

Form **8453-EO**

**Exempt Organization Declaration and Signature for Electronic Filing**

OMB No. 1545-1879

For calendar year 2011, or tax year beginning 07/01/11, and ending 06/30/12

**2011**

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

▶ See instructions on back.

Department of the Treasury  
Internal Revenue Service

Name of exempt organization

Employer identification number

**Wildlife Conservation Society**

**13-1740011**

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

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

1a Form 990 check here ▶ <input checked="" type="checkbox"/>	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b <u>230,042,654</u>
2a Form 990-EZ check here ▶ <input type="checkbox"/>	b Total revenue, if any (Form 990-EZ, line 9)	2b _____
3a Form 1120-POL check here ▶ <input type="checkbox"/>	b Total tax (Form 1120-POL, line 22)	3b _____
4a Form 990-PF check here ▶ <input type="checkbox"/>	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b _____
5a Form 8868 check here ▶ <input type="checkbox"/>	b Balance due (Form 8868, Part I, line 3c or Part II, line 8c)	5b _____

**Part II Declaration of Officer**

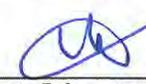
- 6  I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this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

Under penalties of perjury, I declare that I am an officer of the above named organization and that I have examined a copy of the organization's 2011 electronic return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund.

Sign Here ▶  5/10/13 ▶ Vice President & Comproller  
Signature of officer Date Title

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

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

ERO's signature  Date 05/10/13 Check if also paid preparer  Check if self-employed  ERO's SSN or PTIN P00010460  
Use Only Firm's name (or yours if self-employed), address, and ZIP code ▶ Julia Grant  
2300 Southern Blvd Bronx NY 10460 EIN \_\_\_\_\_ Phone no. 718-220-5120

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

Paid Preparer Use Only Print/Type preparer's name Meg Hodgkins Preparer's signature  Date 05/10/13 Check  if self-employed PTIN P01420019  
Firm's name ▶ KPMG/Meg Hogkins Firm's EIN ▶ 13-5565207  
Firm's address ▶ 345 Park Avenue New York NY 10154 Phone no. 212-758-9700

For Privacy Act and Paperwork Reduction Act Notice, see back of form.

Form **8453-EO** (2011)

Form **990**  
 Department of the Treasury  
 Internal Revenue Service

**Return of Organization Exempt From Income Tax**  
 Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)  
 The organization may have to use a copy of this return to satisfy state reporting requirements.

OMB No. 1545-0047  
**2011**  
 Open to Public Inspection

**A For the 2011 calendar year, or tax year beginning 07/01/11 and ending 06/30/12**

<b>B</b> Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	<b>C</b> Name of organization Wildlife Conservation Society		<b>D</b> Employer identification number 13-1740011
	Doing Business As		<b>E</b> Telephone number 718-741-8211
	Number and street (or P.O. box if mail is not delivered to street address) 2300 Southern Blvd	Room/suite	
	City or town, state or country, and ZIP + 4 Bronx NY 10460		<b>G</b> Gross receipts \$ 350,137,962
<b>F</b> Name and address of principal officer: Dr. Cristian Samper President & CEO 2300 Southern Blvd Bronx NY 10460			<b>H(a)</b> Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <b>H(b)</b> Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No If "No," attach a list. (see instructions)
<b>I</b> Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) ( ) (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527			
<b>J</b> Website: <a href="http://www.wcs.org">www.wcs.org</a>			
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other			<b>L</b> Year of formation: 1895
			<b>M</b> State of legal domicile: NY

**Part I Summary**

<b>Activities &amp; Governance</b>	1 Briefly describe the organization's mission or most significant activities: The Wildlife Conservation Society (WCS) saves wildlife and wild lands worldwide through science, global conservation, education and the management of the world's largest system of urban (cont'd on Schedule O)			
	2 Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.			
	3	Number of voting members of the governing body (Part VI, line 1a)	41	
	4	Number of independent voting members of the governing body (Part VI, line 1b)	40	
	5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	2889	
	6	Total number of volunteers (estimate if necessary)	774	
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	56,067	
7b	Net unrelated business taxable income from Form 990-T, line 34	-11,540		
<b>Revenue</b>			Prior Year	Current Year
	8	Contributions and grants (Part VIII, line 1h)	127,644,476	159,029,948
	9	Program service revenue (Part VIII, line 2g)	50,424,721	51,157,154
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	20,023,428	9,724,515
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	8,062,095	10,131,037
12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	206,154,720	230,042,654	
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,854,828	10,399,484
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	88,809,950	91,628,076
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	390,297	393,931
		b Total fundraising expenses (Part IX, column (D), line 25) ▶ 6,809,949		
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	106,042,314	110,830,881
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	206,097,389	213,252,372
19	Revenue less expenses. Subtract line 18 from line 12	57,331	16,790,282	
<b>Net Assets or Fund Balances</b>			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	792,809,108	793,532,399
	21	Total liabilities (Part X, line 26)	125,876,687	136,661,232
22	Net assets or fund balances. Subtract line 21 from line 20	666,932,421	656,871,167	

**Part II Signature Block**

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

<b>Sign Here</b>	Signature of officer 	Date 5/10/2013	
	Type or print name and title Robert Calamo Vice President & Comptroller		
<b>Paid Preparer Use Only</b>	Print/Type preparer's name Meg Hodgkins	Preparer's signature 	Date 05/10/13
	Firm's name KPMG/Meg Hogkins	Check <input type="checkbox"/> if self-employed <input type="checkbox"/> PTIN P01420019	Firm's EIN ▶ 13-5565207
	Firm's address 345 Park Avenue New York, NY 10154-0102	Phone no. 212-758-9700	

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

For Paperwork Reduction Act Notice, see the separate instructions.

DAA

Form 990 (2011)

**Part III Statement of Program Service Accomplishments**

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

**1** Briefly describe the organization's mission:

**The Wildlife Conservation Society (WCS) saves wildlife and wild lands worldwide through science, global conservation, education and the management of the world's largest system of urban (cont'd on Schedule O)**

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

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

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

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

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code: ) (Expenses \$ **82,623,244** including grants of \$ **9,430,670** ) (Revenue \$ **11,454,292** )

**GLOBAL CONSERVATION AND HEALTH PROGRAMS** are funded by restricted gifts, grants and contracts from private individuals, foundations, federal agencies and other sources. In FY 2012 WCS's conservation footprint spanned 65 landscapes across North America, Latin America and the Caribbean, Africa and Asia and 17 seascapes around the world. Here is a small sample of achievements this year:

1. WCS announced a new strategy to take direct responsibility for the continued survival of some of the world's most endangered tortoises and freshwater turtles. WCS will breed several species in captivity with the goal of returning them to the wild. WCS will strive to alleviate threats to highly endangered turtles by working with governments in nations with high

**4b** (Code: ) (Expenses \$ **72,781,958** including grants of \$ **7,000** ) (Revenue \$ **25,374,621** )

**BRONX ZOO and NEW YORK AQUARIUM:** Total attendance at all five WCS facilities was 4,472,593. At the Bronx Zoo attendance totalled 2,005,643 and at the New York Aquarium attendance totaled 755,426.

Here is a small sample of achievements at the Bronx Zoo:

1. The reintroduction of some 2,000 spray toads to Tanzania's Kihansi Gorge marked a major milestone for this tiny species. The repatriation effort was the result of a 12-year partnership between WCS's Bronx Zoo, the Toledo Zoo, the government of Tanzania, and the World Bank.

2. The Bronx Zoo is the only place you will find the endangered maleo bird outside of its native home on the Indonesian island of Sulawesi. The Bronx Zoo hatched three maleo chicks in 2012 (our most productive year ever!) and

**4c** (Code: ) (Expenses \$ **21,079,234** including grants of \$ ) (Revenue \$ **14,328,241** )

**CITY ZOOS: Central Park/Prospect Park and Queens Zoos; Central Park Zoo (CPZ) attendance 1,121,972; Prospect Park Zoo (PPZ) attendance 305,033; Queens Zoo attendance 284,519. A sample of achievements in 2012:**

1. CPZ had one of its most productive breeding years with the debut of eight penguin chicks, in the Fall 2011; a rare crested couca chick hatched in the Fall. The hatching was a significant achievement at CPZ as it is only the fourth zoo in the U.S. to have successfully reared a couca chick; an endangered red panda was welcomed to the CPZ. Red pandas are endangered due to habitat loss caused by deforestation for timber, fuel and agricultural use. It is estimated that fewer than 2,500 remain in the wild.

2. Infrastructure renewal programs at all three City Zoos continue, most

**4d** Other program services. (Describe in Schedule O.)(Expenses \$ **1,027,214** including grants of \$ **961,814** ) (Revenue \$ )**4e Total program service expenses** ▶ **177,511,650**

**Part IV Checklist of Required Schedules**

	Yes	No
<b>1</b> Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	<b>X</b>	
<b>2</b> Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	<b>X</b>	
<b>3</b> 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		<b>X</b>
<b>4 Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	<b>X</b>	
<b>5</b> Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		<b>X</b>
<b>6</b> 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		<b>X</b>
<b>7</b> 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		<b>X</b>
<b>8</b> Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		<b>X</b>
<b>9</b> Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV		<b>X</b>
<b>10</b> Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	<b>X</b>	
<b>11</b> 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.		
<b>a</b> Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	<b>X</b>	
<b>b</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	<b>X</b>	
<b>c</b> 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		<b>X</b>
<b>d</b> 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		<b>X</b>
<b>e</b> Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	<b>X</b>	
<b>f</b> 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	<b>X</b>	
<b>12a</b> Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII		<b>X</b>
<b>b</b> Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	<b>X</b>	
<b>13</b> Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		<b>X</b>
<b>14a</b> Did the organization maintain an office, employees, or agents outside of the United States?	<b>X</b>	
<b>b</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	<b>X</b>	
<b>15</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	<b>X</b>	
<b>16</b> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	<b>X</b>	
<b>17</b> 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)	<b>X</b>	
<b>18</b> 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	<b>X</b>	
<b>19</b> 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		<b>X</b>
<b>20a</b> Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		<b>X</b>
<b>b</b> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

**Part IV Checklist of Required Schedules (continued)**

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

Form **990** (2011)

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

		Yes	No
<b>1a</b>	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
<b>1b</b>	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable		
<b>1a</b>	<b>196</b>		
<b>1b</b>	<b>0</b>		
<b>c</b>	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	<b>X</b>	
<b>2a</b>	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return		
<b>2a</b>	<b>2889</b>		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note.</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>X</b>	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>X</b>	
<b>b</b>	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	<b>X</b>	
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	<b>X</b>	
<b>b</b>	If "Yes," enter the name of the foreign country: <b>See Schedule O</b> See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		<b>X</b>
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		<b>X</b>
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		
<b>6a</b>	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?		<b>X</b>
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>		
<b>a</b>	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?	<b>X</b>	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>X</b>	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		<b>X</b>
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year		
<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		<b>X</b>
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		<b>X</b>
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		<b>X</b>
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		<b>X</b>
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>		
<b>a</b>	Did the organization make any taxable distributions under section 4966?		
<b>9a</b>			
<b>b</b>	Did the organization make a distribution to a donor, donor advisor, or related person?		
<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:		
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>	
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>	
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:		
<b>a</b>	Gross income from members or shareholders	<b>11a</b>	
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>	
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>	
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>	
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>		
<b>a</b>	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.	<b>13a</b>	
<b>b</b>	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	<b>13b</b>	
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>	
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>	<b>X</b>
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	<b>14b</b>	

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

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
	<b>1a</b> <b>41</b>		
<b>b</b>	Enter the number of voting members included in line 1a, above, who are independent		
	<b>1b</b> <b>40</b>		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		<b>X</b>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		<b>X</b>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		<b>X</b>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets?		<b>X</b>
<b>6</b>	Did the organization have members or stockholders?	<b>X</b>	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	<b>X</b>	
<b>b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	<b>X</b>	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>a</b>	The governing body?	<b>X</b>	
<b>b</b>	Each committee with authority to act on behalf of the governing body?	<b>X</b>	
<b>9</b>	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O		<b>X</b>

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed **AK, AL, AR, AZ, CA, CO, CT, DC, DE, FL, GA, HI, ID**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  
 Own website  Another's website  Upon request
- 19** Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, physical address, and telephone number of the person who possesses the books and records of the organization: **Robert Calamo Wildlife Conservatio 2300 Southern Blvd**

