, physical address, and telephone number of the person who possesses the books a THOMAS TEPPER 1615 M STREET NW WASHINGTON,DC 200363209 (800) 843-9453	nd records of th	e orga	nızatıon	l.

Form 990	(2013	
----------	-------	--

_				_
D	-	$\alpha$	Δ	4
г	a	ч	_	•

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

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

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

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

List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter - 0 - in columns (D), (E), and (F) if no compensation was paid

◆ List all of the organization's current key employees, if any See instructions for definition of "key employee"

List the organization's five current highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations

List all of the organization's former officers, key employees, 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 organization compensated any current officer, director, or trustee

(A) Name and Title	(B) A verage hours per week (list any hours for related organizations below dotted line)	more t	han o	one l both	box, an o	heck sofficer (stee) Highest compensated	Former	(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

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

	(A) Name and Title	(B) A verage hours per week (list any hours for related	more t perso and a	tion ( han d n is l	ne b both ctor	oox, an c	officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	С	(F) Estima nount of ompens from t	ted other ation he
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			α	relate organiza	
1b	Sub-Total			•				<b>&gt;</b>					
C	Total from continuation sheet	s to Part VII, S	ection A	٠.	•	•	•	•	1,829,742	(	1		171,974
d 	Total (add lines 1b and 1c).  Total number of individuals (inc.)	cluding but not	· ·	to the	se l	ıste	d abov	e) w			<u>′1                                    </u>		1/1,3/4
	\$100,000 of reportable compe							·					
												Yes	No
3	On line 1a? If "Yes," complete S					key •	emplo	yee, •	or highest compen	sated employee	3	Yes	
4	For any individual listed on line organization and related organ individual										4	Yes	
5	Did any person listed on line 1									or individual for	*	1 62	
	services rendered to the organ	ization? <i>If "Yes,</i>	," compl	ete S	ched	ule J	for su	ch pe	erson	[	5		No
Se	ction B. Independent Co	ntractors											
1	Complete this table for your five compensation from the organization											ax vear	
	,	(A)						, -		(B)	Ť	(C)	<del></del>

(A) Name and business address	(B) Description of services	<b>(C)</b> Compensation
AB DATA 600 AB DATA DRIVE MILWAUKEE WI 53217	DIRECT MAIL	2,015,900
MERKLE RESPONSE SERVICES 100 JAMISON CT HAGERSTOWN MD 21740	CAGING	289,373
CONVIO INC 11501 DOMAIN DR STE 200 AUSTIN TX 78757	WEBSITE	150,000
DONORS SERVICES LLC 6715 SUNSET BLVD LOS ANGELES CA 90028	TELEMARKETING	133,528
WESTLAND PRINTERS 14880 SWEITZER LN LAUREL MD 20707	COMMERCIAL PRINTER	122,500

Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►7

enne	
ier Hev	
5	

Form 99								Page <b>9</b>
Part V	7111	Statement o	<b>of Revenue</b> ule O contains a respon	se or note to any lin	e in this Part VIII			Г
		Check if Schedi	uie O contains a respon	se of flore to any in	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
	1a	Federated camp	paigns 1a	49,334				
anta	ь	Membership du	es <b>1b</b>					
وق	С	Fundraising eve	ents <b>1c</b>					
Gifts, Grants ilar Amounts	d	Related organiz	zations 1d					
E .E	e	Government grants	s (contributions) <b>1e</b>	387,326				
Contributions, Giffs, Grants and Other Similar Amounts	f	All other contribution	ons, gifts, grants, and <b>1f</b> ot included above	27,928,793				
ntribu 1 Oth	g	Noncash contribution 1a-1f \$	ons included in lines	1,667,470				
a C	h	Total. Add lines	s 1a-1f	🛌	28,365,453			
<u></u>				Business Code				
e III	2a	CONTRACTED SER	VICES	900099	69,993	69,993		
æ	b	ADVOCATE TRIPS		900099	13,080	13,080		
M C e	C	LIBRARY SUBSCRIF	PTION	900099	2,218	2,218		
Ŋ,	d							
Ē	e f	All other progra	am service revenue					
Program Service Revenue	'							
	g		s 2a – 2f		85,291			
	3		ome (including dividend ar amounts)		412,370			412,370
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨				
	5	Royalties		•	407,113			407,113
	6a	Gross rents	(ı) Real 541,033	(II) Personal				
	b	Less rental	0					
	<sub>c</sub>	expenses Rental income	541,033					
	d	or (loss) Net rental incor	me or (loss)		541,033			541,033
		Wee Ferred Intest	(i) Securities	(II) O ther	,			<u>, , , , , , , , , , , , , , , , , , , </u>
	7a	Gross amount from sales of assets other	9,555,256	165,623				
	ь	than inventory Less cost or other basis and	8,099,752	167,922				
	c	sales expenses Gaın or (loss)	1,455,504	-2,299				
	d	Net gain or (los	[] (s)		1,453,205			1,453,205
e E	8a	Gross income for events (not incline)						
Other Revenue		\$of contributions See Part IV, lin	s reported on line 1c)					
her	ь	Less direct ex	penses b					
ŏ	c		(loss) from fundraising e	events 🛌				
	9a	Gross income for See Part IV, lin						
	Ь	Less direct ex	a penses b					
	_ c		(loss) from gaming activ	/ities				
	10a	Gross sales of						
		returns and allo	owances . a					
	ь	Less cost of a	oods sold <b>b</b>					
			loss) from sales of inve	entory 🛌				
		Miscellaneous		Business Code				
	11a	MAILING LIST		900099	79,718			79,718
	b	MISCELLANEC	ous	900099	50,545			50,545
	С	CREDIT CARD		900099	38,694			38,694
	d	All other revenu	L	<u>.</u>				
	e	Total. Add lines		🟲	168,957			
	12	Total revenue.	See Instructions	🕨	31,433,422	85,291	(	2,982,678

Form 990 (2013) Page **10** 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) .マ Check if Schedule O contains a response or note to any line in this Part IX (D) (B) Do not include amounts reported on lines 6b, (A) Program service Management and Fundraising 7b. 8b. 9b. and 10b of Part VIII. Total expenses expenses general expenses expenses Grants and other assistance to governments and organizations in the United States See Part IV, line 21 542,182 542,182 Grants and other assistance to individuals in the United States See Part IV, line 22 15,225 15,225 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16 Benefits paid to or for members Compensation of current officers, directors, trustees, and 950,750 772,133 42,216 136,401 key employees Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . Other salaries and wages 9,677,449 7,849,144 436,203 1,392,102 Pension plan accruals and contributions (include section 401(k) 464,181 382,273 17,237 and 403(b) employer contributions) . . . . 64,671 1,010,083 37,509 Other employee benefits . . . . 831,846 140,728 10 797,468 656,748 29,614 111,106 11 Fees for services (non-employees) Management . . . . Legal . . . . . . . . 20,434 15,562 1,304 3,568 91,393 69,601 5,833 15,959 Professional fundraising services See Part IV, line 17 181,454 181,454 Investment management fees . . . . . 209,937 209,937 Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on 4,422,959 3,506,525 293,875 622,559 Schedule O) . . . . . . . Advertising and promotion . . 12 13 Office expenses . . . 3,202,176 2,172,603 231,729 797,844 14 Information technology . . 15 Royalties . 124,782 16 Occupancy . . . . . . 3,032,431 2,405,042 502,607 **17** 1,174,102 1,011,339 36,019 126,744 Travel . . . . . . . 18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . . 19 Conferences, conventions, and meetings . 20 Interest . . . . . . . . . . . . 4,139 3,049 436 654 Payments to affiliates . . . . . . 21 22 Depreciation, depletion, and amortization . 509,304 19,658 384,320 105,326 23 62,516 49,560 2,594 10,362 24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 79,050 11,897 MAILING LIST RENTAL 133,174 42,227 **DUES AND SUBSCRIPTIONS** 109,846 81,389 6,880 21,577 STAFF DEVELOPMENT 36,647 26,993 3,862 5,792 d PERSONNEL ACQUISITIONS 5,758 4,944 144 670 43,259 31,862 4,559 e All other expenses 6,838 Total functional expenses. Add lines 1 through 24e 25 26,696,867 20,891,390 1,516,288 4,289,189 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► 🔽 if following SOP 98-2 (ASC 958-720)

