

Form **990**

Department of the Treasury  
Internal Revenue Service

# Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

- Do not enter Social Security numbers on this form as it may be made public.
- Information about Form 990 and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

Open to Public Inspection

**A** For the 2013 calendar year, or tax year beginning 07/01, 2013, and ending 06/30, 2014

<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)	Room/suite	<b>G</b> Gross receipts \$ 404,611,228.
	2300 SOUTHERN BLVD		
City or town, state or province, country, and ZIP or foreign postal code BRONX, NY 10460		<b>F</b> Name and address of principal officer: DR. CRISTIAN SAMPER PRES & CEO 2300 SOUTHERN BLVD BRONX, NY 10460	
<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>H(a)</b> Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
<b>J</b> Website: WWW.WCS.ORG		<b>H(b)</b> Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>K</b> Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> Other		<b>H(c)</b> Group exemption number	
<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: <u>THE WILDLIFE CONSERVATION SOCIETY (WCS) SAVES WILDLIFE AND WILD PLACES WORLDWIDE THROUGH SCIENCE, CONSERVATION ACTION, EDUCATION, AND INSPIRING PEOPLE TO VALUE NATURE.</u>		
	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 2013 (Part V, line 2a)	2,856
	6	Total number of volunteers (estimate if necessary)	648
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	6,444,987
7b	Net unrelated business taxable income from Form 990-T, line 34	1,124,065	
<b>Revenue</b>	8	Contributions and grants (Part VIII, line 1h)	Prior Year: 124,667,120. Current Year: 165,318,984.
	9	Program service revenue (Part VIII, line 2g)	71,051,484. 64,070,132.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	4,090,271. 11,853,416.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	12,193,561. 12,437,658.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	212,002,436. 253,680,190.
<b>Expenses</b>	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	10,783,599. 9,865,537.
	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)	97,253,287. 101,357,645.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	782,465. 1,003,631.
	16b	Total fundraising expenses (Part IX, column (D), line 25)	9,577,402.
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	109,542,602. 116,891,739.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	218,361,953. 229,118,552.
<b>Net Assets or Fund Balances</b>	19	Revenue less expenses. Subtract line 18 from line 12	-6,359,517. 24,561,638.
	20	Total assets (Part X, line 16)	Beginning of Current Year: 839,099,523. End of Year: 969,992,598.
	21	Total liabilities (Part X, line 26)	158,889,784. 223,647,281.
	22	Net assets or fund balances. Subtract line 21 from line 20	680,209,739. 746,345,317.

**Part II Signature Block**

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

**Sign Here**

Signature of officer: Robert Calamo Date: 5/14/2015

Type or print name and title: ROBERT CALAMO VP AND COMPTRROLLER

**Paid Preparer Use Only**

Print/Type preparer's name: MARY-EVELYN ANTONETTI Preparer's signature: Mary Evelyn Antonetti Date: 5/11/2015 Check  if self-employed PTIN: P00431862

Firm's name: KPMG 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.

Form **990** (2013)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

THE WILDLIFE CONSERVATION SOCIETY (WCS) SAVES WILDLIFE AND WILD PLACES WORLDWIDE THROUGH SCIENCE, CONSERVATION ACTION, EDUCATION, AND INSPIRING PEOPLE TO VALUE NATURE.

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

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

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

4a (Code: ) (Expenses \$ 90,149,041. including grants of \$ 9,865,537. ) (Revenue \$ 20,405,276. )

GLOBAL CONSERVATION AND HEALTH PROGRAMS ARE FUNDED PRIMARILY BY RESTRICTED GIFTS, GRANTS AND CONTRACTS FROM PRIVATE INDIVIDUALS, FOUNDATIONS, FEDERAL AGENCIES AND OTHER SOURCES. ACCOMPLISHMENTS CONTINUED ON SCHEDULE O.