**Bronx NY 10460 718-741-8211**

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
  - List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
  - List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
  - List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.
- List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) <b>Ward Woods</b> Chairman	5.00	X					0	0	0	
(2) <b>Edith McBean</b> Vice Chair	5.00	X					0	0	0	
(3) <b>Mrs Gordon B Pattee</b> Vice Chair	5.00	X					0	0	0	
(4) <b>Brian J Heidtke</b> Treasurer	5.00	X					0	0	0	
(5) <b>Andrew H Tisch</b> Secretary	5.00	X					0	0	0	
(6) <b>Hon. Michael R. Bloomberg</b> Ex Officio Trustee	0.50	X					0	0	0	
(7) <b>John C Liu</b> Ex Officio Trustee	0.50	X					0	0	0	
(8) <b>Christine Quinn</b> Ex Officio Trustee	0.50	X					0	0	0	
(9) <b>Adrian Benape</b> Ex Officio Trustee	0.50	X					0	0	0	
(10) <b>Dr Kate D Levin</b> Ex Officio Trustee	0.50	X					0	0	0	
(11) <b>Ruben Diaz Jr</b> Ex Officio Trustee	0.50	X					0	0	0	
(12) <b>Marty Markowitz</b> Ex Officio Trustee	0.50	X					0	0	0	
(13) <b>Dr Steven E Sanderson</b> Ex Officio Trustee	1.00	X		X			0	0	0	
(14) <b>Frederick W Beinecke</b> Trustee	3.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Eleanor Briggs Trustee	3.00	X						0	0	0
(16) Gilbert Butler Trustee	3.00	X						0	0	0
(17) C Diane Christensen Trustee	3.00	X						0	0	0
(18) Jonathan L Cohen Trustee	3.00	X						0	0	0
(19) Katherine L Dolan Trustee	3.00	X						0	0	0
(20) Alejandro Santo Domingo Trustee	3.00	X						0	0	0
(21) Christopher J. Elliman Trustee	3.00	X			eff 6/18/12			0	0	0
(22) Thomas Dan Friedkin Trustee	3.00	X						0	0	0
(23) Bradley L Goldberg Trustee	3.00	X						0	0	0
(24) Paul A Gould Trustee	3.00	X						0	0	0
(25) Jonathan D Green Trustee	3.00	X						0	0	0

<b>1b</b> Sub-total										
<b>c</b> Total from continuation sheets to Part VII, Section A								5,372,433		1,169,217
<b>d</b> Total (add lines 1b and 1c)								5,372,433		1,169,217

**2** Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **89**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
PG Architects, Landscape, Exhibits 1500 4th Avenue Seattle WA 98101	Architectural	4,116,118
Freeze Frame LLC 1601 Amelia Street Orlando FL 32803	Photo services	946,021
Palm Coast Data, LLC 11 Commerce Blvd Palm Coast FL 32167-7961	Membership Full	583,418
Emerald Tree Care 26 Fox Meadow Road Scarsdale NY 10583	Shrub care & Ma	502,464
Peaker Services 880 Kensington Court Brighton MI 48116	Cogen Maintenanc	498,487

**2** Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **38**

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) <b>Antonia M Grumbach</b> Trustee	3.00	X						0	0	0
(16) <b>Judith H Hamilton</b> Trustee	3.00	X						0	0	0
(17) <b>John N Irwin III</b> Trustee	5.00	X						0	0	0
(18) <b>Rosina M. Bierbaum</b> Trustee	3.00	X						0	0	0
(19) <b>Richard L Kauffman dep</b> Trustee	3.00	X				9/1/2011		0	0	0
(20) <b>Anita L Keefe</b> Trustee	3.00	X						0	0	0
(21) <b>Ambrose K. Monell</b> Trustee	3.00	X						0	0	0
(22) <b>Ronald J. Ulrich</b> eff 10/25/11 Trustee	3.00	X						0	0	0
(23) <b>Katharina Otto-Bernstein</b> dep 10/18/11 Trustee	3.00	X						0	0	0
(24) <b>Merritt Paulson III</b> dep 10/18/11 Trustee	3.00	X						0	0	0
(25) <b>Ogden Phipps II</b> Trustee	3.00	X						0	0	0
<b>1b Sub-total</b> .....										
<b>c Total from continuation sheets to Part VII, Section A</b> .....										
<b>d Total (add lines 1b and 1c)</b> .....										

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) David T Schiff Trustee	3.00	X					0	0	0	
(16) Mrs. Warren L. Schwerin Trustee	3.00	X					0	0	0	
(17) Walter Sedgwick Trustee	3.00	X					0	0	0	
(18) Caroline N Sidnam Trustee	3.00	X					0	0	0	
(19) Roselinde Torres Trustee	3.00	X					0	0	0	
(20) Barbara Hrbek Zucker Trustee	3.00	X					0	0	0	
(21) Audrey Choi Trustee	3.00	X					0	0	0	
(22) Gordon E Dyal Trustee	3.00	X					0	0	0	
(23) Hamilton James Trustee	3.00	X					0	0	0	
(24) Steven E. Sanderson President CEO	40.00			X			1,015,701	0	147,965	
(25) WB McKeown SVP General Counsel	40.00			X			425,100	0	55,648	
<b>1b Sub-total</b>							<b>1,440,801</b>		<b>203,613</b>	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) John G Robinson EVP Conservation & S	40.00			X				361,409	0	122,288
(16) John F Calvelli EVP Public Affairs	40.00			X				355,950	0	108,674
(17) Patricia Calabrese EVP & CFO	40.00			X				355,873	0	80,512
(18) Robert A Cook EVP	40.00			X				345,428	0	81,625
(19) Bertina Ceccarelli EVP Global Resources	40.00			X				319,272	0	63,693
(20) Robert A Moskovitz SVP Business	40.00			X				268,340	0	47,312
(21) Robert Calamo VP & Comptroller	40.00			X				234,657	0	69,486
(22) James J Breheny EVP, Direct Zoos	40.00			X				211,198	0	55,945
(23) Joshua R Ginsberg SVP Global	40.00			X				192,848	0	54,440
(24) Laura Stolzenhaler VP Budget & Fin Plan	40.00			X				177,631	0	16,655
(25) Christopher J McKenzie SVP General Counsel	40.00			X				162,547	0	29,535
<b>1b Sub-total</b>								<b>2,985,153</b>		<b>730,165</b>
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

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

(A) Name and title	(B) Average hours per week (describe hours for related organizations in Schedule O)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(15) Paula Loring-Simon VP & CTO	40.00					X		250,434	0	82,534
(16) Herman Smith VP Human Resources	40.00					X		226,041	0	67,357
(17) Sean Cover Dir of Treasury	40.00					X		160,340	0	37,435
(18) Susan Chin VP Planning & Design	40.00					X		158,034	0	25,041
(19) Jon Forest Dohlin VP & Dir NYA	40.00					X		151,630	0	23,072
(20)										
(21)										
(22)										
(23)										
(24)										
(25)										
<b>1b Sub-total</b>								<b>946,479</b>		<b>235,439</b>
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>										

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation

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

**Part VIII Statement of Revenue**

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b> Federated campaigns	<b>1a</b>					
	<b>b</b> Membership dues	<b>1b</b>	13,886,572				
	<b>c</b> Fundraising events	<b>1c</b>	839,954				
	<b>d</b> Related organizations	<b>1d</b>					
	<b>e</b> Government grants (contributions)	<b>1e</b>	65,722,952				
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b>	78,580,470				
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		2,860,703				
	<b>h Total.</b> Add lines 1a-1f		159,029,948				
<b>Program Service Revenue</b>		<b>Busn. Code</b>					
	<b>2a</b> gate, exhibit admissions	713990	34,848,965	34,848,965			
	<b>b</b> fees and contracts from gover	541700	13,753,142	13,753,142			
	<b>c</b> education revenues	611710	2,524,966	2,524,966			
	<b>d</b> collection deaccessions	900099	30,081	30,081			
	<b>e</b>						
	<b>f</b> All other program service revenue						
<b>g Total.</b> Add lines 2a-2f		51,157,154					
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts)		8,948,910			8,948,910	
	<b>4</b> Income from investment of tax-exempt bond proceed						
	<b>5</b> Royalties		14,863			14,863	
	<b>6a</b> Gross rents	(i) Real					
		(ii) Personal					
	<b>b</b> Less: rental exps.						
	<b>c</b> Rental inc. or (loss)						
	<b>d</b> Net rental income or (loss)						
	<b>7a</b> Gross amount from sales of assets other than inventory	(i) Securities		101,639,435			
		(ii) Other					
	<b>b</b> Less: cost or other basis & sales exps.			100,863,830			
	<b>c</b> Gain or (loss)			775,605			
	<b>d</b> Net gain or (loss)			775,605		2,232,495	-1,456,890
	<b>8a</b> Gross income from fundraising events (not including \$ 839,954 of contributions reported on line 1c). See Part IV, line 18	<b>a</b>		1,622,528			
		<b>b</b> Less: direct expenses		952,800			
<b>c</b> Net income or (loss) from fundraising events			669,728			669,728	
<b>9a</b> Gross income from gaming activities. See Part IV, line 19	<b>a</b>						
	<b>b</b> Less: direct expenses						
	<b>c</b> Net income or (loss) from gaming activities						
<b>10a</b> Gross sales of inventory, less returns and allowances	<b>a</b>		26,532,231				
	<b>b</b> Less: cost of goods sold		18,278,678				
	<b>c</b> Net income or (loss) from sales of inventory		8,253,553		297,955	7,955,598	
<b>11a</b> miscellaneous revenues	<b>Busn. Code</b>						
	611710		2,018,056			2,018,056	
	<b>b</b> sponsorships	900099	1,649,220			1,649,220	
	<b>c</b> Brookside CPG	900099	2,396		2,396		
	<b>d</b> All other revenue	900099	-2,476,779		-2,476,779		
<b>e Total.</b> Add lines 11a-11d			1,192,893				
<b>12 Total revenue.</b> See instructions.			230,042,654	51,157,154	56,067	19,799,485	

**Part IX Statement of Functional Expenses**

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	4,467,714	4,467,714		
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	153,950	153,950		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16	5,777,820	5,777,820		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	5,338,120	1,598,467	3,356,318	383,335
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	73,064,194	61,657,214	7,642,508	3,764,472
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	6,166,904	4,591,769	1,200,823	374,312
9 Other employee benefits	2,629,609	1,583,429	652,242	393,938
10 Payroll taxes	4,429,249	3,522,324	636,537	270,388
11 Fees for services (non-employees):				
a Management				
b Legal	611,820	23,650	588,170	
c Accounting	318,866	33,949	280,917	4,000
d Lobbying	20,000		20,000	
e Professional fundraising services. See Part IV, line 7	393,931			393,931
f Investment management fees	2,541,786		2,541,786	
g Other	34,804,827	32,722,639	1,744,811	337,377
12 Advertising and promotion	3,372,451	1,686,975	1,533,767	151,709
13 Office expenses	14,106,502	13,246,350	380,678	479,474
14 Information technology	2,147,909	1,926,970	220,939	
15 Royalties				
16 Occupancy	9,396,587	9,284,514	112,073	
17 Travel	10,487,960	10,155,452	187,899	144,609
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,643,139	1,461,969	152,384	28,786
20 Interest	3,078,440		3,078,440	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	17,557,908	15,170,668	2,352,269	34,971
23 Insurance	3,061,982	2,960,371	75,223	26,388
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a food and forage	1,953,670	1,953,670		
b repairs and maintenance	1,900,494	1,874,190	23,339	2,965
c direct mail and printing	1,697,451		1,697,451	
d other expenses	1,635,269	1,163,776	452,199	19,294
e All other expenses	493,820	493,820		
25 Total functional expenses. Add lines 1 through 24e	213,252,372	177,511,650	28,930,773	6,809,949
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