4,487,252

868.978

831,077

2,787,197

Part X Balance Sheet

Pal	rt X	Check if Schedule O contains a response or note to any line in	this Pa	art X			
					(A)		(B)
	1	Cash-non-interest-bearing			Beginning of year 713		End of year 297
	2	Savings and temporary cash investments			2,547,309		5,811,456
					11,605,993		11,541,325
	3	Pledges and grants receivable, net			491,744		
	4	Accounts receivable, net			· · · · · · · · · · · · · · · · · · ·	4	479,856
	5	Loans and other receivables from current and former officers, of employees, and highest compensated employees. Complete P. Schedule L	art II d	of		5	
sts	6	Loans and other receivables from other disqualified persons (a $4958(f)(1)$ ), persons described in section $4958(c)(3)(B)$ , and and sponsoring organizations of section $501(c)(9)$ voluntary e organizations (see instructions) Complete Part II of Schedule	outing employers		6		
Assets	7	Notes and loans receivable, net				7	
ď	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			810,932		864,784
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D		7,120,288			55 (,, 5 -
	Ь	Less accumulated depreciation	10b	6,258,948	1,121,768	10c	861,340
	11	Investments—publicly traded securities			30,034,588		34,273,336
	12	Investments—other securities See Part IV, line 11			247,105		259,469
	13	Investments—program-related See Part IV, line 11			13		
	14	Intangible assets			14		
	15	Other assets See Part IV, line 11			7,924,543		6,947,413
	16	Total assets. Add lines 1 through 15 (must equal line 34)		54,784,695		61,039,276	
	17	Accounts payable and accrued expenses			1,552,654		2,029,746
	18	Grants payable			1,002,001	18	2,020,110
	19	Deferred revenue			3,255,549		3,345,943
	20	Tax-exempt bond liabilities			5,255,515	20	3,515,515
	21	Escrow or custodial account liability Complete Part IV of Sch			26,030		26,030
68	l	Loans and other payables to current and former officers, direct			20,000	21	20,000
Liabilitie	22	key employees, highest compensated employees, and disqual	ified	•		22	
<u>. e</u>		persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third partie				23	
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities (including federal income tax, payables to rela and other liabilities not included on lines 17-24) Complete Pa	rt X of	Schedule	1,081,881	25	1,247,565
	26	Total liabilities. Add lines 17 through 25			5,916,114	26	6,649,284
—		Organizations that follow SFAS 117 (ASC 958), check here ▶ lines 27 through 29, and lines 33 and 34.			, ,		, ,
ř	27	Unrestricted net assets			2,923,655	27	8,901,267
<u>명</u>	28	Temporarily restricted net assets			34,466,955		33,460,829
Ë	29	Permanently restricted net assets			11,477,971	29	12,027,896
Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), check is complete lines 30 through 34.			, ,		, , , , , , , , , , , , , , , , , , ,
ō	30	Capital stock or trust principal, or current funds				30	
Assets or	31	Paid-in or capital surplus, or land, building or equipment fund				31	
¥\$\$	32	Retained earnings, endowment, accumulated income, or other		· · ·		32	
<del>7</del> ∺	33	Total net assets or fund balances			48,868,581	33	54,389,992
Ŋĕŧ	34	Total liabilities and net assets/fund balances			54,784,695	34	61,039,276
	"	i otal navinties and net assets/junia valantes	• •	• •	04,704,090		61,039,276

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI	•			F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		31,4	133,422
2	Total expenses (must equal Part IX, column (A), line 25)	2			 596,867
3	Revenue less expenses Subtract line 2 from line 1			20,0	96,667
•	Revenue less expenses subtractime 2 nonnime 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	3		4,7	736,555
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		48.8	368,581
5	Net unrealized gains (losses) on investments				
_		5		- 8	321,749
6	Donated services and use of facilities	6			
7	Investment expenses	_ 1			
8	Prior period adjustments	7			
0		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		1.6	506,605
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			389,992
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	ו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
C	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e <b>2c</b>	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3 <b>a</b>	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

### 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

Form 990, Part VII - Compensation Compensated Employees, and Inde				IIu	Ste	es, r	(e y		lest	
<b>(A)</b> Name and Title	(B) A verage hours per week (list any hours for related	Posit more th perso and a	ion ( nan o n is b	ne booth a	ox, u an of trus	inless fficer tee)		( <b>D)</b> 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
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/2033 11200/	2,2033 112007	related organizations
DOUGLAS W WALKER	2 00	х		х				0	0	0
CHAIR MOLLY MCUSIC	2 00	X		×				0	0	0
VICE CHAIR WILLIAM J CRONON	2 00	-								
VICE CHAIR KEVIN LUZAK	2 00	×		Х				0	0	0
TREASURER		х		х				0	0	0
MARCIA KUNSTEL SECRETARY	2 00	×		х				0	0	0
DAVID BONDERMAN	2 00	х		х				0	0	0
AT-LARGE HANSJORG WYSS	2 00	х		х				0	0	0
BRENDA S DAVIS	2 00	X						0	0	0
GOV COUNCIL MEMBER EDWARD A AMES	2 00									
GOV COUNCIL MEMBER (TO OCT '13)  JAMES R BACA	2 00	X						0	0	0
GOV COUNCIL MEMBER (TO SEP '14) THOMAS A BARRON		Х						0	0	0
GOV COUNCIL MEMBER	2 00	х						0	0	0
RICHARD C BLUM  GOV COUNCIL MEMBER	2 00	×						0	0	0
CRANDALL C BOWLES	2 00	х						0	0	0
GOV COUNCIL MEMBER WILLIAM M BUMPERS	2 00	х						0	0	0
OV COUNCIL MEMBER  NORMAN L CHRISTENSEN JR	2 00	X						0	0	0
GOV COUNCIL MEMBER (FROM JUN '14) BETHINE CHURCH	2 00	-								
GOV COUNCIL MEMBER (TO OCT '13)  DAVID CHURCHILL	2 00	×						0	0	0
GOV COUNCIL MEMBER		х						0	0	0
BERTRAM J COHN GOV COUNCIL MEMBER (TO OCT '13)	2 00	х						0	0	0
WILLIAM COLEMAN GOV COUNCIL MEMBER	2 00	х						0	0	0
CHRISTOPHER J ELLIMAN	2 00	х						0	0	0
CARL FERENBACH	2 00	×						0	0	0
GOV COUNCIL MEMBER (FROM OCT '13) DAVID J FIELD	2 00	X						0	0	0
GOV COUNCIL MEMBER GEORGE T FRAMPTON JR	2 00	-								
GOV COUNCIL MEMBER JERRY F FRANKLIN	2 00	Х						0	0	0
GOV COUNCIL MEMBER		х						0	0	0
CAROLINE M GETTY  GOV COUNCIL MEMBER	2 00	х						0	0	0
	_					•				

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (B) (C) (D) (F) Name and Title Position (do not check Average Reportable Reportable Estimated amount hours per more than one box, unless compensation compensation of other week (list person is both an officer from the from related compensation organization (Wany hours and a director/trustee) organizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Former Highest compensated employee Individual trustee or director organizations Institutional Trustee related below organizations employee dotted line) REGINALD FLIP HAGOOD 2 00 Χ 0 0 GOV COUNCIL MEMBER HEATHER KENDALL-MILLER 2 00 Χ 0 0 GOV COUNCIL MEMBER (TO OCT '14) MICHAEL A MANTELL 2 00 0 0 n Χ GOV COUNCIL MEMBER DAVE MATTHEWS 2 00 Χ 0 0 0 GOV COUNCIL MEMBER SCOTT A NATHAN 2 00 Х 0 0 0 GOV COUNCIL MEMBER (TO APR '14) JAIME A PINKHAM 2 00 X 0 0 Ω GOV COUNCIL MEMBER REBECCA L ROM 2 00 Χ 0 0 0 GOV COUNCIL MEMBER THEODORE ROOSEVELT IV 2 00 Χ 0 0 0 GOV COUNCIL MEMBER CATHY DOUGLAS STONE 2 00 Χ 0 0 GOV COUNCIL MEMBER JENNIFER PERKINS SPEERS 2 00 Χ GOV COUNCIL MEMBER (FROM FEB '14) SARA VERA 2 00 Χ 0 0 0 GOV COUNCIL MEMBER CHRISTINA WONG 2 00 Χ 0 0 GOV COUNCIL MEMBER (TO SEP '14) JAMIE WILLIAMS 40 00 Χ 287,850 0 22,308 PRESIDENT THOMAS F TEPPER JR 40 00 Χ 188,380 0 15,504 CFO AMELIA HELLMAN 40 00 Х 177,021 0 12,699 VP PHILANTHROPY MELYSSA L WATSON 40 00 154,541 Х 0 21,019 VP CONSERVATION KATHARINE L THOMAS 40 00 Х 147,231 0 14.448 VP COMMUNICATIONS & MARKETING SARA E BARTH 40 00 Χ 157,898 0 19,625 SR REG DIR FOR THE PACIFIC AND SOUTHEAST CATHLEEN GRAMS 40 00 Χ 142,456 0 11,666 DEPUTY VP PHILANTHROPY ALLEN MAY 40 00 Х 131,419 0 14,885 SR DIR OF PHILANTHROPY, MAJOR GIFTS DANIEL A SMUTS 40 00 Χ 120,076 0 21,638 SR REG DIR SAN FRANCISCO PAULA WOLFERSEDER YABAR 40 00 185,017 0 6,784 VP MEMBERSHIP & DEVELOPMENT SPENCER R PHILLIPS 40 00 Х 137,853 0 11,398 VP RESEARCH