4b (Code: ) (Expenses \$ 74,526,357. including grants of \$ ) (Revenue \$ 23,384,876. )

BRONX ZOO AND NEW YORK AQUARIUM: TOTAL ATTENDANCE AT ALL FIVE WCS FACILITIES WAS 3,992,176. AT THE BRONX ZOO ATTENDANCE TOTALLED 1,862,926 AND AT THE NEW YORK AQUARIUM ATTENDANCE TOTALLED 506,044. ACCOMPLISHMENTS CONTINUED SCHEDULE O

4c (Code: ) (Expenses \$ 23,613,483. including grants of \$ ) (Revenue \$ 12,644,773. )

CITY ZOOS: CENTRAL PARK/PROSPECT PARK AND QUEENS ZOOS; CENTRAL PARK ZOO (CPZ) ATTENDANCE 1,016,259; PROSPECT PARK ZOO (PPZ) ATTENDANCE 305,802; QUEENS ZOO ATTENDANCE 301,145. ACCOMPLISHMENTS CONTINUED ON SCHEDULE O

4d Other program services (Describe in Schedule O.) (Expenses \$ 134,921. including grants of \$ ) (Revenue \$ 7,635,207. )

4e Total program service expenses 188,423,802.

Part IV Checklist of Required Schedules

Table with 3 columns: Question number, Yes, No. Rows include questions 1 through 20b regarding organizational requirements and financial reporting.

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

	Yes	No
<b>21</b> Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II . . . . .</i>	X	
<b>22</b> Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III . . . . .</i>	X	
<b>23</b> Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J . . . . .</i>	X	
<b>24 a</b> Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a. . . . .</i>	X	
<b>24 b</b> Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . . . .		X
<b>24 c</b> 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
<b>24 d</b> Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . . . .		X
<b>25 a</b> <b>Section 501(c)(3) and 501(c)(4) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I. . . . .</i>		X
<b>25 b</b> Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I . . . . .</i>		X
<b>26</b> Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payable to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II. . . . .		X
<b>27</b> Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III. . . . .</i>		X
<b>28</b> 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):		
<b>a</b> A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>		X
<b>b</b> A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>		X
<b>c</b> An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV. . . . .</i>		X
<b>29</b> Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M . . . . .</i>	X	
<b>30</b> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M . . . . .</i>		X
<b>31</b> Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I. . . . .</i>		X
<b>32</b> Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II . . . . .</i>		X
<b>33</b> Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I . . . . .</i>	X	
<b>34</b> Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1 . . . . .</i>	X	
<b>35 a</b> Did the organization have a controlled entity within the meaning of section 512(b)(13)? . . . . .	X	
<b>b</b> If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2. . . . .</i>	X	
<b>36</b> <b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 . . . . .</i>	X	
<b>37</b> Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI. . . . .</i>		X
<b>38</b> Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O . . . . .	X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Table with columns for line numbers (1a-14b), descriptions of questions, and Yes/No response boxes. Includes entries for Form 1096, Form W-2G, Form W-3, Form 990-T, Form 8886-T, Form 8282, Form 8899, Form 1098-C, Form 4966, Form 720, and Form 702.

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 or note to any line in this Part VI [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a (41), 1b (40), 2 (X), 3 (X), 4 (X), 5 (X), 6 (X), 7a (X), 7b (X), 8a (X), 8b (X), 9 (X).

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

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

Section C. Disclosure

- 17 List the states with which a copy of this Form 990 is required to be filed ATTACHMENT 2
18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
[X] Own website [X] Another's website [X] Upon request [ ] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: ROBERT CALAMO 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 or note to any line in this Part VII.