**Part X Balance Sheet**

		(A)		(B)	
		Beginning of year		End of year	
<b>Assets</b>	1	Cash—non-interest bearing	15,240,889	1	20,523,051
	2	Savings and temporary cash investments	50,629,552	2	44,286,509
	3	Pledges and grants receivable, net	80,689,392	3	106,147,548
	4	Accounts receivable, net	3,870,633	4	2,607,182
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions)		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	2,089,878	8	1,850,542
	9	Prepaid expenses and deferred charges	5,686,722	9	4,045,110
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 458,285,871		
	b	Less: accumulated depreciation	10b 227,719,302	10c	230,566,569
	11	Investments—publicly traded securities	36,294,399	11	29,135,009
	12	Investments—other securities. See Part IV, line 11	372,010,836	12	352,331,223
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	1,694,405	15	2,039,656
16	<b>Total assets.</b> Add lines 1 through 15 (must equal line 34)	792,809,108	16	793,532,399	
<b>Liabilities</b>	17	Accounts payable and accrued expenses	27,627,440	17	31,193,886
	18	Grants payable		18	
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	66,554,348	20	66,520,032
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties		23	
	24	Unsecured notes and loans payable to unrelated third parties		24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	31,694,899	25	38,947,314
	26	<b>Total liabilities.</b> Add lines 17 through 25	125,876,687	26	136,661,232
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.</b>				
	27	Unrestricted net assets	308,835,578	27	280,640,646
	28	Temporarily restricted net assets	150,345,934	28	148,163,693
	29	Permanently restricted net assets	207,750,909	29	228,066,828
	<b>Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.</b>				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	<b>Total net assets or fund balances</b>	666,932,421	33	656,871,167	
34	<b>Total liabilities and net assets/fund balances</b>	792,809,108	34	793,532,399	

Form 990 (2011)

**Part XI Reconciliation of Net Assets**

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

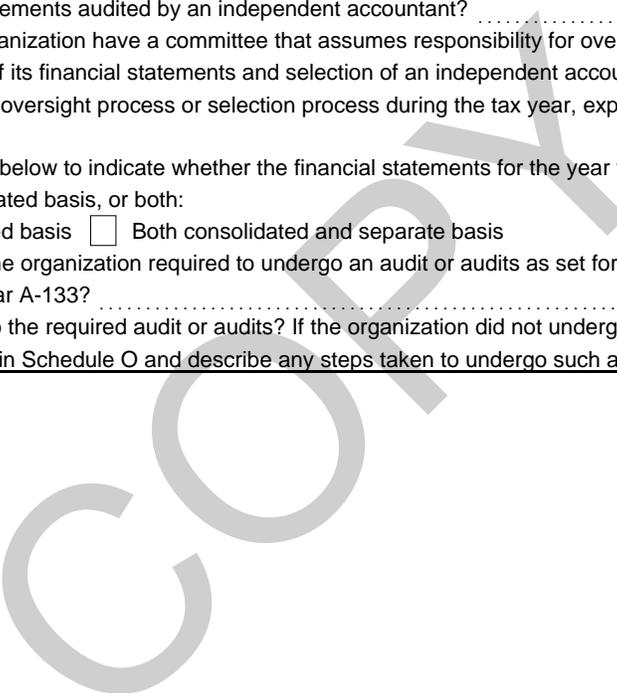
1	Total revenue (must equal Part VIII, column (A), line 12)	1	230,042,654
2	Total expenses (must equal Part IX, column (A), line 25)	2	213,252,372
3	Revenue less expenses. Subtract line 2 from line 1	3	16,790,282
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	666,932,421
5	Other changes in net assets or fund balances (explain in Schedule O)	5	-26,851,536
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	656,871,167

**Part XII Financial Statements and Reporting**

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

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

Form **990** (2011)



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

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2011**

Open to Public Inspection

Department of the Treasury  
Internal Revenue Service

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

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

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

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

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

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: .....
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9  An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 10  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
  - a  Type I      b  Type II      c  Type III—Functionally integrated      d  Type III—Other
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? .....
  - (ii) A family member of a person described in (i) above? .....
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? .....
- h Provide the following information about the supported organization(s).

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

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

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

Schedule A (Form 990 or 990-EZ) 2011

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	122,313,298	125,627,662	131,117,659	127,338,260	159,029,958	665,426,837
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge						
<b>4 Total.</b> Add lines 1 through 3	122,313,298	125,627,662	131,117,659	127,338,260	159,029,958	665,426,837
<b>5</b> The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						22,369,815
<b>6 Public support.</b> Subtract line 5 from line 4						643,057,022

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ▶	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>7</b> Amounts from line 4	122,313,298	125,627,662	131,117,659	127,338,260	159,029,958	665,426,837
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	22,743,627	-110,311,644	16,723,813	21,106,670	8,963,773	-40,773,761
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	18,822,355	24,254,152	29,151,370	24,927,702	30,113,246	127,268,825
<b>11 Total support.</b> Add lines 7 through 10						751,921,901
<b>12</b> Gross receipts from related activities, etc. (see instructions)					12	51,157,154

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

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2011 (line 6, column (f) divided by line 11, column (f))	<b>14</b>	85.52%
<b>15</b> Public support percentage from 2010 Schedule A, Part II, line 14	<b>15</b>	85.38%

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

**b 33 1/3% support test—2010.** If the organization did not check 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—2011.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

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

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

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

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
<b>9</b> Amounts from line 6						
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
<b>c</b> Add lines 10a and 10b						
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.)						

**14 First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2011 (line 8, column (f) divided by line 13, column (f))	<b>15</b>	%
<b>16</b> Public support percentage from 2010 Schedule A, Part III, line 15	<b>16</b>	%

**Section D. Computation of Investment Income Percentage**

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

**19a 33 1/3% support tests—2011.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**b 33 1/3% support tests—2010.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

**20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**Part IV Supplemental Information.** Complete this part to provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

**Part II, Line 10 - Other Income Detail**

guest services revenues, events, mis \$ 127,268,825

COPY

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
 ▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ.  
 ▶ See separate instructions.

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

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

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

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

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

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

Name of organization <b>Wildlife Conservation Society</b>	Employer identification number <b>13-1740011</b>
--	---

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

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

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

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

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

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

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

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

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

<b>Limits on Lobbying Expenditures</b> (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b> Total lobbying expenditures to influence public opinion (grass roots lobbying)		<b>117,599</b>													
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying)		<b>352,796</b>													
<b>c</b> Total lobbying expenditures (add lines 1a and 1b)		<b>470,395</b>													
<b>d</b> Other exempt purpose expenditures		<b>210,263,193</b>													
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d)		<b>210,733,588</b>													
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		<b>1,000,000</b>													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b> Grassroots nontaxable amount (enter 25% of line 1f)		<b>250,000</b>													
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0-		<b>0</b>													
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0-		<b>0</b>													
<b>j</b> If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?			<input type="checkbox"/> Yes <input type="checkbox"/> No												

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

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) Total
<b>2a</b> Lobbying nontaxable amount	<b>1,000,000</b>	<b>1,000,000</b>	<b>1,000,000</b>	<b>1,000,000</b>	<b>4,000,000</b>
<b>b</b> Lobbying ceiling amount (150% of line 2a, column(e))					<b>6,000,000</b>
<b>c</b> Total lobbying expenditures	<b>524,734</b>	<b>897,539</b>	<b>680,978</b>	<b>470,395</b>	<b>2,573,646</b>
<b>d</b> Grassroots nontaxable amount	<b>250,000</b>	<b>250,000</b>	<b>250,000</b>	<b>250,000</b>	<b>1,000,000</b>
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					<b>1,500,000</b>
<b>f</b> Grassroots lobbying expenditures	<b>131,184</b>	<b>224,385</b>	<b>170,244</b>	<b>117,599</b>	<b>643,412</b>

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

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

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

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

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

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

**Part IV Supplemental Information**

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

**Schedule C, Part I-A, Line 1**

Grassroots Lobbying WCS conducts several campaigns on federal legislation regarding Wildlife Conservation Society, and has an active presence on the WCS website that requests individuals to send emails to federal elected officials. In addition, the website was utilized for grassroots outreach on the city and state level in regarding funding for zoos and aquariums.

**Part IV** Supplemental Information (continued)

Direct Lobbying on the city, state and federal level is conducted in regards to funding for zoos and global conservation.

COPY

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

OMB No. 1545-0047

2011

Open to Public Inspection

Name of the organization

Employer identification number

Wildlife Conservation Society

13-1740011

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

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate contributions to (during year), 3 Aggregate grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

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

Table with 2 columns: Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution... 2a Total number of conservation easements, 2b Total acreage restricted by conservation easements, 2c Number of conservation easements on a certified historic structure included in (a), 2d Number of conservation easements included in (c) acquired after 8/17/06... 3 Number of conservation easements modified... 4 Number of states where property subject to conservation easement is located... 5 Does the organization have a written policy regarding the periodic monitoring... Yes No, 6 Staff and volunteer hours devoted to monitoring... 7 Amount of expenses incurred in monitoring... \$, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B) (i) and section 170(h)(4)(B)(ii)? Yes No, 9 In Part XIV, describe how the organization reports conservation easements...

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

Table with 2 columns: \$, \$, \$, \$. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition... 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition... (i) Revenues included in Form 990, Part VIII, line 1, (ii) Assets included in Form 990, Part X, 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: a Revenues included in Form 990, Part VIII, line 1, b Assets included in Form 990, Part X.

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

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

- a**  Public exhibition
- b**  Scholarly research
- c**  Preservation for future generations
- d**  Loan or exchange programs
- e**  Other .....

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

**5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

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

**1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No

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

	Amount
<b>c</b> Beginning balance .....	<b>1c</b>
<b>d</b> Additions during the year .....	<b>1d</b>
<b>e</b> Distributions during the year .....	<b>1e</b>
<b>f</b> Ending balance .....	<b>1f</b>

**2a** Did the organization include an amount on Form 990, Part X, line 21?  Yes  No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance .....	402,183,408	371,026,892	341,646,291		
<b>b</b> Contributions .....	615,919	2,328,249	4,221,831		
<b>c</b> Net investment earnings, gains, and losses .....	-7,246,243	47,811,500	44,076,201		
<b>d</b> Grants or scholarships .....					
<b>e</b> Other expenditures for facilities and programs .....	18,649,790	18,983,233	18,917,431		
<b>f</b> Administrative expenses .....					
<b>g</b> End of year balance .....	376,903,294	402,183,408	371,026,892		

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

- a** Board designated or quasi-endowment ▶ **34.00 %**
- b** Permanent endowment ▶ **55.00 %**
- c** Temporarily restricted endowment ▶ **11.00 %**

The percentages in lines 2a, 2b, and 2c should equal 100%.

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

	Yes	No
<b>(i)</b> unrelated organizations .....		<b>X</b>
<b>(ii)</b> related organizations .....		<b>X</b>
<b>b</b> If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? .....		

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

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land .....		651,268		651,268
<b>b</b> Buildings .....				
<b>c</b> Leasehold improvements .....		379,875,166	210,877,152	168,998,014
<b>d</b> Equipment .....		23,663,540	16,842,150	6,821,390
<b>e</b> Other .....		54,095,897		54,095,897

**Total.** Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ **230,566,569**

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests	<b>74,098,368</b>	<b>Market</b>
(3) Other <b>Multi asset class &amp; other alt</b>	<b>226,632,029</b>	<b>Market</b>
(A) <b>Alternative investments</b>	<b>38,933,544</b>	<b>Market</b>
(B) <b>Short-term investments</b>	<b>9,286,617</b>	<b>Market</b>
(C) <b>Natural Resources</b>	<b>3,380,665</b>	<b>Market</b>
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.)	<b>352,331,223</b>	

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

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

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

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.)	

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

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) <b>post retirement benefit obligation</b>	<b>35,382,663</b>
(3) <b>annuity liability</b>	<b>3,564,651</b>
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
(11)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.)	<b>38,947,314</b>

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

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

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year. Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV.)	8	
9	Total adjustments (net). Add lines 4 through 8	9	
10	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9	10	

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

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments	2a	
	b Donated services and use of facilities	2b	
	c Recoveries of prior year grants	2c	
	d Other (Describe in Part XIV.)	2d	
	e Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
	a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
	b Other (Describe in Part XIV.)	4b	
	c Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	

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

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

**Part XIV Supplemental Information**

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

**Part X - FIN 48 Footnote**

WCS recognizes the benefit of tax positions when it is more-likely than-not that the position will be sustainable based on the merits of the position.

**Part XIV - Supplemental Financial Information**

Endowment funds are used to support WCS programs and projects as designated by the donors in futhering the overall missiom of WCS.