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493089004085

OMB No 1545-0047

### **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.

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of	the	organization
HE WILDE	RNE	SS SOCIETY

Employer identification number

53-0167933

	rt I			blic Charity Sta						nstructions		
The	rganı	zatıon ıs	not a privat	te foundation becaus	eıtıs (Forl	ınes 1 throu	gh 11, check	only one bo	ox)			
1	Γ	A chur	ch, convent	on of churches, or as	ssociation of	churches de	escribed in <b>s</b> e	ection 170(b	o)(1)(A)(i).			
2	Γ	A scho	ol described	in <b>section 170(b)(1</b>	L <b>)(A)(ii).</b> (At	tach Schedu	ıle E )					
3	Γ	A hosp	ıtal or a coo	perative hospital se	rvice organiz	atıon descrı	bed in <b>sectio</b>	n 170(b)(1)	(A)(iii).			
4	Γ			h organization operat	ted ın conjun	ction with a	hospital desc	cribed in <b>sec</b>	tion 170(b)(	1)(A)(iii). E	nter the	
5	_			ty, and state erated for the benefi	t of a college	or universit	v owned or o	perated by a	aovernment	al unit desc	ribed in	
3	,	_	•	A)(iv). (Complete P	_	or universit	Ly Owned or o	perated by a	governmen	ai uiiit uest	nbeu iii	
6	_			local government or	•	al unit decc	rihed in <b>secti</b>	on 170(h)/1	)(A)(y)			
7	<u> </u>			at normally receives	=					rom the gene	eral nublic	•
•	,	_		on 170(b)(1)(A)(vi).		•	support nom	u governine	incar anne or n	om the gent	crai pabile	
8	$\vdash$			described in <b>section</b>			nplete Part II	)				
9	Γ	An orga	anızatıon th	at normally receives	(1) more th	an 331/3% o	fits support	from contrıb	utions, mem	bershıp fees	, and gros	ss
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of										
				oss investment inco				•		tax) from bu	sinesses	
	_			janızatıon after June								
10		An orga	anization or	ganized and operated	d exclusively	to test for p	oublic safety	See <b>section</b>	1 509(a)(4).			
11	ı	one or the box	more public that descri	ganized and operated ly supported organiz bes the type of supp <b>b</b> Type II <b>c</b>	ations descr oorting organ	ibed in secti ization and c	on 509(a)(1) complete line	or section s s 11e throu	509(a)(2) S	ee <b>section 5</b>	09(a)(3).	Check
e	Γ	other tl section	han foundatı n 509(a)(2)	ox, I certify that the ion managers and otl	her than one	or more pub	licly support	ed organızat	ions describ	ed in section	n 509(a)(:	1) or
f			rganization this box	received a written de	etermination	from the IRS	S that it is a	Type I, Type	e II, or I ype	III supporti	ng organi	zation,
g		Since A followir	August 17, 2 ng persons?	2006, has the organi				•				, 
				rectly or indirectly o	•		•	persons des	scribed in (ii)		Yes	No
		-		governing body of th	7 7	_	17			11g		
		• •	•	er of a person descri	• •					11g	<del>`                                    </del>	
L				lled entity of a perso						11g(	·III)	<u> </u>
h		Provide	e the following	ng information about	the Supporte	eu organizati	1011(5)					
(i) Name o supporteo organizatio		rted	(ii) EIN	(iii) Type of organization (described on lines 1 - 9 above or IRC section (see	organization in		the organiz	(v) Did you notify the organization in col (i) of your support?		the ion in anized S ?	mone	nount of etary port
				instructions))	Yes	No	Yes	No	Yes	No		
Tota	1		I			l		l				

instructions

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do 20,347,273 21,120,937 21,136,337 34,840,384 28,365,453 125,810,384 not include any "unusual grants ") 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 20,347,273 21,120,937 21,136,337 34,840,384 28,365,453 125,810,384 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 17,400,855 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 108,409,529 from line 4 Section B. Total Support Calendar year (or fiscal year **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (a) 2009 (f) Total beginning in) 🟲 20,347,273 34,840,384 28,365,453 Amounts from line 4 21,120,937 21,136,337 125,810,384 Gross income from interest, dividends, payments received on securities loans, rents, royalties 2,311,578 2,091,383 1,436,853 1,516,247 1,478,928 8,834,989 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 113,751 23.014 35,311 17,603 50,545 240,224 capital assets (Explain in Part IV) 11 Total support (Add lines 7 134,885,597 through 10) 12 Gross receipts from related activities, etc (see instructions) 12 237,028 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 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 80 370 % Public support percentage for 2012 Schedule A, Part II, line 14 15 71 320 % 16a 33 1/3% support test—2013. 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—2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this ►□ box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. 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 - 2012. 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

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

Schedule A (Form 990 or 990-EZ) 2013 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	<b>(b)</b> 2010	(c) 2011	(d) 2012	<b>(e)</b> 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	<b>Total.</b> Add lines 1 through 5						
7a	Amounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	Amounts included on lines 2 and 3						
	received from other than						
	disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public support (Subtract line 7c						
	from line 6 ) ction B. Total Support						
	ndar year (or fiscal year beginning	( ) 2000	(1) 2010	( ) 2011	(1) 2012	( ) 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	<b>(b)</b> 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	( <b>B)</b> 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	<b>(B)</b> 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2012	(5,232	
9	in)  A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	<b>(b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	( <b>b)</b> 2010	(6) 2011	(1) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	( <b>b)</b> 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	( <b>b)</b> 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	( <b>b)</b> 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (	on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here  ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization  ic Support Performance (line 8, column ( 2 Schedule A, Paragraphic Performance)  colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or  13, column (f))  ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV ) Total support. (Add lines 9, 10c, 11, and 12 ) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the state of the sta	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or  13, column (f)) <b>ge</b> by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV		<b>formation.</b> Provide the explanations required by Part II, line 10; Part II, lin ne 12. Also complete this part for any additional information. (See instruction	<b>lation.</b> Provide the explanations required by Part II, line 10; Part II, line 17a or 2. Also complete this part for any additional information. (See instructions).					
	Facts And Circumstances Test							
Retu	ırn Reference	Explanation						
		Schodulo A / Form 000 o	000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

DLN: 93493089004085

53-0167933

### OMB No 1545-0047

### **SCHEDULE C**

(Form 990 or 990-EZ)

THE WILDERNESS SOCIETY

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. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

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, Part V, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III Name of the organization **Employer identification number** 

Par	t I-A Complete if the or	ganization is exempt under	section 501(	c) or is a section 527	organization.
1	Provide a description of the or	ganızatıon's dırect and ındırect politi	cal campaign act	tivities in Part IV	
2	Political expenditures			▶	\$
3	Volunteer hours				
Par	Complete if the or	ganization is exempt under	section 501(	c)(3).	
1		e tax incurred by the organization un			<u> </u>
2	Enter the amount of any excise	e tax incurred by organization manag	gers under sectio	n 4955 🕨	\$
3	·	section 4955 tax, did it file Form 47.			☐ Yes ☐ No
4a	Was a correction made?	·	•		☐ Yes ☐ No
ь	If "Yes," describe in Part IV				
Pari		ganization is exempt under	section 501(	c), except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization for se	ection 527 exem	pt function activities 🕨	\$
2		organization's funds contributed to o	ther organization:	s for section 527	
	exempt function activities			•	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter here	and on Form 112	20-POL, line 17b	\$
4	Did the filing organization file I	Form 1120-POL for this year?			☐ Yes ☐ No
5	organization made payments amount of political contribution	nd employer identification number (E For each organization listed, enter th ns received that were promptly and o political action committee (PAC) If	ie amount paid fro directly delivered	om the filing organization's f to a separate political orga	unds Also enterthe nızatıon, such as a
	(a) Name	( <b>b)</b> Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter - 0-

section 4911 tax for this year?