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) WARD WOODS CHAIRMAN	5.00	X						0	0	0
(2) WELLINGTON DENAHAN TRUSTEE FROM 2/25/14	1.00	X						0	0	0
(3) ANTONIA M. GRUMBACH VICE CHAIR & TRUSTEE	5.00	X						0	0	0
(4) BRIAN J HEIDTKE TREASURER	5.00	X						0	0	0
(5) ANDREW H TISCH SECRETARY	5.00	X						0	0	0
(6) HON. BILL DE BLASIO EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(7) SCOTT STRINGER EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(8) MELISSA MARK-VIVERITO EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(9) MITCHELL SILVER EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(10) TOM FINKELPEARL EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(11) RUBEN DIAZ JR EX OFFICIO TRUSTEE	.50	X						0	0	0
(12) ERIC ADAMS EX OFFICIO TRUSTEE FR. 1/1/14	.50	X						0	0	0
(13) THOMAS EDELMAN TRUSTEE FROM 6/17/14	1.00	X						0	0	0
(14) FREDERICK W BEINECKE TRUSTEE	1.00	X						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
15) ELEANOR BRIGGS TRUSTEE	1.00	X					0	0	0	
16) DAVID B. SCHIFF TRUSTEE FROM 6/17/14	1.00	X					0	0	0	
17) C DIANE CHRISTENSEN TRUSTEE	2.00	X					0	0	0	
18) JONATHAN L COHEN TRUSTEE	2.00	X					0	0	0	
19) KATHERINE L DOLAN TRUSTEE	2.00	X					0	0	0	
20) CHRISTOPHER J. ELLIMAN TRUSTEE	1.00	X					0	0	0	
21) THOMAS DAN FRIEDKIN TRUSTEE	1.00	X					0	0	0	
22) BRADLEY L GOLDBERG TRUSTEE	1.00	X					0	0	0	
23) PAUL A GOULD TRUSTEE	2.00	X					0	0	0	
24) JONATHAN D GREEN TRUSTEE	1.00	X					0	0	0	
25) JUDITH H HAMILTON TRUSTEE	2.00	X					0	0	0	
<b>1b Sub-total</b>							0	0	0	
<b>c Total from continuation sheets to Part VII, Section A</b>							4,796,023.	0	1,596,495.	
<b>d Total (add lines 1b and 1c)</b>							4,796,023.	0	1,596,495.	

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **121**

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
ATTACHMENT 3		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **45**

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 26) JOHN N IRWIN III TRUSTEE	5.00	X						0	0	0
( 27) ROSINA M. BIERBAUM TRUSTEE	1.00	X						0	0	0
( 28) MRS. GORDON B. PATTEE TRUSTEE, VC UNTIL 2/25/14	5.00	X						0	0	0
( 29) ANITA L KEEFE TRUSTEE	1.00	X						0	0	0
( 30) AMBROSE K. MONELL TRUSTEE	2.00	X						0	0	0
( 31) ADEBAYO OGUNLESI TRUSTEE FROM 6/17/14	1.00	X						0	0	0
( 32) ALEJANDRO SANTO DOMINGO TRUSTEE	1.00	X						0	0	0
( 33) OGDEN PHIPPS II TRUSTEE	1.00	X						0	0	0
( 34) DAVID T SCHIFF TRUSTEE UNTIL 10/29/13	1.00	X						0	0	0
( 35) WALTER SEDGWICK TRUSTEE	2.00	X						0	0	0
( 36) CAROLINE N SIDNAM TRUSTEE	2.00	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 of reportable compensation from the organization **▶** 121

	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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		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? <i>If "Yes," complete Schedule J for such individual</i> . . . . .	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? <i>If "Yes," complete Schedule J for such person</i> . . . . .		X

**Section B. Independent Contractors**

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 37) ROSELINDE TORRES TRUSTEE	1.00	X					0	0	0	
( 38) BARBARA HRBEK ZUCKER TRUSTEE	1.00	X					0	0	0	
( 39) AUDREY CHOI TRUSTEE	1.00	X					0	0	0	
( 40) GORDON E DYAL TRUSTEE	1.00	X					0	0	0	
( 41) HAMILTON JAMES TRUSTEE	1.00	X					0	0	0	
( 42) KATHERINE SHERRILL TRUSTEE FROM 10/29/13	1.00	X					0	0	0	
( 43) HON MICHAEL R BLOOMBERG EX OFF. TRUST. UNTIL 12/31/14	.50	X					0	0	0	
( 44) JOHN C LIU EX OFF. TRUST. UNITL 12/31/14	.50	X					0	0	0	
( 45) CHRISTINE QUINN EX OFF. TRUST. UNTIL 12/31/14	.50	X					0	0	0	
( 46) VERONICA M. WHITE EX OFF. TRUST. UNTIL 12/31/14	.50	X					0	0	0	
( 47) DR KATE D LEVIN EX OFF. TRUST. UNTIL 12/31/14	.50	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 of reportable compensation from the organization **▶** 121