**Part XIV Supplemental Information** (continued)

COPY

**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.  
▶ Attach to Form 990. ▶ See separate instructions.

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Activities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

**1 For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?  Yes  No

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
<b>Central America and the Caribbean</b>					
(1)			Program Services	Conservation program	2,952,984
<b>East Asia and the Pacific</b>					
(2)			Program Services	Conservation program	11,270,659
<b>Russia and the Newly Independent States</b>					
(3)	1	15	Program Services	grants	204,719
<b>Russia and the Newly Independent States</b>					
(4)			Program Services	conservation program	1,611,492
<b>South America</b>					
(5)	9	201	Program Services	grants	1,716,159
<b>South America</b>					
(6)			Program Services	conservation program	8,761,917
<b>South Asia</b>					
(7)	6	109	Program Services	grants	13,750
<b>South Asia</b>					
(8)			Program Services	conservation program	4,025,058
<b>Sub-Sahara Africa</b>					
(9)	16	1,017	Program Services	grants	1,975,907
<b>Sub-Sahara Africa</b>					
(10)			Program Services	conservation program	27,393,955
<b>Central America and the Caribbean</b>					
(11)	10	48	Program Services	grants	592,385
<b>East Asia and the Pacific</b>					
(12)	15	513	Program Services	grants	899,486
<b>North America</b>					
(13)	1	3	Program Services	grants	899,129
<b>North America</b>					
(14)			Program Services	conservation program	19,672,709
<b>Caribbean</b>					
(15)			Investments		44,000,000
(16)					
(17)					
<b>3a Sub-total</b> ....	<b>58</b>	<b>1,906</b>			<b>125,990,309</b>
<b>b</b> Total from continuation sheets to Part I ...					
<b>c Totals</b> (add lines 3a and 3b)	<b>58</b>	<b>1,906</b>			<b>125,990,309</b>

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

Schedule F (Form 990) 2011

DAA

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENTRAL AMERICA	collaboration biodiv	255,312	checks and wire			
(2)			CENTRAL AMERICA	Support implementati	77,415	wire transfer			
(3)			EAST ASIA	Support CLEC conser	7,749	checks			
(4)			EAST ASIA	Support conservation	6,500	checks			
(5)			EAST ASIA	Support biodiversty	63,772	checks and wire			
(6)			EAST ASIA	Support training on	7,274	checks and wire			
(7)			EAST ASIA	Subgrant to Yayasan	50,990	checks and wire			
(8)			EAST ASIA	Conserve Wildlife an	23,800	checks and wire			
(9)			EAST ASIA	Support Organization	93,596	checks and wire			
(10)			EAST ASIA	Support for Ibis Ric	8,903	checks and wire			
(11)			EAST ASIA	Support CSO Green PN	105,241	checks and wire			
(12)			EAST ASIA	Support research fel	51,208	wire transfers			
(13)			EAST ASIA	Support Orangutans c	5,441	wire transfers			
(14)			EAST ASIA	Support climate chan	186,808	wire transfers			
(15)			EAST ASIA	Grant awarded for "T	20,000	wire transfers			
(16)			EAST ASIA	Support for protecti	103,000	wire transfers			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter ▶ 38

3 Enter total number of other organizations or entities ▶ 7

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA	Sub-grant for suppor	5,206	wire transfers			
(2)			EUROPE	Improve the conserva	23,000	checks			
(3)			EUROPE	Support Ocean5 proj	13,000	checks and wire			
(4)			EUROPE	Sponsorship on Globa	25,749	checks			
(5)			EUROPE	Support Equoatorial	26,000	wire transfers			
(6)			NORTH AMERICA	Support crocodile co	10,000	wire transfers			
(7)			NORTH AMERICA	Subgrant PREDICT pro	889,129	wire transfers			
(8)			RUSSIA	Support Infrastructu	32,685	checks			
(9)			RUSSIA	Support for Conserva	11,710	checks			
(10)			RUSSIA	Improve anti poachin	47,576	checks and wire			
(11)			RUSSIA	Develop veterinary l	25,000	checks and wire			
(12)			SOUTH AMERICA	Support for construc	39,550	checks			
(13)			SOUTH AMERICA	Support Centdor	15,000	checks			
(14)			SOUTH AMERICA	Support WCS_CIPLA	77,514	checks			
(15)			SOUTH AMERICA	Support site based b	11,347	checks			
(16)			SOUTH AMERICA	Support for project	44,043	checks			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	Support WCS CRTM Pil	15,630	checks			
(2)			SOUTH AMERICA	Support OWOH Project	8,306	checks			
(3)			SOUTH AMERICA	Support comm conser	13,500	checks			
(4)			SOUTH AMERICA	Support Fundacion Co	60,314	checks			
(5)			SOUTH AMERICA	Research conserv Bra	7,075	checks			
(6)			SOUTH AMERICA	Support biodiversity	11,339	checks			
(7)			SOUTH AMERICA	Support Project Caca	22,636	checks			
(8)			SOUTH AMERICA	Support Orangutans c	66,663	checks			
(9)			SOUTH AMERICA	Ranger overnight all	5,612	checks			
(10)			SOUTH AMERICA	Support AMWAE Cons	38,939	checks and wire			
(11)			SOUTH AMERICA	Support Fundacion Al	15,000	checks and wire			
(12)			SOUTH AMERICA	Support Fundacion Ca	71,004	checks and wire			
(13)			SOUTH AMERICA	Collaborate on proje	54,370	checks and wire			
(14)			SOUTH AMERICA	Support Chocolecos	27,527	checks and wire			
(15)			SOUTH AMERICA	Support Community ba	66,678	checks and wire			
(16)			SOUTH AMERICA	Support site based b	10,000	checks and wire			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	Support NAWE's biodi	57,922	checks and wire			
(2)			SOUTH AMERICA	Support implementati	27,000	checks and wire			
(3)			SOUTH AMERICA	Support FLACSO Commu	27,500	wire transfer			
(4)			SOUTH AMERICA	Support to purchase	5,655	wire transfer			
(5)			SOUTH AMERICA	Support biodiversity	62,495	wire transfer			
(6)			SOUTH AMERICA	Support conservation	22,217	wire transfer			
(7)			SOUTH AMERICA	Various orgs < 5000	522,743	wire transfer			
(8)			SOUTH AMERICA	Support local organi	25,754	checks and wire			
(9)			SOUTH AMERICA	Support conservation	262,037	wire transfer			
(10)			SOUTH AMERICA	Support research pro	6,000	wire transfer			
(11)			SOUTH AMERICA	Support PSNR with bu	19,441	wire transfer			
(12)			SOUTH AMERICA	Strenthening local c	116,049	wire transfer			
(13)			SOUTH AMERICA	Support Instituto Pi	39,976	checks and wire			
(14)			SOUTH AMERICA	Support research st	39,000	checks and wire			
(15)			SOUTH ASIA	Grants to propagate	13,750	checks			
(16)			SUB-SAHARAN AFRICA	Support to conservat	11,515	checks and wire			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000    
 Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	Support local organi	34,307	checks and wire			
(2)			SUB-SAHARAN AFRICA	Outreach/Sensitizati	41,688	checks			
(3)			SUB-SAHARAN AFRICA	Building of Central	42,926	checks			
(4)			SUB-SAHARAN AFRICA	Funding to support	9,938	checks			
(5)			SUB-SAHARAN AFRICA	Consultancy fee to i	10,995	checks			
(6)			SUB-SAHARAN AFRICA	Data collection/asse	64,326	checks			
(7)			SUB-SAHARAN AFRICA	Community Education	10,000	checks and wire			
(8)			SUB-SAHARAN AFRICA	Implement USAID	5,700	checks and wire			
(9)			SUB-SAHARAN AFRICA	Sub=contracted Ibong	5,488	checks and wire			
(10)			SUB-SAHARAN AFRICA	Support conservation	37,671	checks and wire			
(11)			SUB-SAHARAN AFRICA	Training/capacity bu	69,533	checks and wire			
(12)			SUB-SAHARAN AFRICA	PhD Fieldwork activ	9,659	wire transfer			
(13)			SUB-SAHARAN AFRICA	Support conservation	40,639	checks and wire			
(14)			SUB-SAHARAN AFRICA	Support local organi	342,171	wire transfer			
(15)			SUB-SAHARAN AFRICA	Support investigatio	54,442	wire transfer			
(16)			SUB-SAHARAN AFRICA	Support phase of dev	69,200	wire transfer			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter  \_\_\_\_\_

3 Enter total number of other organizations or entities  \_\_\_\_\_

**Part II Grants and Other Assistance to Organizations or Entities Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000  Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	Partnership to creat	12,643	wire transfer			
(2)			SUB-SAHARAN AFRICA	Support research pro	8,250	wire transfer			
(3)			SUB-SAHARAN AFRICA	Support conservation	139,041	wire transfer			
(4)			SUB-SAHARAN AFRICA	Support climate chan	64,743	wire transfer			
(5)			SUB-SAHARAN AFRICA	Sub-grant to Rindra	105,684	wire transfer			
(6)			SUB-SAHARAN AFRICA	Support commun	58,689	wire transfer			
(7)			SUB-SAHARAN AFRICA	Crop purchases to su	311,681	check and wire			
(8)			SUB-SAHARAN AFRICA	Implementation of US	16,000	check and wire			
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

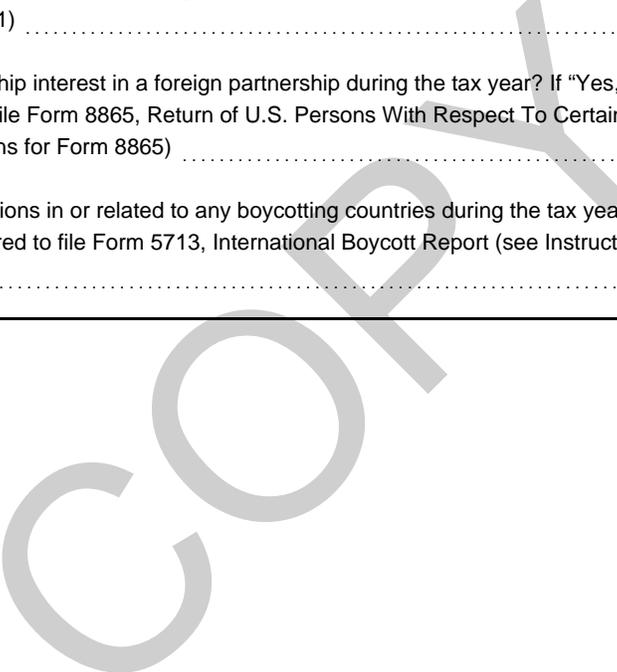
**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Transfer for health and c	SUB-SAHARAN AFRICA	1	13,975	Wire transfer/c			
(2) Conducting of the River C	RUSSIA AND NEWLY INDEPENDENT STATES	1	6,002	Check			
(3) Translocating 10-12 zebra	RUSSIA AND NEWLY INDEPENDENT STATES	1	12,041	Check			
(4) PhD fieldwork support act	SUB-SAHARAN AFRICA	1	7,000	Check			
(5) Grants released under lan	SOUTH-ASIA	1	7,068	Check			
(6) Tracking the tiger in fra	SOUTH-ASIA	1	6,000	Wire transfer/c			
(7) Provides for Diploma cour	CENTRAL AMERICA	1	12,000	Wire transfer/c			
(8) The effects of habitat fr	SOUTH ASIA	1	7,500	Wire transfer/c			
(9) Publication of the book a	EUROPE	1	6,500	Wire transfer			
(10) Sponsorship (grant part o	SOUTH AMERICA	1	7,155	Wire transfer/c			
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**Part IV Foreign Forms**

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) .....  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) .....  Yes  No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) .....  Yes  No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) .....  Yes  No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) .....  Yes  No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713) .....  Yes  No

**Schedule F (Form 990) 2011**



**Part V Supplemental Information**

Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds**

Grantees are required to submit financial and programatic reports on the use of the funds based on the terms of the grant. In addition, site visits by WCS staff to review grantee progress supplements those reporting requirements. WCS uses the accrual method of accounting.