┌ Yes ┌ No

## 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 E (The term "expenditures" means ar		(a) Filing organization's totals	<b>(b)</b> Affiliated group totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	201,531	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	236,567	
c	Total lobbying expenditures (add lines 1a and 1b	438,098		
d	Other exempt purpose expenditures	26,248,769		
e	Total exempt purpose expenditures (add lines 1	26,686,867		
f	Lobbying nontaxable amount Enter the amount f	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		
	Grassroots nontaxable amount (enter 25% of lin	e 1f\	250,000	
_	Subtract line 1g from line 1a If zero or less, enter	•	230,000	
			0	
_	Subtract line 1f from line 1c If zero or less, ente	er -u- ne 1h or line 1i, did the organization file Form 472		

# 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) 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d)</b> 2013	(e) Total			
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
b	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000			
c	Total lobbying expenditures	324,073	262,111	158,989	438,098	1,183,271			
_d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000			
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000			
f_	Grassroots lobbying expenditures	102,032	62,598	, , , , , , , , , , , , , , , , , , ,	201,531	385,425			

	Part II-B Complete if the organization is exempt under section filed Form 5768 (election under section 501(h)).					
For e	r each "Yes" response to lines 1a through 1ı below, provide in Part IV a detailed descri	ption of the lobbying	(8	a)	(1	b)
	tivity.		Yes	No	Amo	ount
1 a	legislation, including any attempt to influence public opinion on a legislative r through the use of					
b c	b Paid staff or management (include compensation in expenses reported on line	es 1c through 1ı)?				
d	d Mailings to members, legislators, or the public?					
e	e Publications, or published or broadcast statements?					
f	f Grants to other organizations for lobbying purposes?					
g	<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislati	ive body?				
h i		ımılar means?				
j	•			1		
2a	<b>.</b>	on 501(c)(3)?				
b						
C	, , , , , , , , , , , , , , , , , , , ,			İ		
	d If the filing organization incurred a section 4912 tax, did it file Form 4720 for	-				
Par	art III-A Complete if the organization is exempt under section 501(c)(6).	on 501(c)(4), section 5	01(c	)(5), c	or sect	ion
	301(0)(0).				Ye	s No
1	Were substantially all (90% or more) dues received nondeductible by membe	rs?		Г	1	111
2					2	
3					3	
Pai	art III-B Complete if the organization is exempt under section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 a line 3, is answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not inclease for which the section 527(f) tax was paid).	lude amounts of political	20			
a	•		2a			
b			2b 2c			
с 3		a saction 163(a) duas	3			
4						
•	does the organization agree to carryover to the reasonable estimate of nonde political expenditure next year?	•	4			
5	, , , , , , , , , , , , , , , , , , , ,		5			
P	Part IV Supplemental Information					
	Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line Part II-B, line 1 Also, complete this part for any additional information	e 5, Part II-A (affiliated grou	p lıst),	Part II	-A , line	2, and
	Return Reference Explanation					

201104410 3 (1 01111 3 3 0 01 3 3 0 12 ) 2 0 1 3		i age <del>-i</del>
Part IV Supplemental Information	on <i>(continued)</i>	
Return Reference	Explanation	

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

### DLN: 93493089004085

OMB No 1545-0047

Open to Public

### **SCHEDULE D**

(Form 990)

Department of the Treasury Internal Revenue Service

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ▶ Attach to Form 990. ▶ See separate instructions. ▶ Information about Schedule D (Form 990) and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

**Supplemental Financial Statements** 

	e of the organization VILDERNESS SOCIETY	Employer identification number					
				0167933			
Par	Organizations Maintaining Donor Advorganization answered "Yes" to Form 990,		ınds	or Account	<b>s.</b> Comple	ete if	the
		(a) Donor advised funds		<b>(b)</b> Funds and	otheracco	unts	
7	Total number at end of year						
A	Aggregate contributions to (during year)						
A	Aggregate grants from (during year)						
ļ	Aggregate value at end of year						
	Did the organization inform all donors and donor advisor funds are the organization's property, subject to the org		or advi	sed	┌ Yes	Г	No
	Did the organization inform all grantees, donors, and do used only for charitable purposes and not for the benefit conferring impermissible private benefit?				┌ Yes	Г	No
	Conservation Easements. Complete if	the organization answered "Yes" to	Forn	n 990, Part I	V, line 7.		
	Purpose(s) of conservation easements held by the orga Preservation of land for public use (e g , recreation of Protection of natural habitat Preservation of open space Complete lines 2a through 2d if the organization held a	or education)  Preservation of an Preservation of a c	ertifie	d historic strud	cture		
,	easement on the last day of the tax year	Г		11-14 -4 41-	- FJ -6 Ab	- V	
	Total number of conservation easements	-	20	Held at the	e Ena or th	e yea	ır
-		-	2a				
	Total acreage restricted by conservation easements		2b				
_	Number of conservation easements on a certified histor	` '	2c				
	Number of conservation easements included in (c) acqu historic structure listed in the National Register		2d				
	Number of conservation easements modified, transferre	ed, released, extinguished, or terminate	d by th	ie organization	during		
1	the tax year 🛌						
	Number of states where property subject to conservation	on easement is located 🛌	_				
	Does the organization have a written policy regarding the enforcement of the conservation easements it holds?	ne periodic monitoring, inspection, hand	ling of	violations, an	d ┌ Yes	Г	No
:	Staff and volunteer hours devoted to monitoring, inspec •	ting, and enforcing conservation easem	ents c	luring the year			
	Amount of expenses incurred in monitoring, inspecting,	and enforcing conservation easements	durin	the vear			
	► \$	and emoreting conservation casements	aariii	g che year			
	Does each conservation easement reported on line 2(d and section 170(h)(4)(B)(ii)?	) above satisfy the requirements of sec	tion 17	70(h)(4)(B)(ı)	┌ Yes	Г	No
	In Part XIII, describe how the organization reports constalance sheet, and include, if applicable, the text of the	footnote to the organization's financial					
	the organization's accounting for conservation easemer  Organizations Maintaining Collections  Complete if the organization answered "Ye	s of Art, Historical Treasures, o	or Otl	her Similar	Assets.		
٠	If the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar asset service, provide, in Part XIII, the text of the footnote to	16 (ASC 958), not to report in its reven is held for public exhibition, education, o	r rese	arch in further			
٠,	If the organization elected, as permitted under SFAS 11 works of art, historical treasures, or other similar asset service, provide the following amounts relating to these	s held for public exhibition, education, c				olic	
	(i) Revenues included in Form 990, Part VIII, line 1			<b>►</b> \$			
	(ii) Assets included in Form 990, Part X				1		
	If the organization received or held works of art, historic following amounts required to be reported under SFAS 1		r finan			•	
	Revenues included in Form 990, Part VIII, line 1	<u></u>		<b>.</b>			
	xevenues included in Form 550, Fait VIII, line I			<b>F</b> ⊅			