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

**Section B. Independent Contractors**

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
48) MARTY MARKOWITZ EX OFF. TRUST. UNTIL 12/31/14	.50	X					0	0	0	
49) CRISTIAN SAMPER PRESIDENT & CEO	40.00 0	X		X			798,442.	0	164,697.	
50) JOHN F CALVELLI EVP PUBLIC AFFAIRS	40.00 .30			X			364,670.	0	199,685.	
51) PATRICIA CALABRESE EVP & CFO	40.00 .30			X			392,752.	0	208,054.	
52) JOHN G ROBINSON EVP CONSERVATION	40.00 .20			X			374,750.	0	229,002.	
53) BERTINA CECCARELLI EVP GLOBAL RESOURCES	40.00 0			X			336,017.	0	133,871.	
54) ROBERT A MOSKOVITZ SVP BUSINESS	40.00 0			X			285,271.	0	79,230.	
55) ROBERT CALAMO VP & COMPROLLER	40.00 .30			X			258,727.	0	85,675.	
56) JAMES J BREHENY EVP, DIRECT ZOOS	40.00 0			X			296,071.	0	90,799.	
57) JOSHUA R GINSBERG SVP GLOBAL	40.00 1.00			X			205,155.	0	51,477.	
58) LAURA STOLZENTHALER VP BUDGET & FIN PLAN	40.00 0			X			196,088.	0	24,592.	
<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 of reportable compensation from the organization **▶ 121**

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

**Section B. Independent Contractors**

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

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

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

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
( 59) CHRISTOPHER J MCKENZIE SVP GENERAL COUNSEL	40.00 .50			X				309,351.	0	78,417.
( 60) HERMAN SMITH VP HUMAN RESOURCES	40.00 0					X		244,316.	0	67,969.
( 61) MARY DIXON VP COMMUNICATIONS & PUBLIC AFF	40.00 0					X		202,370.	0	41,895.
( 62) SEAN COVER DIRECTOR OF TREASURY	40.00 0					X		169,868.	0	48,052.
( 63) SUSAN CHIN VP PLANNING & DESIGN	40.00 0					X		168,408.	0	33,621.
( 64) PATRICK THOMAS VP & GENERAL CURATOR, ASS DIR	40.00 0					X		193,767.	0	59,459.
<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 of reportable compensation from the organization ▶ 121