**Part I, Line 3 - Activities per Region**

Region	Expenditures	Investments
Central America and the Caribbean	\$ 2,952,984	\$ 0
East Asia and the Pacific	\$ 11,270,659	\$ 0
Russia and the Newly Independent States	\$ 204,719	\$ 0
Russia and the Newly Independent States	\$ 1,611,492	\$ 0
South America	\$ 1,716,159	\$ 0
South America	\$ 8,761,917	\$ 0
South Asia	\$ 13,750	\$ 0
South Asia	\$ 4,025,058	\$ 0
Sub-Saharan Africa	\$ 1,975,907	\$ 0
Sub-Saharan Africa	\$ 27,393,955	\$ 0
Central America and the Caribbean	\$ 592,385	\$ 0
East Asia and the Pacific	\$ 899,486	\$ 0
North America	\$ 899,129	\$ 0
North America	\$ 19,672,709	\$ 0
Caribbean	\$ 0	\$ 44,000,000

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

**Supplemental Information Regarding  
Fundraising or Gaming Activities**

OMB No. 1545-0047

**2011**

Department of the Treasury  
Internal Revenue Service

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

Open To Public Inspection

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I Fundraising Activities.** Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

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

- a  Mail solicitations
- b  Internet and email solicitations
- c  Phone solicitations
- d  In-person solicitations
- e  Solicitation of non-government grants
- f  Solicitation of government grants
- g  Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  Yes  No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
Mary Kilbourn 1 670 West End Ave New York NY 10025	Strategic		X	0	147,967	-147,967
Schultz & Williams 2 325 Chestnut Street Philadelphia PA 19106	Membership		X	6,190,161	120,000	6,070,161
The Event Shop 3 8 Hathaway Lane Verona NJ 07044	Gala		X	1,276,951	78,364	1,198,587
Ngozi Okaro 4 102 Bradhurst Ave New York NY 10039	Strategic		X	0	25,600	-25,600
Prasad Consulting & Research 5 20 Sutton Ave South New York NY 10022	Strategic		X	0	22,000	-22,000
6						
7						
8						
9						
10						
<b>Total</b>				<b>7,467,112</b>	<b>393,931</b>	<b>7,073,181</b>

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

**All states**

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events	
		<u>Gala</u> (event type)	<u>Dinner by the S</u> (event type)	<u>2</u> (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts	1,276,951	1,001,000	184,531	2,462,482
	2	Less: Charitable contributions	121,791	699,000	19,163	839,954
	3	Gross income (line 1 minus line 2)	1,155,160	302,000	165,368	1,622,528
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs	416,926	8,041		424,967
	7	Food and beverages	211,316	45,587		256,903
	8	Entertainment				
	9	Other direct expenses	123,290	57,971	89,669	270,930
	10	Direct expense summary. Add lines 4 through 9 in column (d)				952,800
11	Net income summary. Combine line 3, column (d), and line 10				669,728	

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

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

9 Enter the state(s) in which the organization operates gaming activities: \_\_\_\_\_  
 a Is the organization licensed to operate gaming activities in each of these states? 9a  Yes  No

b If "No," explain: \_\_\_\_\_  
 \_\_\_\_\_

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

b If "Yes," explain: \_\_\_\_\_  
 \_\_\_\_\_

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

<b>13a</b>		%
<b>13b</b>		%

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

Name ▶ .....

Address ▶ .....

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

Name ▶ .....

Address ▶ .....

16 Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer     Employee     Independent contractor

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

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

**Sch G, Part I, Line 2b, Col (iii) - Custody or Control Arrangement**

**Mary Kilbourn**  
Funds were sent directly to WCS - Sea Change campaign

**Schultz & Williams**  
Funds were sent directly to WCS- membership campaigns

**The Event Shop**  
Funds were sent directly to WCS - Gala

**Ngozi Okaro**  
Funds were sent directly to WCS - Flagship Fundraising initiative

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

<b>13a</b>		%
<b>13b</b>		%

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

Name ▶ .....

Address ▶ .....

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

Name ▶ .....

Address ▶ .....

16 Gaming manager information:

Name ▶ .....

Gaming manager compensation ▶ \$ .....

Description of services provided ▶ .....

Director/officer     Employee     Independent contractor

17 Mandatory distributions:

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

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

**Prasad Consulting & Research**  
**Funds were sent directly to WCS as part of several initiatives**

**Sch G, Part I, Line 2b, Col (v) - Fundraising vs. Reimbursement Explanation**  
**Mary Kilbourn**  
**Sea Change consulting services**

**Schultz & Williams**  
**Direct mail membership solicitation advice**

**The Event Shop**  
**Event consulting services**



**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Grants and Assistance**

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Amazon Conservation Association 1731 Connecticut Ave NW Washington DC 20009	52-2211305	501c3	86,870				collaboration "to pr
(2)	Bronx River Alliance 1 Bronx River Parkway Bronx NY 10462	75-3001587	501c3	200,000				NOAA grant support
(3)	Bronx River Art Center 1087 E Tremont Ave Bronx NY 10460	13-3261148	501c3	35,242				NOAA grant support
(4)	Blackfoot Community College Highway 2 and B9 Browning MT 59417	81-0378943	501c3	6,000				Support 2 leaders &
(5)	Cardinal Foundation 110 Thomas Steet Winston Salem NC 27101	56-1944942	501c3	40,000				Support implementati
(6)	Center for Native Ecosystems 1536 Wynkoop Street Denver CO 80202	84-1512852	501c3	29,748				Support updating &
(7)	Children's Hospital, Boston 300 Longwood Ave Boston MA 02115	04-2774441	501c3	272,000				Collaboration "PREDI
(8)	Columbia University 2910 Broadway New York City NY 10025	13-5598093	501c3	20,479				Collaboration on bio
(9)	Columbia University 2910 Broadway New York City NY 10025	13-5598093	501c3	14,800				Support Earth Instit

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **▶ 43**
- 3 Enter total number of other organizations listed in the line 1 table **▶ 0**

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

Schedule I (Form 990) (2011)

DAA

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Grants and Assistance**

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Conservation International 2011 Crystal Drive Arlington VA 22202	52-1497470	501c3	19,761				Support conservation
(2)	Conservation Strategy Fund 1160 G Street Arcata CA 95521	94-3294843	501c3	86,497				Collaboration to mon
(3)	Ducks Unlimited 3074 Gold Canal Drive Rancho Cordova CA 95670	13-5643799	501c3	16,800				Support Wildlife act
(4)	Ecoadapt PO Box 11195 Bainsbridge WA 98110	26-3303629	501c3	11,760				Participatio in clim
(5)	Ecohealth Alliance 460 West 34th Street New York City NY 10001	31-1726494	501c3	28,500				Collaboration "PREDI
(6)	Forest Trends 1050 Potomac Street NW Washington DC 20007	52-2135531	501c3	378,433				Collaboration on bio
(7)	Georgia Department of Natural Resou 2065 Hwy 278 SE Social Circle GA 30025	58-1130945	GOV	18,960				Support fire crew ta
(8)	Grand Canyon Trust 2601 N. Fort Valley Rd Flagstaff AZ 86001	86-0512633	501c3	120,000				Support "Restoring B
(9)	Hawaiian Sliversword Foundation PO Box 41476 Tuscon AZ 85717	86-0879183	501c3	200,000				Support Kanakaleonul

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

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Schedule I (Form 990) (2011)

DAA

**SCHEDULE I  
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Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Grants and Assistance**

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Hudson River Foundation 17 Battery Place New York NY 10004	13-3089956	501c3	163,525				NOAA grant suport
(2)	Idaho Department of Fish and Game 600 S. Walnut Street Boise ID 83706	86-6000952	GOV	17,227				Support " Developmen
(3)	International Society for Infectiou 1330 Beacon Street Brookline MA 02446	22-2473000	501c3	147,000				monitoring collabora
(4)	Montana State University PO Box 1743460 Bozeman MT 59717	81-6010045	501c3	35,000				Research program
(5)	National Wildlife Federation 149 State Street Montpelier VT 05602	53-0204616	501c3	40,217				support "Beyond Plan
(6)	New York Botanical Garden 200th Street Kazimiroff Blvd Bronx NY 10458	13-1693134	501c3	100,000				NOAA grant support
(7)	NYC Department of Parks and Recreat 830 Fifth Avenue New York NY 10065		GOV	150,735				NOAA grant support
(8)	Open Space Institute 1350 Broadway New York City NY 10018	52-1053406	501c3	15,200				Support development
(9)	Playa Lakes Joint Venture 103 East Simpson Street Lafayette CO 80026	84-1623284	501c3	15,828				Support wind Siting

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

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

Schedule I (Form 990) (2011)

DAA

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Grants and Assistance**

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	Praecipio International 1606 3rd Ave North Seattle WA 98109	27-1935761	GOV	15,000				Collaboration PREDIC
(2)	Relief International 1100 H Street NW Washington DC 20005	95-4300662	501c3	158,285				Support "Translinks
(3)	Rocking the Boat Inc 812 Edgewater Road Bronx NY 10474	13-4177814	501c3	100,000				NOAA grant support
(4)	Scenic Hudson Inc 1 Civic Center Plaza Poughkeepsie NY 12601	23-7148333	501c3	40,543				Support Estuarine Ad
(5)	Sustainable South Bronx 890 Garrison Avenue Bronx NY 10471	02-0585999	501c3	133,084				NOAA grant support
(6)	The Coral Reef Alliance 351 California Street San Francisco CA 94104	94-3211245	501c3	25,000				Strengthen Managemen
(7)	The Humane Society of US 2100 L. Street NW Washington DC 20037	53-0225390	501c3	5,500				Support convention o
(8)	The Nature Conservancy 701 West Ocean Acres Drive Kill Devil Hills NC 27948	53-0242652	501c3	291,833				support " Coastal ad
(9)	The Point Community Development Cor 940 Garrison Avenue Bronx NY 10474	13-3765140	501c3	78,726				NOAA grant support

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

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

Schedule I (Form 990) (2011)

DAA

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2011**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

▶ Attach to Form 990.

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I General Information on Grants and Assistance**

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

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

1	(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1)	United States Department of Agriculture 1405 Hollipark Drive Idaho Falls ID 83401		GOV	24,863				Support research fel
(2)	University of Vermont 85 S Prospect Street Burlington VT 05405	03-0179440	501c3	100,000				Support completion o
(3)	University of Wisconsin Board of Re 21 North Park Street Madison WI 53715		GOV	219,464				Collaboration on "Tr
(4)	Washington Department of Fish and W 600 Capitol Way North Olympia WA 98501	91-1632572	GOV	19,152				Support restoration
(5)	White Oak Conservation Center 1615 Riverside Ave Jacksonville FL 32204	26-0035224	501c3	40,000				Support Okapi Conser
(6)	World Wildlife Fund, USA 1250 24th Street NW Washington DC 20090	52-1693387	501c3	767,182				collaboration on var
(7)	Yale University PO Box 1873 New Haven CT 06508	06-0646973	501c3	168,500				Collaboration Predic
(8)								
(9)								

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

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

Schedule I (Form 990) (2011)

DAA

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 Vocal sigs Neotropical b	1	74,200			
2 Penguins project at Punta	1	30,000			
3 Conserving American croco	1	8,250			
4 Conservation Biology & ac	1	29,000			
5 Support tiger hormone res	1	5,000			
6 Production of movie 'Caug	1	7,500			
7					

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

**Part I, Line 2 - Procedures for Monitoring the Use of Grant Funds**

Funds granted to other organizations and individuals are monitored through financial reimbursement procedures. Funds are released based on expenditure reports submitted which are reviewed by the Finance Division's Grants Department of Wildlife Conservation Society. Reports are reviewed and checked over for accuracy and budgetary compliance before reimbursements are issued. In the cases where the organization has been advanced funds for the grant, expense reports are required on a quarterly basis and are reviewed before further advances can be issued.