**b** Assets included in Form 990, Part X

Part	t 🚻 Organizations Mair	ntaining Collec	tions of Art,	Histori	cal Tr	easu	res, or O	the	r Similar As	sets (	continued)
3	Using the organization's acquis collection items (check all that		and other record	ls, check	any of t	he follo	wing that a	re a	significant use	ofits	
а	Public exhibition			d $ egin{array}{c c c c c c c c c c c c c c c c c c c $	Loan	or exch	ange progr	ams			
b	Scholarly research			е Г	Other	-					
c	Preservation for future gen	ierations									
4	Provide a description of the org Part XIII	janization's collec	tions and explai	n how the	y furthe	er the o	rganızatıon	's ex	empt purpose	ın	
5	During the year, did the organiz assets to be sold to raise funds									┌ Yes	√ No
Par	rt IV Escrow and Custod Part IV, line 9, or rep	lial Arrangem	ents. Comple	te if the	organ	ızatıon				•	1 110
1a	Is the organization an agent, tr included on Form 990, Part X?						r other ass	ets r		 ┌ Yes	 ✓ No
b	If "Yes," explain the arrangeme	ent in Part XIII an	d complete the 1	following t	able					•	,
									Ar	nount	
c	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an	amount on Form	990, Part X, line	21?			_			マ Yes	
b	If "Yes," explain the arrangeme	ant in Part VIII C	hack hara if the	evnlanatı	on hac	haan n	rovided in P	art \	KIII		Ī✓
	rt V Endowment Funds									<u></u>	
			Current year	(b)Prior y					hree years back	(e)Four	years back
1a	Beginning of year balance .		19,228,340	16,	711,871		13,916,517		13,864,750		12,433,120
b	Contributions		573,107		89,192		112,204		5,000		55,828
C	Net investment earnings, gains	, and losses	-308,193	3,	016,745		3,203,142		591,539		1,880,177
d	Grants or scholarships										
е	and programs		615,959		589,468		519,992		544,772		504,375
f	Administrative expenses .										
g	End of year balance		18,877,295	19,	228,340		16,711,871		13,916,517		13,864,750
2	Provide the estimated percenta	age of the current	year end balanc	e (lıne 1g	, colum	n (a)) h	eld as				
а	Board designated or quasi-end	owment 🟲									
b	Permanent endowment 🕨 🛚 63	3 720 %									
c	Temporarily restricted endowm The percentages in lines 2a, 2										
За	Are there endowment funds not	: in the possessio	n of the organiza	tion that a	are held	d and a	dmınıstered	for	the		
	organization by									Yes	+
	(i) unrelated organizations .							٠	3a		No
b	(ii) related organizations .  If "Yes" to 3a(ii), are the relate				 lula B2				3a(		No
4	Describe in Part XIII the inten	=	· ·					•	3	<u> </u>	<u> </u>
	rt VI Land, Buildings, an					n answ	ered 'Yes	' to	Form 990, Pa	art IV, I	ine
	11a. See Form 990, I	Part X, line 10.									
	Description of prop	erty			) Cost or is (inves		( <b>b)</b> Cost or o		(c) Accumulate depreciation	ed ( <b>d</b> )	Book value
1a	Land										
b	Buildings			. [							
c	Leasehold improvements			. [			2,192	2,036	2,078,2	214	113,822
d	Equipment						4,740	),707	4,108,8	333	631,874
	Other							7,545	<u> </u>	901	115,644
Tota	al. Add lines 1a through 1e <i>(Colu</i>	mn (d) must equal	Form 990, Part X	, column (	B), line	10(c).)			🕨		861,340
									Schedule I	) (Form	990) 2013

Part VII Investments—Other Securities. Col	mplete if the organization	answered 'Yes' to For	rm 990, Part IV, line 11b.
See Form 990, Part X, line 12.  (a) Description of security or category	(b)Book value	(c) Method of v	
(including name of security)		Cost or end-of-year	market value
(1)Financial derivatives (2)Closely-held equity interests			
Other			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	<b>b</b>	1	
Part VIII Investments—Program Related. C	omplete if the organization	<u> </u>	orm 990 Part IV line 11c
See Form 990, Part X, line 13.			
(a) Description of investment	(b) Book value	(c) Method of v Cost or end-of-year	
		Cost of elid-ol-year	illarket value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13 )	<b>F</b>		
Part IX Other Assets. Complete if the organization		0, Part IV, line 11d See	
(a) Descri	ription		(b) Book value
(1) ARTWORKS (2) BENEFICIAL INTEREST			125,950 6,821,463
(2) BENEFICIAL INTEREST			0,021,403
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1			6,947,413
Part X Other Liabilities. Complete if the organized Form 990, Part X, line 25.	anization answered Yes' t	to Form 990, Part IV,	line 11e or 11f. See
1 (a) Description of liability	(b) Book value		
Federal Income taxes			
DEFERRED RENT	1,247,065		
DEPOSITS	500		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25 )	1 347 565		
Total. (Column (b) must equal Form 990, Part X, col (b) line 25 )	= 1= 1= = =		1

	the organization answered 'Yes' to Form 990, Part IV, line 12a.		
1	Total revenue, gains, and other support per audited financial statements	1	30,404,035
2	A mounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII )		
e	Add lines <b>2a</b> through <b>2d</b>	2e	-821,749
3	Subtract line <b>2e</b> from line <b>1</b>	3	31,225,784
4	Amounts included on Form 990, Part VIII, line 12, but not on line <b>1</b>		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a 209,937		
b	Other (Describe in Part XIII )		
c	Add lines <b>4a</b> and <b>4b</b>	4c	207,638
5	Total revenue Add lines <b>3</b> and <b>4c.</b> (This must equal Form 990, Part I, line 12)	5	31,433,422
			· '
	Reconciliation of Expenses per Audited Financial Statements With Expenses if the organization answered 'Yes' to Form 990, Part IV, line 12a.	per	· '
	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	per 1	Return. Complete
L	ıf the organization answered 'Yes' to Form 990, Part IV, line 12a.	-	Return. Complete
L	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	-	Return. Complete
L 2	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	-	Return. Complete
L 2 a	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	-	Return. Complete
L 2 a b	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	-	Return. Complete
L a b	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	-	<b>Return.</b> Complete 24,882,624
L a b c d	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1	<b>Return.</b> Complete 24,882,624
L 2 a b c d e	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1 2e	<b>Return.</b> Complete 24,882,624
L 2 a b c d e	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1 2e	<b>Return.</b> Complete 24,882,624
1 2 a b c d e 3	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1 2e	<b>Return.</b> Complete 24,882,624
L 2 a b c d e 3	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	1 2e	Return. Complete  24,882,624
1 2 a b c d e 3 4 a b	If the organization answered 'Yes' to Form 990, Part IV, line 12a.  Total expenses and losses per audited financial statements	2e 3	Return. Complete  24,882,624

Return Reference	Explanation
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
PART IV, LINE 2B	THE SOCIETY HOLDS FUNDS IN CUSTODIAL AGREEMENTS, AND RECORDS ANY TRANSACTIONS AS AGENCY TRANSACTIONS
PART V, LINE 4	THE SOCIETY MAINTAINS TWO TYPES OF ENDOWMENT FUNDS GENERAL ENDOWMENT (DONOR-RESTRICTED) AND CAPITAL RESERVES GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT TO THE ORGANIZATION GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS GOVERNING THEIR USE THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED
PART X, LINE 2	MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS AND THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30, 2014
PART XI, LINE 4B - OTHER ADJUSTMENTS	LOSS ON DISPOSAL -2,299
PART XII, LINE 4B - OTHER ADJUSTMENTS	LOSS ON DISPOSAL -2,299 CHANGE IN BENEFICIAL INTEREST 1,682,934 PLEDGE ALLOWANCE -76,329

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493089004085

OMB No 1545-0047

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

Internal Revenue Service

Department of the Treasury

**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.

**Supplemental Information Regarding** 

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

► Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization			Employer ident	tification number
HE WILDERNESS SOCIETY			53-0167933	
<b>Part I</b> Fundraising Activities. Com Form 990-EZ filers are not requ			o Form 990, Part IV,	line 17.
1 Indicate whether the organization raised fu	ınds through any of the f	following activities Che	ck all that apply	
a 🔽 Mail solicitations	e	Solicitation of non-	-	
<b>b</b> Internet and email solicitations	f	Solicitation of gove		
c	g	Special fundraising	g events	
2a Did the organization have a written or oral or key employees listed in Form 990, Part				Γ <sub>Yes</sub> Γ <sub>Ne</sub>
<b>b</b> If "Yes," list the ten highest paid individua to be compensated at least \$5,000 by the		rs) pursuant to agreeme	nts under which the fun	draiser is
(i) Name and address of individual or entity (fundraiser)	y (iii) Did fundraiser have custody or control of contributions?	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
TELEMARKET	Yes No			
DONOR SERVICES GROUP LLC 6715 SUNSET BLVD	No	220,017	164,669	55,348
HOLLYWOOD, CA 90028				
COMNET MARKETING GROUP INC 1214 STOWE AVE	NG	14,977	14,049	928
MEDFORD, OR 97501				
3				
4				
5				
6				
7				
8				
9				
10				
	<del></del>	234,994	178,718	56,276
3 List all states in which the organization is registration or licensing AK, AL, AR, CA, CO, CT, FL, GA, HI, IL, KS, KY				