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Compensation Information**

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

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

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

Open to Public Inspection

**Wildlife Conservation Society**

Employer identification number  
**13-1740011**

**Part I Questions Regarding Compensation**

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

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

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

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

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

- Compensation committee
- Independent compensation consultant
- Form 990 of other organizations
- Written employment contract
- Compensation survey or study
- Approval by the board or compensation committee

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

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

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

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>	<input checked="" type="checkbox"/>	
<b>2</b>	<input checked="" type="checkbox"/>	
<b>4a</b>		<input checked="" type="checkbox"/>
<b>4b</b>	<input checked="" type="checkbox"/>	
<b>4c</b>		<input checked="" type="checkbox"/>
<b>5a</b>		<input checked="" type="checkbox"/>
<b>5b</b>		<input checked="" type="checkbox"/>
<b>6a</b>	<input checked="" type="checkbox"/>	
<b>6b</b>		<input checked="" type="checkbox"/>
<b>7</b>	<input checked="" type="checkbox"/>	
<b>8</b>		<input checked="" type="checkbox"/>
<b>9</b>		

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

Schedule J (Form 990) 2011

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Steven E. Sanderson	(i)	513,417	215,000	287,284	126,188	21,777	1,163,666	0
	(ii)	0	0	0	0	0	0	0
2 WB McKeown	(i)	234,101	140,000	50,999	55,232	416	480,748	40,407
	(ii)	0	0	0	0	0	0	0
3 John G Robinson	(i)	357,845	0	3,564	101,054	21,234	483,697	0
	(ii)	0	0	0	0	0	0	0
4 John F Calvelli	(i)	334,915	0	21,035	89,209	19,465	464,624	0
	(ii)	0	0	0	0	0	0	0
5 Patricia Calabrese	(i)	353,551	0	2,322	57,289	23,223	436,385	0
	(ii)	0	0	0	0	0	0	0
6 Robert A Cook	(i)	276,966	0	68,462	57,498	24,127	427,053	40,390
	(ii)	0	0	0	0	0	0	0
7 Bertina Ceccarelli	(i)	318,770	0	502	38,744	24,949	382,965	0
	(ii)	0	0	0	0	0	0	0
8 Robert A Moskovitz	(i)	254,432	12,000	1,908	42,958	4,354	315,652	0
	(ii)	0	0	0	0	0	0	0
9 Robert Calamo	(i)	228,876	0	5,781	44,387	25,099	304,143	0
	(ii)	0	0	0	0	0	0	0
10 James J Breheny	(i)	205,220	0	5,978	30,225	25,720	267,143	0
	(ii)	0	0	0	0	0	0	0
11 Joshua R Ginsberg	(i)	191,865	0	983	28,545	25,895	247,288	0
	(ii)	0	0	0	0	0	0	0
12 Laura Stolzenhaler	(i)	177,478	0	153	16,106	549	194,286	0
	(ii)	0	0	0	0	0	0	0
13 Christopher J McKenzie	(i)	142,478	20,000	69	20,887	8,648	192,082	0
	(ii)	0	0	0	0	0	0	0
14 Paula Loring-Simon	(i)	246,870	0	3,564	57,998	24,536	332,968	0
	(ii)	0	0	0	0	0	0	0
15 Herman Smith	(i)	225,100	0	941	53,713	13,644	293,398	0
	(ii)	0	0	0	0	0	0	0
16 Sean Cover	(i)	160,133	0	207	18,569	18,866	197,775	0
	(ii)	0	0	0	0	0	0	0

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

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

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

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Susan Chin	(i)	157,545	0	489	16,214	8,827	183,075	0
	(ii)	0	0	0	0	0	0	0
2 Jon Forest Dohlin	(i)	150,963	0	667	21,382	1,690	174,702	0
	(ii)	0	0	0	0	0	0	0
3	(i)							
	(ii)							
4	(i)							
	(ii)							
5	(i)							
	(ii)							
6	(i)							
	(ii)							
7	(i)							
	(ii)							
8	(i)							
	(ii)							
9	(i)							
	(ii)							
10	(i)							
	(ii)							
11	(i)							
	(ii)							
12	(i)							
	(ii)							
13	(i)							
	(ii)							
14	(i)							
	(ii)							
15	(i)							
	(ii)							
16	(i)							
	(ii)							

**Part III Supplemental Information**

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

**Part I, Line 1a - Fringe or Expense Explanation**

WCS compensation for officers and key employees has three main components:

(1) cash compensation in the form of base salary and, for specific positions, taxable cash allowances for certain business expenses in lieu of reimbursement (e.g., phone allowance) and, in certain circumstances, incentive compensation and discretionary performance bonuses; (2) non-cash taxable and non-taxable benefits (eg., health and life insurance) and (3) in certain circumstances, deferred compensation.

The following provides required responses to Part I lines 1a, 4b, 6a as well as other supplemental information:

Supplemental information on base compensation (Column Bi): As required by Form 990, base compensation includes employees' regular, sick and vacation pay for the calendar year ending December 31 2011 as reported on the employees' W-2 Box 5. Base compensation excludes pre-tax deductions for health insurance premiums and flexible spending account contributions; these pre-tax deductions are reported as part of Column D as required by Form 990 instructions.

Supplemental information on other reportable income (Column Biii) including

**Part III Supplemental Information**

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

disclosure required for Part I, line 1a on housing use and tax indemnification: The totals in Column Biii include the following components of taxable income reported on the employee's W-2 for 2011: the fair market rental value of housing and related tax payments for President and CEO Dr. Steven E. Sanderson; any payments for compensation under multi-year supplemental non-qualified compensation plans which vested in the 2011 tax year; the value of taxable group life premiums; and any tuition reimbursement and taxable allowances for automobile and cell phone use provided to certain officers and key employees reported on Schedule J, Part II. Automobile and cell phone allowances, if provided, are made in lieu of reimbursement for those business expenses. The largest component of other reportable income (column Biii) for Dr. Sanderson was the rental value of housing and related tax payments (\$257,017). As a condition of employment and for the convenience of WCS, the President and CEO is required to reside in a WCS-owned apartment at which fundraising and other meetings are held for WCS's purpose and benefit. The apartment is centrally located to facilitate travel to all of WCS's New York City locations. WCS treats the rental value of the apartment as a taxable benefit and covers the

**Part III Supplemental Information**

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

additional tax liability because WCS requires Dr.Sanderson to reside there.

For the 2011 tax year the reported rental value and related tax payments totaled \$257,017, consisting of rental value of \$130,838. and related tax payments totaling \$126,179. The largest component of other reportable income for Dr. Cook and Mr. McKeown was a payment to each of compensation under multi-year supplemental non-qualified compensation plans which vested in the 2011 tax year as service requirements were met. These payments were reported as taxable income on the employees' 2011 W2's. For Dr. Cook the payment was \$40,390, which was reported as deferred compensation on previous years' Form 990s. Mr. Mckeown received \$47,042 of which \$40,407 was reported as deferred compensation in previous years as well.

Supplemental information on retirement and other deferred compensation (Column C), including disclosure required for Part I, line 4b on non-qualified deferred compensation plans: Column C has two components: the estimated present value of accrued qualified pension benefit earned in calendar 2011, and the estimated accrued value of the supplemental non-qualified retirement plans currently in force but not yet vested. These non-qualified plans are described as follows:

**Part III Supplemental Information**

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

WCS has established supplemental non-qualified retirement plans to provide retirement benefits to executives which would otherwise be lost due to statutory limitations and for the purpose of retaining talent. For retention purposes, these plans are payable on various pre-determined vesting dates set for each participant, typically five to ten years from the establishment of the plans. Payment is subject to the achievement of certain service requirements provided that the individual is employed by WCS through the vesting date or in certain other limited circumstances. As noted below, eight individuals participated in these plans during the reporting period, and the estimated accruals not yet vested are a component of deferred compensation reported in Column C for each: (Note that these accruals are reported again below in the disclosure for Part I, Line 4.)

Steven E. Sanderson, President and CEO \$66,847; Subsequently, Dr. Sanderson retired in July 2012 in advance of the plan vesting date, forfeiting this and prior reported non-qualified plan accruals.

John F. Calvelli, Executive Vice President for Public Affairs \$61,561;

Dr John G. Robinson, Executive Vice President for Conservation and Science \$40,390;

**Part III Supplemental Information**

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

Patricia Calabrese, Executive Vice President for Administration and

Chief Financial Officer \$6,361;

Bertina Ceccarelli, Executive Vice President for Global Resources

\$12,564;

Dr Robert Cook, Executive Vice President and General Director, Living

Institutions \$12,052;

Christopher J. McKenzie, Senior Vice President and General Counsel \$4,193;

James J. Breheny, Executive Vice President and General Director Zoos and

Aquarium and Director, Bronx Zoo \$1,158.

Supplemental information on non-taxable benefits (Column D) and disclosure

required for Part I, line 1a: Column D includes the value of qualified

health, dental and long-term disability insurance provided to WCS employees

and pre-tax employee contributions to health insurance premiums and

flexible spending plans. For James Breheny, Executive Vice President

and General Director Zoos and Aquarium and Director, Bronx Zoo, Column D

\$18,000 for the imputed rental value of housing. As a condition of

employment and for the convenience of WCS, Mr Breheny is required to live

in WCS housing on zoo grounds and WCS treats the value of such housing as a

**Part III Supplemental Information**

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

non-taxable benefit.

**Part I, Line 4 - Severance, Nonqualified, and Equity-Based Payments**

	Severance	Nonqualified	Equity-based
Steven E. Sanderson	0	66,847	0
John G Robinson	0	40,390	0
John F Calvelli	0	61,561	0
Patricia Calabrese	0	6,361	0
Robert A Cook	0	12,052	0
Bertina Ceccarelli	0	12,564	0
James J Breheny	0	1,158	0
Christopher J McKenzie	0	4,193	0

**Part I, Line 6a - Compensation Contingent upon Net Earnings of Organization**

Disclosure required for Part I, line 6a regarding contingent compensation

(Column Bii): This column reports a \$12,000 incentive payment made to Robert Moskovitz, Senior Vice President for Business Services, for the fiscal year ending June 30, 2011. As a condition of his employment, Mr.

Part III Supplemental Information

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

Moskovitz receives a portion of his compensation as a variable incentive payment determined by a formula based on the net income results of certain auxiliary service departments in his division during the fiscal year. The reported \$12,000 payment was made for fiscal year ending June 30, 2011, and was reported as taxable income on Mr. Moskovitz's 2011 W-2.

Part I, Line 7 - Non-Fixed Payments Provided

Three executives received non-fixed payments in 2011. Steven E. Sanderson, President and CEO, received \$215,000, and WB McKeown, Senior Vice President and General Counsel, received \$140,000. These payments were one-time discretionary bonuses in recognition of extraordinary accomplishments during the prior year. Christopher J. McKenzie received a \$20,000 one-time signing bonus as incoming Senior Vice President and General Counsel. These payments were reported as taxable income on the employees' 2011 W-2.

**SCHEDULE K  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information on Tax-Exempt Bonds**

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

▶ Attach to Form 990. ▶ See separate instructions.

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

Name of the organization

**Wildlife Conservation Society**

Employer identification number

**13-1740011**

**Part I Bond Issues**

(a) Issuer name	(b) Issuer EIN	(c) CUSIP #	(d) Date issued	(e) Issue price	(f) Description of purpose	(g) Defeased		(h) On behalf of issuer		(i) Pooled financing	
						Yes	No	Yes	No	Yes	No
A Trust for Cultural Resources NYC	91-1882413	3649717MX0	03/11/04	66,843,867	Financing of Capital		X		X		X
B											
C											
D											

**Part II Proceeds**

	A	B	C	D
1 Amount of bonds retired				
2 Amount of bonds legally defeased				
3 Total proceeds of issue	66,520,032			
4 Gross proceeds in reserve funds				
5 Capitalized interest from proceeds				
6 Proceeds in refunding escrows				
7 Issuance costs from proceeds	652,812			
8 Credit enhancement from proceeds				
9 Working capital expenditures from proceeds				
10 Capital expenditures from proceeds				
11 Other spent proceeds				
12 Other unspent proceeds				
13 Year of substantial completion	2008			
	Yes	No	Yes	No
14 Were the bonds issued as part of a current refunding issue?		X		
15 Were the bonds issued as part of an advance refunding issue?		X		
16 Has the final allocation of proceeds been made?	X			
17 Does the organization maintain adequate books and records to support the final allocation of proceeds?	X			

**Part III Private Business Use**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X						
2 Are there any lease arrangements that may result in private business use of bond-financed property?		X						

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

Schedule K (Form 990) 2011

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....		<b>X</b>						
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....		<b>X</b>						
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ..								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....								
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....		<b>5.00</b> %						
<b>6</b> Total of lines 4 and 5 .....		<b>5.00</b> %						
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? .....	<b>X</b>							

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? .....		<b>X</b>						
<b>2</b> Is the bond issue a variable rate issue? .....		<b>X</b>						
<b>3a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....		<b>X</b>						
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>4a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? ..	<b>X</b>							
<b>b</b> Name of provider .....	<b>FSA</b>							
<b>c</b> Term of GIC .....	<b>3.3</b>							
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....	<b>X</b>							
<b>5</b> Were any gross proceeds invested beyond an available temporary period? ..	<b>X</b>							
<b>6</b> Did the bond issue qualify for an exception to rebate? .....	<b>X</b>							

**Part V Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations .....  Yes  No

**Part VI Supplemental Information.** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

**Schedule K - Additional Information**

**Trust for Cultural Resources NYC**

**On February 1, 2004, WCS entered into a Loan Agreement with the Trust for Cultural Resources of the City of New York (the Trust) to finance a portion of the costs of capital improvements at the Bronx Zoo and the New York**

**Part III Private Business Use (Continued)**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>3a</b> Are there any management or service contracts that may result in private business use of bond-financed property? .....								
<b>b</b> If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property?								
<b>c</b> Are there any research agreements that may result in private business use of bond-financed property? .....								
<b>d</b> If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? ..								
<b>4</b> Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government .....								
<b>5</b> Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government .....								
<b>6</b> Total of lines 4 and 5 .....								
<b>7</b> Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities? .....								