Pa	rt II	Fundraising Events. Com more than \$15,000 of fundra events with gross receipts g	aising event contribut	ion answered "Yes" to tions and gross income	Form 990, Part IV, li on Form 990-EZ, lin	ne 18, or reported es 1 and 6b. List
			(a) Event #1	<b>(b)</b> Event #2	(c) O ther events	(d) Total events (add col (a) through col (c))
			(event type)	(event type)	(total number)	(-),
Revenue	1	Gross receipts				
eVe	2	Less Contributions				
<u>~</u>	3	Gross income (line 1 minus line 2)				
	4	Cash prizes				
မှ	5	Noncash prizes				
Expenses	6	Rent/facility costs				
ă	7	Food and beverages .				
Direct	8	Entertainment				
ے	9	Other direct expenses .				
	10	Direct expense summary Add lin	es 4 through 9 ın colum	n (d)		( )
	11	Net income summary Subtract li	ne 10 from line 3, colum	n (d)		
Par	t II	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than
<u>Ф</u>		\$13,000 OH FORM 330 EZ, III	(a) Bingo	(b) Pull tabs/Instant	(c) Other gaming	(d) Total gaming (add
Revenue				bingo/progressive bingo		col (a) through col (c)
<u>~</u>	1	Gross revenue				
ses	2	Cash prizes				
Expenses	3	Non-cash prizes				
Direct B	4	Rent/facility costs				
<u>ā</u>	5	Other direct expenses				
	6	Volunteer labor	<ul><li>✓ Yes</li></ul>	Г Yes% Г Nо	<ul><li>☐ Yes</li></ul>	
	7	Direct expense summary Add lines	s 2 through 5 in column	(d)		
	8	Net gaming income summary Subt	ract line 7 from line 1, c	olumn (d)		
9	Ent	er the state(s) in which the organiza	ition operates gaming ac	ctivities		
a Is the organization licensed to operate gaming activities in each of these states? Yes						
b	If"	No," explain				
10a b		re any of the organization's gaming l Yes," explain				

|--|

Page :	3
--------	---

			11							
Doe	s the organization operate gaming ac	tivities with nonmembers?	· · · · · · · · · · · · · · · · · · ·							
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 gar	ning?	· · · · · · · · · · · · · · · · · · ·							
13	Indicate the percentage of gaming	activity operated in								
а	The organization's facility $oldsymbol{.}$									
b	An outside facility									
14	Enter the name and address of the	enter the name and address of the person who prepares the organization's gaming/special events books and records								
	Name 🟲									
	Address ►									
15a	Does the organization have a contr	act with a third party from v	whom the organization receives gaming							
	<del>-</del>	·								
Ь			organization 🟲 \$ and the							
	amount of gaming revenue retained	-	- · · · · · · · · · · · · · · · · · · ·							
C	If "Yes," enter name and address of the third party									
	Name ►									
	Address ▶									
16	Gaming manager information									
	Name ▶									
	Gamıng manager compensation ▶ \$									
	Description of services provided 🕨									
	Director/officer	Employee	Independent contractor							
17	Mandatory distributions	r Employee	, independent contractor							
а	,	state law to make charitable	e distributions from the gaming proceeds to							
	retain the state gaming license?									
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent									
	n the organization's own exempt activities during the tax year 🕨 💲									
Pa		, 15b, 15c, 16, and 17b,	anations required by Part I, line 2b, columns (iii) and (v), and as applicable. Also complete this part to provide any							
	Return Reference		Explanation							
	IEDULE G, PART I, E 2B, COLUMN (V)	CAMPAIGNS WE EXPI WHO DO APPEALS TO NET INCOME OTHER LAPSED REINSTATEM DESIGN, BUDGETED A DONORS OR RECRUIT AFTER THE CAMPAIG	TELEMARKETING VENDORS FOR DIFFERENT TYPES OF FUNDRAISING ECT GAINS FORM VENDORS WHO DO REVEWAL CALLING AND VENDORS EXISTING MEMBERSHIP BOTH PRODUCE SUBSTANTIAL, IMMEDIATE TELEMARKETING VENDORSWORK ON DIFFERENT CAMPAIGNS SUCH AS IENTS AND SUSTAINER (MONTHLY GIVING) INVITES WHICH ARE, BY AT AN INITIAL NET LOSS THEY ARE INTENDED TO REINSTATE LAPSED MONTHLY CONTRIBUTORS AND NET INCOME IN FUTURE MONTHS IN SARE OVER THE AMOUNT PAID TO OR RETAINED BY FUNDRAISERS							

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493089004085

OMB No 1545-0047

Schedule I (Form 990)

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

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

Open to Public **Inspection** 

Department of the Treasury ▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization

Employer identification number

						' '	
THE WILDERNESS SOCIETY	53-0167933						
Part I General Information	n on Grants and	d Assistance				<b>I</b>	
Does the organization maintain the selection criteria used to av Describe in Part IV the organization.	vard the grants or as ation's procedures fo	sistance? or monitoring the use o	f grant funds in the Unite	ed States			✓ Yes
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							
<ul><li>2 Enter total number of section 50</li><li>3 Enter total number of other orga</li></ul>		=				· · · <b>-</b>	19

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

(a)Type of grant or assistance	(b)Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) GLORIA BARRON WILDERNESS SOCIETY SCHOLARSHIP	2	10,000			
(2) NELSON SCHOLARSHIP	1	5,225			

Part IV Supplemental Information. Provide the information required in Part I, line 2, Part III, column (b), and any other additional information.

ACCOMPLISHMENTS MAY BE REQUESTED

Return Reference Explanation PART I, LINE 2 GRANT AND AWARDS TO OTHER ORGANIZATIONS ARE REQUESTED AND MONITORED BY PROGRAM STAFF THE PRIMARY CRITERION FOR AN AWARD IS THE RECEIVING ORGANIZATION WILL USE THE FUNDS FOR ACTIVITIES WHICH SUPPORT THE SOCIETY'S MISSION A  ${\sf REQUEST}$  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, FINANICAL REPORTS. AND TANGIBLE SUCCESSES ACHIEVED WITH THE FUNDING. INCLUDING ANY UNEXPECTED CHALLENGES ENCOUNTERED DURNG 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

### **Additional Data**

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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NEW VENTURE FUND 1201 CONNECTICUT AVE SUITE 300 WASHINGTON, DC 20036	20-5806345	501(C)(3)	100,000				CONSERVATION PROJECT

Form 990,Schedule 1, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
LOS PADRES FOREST WATCH INC 16 W MISSION STREET SANTA BARBARA,CA 93101	20-1531390	501(C)(3)	61,400				CONSERVATION PROJECT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ARIZONA WILDERNESS COALITION PO BOX 403040 TUSCON,AZ 85717	20-0412328	501(C)(3)	60,000				CONSERVATION PROJECT			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HIGH COUNTRY CONSERVATION ADVOCATES 724 ELK AVE CRESTED BUTTE CRESTED BUTTE,CO 81224	84-0772688	501(C)(3)	40,000				CONSERVATION PROJECT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
HISPANIC FEDERATION INC 55 EXCHANGE PLACE SUITE 501 NEW YORK, NY 10005	13-3573852	501(C)(3)	30,000				CONSERVATION PROJECT			

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
SKY ISLAND ALLIANCE 300 E UNIVERSITY BLVD SUITE 270 TUSCON,AZ 85717	86-0796748	501(C)(3)	30,000				CONSERVATION PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	( <b>d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> 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 557 EAST MAIN STREET FRANKLIN FRANKLIN,NC 28734	56-2142199	501(C)(3)	25,000				CONSERVATION PROJECT			

form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	<b>(h)</b> Purpose of grant or assistance		
FRIENDS OF BROWNS CANYON 7305 COUNTY ROAD 111A SALIDA,CO 81201	26-0068761	501(C)(3)	20,000				CONSERVATION PROJECT		

Form 990,Schedule I, Pai	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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
VET VOICE FOUNDATION INC 2201 WISCONSIN AVENUE NW STE 320 WASHINGTON, DC 20007	26-4627222	501(C)(3)	20,000				CONSERVATION PROJECT			

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
YOSEMITE CONSERVANCY 101 MONTGOMERY STREET SUITE 1700 SAN FRANCISCO,CA 94104	94-3058041	501(C)(3)	20,000				CONSERVATION PROJECT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST VIRGINIA RIVERS COALITION 3501 MACCORKLE AVE SUITE 129 CHARLESTON CHARLESTON, WV 25304	52-1736621	501(C)(3)	17,500				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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
WEST VIRGINIA WILDERNESS COALITION 120 W WASHINGTON STREET SUITE 5 LEWISBURG LEWISBURG,WV 24901	45-4359741	501(C)(3)	17,500				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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
WILDERNESS WORKSHOP 520 SOUTH 3RD STREET 27 CARBONDALE,CO 81623	74-1900412	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									
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
FLORIDA WATER AND LAND LEGACY 1700 N MONROE STREET 11-286 TALLAHASSEE,FL 32303	46-0560492	501(C)(4)	10,000				CONSERVATION PROJECT		

Form 990,Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
GREATER YELLOWSTONE COALITION 215 S WALLACE AVE BOZEMAN BOZEMAN, MT 59715	81-0414042	501(C)(3)	10,000				CONSERVATION PROJECT			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WINTER WILDLANDS ALLIANCE 910 MAIN STREET SUITE 235 BOISE,ID 83702	82-0523471	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							
(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PUBLIC EMPLOYEES FOR ENVIRONMENTAL RESPONSIBILITY 2000 P STREET NW SUITE 240 WASHINGTON, DC 20036	93-1102740	501(C)(3)	8,500				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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
CONSERVATION COLORADO 1536 WYNKOOP STREET STE 5C DENVER,CO 80202	30-0037131	501(C)(4)	8,000				CONSERVATION PROJECT	

Form 990,Schedule I, Par	Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States								
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
NEW MEXICO WILDLIFE FEDERATION 121 CARDENAS DRIVE NE ALBUQUERQUE,NM 87108	85-0160947	501(C)(3)	8,000				CONSERVATION PROJECT		

<u> Form 990,Schedule I, Pa</u>	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>(b)</b> EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ROCKY MOUNTAIN WILD 1536 WYNKOOP STREET 303 DENVER,CO 80202	84-1512852	501(C)(3)	7,500				CONSERVATION PROJECT		

Form 990,Schedule I, Pai	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>(b)</b> EIN	(c) IRC Code section if applicable	<b>(d)</b> A mount of cash grant	(e) A mount of non- cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance	
NATURAL RESOURCES DEFENSE COUNCIL 1200 NEW YORK AVE NW STE 400 WASHINGTON, DC 20005	13-2654926	501(C)(3)	6,000				CONSERVATION PROJECT	

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493089004085

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

## **Compensation Information**

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

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23. ► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

Name of the organization THE WILDERNESS SOCIETY

**Employer identification number** 

53-0167933

Pa	art 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 lis 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding			
	First-class or charter travel Housing allowance or residence for pe	ersonal use		
	Travel for companions Payments for business use of person	al residence		
	Tax idemnification and gross-up payments  Health or social club dues or initiation	n fees		
	Discretionary spending account Personal services (e.g., maid, chauffe	ur, chef)		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding pay reimbursement or provision of all of the expenses described above? If "No," complete Part III to e			
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by a directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in			
		<u> </u>		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but expl	;		
	Compensation committee			
	Form 990 of other organizations  Approval by the board or compensations	on committee		
4	During the year, did any person listed in Form 990, Part VII, Section A, line $1a$ with respect to the or a related organization	filing organization		
а	Receive a severance payment or change-of-control payment?	4a	Yes	
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
С	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in	Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue an compensation contingent on the revenues of	у		
а	The organization?	5a		No
ь	• 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 an compensation contingent on the net earnings of	у		
а	The organization?	6a		No
b	Any related organization?	6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-payments not described in lines 5 and 6? If "Yes," describe in Part III	fixed 7		No
8	Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was	5		
	subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Ye			
	ın Part III	8		Νo
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described section 53 $4958-6(c)$ ?	ın Regulations <b>9</b>		

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

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

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

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
	(i) Rase		other deferred compensation	benefits	(B)(ı)-(D)	reported as deferred in prior Form 990			
(1)JAMIE WILLIAMS PRESIDENT	(i) (ii)	287,850 0	0	0	15,525 0	6,783 0	310,158 0	0	
(2)THOMAS F TEPPER JR CFO	(i) (ii)	188,380 0	0 0	0	6,750 0	8,754 0	203,884	0	
(3)AMELIA HELLMAN VP PHILANTHROPY	(i) (ii)	177,021 0	0 0	0	8,538 0	4,161 0	189,720 0	0	
(4)MELYSSA L WATSON VP CONSERVATION	(i) (ii)	154,541 0	0 0	0	9,95 <b>4</b> 0	11,065 0	175,560 0	0	
(5)KATHARINE L THOMAS VP COMMUNICATIONS & MARKETING	(i) (ii)	147,231 0	0	0	9,085	5,363 0	161,679 0	0	
(6)SARA E BARTH SR REG DIR FOR THE PACIFIC AND SOUTH	(i) (ii)	157,898 0	0	0	10,022	9,603	177,523	0	
(7)CATHLEEN GRAMS DEPUTY VP PHILANTHROPY	(i) (ii)	142,456 0	0	0	7,252 0	4,414	154,122	0	
(8)PAULA WOLFERSEDER YABAR VP MEMBERSHIP & DEVELOPMENT	(i) (ii)	185,017 0	0	0	6,583 0	201	191,801	0	
(9)SPENCER R PHILLIPS VP RESEARCH	(i) (ii)	137,853 0	0 0	0	5,791 0	5,607 0	149,251	0	

#### Part IIII Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II

Also complete this part for any additional information

Return Reference	Explanation
	THE SUPPLEMENTAL NONQUALIFIED RETIREMENT PLAN, WHICH WAS AUTHORIZED BY THE COUNCIL, IS ONLY AVAILABLE TO THE SENIOR
	VICE PRESIDENTS AND THE PRESIDENT CURRENTLY, ONLY FORMER PRESIDENT WILLIAM MEADOWS IS ENROLLED IN THE PLAN SEVERANCE PAYMENTS PAULA WOLFERSEDER YABAR \$ 64,615

Schedule J (Form 990) 2013

### **Additional Data**

Software ID: Software Version:

**EIN:** 53-0167933

Name: THE WILDERNESS SOCIETY

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(B) Breakdown	of W-2 and/or 1099-MI	SC compensation	(C) Deferred	1 , ,	(E) Total of columns	(F) Compensation
(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation	compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
(ı) 287,850 ıı) 0	0 0	0	15,525	6,783 0	310,158	0
(ı) 188,380 ıı) 0	0 0	0	6,750	8,754	203,884	0 0
(ı) 177,021 ıı) 0	0 0	0	8,538	3 4,161 0 0	189,720	0 0
(ı) 154,541 ıı) 0	0 0	0	9,954	11,065	175,560	0
(ı) 147,231 ıı) 0	0 0	0	9,085	5,363	161,679 0	0
(ı) 157,898 ıı) 0	0 0	0	10,022	9,603	3 177,523 0 0	0
(ı) 142,456 II) 0	5 0	, 0	7,252	2 4,414 0	154,122	0
(I) 185,017 II) 0	0 0	0	6,583	201	191,801	0
(ı) 137,853 ıı) 0	0 0	0	5,791	1	149,251	0
	(i) Base Compensation  287,850  10 188,380  11 177,021  11 154,541  11 10 157,898  11 185,017  11 1 137,853	(i) Base Compensation (ii) Bonus & incentive compensation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(ii) Base Compensation Incentive compensation (III) Other compensation 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(ii) Base Compensation (iii) Bonus & Incentive Compensation (iii) Other	(i) Base Compensation         (ii) Bonus & incentive compensation         (iii) Other compensation         compensation         benefits           1) 287,850 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	(i) Base compensation (ii) Bonus & (iii) Other compensation (iiii) Other compensation (iiiii) Other compensation (iiiii) Other compensation (iiiii) Other compensation (iiiiii) Other compensation (iiiiiiiii) Other compensation (iiiiiiiiiii) Other compensation (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii

DLN: 93493089004085

OMB No 1545-0047

**SCHEDULE M** (Form 990)

Department of the Treasury

Internal Revenue Service

# **Noncash Contributions**

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

**Inspection** 

Name of the organization THE WILDERNESS SOCIETY

**Employer identification number** 

Tunes of Dunasity			[53	-0167933			
art I Types of Property	(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr		_	nts
Art—Works of art							
Art—Historical treasures .							
Art—Fractional interests							
Books and publications							
Clothing and household goods							
Cars and other vehicles							
Boats and planes							
Intellectual property							
Securities—Publicly traded .	Х	69	1,658,214	RESALE VALUE			
Securities—Closely held stock .			, ,				
Securities—Partnership, LLC, or trust interests							
Securities—Miscellaneous							
Qualified conservation contribution—Historic structures							
Qualified conservation contribution—Other							
Real estate—Residential .							
Real estate—Commercial							
Real estate—O ther							
Collectibles							
Food inventory							
Drugs and medical supplies .							
Taxidermy							
Historical artifacts							
Scientific specimens							
Archeological artifacts							
Other►( SCELLANEOUS)	Х	3	9,256	COMPARISON			
O ther ►()	_						
Other ▶(							
Other ▶ ()							
Number of Forms 8283 received by t	he organizat	ion during the tax year for	contributions	<u> </u>			
for which the organization completed				9			
- · · · · · · · · · · · · · · · · · · ·	,			•		Yes	N
a During the year, did the organization	receive by	contribution any property i	reported in Part I, lines 1	through 28, that			
it must hold for at least three years	from the date	e of the initial contribution	, and which is not require	d to be used			
for exempt purposes for the entire ho					30a		N
<b>b</b> If "Yes," describe the arrangement i							.,,
Does the organization have a gift ac		licy that requires the revie	ew of any non-standard co	ntributions?	31	Yes	
Does the organization hire or use thi contributions?	rd parties or	related organizations to s	solicit, process, or sell no	ncash 	32a		N
<b>b</b> If "Yes," describe in Part II							
If the organization did not report an describe in Part II	amount in co	olumn (c) for a type of prop	erty for which column (a)	ıs checked,			