**Part IV Arbitrage**

	A		B		C		D	
	Yes	No	Yes	No	Yes	No	Yes	No
<b>1</b> Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue? .....								
<b>2</b> Is the bond issue a variable rate issue? .....								
<b>3a</b> Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue? .....								
<b>b</b> Name of provider .....								
<b>c</b> Term of hedge .....								
<b>d</b> Was the hedge superintegrated? .....								
<b>e</b> Was the hedge terminated? .....								
<b>4a</b> Were gross proceeds invested in a guaranteed investment contract (GIC)? ..								
<b>b</b> Name of provider .....								
<b>c</b> Term of GIC .....								
<b>d</b> Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied? .....								
<b>5</b> Were any gross proceeds invested beyond an available temporary period? ..								
<b>6</b> Did the bond issue qualify for an exception to rebate? .....								

**Part V Procedures To Undertake Corrective Action**

Check the box if the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program if self-remediation is not available under applicable regulations .....  Yes  No

**Part VI Supplemental Information.** Complete this part to provide additional information for responses to questions on Schedule K (see instructions).

**Aquarium, In connection with the Loan Agreement, On March 11, 2004, the Trust issued \$65,530,000 of Revenue bonds, Series 2004 (the Bonds) with a net original issue premium of \$1,313,867, loaning the proceeds of the issuance to WCS. The unamortized bond premium was \$990,032.**

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2011**

**Open To Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

**Wildlife Conservation Society**

Employer identification number  
**13-1740011**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	<b>X</b>	<b>48</b>	<b>2,860,703</b>	<b>Market Value</b>
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶( )				
26 Other ▶( )				
27 Other ▶( )				
28 Other ▶( )				

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

**29**

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		<b>X</b>
31	<b>X</b>	
32a		<b>X</b>

b If "Yes," describe the arrangement in Part II.

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

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

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

**Part II**

**Supplemental Information.** Complete this part to provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

COPY

**SCHEDULE O**  
**(Form 990 or 990-EZ)**Department of the Treasury  
Internal Revenue Service

Name of the organization

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

▶ Attach to Form 990 or 990-EZ.

OMB No. 1545-0047

**2011****Open to Public  
Inspection****Wildlife Conservation Society**

Employer identification number

**13-1740011****Form 990 - Additional Information****Form 990 Part I Line 1 - Mission statement continued**

wildlife parks, led by the flagship Bronx Zoo. Together these activities change attitudes towards nature and help people imagine wildlife and humans living in harmony. WCS is committed to this mission because it is essential to the integrity of life on Earth.

**Form 990, Part I, Line 6**

Wildlife Conservation Society has volunteers in all of our NYC park facilities. These individuals assist in our education efforts as docents, or may be inside an exhibit with a rare animal or artifact. They provide information on WCS's animal collection to our visitors. Our FOZ (Friends of the Zoo) volunteers donate their time for a two year period while they learn about our living institutions, our global programs, animal habitats, and educational programs. They are trained by WCS staff and are encouraged to attend educational classes. Volunteers may also be interns studying: veterinary, exhibit graphics and design or other specialities, usually earning school credit or service hours for the time they are at our facilities. Our New York Aquarium has volunteer divers who assist us in maintaining the water quality of our exhibit tanks. They are experienced divers, who accumulate dive hours towards maintaining their diving certification. The number of volunteers at each facility is as follows: Bronx Zoo 158, NY Aquarium 283, Central Park Zoo 150, Prospect Park Zoo 132, and Queens Zoo 51.

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

## Form 990, Part III, Line 4a - First Accomplishment

turtle diversity, including Cambodia, China, Myannar, Vietnam, Columbia, Ecuador and Guatemala.

2.WCS has led efforts to protect the biodiversity of Madagascar's Makira forest for more than a decade. With WCS planning assistance at both the government and community level, the Makira Natural Park became this island nation's largest protected area in 2012.

3.WCS is developing and working with intelligence networks (enforcement agencies and customs) around our elephant sites in Asia to detect and apprehend poachers and illegal wildlife traders. We are partnering with the authorities to ensure that these individuals are prosecuted in court and given appropriate sentences.

4.WCS's long-running collaboration with the Government of Thailand to train and deploy park guards in the country's most important reserve has led to seven years of population stability in tigers and other wildlife.

5.Researchers from WCS's Columbia Program assisted in confirming presence of a critically endangered subspecies of brown spider monkey in Selva de Florencia National Park.

6.Conservationists from WCS's Peru Program discovered 365 previously undocumented species in Bahuaja-Sonene National Park.

7.Working with the Republic of South Sudan and USAID, WCS helped to inaugurate a new state-of-the-art park headquarters for Boma National Park.

8.Conservationists with WCS's Afghanistan Program captured and fit two snow leopards with satellite collars, a first for snow leopard research in the country.

9. Working with the Center for Disease Control (CDC) and other partners, WCS health experts helped to identify animal-borne pathogens in illegally

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

imported wildlife entering the United States.

10. Working with Guatemala partners, WCS helped facilitate an agreement to safeguard some 80,000 acres of intact forest in the heart of the Maya Biosphere Reserve.

Form 990, Part III, Line 4b - Second Accomplishment

there are now two male and seven female birds in the collection.

3. The Education Department at the Bronx Zoo was named the winner of the 2012 EdCon Award for Excellence in Programming by the American Association of Museums (AAM) for its Wildlife Career Ladder program for teens. The EdCon Award for Excellence in Programming recognizes exemplary creativity and innovation in museum educational programming.

4. The Bronx Zoo lead flamingo researchers in banding and health assessment project in the Bahamas. The researchers coralled a large group of juvenile Caribbean flamingos in order to attach leg bands, record body measurements, and conduct brief health assessments. In all 198 flamingoes were banded. The bands will enable researchers to identify these birds in the future and track movements and migration to different breeding colonies throughout the Caribbean.

5. WCS created the Online Teacher Academy in 2007. The program introduce educators to life science content, teaching methods, and new technology while using resources likes zoos and aquariums as serious tools for teaching science. Through professional development, the Online Teachers Academy makes a significant impact on enviromental and conservation education in the classroom. The web-based resource for teacher professional development has already made a tremendous difference in teaching educators about conservation in New York City, across the country and around the

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

globe.

6. There were several significant births at the Bronx Zoo this year: A trio of black-necked swan cygnets were hatched in Spring 2012. Three rare species of spur-winged chicks were hatched in June 2012. The species is rare in the U.S. zoos; there are currently only 35 birds in 14 Association of Zoos and Aquariums (AZA) accredited facilities. A Coquerel's sifaka and collared lemur were also born at the Bronx Zoo. All lemurs species are endemic to the island nation of Madagascar. Both the sifaka and the lemur are seeing dramatic declines in population due to the loss of suitable habitat and the International Union for Conservation of Nature (IUCN) has designated the sifaka as an endangered species and the collared lemur as vulnerable.

The New York Aquarium continues to advance its ambitious exhibit redevelopment program:

1. The New York Aquarium opened a new summer exhibit, A-MAZE-ING Water, as part of the World Oceans Day. The program featured Water Extreme Journey, where visitors travelled through a 1,500 square foot maze, learning about the environmental threats that plague our waterways along the way to an ocean-themed destination. Guests also learnt about the aquarium's New York Seascape, a conservation program designed to restore healthy populations of local marine species - many of them threatened - and to protect New York marine waters.

2. WCS launched the New York Seascape, a local conservation program part of WCS's A SEA CHANGE initiative, a 10-year plan to revitalize the aquarium and ignite the rebirth of Coney Island. An important component to A SEA CHANGE includes construction of a new exhibit Ocean Wonders: Sharks!

3. Several notable additions to the aquarium's collection were added this

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

year. An orphaned southern sea otter pup from Monterey was added to the aquarium's collection, bringing the sea otter numbers to three young males. The first blackfooted penguin chick to hatch at the aquarium in thirty years fully fledged and is now on exhibit, and the aquarium's aquarists had successfully propagated an unprecedented number of potbellied seahorses and the locally threatened northern seahorse.

Form 990, Part III, Line 4c - Third Accomplishment

notably the renovation of life support system to the CPZ' Penguin exhibit.

3. Wildlife conservation education programs continue to expand at the all three City Zoos, venturing into areas of urban ecology education to address topics of conservation concern in the New York metropolitan area.

4. Prospect Park Zoo re-opened the renovated Discovery Center for Children. The redesigned space includes the addition of several nature-themed learning areas for children and families, campsite for reading nature books, puppets and costumes for kids to perform their own wildlife plays and an area where kids can play.

5. PPZ debuted a new Dingo exhibit in Spring 2012. The Australian dingoes (two males and two females) are new species for the zoo and a perfect addition to the zoo's Australian Walkabout on the Discovery Trail. These are the first dingoes in a New York City zoo in 40 years.

6. The Queens Zoo produced a Texas longhorn calf in Spring 2012, bringing the total to three longhorns at the Queens Zoo.

7. The Queens zoo also welcomed four new Pronghorn Antelope Fawns - three females and a male. The pronghorn antelope is the lone member of the family Antilocapridae. They are true American natives that do not occur anywhere else in the world.

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

**Form 990, Part III, Line 4d - All Other Accomplishment**

NOAA Regional Partnership Grant Program continued to work with local not-for-profit community based organizations on various environmental programs and projects. This program has been instrumental in bringing together organizations from the surrounding community to enhance the water quality of the Bronx River and other local waterways.

**Form 990, Part V, Line 4b - Financial Accounts in Foreign Countries**

Afghanistan, Argentina, Belize, Bolivia, Burma, Cambodia, Congo (Democratic Republic), China, Chile, Cameroon, Columbia, Ecuador, Fiji, Gabon, Guatemala, Indonesia, Kenya, Laos, Madagascar, Mongolia, Nigeria, Nicaragua, Paraguay, Peru, Pakistan, Papua New Guinea, Russia, Rwanda, Sudan, Thailand, Tanzania, Uganda, United Kingdom, Venezuela, Vietnam, Zambia

**Form 990, Part VI, Line 6 - Classes of Members or Stockholders**

WCS is a New York not-for-profit corporation with voting and non-voting members and with no stockholders.

Voting members may vote to elect Trustees and vote on certain corporate actions pursuant to New York law governing not-for-profit corporations.

**Form 990, Part VI, Line 7a - Election of Members and Their Rights**

See response above regarding line 6

**Form 990, Part VI, Line 7b - Decisions Subject to Approval of Members**

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

See response above regarding Line 6

Form 990, Part VI, Line 10b - Policies and Procedures Governing Chapters

WCS has no chapters. WCS has branch offices in a number of locations.

WCS has affiliates. WCS has adopted policies and procedures that are applicable to its branch offices and affiliates.

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

WCS's 990 is prepared by the Comptroller and the Comptroller's staff in consultation with other WCS officers and staff and WCS's outside auditors. The draft is reviewed by the Chief Financial Officer and by WCS's outside auditors. Before filing, the draft 990 is reviewed by the Audit Committee and provided to the entire Board of Trustees by posting on a secure website accessible to all the Trustees.

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

WCS's Board of Trustees has adopted a written conflicts of interest policy applicable to Trustees and officers and another written conflicts of interest policy applicable to employees. Under these policies, Trustees, officers and employees are required to disclose conflicts and possible conflicts whenever they become aware of them. In addition, the disclosing individual may not participate in the consideration or action on the relevant matter. Annually Trustees and officers and certain management employees are required to complete and return a statement affirming their knowledge of the policy and their commitment to abide by it, and also to identify known conflicts and possible conflicts. Under the applicable policy any conflict or possible conflict is to be dealt with on a case by

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

case basis, in the case of employees, by management under supervision of the Audit Committee, and in the case of Trustees, by the Audit Committee.

Form 990, Part VI, Line 15a - Compensation Process for Top Official

Under the WCS bylaws, the Human Resources and Compensation Committee of the Board of Trustees has the responsibility and authority to fix the compensation of all corporate officers. That Committee decides the form and amount of compensation for the President and Chief Executive Officer and senior managers using the methods listed in Schedule J, Part I line 3. The Committee is composed of persons without a conflict with respect to its compensation decisions. The Committee relies on appropriate data as to the reasonableness of compensation and documents the basis for each decision at the time the decision is made.