32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, to number of items received, or a combination of both. Also complete this part for any additional information						
Return Reference	Explanation					
, , ,	COLUMN (B) REFLECTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF ITEMS					

Schedule M (Form 990) (2013)

efile GRAPHIC print - DO NOT PROCESS

As Filed Data -

DLN: 93493089004085

OMB No 1545-0047

2013 Open to Public Inspection

**SCHEDULE 0** (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization THE WILDERNESS SOCIETY

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Employer identification number

53-0167933

Return Reference	Explanation
FORM 990, PART VI,	DAVID BONDERMAN AND RICHARD BLUM ARE RELATED THROUGH A BUSINESS RELATIONSHIP CAROLINE
SECTION A, LINE 2	GETTY AND MICHAEL MANTELL ARE RELATED THROUGH A BUSINESS RELATIONSHIP

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 4	1 MEMBERS WILL SERVE UP TO THREE, THREE YEAR TERMS WITHIN ASSIGNED AND STAGGERED CLASSES, STARTING WITH INITIAL CLASSES OF 1, 2, AND 3 YEARS MEMBERS NEED TO BE REELECTED BY THE FULL COUNCIL AT THE END OF EACH TERM 2 ANY MEMBER WHO IS AN OFFICER AT THE TIME OF REACHING THEIR TERM LIMIT WILL BE GIVEN AN ADDITIONAL THREE YEAR TERM 3 THE PRESUMPTION IS THAT A GC MEMBER'S TERM WILL END AFTER 9 YEARS OR, IN THE CASES OF OFFICERS, AFTER 12 YEARS BUT IN CASES WHERE A GC MEMBER'S DEDICATION AND COMMITMENT TO THE FUTURE IS DEEMED EXCEPTIONAL, THAT MEMBER MAY BE ASKED TO STAY FOR UP TO ANOTHER FULL TERM CYCLE OF 9-12 YEARS OR SOME PORTION OF THAT, IF APPROVED BY THE GC 4 FORMER GC MEMBERS MAY BE INVITED TO REJOIN THE GC AFTER A MINIMUM HIATUS OF ONE YEAR SUCH INDIVIDUALS WOULD THEN BEGIN A NEW PERIOD OF SERVICE FOR UP TO 9-12 YEARS 5 SELECT GC MEMBERS MAY BE ASKED TO JOIN THE HONORARY COUNCIL, WHICH WAS RECENTLY CREATED, WHEN THEIR RESPECTIVE TERM ENDS AT THE DISCRETION OF THE CHAIR AND APPROVED BY EXECUTIVE COMMITTEE 6 MEMBERS OF THE GC WILL BE ASKED TO ASSESS THE PERFORMANCE OF THE PRESIDENT AND THE GC AS A WHOLE ANNUALLY 7 AT THE END OF EACH THREE YEAR TERM, THE GC CHAIR OR GOVERNANCE COMMITTEE CHAIR WILL MEET INDIVIDUALLY WITH EACH GC MEMBER TO HAVE AN HONEST EXCHANGE ABOUT WHAT IS WORKING WELL AND WHAT CAN BE IMPROVED 8 ANY GC MEMBER WHO MISSES THREE CONSECUTIVE MEETINGS WILL MEET WITH THE GC CHAIR OR GOVERNANCE COMMITTEE CHAIR NO REVIEW THE STATUS OF THEIR MEMBERSHIP ON THE GC 9 GC MEMBERS WILL BE EXPECTED OR FORMALLY ASKED TO LEAVE THE GC WHEN ANY OF THESE CIRCUMSTANCES ARE MET A) THEY RUN FOR A STATEWIDE OR FEDERAL POLITICAL OFFICE, OR B) THEY ARE CONVICTED OF A MAJOR CRIME 10 IT IS ANTICIPATED THAT EVERY GC MEMBER WILL MAKE SOME FINANCIAL CONTRIBUTION TO TWO ON AN ANNUAL BASIS AS PART OF THEIR ROLE WITH THE ORGANIZATION AT A LEVEL THAT IS COMMENSURATE WITH THEIR ABILITIES TO CONTRIBUTE FINANCIAL PARTICIPATION BY EVERY MEMBER OF THE GC IS ESSENTIAL TO SHOW COMMITMENT TO CURRENT AND PROSPECTIVE DONORS AS WELL TO HE

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

Return Reference	Explanation
PART VI, SECTION B, LINE 12C	TWS HAS A WRITTEN CONFLICT OF INTEREST POLICY IT IS REVIEWED ANNUALLY ALL STAFF, INCLUDING OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES, MUST CERTIFY ANUALLY THAT THEY HAVE READ AND FAMILIARIZED THEMSELVES WITH THE POLICY, AND DISCLOSE ANY POTENTIAL CONFLICTS STAFF DISCLOSE WHETHER THEY SERVE AS BOARD MEMBERS OR OFFICERS OF ANY OTHER ORGANIZATION WHOSE MISSION AND ACTIVITIES MAY OVERLAP WITH THOSE OF TWS FURTHER, ALL OFFICERS, DIRECTORS, TRUSTEES AND KEY EMPLOYEES DISCLOSE ANY RELATED ORGANIZATION RELATIONSHIPS COMPLETED FORMS ARE REVIEWED AND ANY POTENTIAL CONFLICTS ARE DISCUSSED ADN ADDRESSED AS APPROPRIATE TO ENFORCE COMPLIANCE WITH THE POLICY ALL STAFF INCLUDING OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES, NOTIFY THE ORGANIZATION IF CIRCUMSTANCES CHANGE THROUGH THE COURSE OF THE FISCAL YEAR AND THE CHANGED CIRCUMSTANCES ARE DISCUSSED AND ADDRESSED AS APPROPRIATE TO REMAIN IN COMPLIANCE WITH THE POLICY

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

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST

Return Reference	Explanation
FORM 990, PART IX, LINE 11G	TEMPS PROGRAM SERVICE EXPENSES 8,776 MANAGEMENT AND GENERAL EXPENSES 736 FUNDRAISING EXPENSES 1,558 TOTAL EXPENSES 11,070 VOLUNTEER EXPENSES PROGRAM SERVICE EXPENSES 82,644 MANAGEMENT AND GENERAL EXPENSES 6,926 FUNDRAISING EXPENSES 14,673 TOTAL EXPENSES 104,243 WRITING/ EDITING PROGRAM SERVICE EXPENSES 1,526 MANAGEMENT AND GENERAL EXPENSES 128 FUNDRAISING EXPENSES 271 TOTAL EXPENSES 1,925 DIRECT MAIL PROGRAM SERVICE EXPENSES 413,839 MANAGEMENT AND GENERAL EXPENSES 34,683 FUNDRAISING EXPENSES 73,474 TOTAL EXPENSES 521,996 PRODUCTION/ DESIGN PROGRAM SERVICE EXPENSES 156,414 MANAGEMENT AND GENERAL EXPENSES 13,109 FUNDRAISING EXPENSES 27,770 TOTAL EXPENSES 197,293 PHOTOGRAPHY PROGRAM SERVICE EXPENSES 159 MANAGEMENT AND GENERAL EXPENSES 13 FUNDRAISING EXPENSES 28 TOTAL EXPENSES 200 COMPUTER SERVICE PROGRAM SERVICE EXPENSES 673,395 MANAGEMENT AND GENERAL EXPENSES 56,436 FUNDRAISING EXPENSES 119,557 TOTAL EXPENSES 849,388 CONSULTANTS PROGRAM SERVICE EXPENSES 2,169,772 MANAGEMENT AND GENERAL EXPENSES 181,844 FUNDRAISING EXPENSES 385,228 TOTAL EXPENSES 2,736,844

Return Reference	Explanation
FORM 990, PART XI, LINE 9	PLEDGE ALLOWANCE -76,329 CHANGE IN BENEFICIAL INTEREST 1,682,934