Form 990, Part VI, Line 15b - Compensation Process for Officers

Yes see above

Form 990, Part VI, Line 17 - Other States Where Copy of Return is Filed

Illinois, Indiana, Kansas, Kentucky, Massachusetts, Maryland, Maine, Michigan, Minnesota, Montana, North Carolina, North Dakota, New Hampshire, New Jersey, New Mexico, New York, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Virginia, Washington, Wisconsin, West Virginia, Wyoming

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

Our Audited Financial Statements, IRS 990, and IRS 990T are posted and available on our website. The IRS 990 is also posted on Guidestar.

Name of the organization

Wildlife Conservation Society

Employer identification number

13-1740011

Documents are also furnished upon request.

Form 990, Part VII - Related Organizations

Individuals listed in Part VII, Column (A), devoted the following estimated hours per week to related organizations. For all other individuals listed in Part VII, Column (A), zero hours per week were devoted to related organizations.

John F. Calvelli - 0.3 hrs/wk

John G. Robinson - 0.2 hrs/wk

Patricia Calabrese - 0.3 hrs/wk

Christopher J. McKenzie - 0.5 hrs/wk

Robert Calamo - 0.3 hrs/wk

Joshua R. Ginsberg - 1.0 hrs/wk

Form 990, Part XI, Line 5 - Other Changes in Net Assets Explanation

Unrealized investment loss in the amount \$18,995,354 and net loss for subsidiary activities in the amount of \$9,209,163 are on the WCS financial statement but is not included on Form 990 as recognized loss.

Investment expenses in the amount of \$2,541,786 is included in WCS financial statement, shown net of investment income. This transaction is included in Form 990 as investment expense on Part IX Statement of Functional Expenses, line item 11f.

**SCHEDULE R  
(Form 990)**Department of the Treasury  
Internal Revenue Service

Name of the organization

**Related Organizations and Unrelated Partnerships**

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

▶ Attach to Form 990.

▶ See separate instructions.

OMB No. 1545-0047

**2011****Open to Public  
Inspection**

Wildlife Conservation Society

Employer identification number  
13-1740011**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) Makira Carbon Company LLC 2300 Southern Blvd Bronx, New York NY 10460 24-4470986	conservatn	DE			WCS
(2) Tierra de Guanacos LLC 2300 Southern Blvd Bronx, New York NY 10460	conservatn	DE			Tierras LL
(3) Tierra de Truchas LLC 2300 Southern Blvd Bronx, New York NY 10460	conservatn	DE			Tierras LL
(4) Tierras LLC 2300 Southern Blvd Bronx, New York NY 10460	conservatn	DE			WCS
(5) Conservation Livelihoods Internatio 2300 Southern Blvd Bronx, New York NY 10460	livlihoods	DE			WCS

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) WCS Wildlife Conserv Soc Canada 720 Spadina Avenue Toronto CA M5S 2T9 85-4255882	Conservatn	CA			WCS	X	
(2) Zoological Kingdom, Inc. 2300 Southern Blvd Bronx NY 10460 13-7220020	Inactive	NY	501c3	7	WCS	X	
(3) Wild Lands Conservation Society 2300 Southern Blvd Bronx NY 10460 20-1262383	Inactive	DE	501c3	7	WCS	X	
(4) WCS Associacao Conservacao da Vida Rua Jardim Botânico 674 Rio de Janeiro Brazil BR 22 461	Conservatn	BR			WCS	X	
(5) WCS Europe ZXL Outer Circle London UK NW14RY	Conservatn	UK			WCS	X	

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

DAA WILDLIFE CONSERVATION SOCIETY  
EIN# 13-1740011

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2011**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.**

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

**Wildlife Conservation Society**

Employer identification number  
**13-1740011**

**Part I Identification of Disregarded Entities** (Complete if the organization answered "Yes" to Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) .....					
(2) .....					
(3) .....					
(4) .....					
(5) .....					

**Part II Identification of Related Tax-Exempt Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
(1) <b>Wildlife Conservation Soc Singapore 1 Raffles Place Singapore SN 48919</b>	<b>Conservatn</b>	<b>SN</b>			<b>WCS</b>	<b>X</b>	
(2) <b>Conservation Flight Association PO Box 4369 Dar-ts-Salaam TZ 35091</b>	<b>Aircraft</b>	<b>TZ</b>			<b>WCS</b>	<b>X</b>	
(3) .....							
(4) .....							
(5) .....							

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispro- portionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) .....												
(2) .....												
(3) .....												
(4) .....												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1) 182 Flight Corp 2300 Southern Blvd Bronx NY 10460 13-4120289	aircraft o	DE	WCS	C			100.000000
(2) Community Markets for Conserv Ltd No 26 Joseph Mwila Rd Rhodespark ZA 35091	conservtn	ZA	WCS	C			100.000000
(3) Wildlife Conserv & Science (Malaysi 7 Jalan Ridgeway Sarawak MY 93450	conservtn	MY	WCS	C			83.333333
(4) Tierra de Guanacos LLC Uno Limitada 2300 Southern Blvd Bronx CI 10460	conserv	CI	Trunch & Gu	C			100.000000

**Part III Identification of Related Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of- year assets	(h) Dispro- portionate alloc.?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
							Yes	No		Yes	No	
(1) .....												
(2) .....												
(3) .....												
(4) .....												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership
(1)Tierra de GuanacosLLC Dos Limitada 2300 Southern Blvd Bronx CI 10460	conserv	CI	Trunch & G	C			100.000000
(2)Wildlife Conservation Society - Ind 1669, 31st Cross, 16th Main Bangalore IN 560070	conserv	IN	WCS	C			100.000000
(3)Professional Housing Corporation 2300 Southern Blvd Bronx NY 10460 13-3546032	Real Estat	NY	WCS	C			100.000000
(4) .....							

**Part V Transactions With Related Organizations** (Complete if the organization answered "Yes" to Form 990, Part IV, line 34, 35, 35a, or 36.)

**Note.** Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.

	Yes	No
<b>1</b> During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
<b>a</b> Receipt of <b>(i)</b> interest <b>(ii)</b> annuities <b>(iii)</b> royalties or <b>(iv)</b> rent from a controlled entity		X
<b>b</b> Gift, grant, or capital contribution to related organization(s)	X	
<b>c</b> Gift, grant, or capital contribution from related organization(s)		X
<b>d</b> Loans or loan guarantees to or for related organization(s)	X	
<b>e</b> Loans or loan guarantees by related organization(s)		X
<b>f</b> Sale of assets to related organization(s)		X
<b>g</b> Purchase of assets from related organization(s)		X
<b>h</b> Exchange of assets with related organization(s)		X
<b>i</b> Lease of facilities, equipment, or other assets to related organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets from related organization(s)		X
<b>k</b> Performance of services or membership or fundraising solicitations for related organization(s)	X	
<b>l</b> Performance of services or membership or fundraising solicitations by related organization(s)		X
<b>m</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
<b>n</b> Sharing of paid employees with related organization(s)	X	
<b>o</b> Reimbursement paid to related organization(s) for expenses	X	
<b>p</b> Reimbursement paid by related organization(s) for expenses	X	
<b>q</b> Other transfer of cash or property to related organization(s)	X	
<b>r</b> Other transfer of cash or property from related organization(s)	X	

**2** If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds.

	(a) Name of other organization	(b) Transaction type (a-r)	(c) Amount involved	(d) Method of determining amount involved
(1)	WCS Wildlife Conserv Soc Canada	b	917,408	Fair Market Value
(2)	WCS Associacao Conservacao da Vida	b	1,150,000	Fair Market Value
(3)	Wildlife Conservation & Science (Ma	b	901,000	Fair Market Value
(4)	Wildlife Conservation Soc Singapore	b	60,000	Fair Market Value
(5)	WCS Europe	b	112,950	Fair Market Value
(6)	Community Markets for Conservation	b	83,000	Fair Market Value

**Part VI Unrelated Organizations Taxable as a Partnership** (Complete if the organization answered "Yes" to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under section 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	
(1) .....													
(2) .....													
(3) .....													
(4) .....													
(5) .....													
(6) .....													
(7) .....													
(8) .....													
(9) .....													
(10) .....													
(11) .....													

**Part VII Supplemental Information**

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

**Schedule R - Additional Information****Schedule R- Related Entities Descriptions and Additional Information**

The related entities described here have all been organized by WCS in order to carry out its tax-exempt, charitable, conservation mission. All of them are operated on a non-profit basis in furtherance of WCS's purposes.

The following briefly describes the entities listed in Schedule R:

Makira Carbon Company LLC, Conservation Livelihoods International LLC, and Tierras LLC are all single member limited liability companies formed in Delaware, of which the sole member is WCS, and which have officers who are employees of WCS. Makira was formed to carry on wildlife conservation in Madagascar through measures dealing with climate change. Conservation Livelihoods was formed to promote wildlife conservation and sustainable natural resource use in communities around the world through participation in the ownership and management of economic development enterprises that foster such ends and are compatible with the conservation and protection of the natural environment.

Tierra de Guanacos LLC and Tierras de Truchas LLC are Delaware limited liability companies, the sole member of which is Tierras LLC. The mission of all three of these companies is to carry on wildlife and land conservation in Chile, including through Tierra de Guanacos LLC Uno Limitada and Tierra de Guanacos LLC Dos Limitada. Each of the latter is a Chilean limited liability company that holds real property for wildlife conservation purposes in Chile, and each has its members Tierra de Guanacos LLC and Tierras de Truchas LLC.

Professional Housing Corporation is a not for profit corporation formed in Delaware with a single member, WCS, that was exempt as a title holding company under Section 501(c)(2) through November 15, 2010. It holds title to

**Part VII Supplemental Information**

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

real property for, and has directors and officers who are employees of WCS. 182 Flight Corp. is a not for profit corporation formed in Delaware, with a single member, WCS. In connection with WCS program activities, 182 Flight Corp holds aircraft for, and has directors and officers who are employees of WCS.

Wild Lands Conservation Society is a not for profit corporation formed in Delaware, with a single member, WCS, and is a public charity.

Zoological Kingdom Inc. is a not for profit corporation formed in New York by WCS and is a public charity.

Wildlife Conservation Society Canada is a not for profit tax exempt corporation formed in Canada, with a single member, WCS. It carries on wildlife conservation in Canada and has directors and officers who are employees of WCS.

WCS - Associacao Conservacao da Vida Silvestre is a civil association, not for profit and tax exempt, organized under the laws of the State of Rio de Janeiro, Brazil. It carries on wildlife conservation in Brazil and has WCS as a member and WCS employees on its governing body.

Wildlife Conservation and Science(Malaysia)BHD is a Malaysia company limited by guarantee, with members and directors who are employees of WCS, formed to protect wildlife and wild places in Malaysia.

Community Markets for Conservation Limited is a Zambian company limited by guarantee, the sole guarantors of which are Conservation Livelihoods International LLC and an employee of WCS, formed to promote wildlife conservation and sustainable natural resource use through rural agricultural development in Zambia that is compatible with the conservation and protection of the natural environment.

WCS Europe is a company limited by guarantee under the law of England and

**Part VII Supplemental Information**

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

Wales, the sole member of which is WCS, formed to protect and conserve the natural environment and its flora and fauna through the conservation and preservation of wildlife and wild places anywhere in the world. WCS Europe is a tax exempt charity in the United Kingdom.

Wildlife Conservation Society Singapore Limited is a public company limited by guarantee under Singapore law, the guarantors of which are WCS and employees of WCS, formed to protect and conserve the natural environment, in particular to (i) preserve wildlife and wild places and (ii) protect and conserve, care for and exhibit, animals and plants in zoological parks, gardens or other collections. WCS Singapore is a tax exempt charity in Singapore.

Wildlife Conservation Society-India is a company limited by guarantee under Indian law formed for the protection and conservation of the natural environment, its flora and fauna and in particular the preservation of wildlife and wild places, the conduct and support of scientific, conservation and veterinary research regarding wildlife and wild places, the management and care of wildlife and the education and instruction of the public regarding the protection and conservation of the natural environment. WCS India's guarantors and directors include employees of WCS.

Conservation Flight Association is a company limited by guarantee under Tanzanian law, formed to support the conduct of research and other programs and projects for the protection and conservation of wildlife and wild places, in particular by providing air transport services for such programs and projects.