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

**Section B. Independent Contractors**

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

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

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

**Part VIII Statement of Revenue**

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
<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>	3,063,644.			
	<b>c</b> Fundraising events . . . . .	<b>1c</b>	1,156,603.			
	<b>d</b> Related organizations . . . . .	<b>1d</b>				
	<b>e</b> Government grants (contributions) . .	<b>1e</b>	79,529,749.			
	<b>f</b> All other contributions, gifts, grants, and similar amounts not included above .	<b>1f</b>	81,568,988.			
	<b>g</b> Noncash contributions included in lines 1a-1f: \$		2,920,092.			
	<b>h Total.</b> Add lines 1a-1f . . . . .		165,318,984.			
<b>Program Service Revenue</b>		<b>Business Code</b>				
	<b>2a</b> GATE, EXHIBIT ADMISSIONS	713990	34,471,205.	34,471,205.		
	<b>b</b> FEES AND CONTRACTS FROM GOVER	541700	16,432,509.	16,432,509.		
	<b>c</b> EDUCATION REVENUES	611710	2,281,465.	2,281,465.		
	<b>d</b> COLLECTION DEACCESSIONS	900099	19,171.	19,171.		
	<b>e</b> MEMBERSHIP DUES	900099	10,865,782.	10,865,782.		
	<b>f</b> All other program service revenue . . . . .					
<b>g Total.</b> Add lines 2a-2f . . . . .		64,070,132.				
<b>Other Revenue</b>	<b>3</b> Investment income (including dividends, interest, and other similar amounts) . . . . .		2,405,912.			2,405,912.
	<b>4</b> Income from investment of tax-exempt bond proceeds . . .		0			
	<b>5</b> Royalties . . . . .		7,768.			7,768.
		(i) Real	(ii) Personal			
	<b>6a</b> Gross rents . . . . .					
	<b>b</b> Less: rental expenses . . . . .					
	<b>c</b> Rental income or (loss) . . . . .					
	<b>d</b> Net rental income or (loss) . . . . .			0		
		(i) Securities	(ii) Other			
	<b>7a</b> Gross amount from sales of assets other than inventory	142,476,626.				
	<b>b</b> Less: cost or other basis and sales expenses . . . . .	133,029,122.				
	<b>c</b> Gain or (loss) . . . . .	9,447,504.				
	<b>d</b> Net gain or (loss) . . . . .			9,447,504.	6,906,305.	2,541,199.
	<b>8a</b> Gross income from fundraising events (not including \$ 1,156,603. of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>a</b>	1,468,119.			
	<b>b</b> Less: direct expenses . . . . .	<b>b</b>	1,053,114.			
<b>c</b> Net income or (loss) from fundraising events . . . . .			415,005.		415,005.	
<b>9a</b> Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>a</b>					
<b>b</b> Less: direct expenses . . . . .	<b>b</b>					
<b>c</b> Net income or (loss) from gaming activities . . . . .			0			
<b>10a</b> Gross sales of inventory, less returns and allowances . . . . .	<b>a</b>	24,954,341.				
<b>b</b> Less: cost of goods sold . . . . .	<b>b</b>	16,848,802.				
<b>c</b> Net income or (loss) from sales of inventory . . . . .			8,105,539.	-207,614.	8,313,153.	
<b>Miscellaneous Revenue</b>		<b>Business Code</b>				
<b>11a</b> MISCELLANEOUS REVENUES	611710		3,232,142.		3,232,142.	
<b>b</b> SPONSORSHIPS	900099		930,908.		930,908.	
<b>c</b> BROOKSIDE CPG	900099		2,521.	2,521.		
<b>d</b> All other revenue . . . . .	900099		-256,225.	-256,225.		
<b>e Total.</b> Add lines 11a-11d . . . . .			3,909,346.			
<b>12 Total revenue.</b> See instructions . . . . .			253,680,190.	64,070,132.	6,444,987.	17,846,087.

**Part IX Statement of Functional Expenses**

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

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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21 .	2,193,769.	2,193,769.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22 . . . . .	168,475.	168,475.		
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16 . . . . .	7,503,293.	7,503,293.		
4 Benefits paid to or for members . . . . .	0			
5 Compensation of current officers, directors, trustees, and key employees . . . . .	4,903,587.	1,516,129.	2,956,290.	431,168.
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) . . . . .	0			
7 Other salaries and wages . . . . .	82,362,085.	67,514,165.	10,277,521.	4,570,399.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	6,935,380.	4,995,171.	1,087,117.	853,092.
9 Other employee benefits . . . . .	2,650,585.	1,994,878.	605,332.	50,375.
10 Payroll taxes . . . . .	4,506,008.	3,438,563.	735,186.	332,259.
11 Fees for services (non-employees):				
a Management . . . . .	0			
b Legal . . . . .	2,317,924.	1,702,066.	615,858.	
c Accounting . . . . .	427,192.	87,192.	340,000.	
d Lobbying . . . . .	20,000.		20,000.	
e Professional fundraising services. See Part IV, line 17.	1,003,631.			1,003,631.
f Investment management fees . . . . .	3,448,988.		3,448,988.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	48,631,339.	45,489,987.	2,928,247.	213,105.
12 Advertising and promotion . . . . .	2,639,490.	1,181,024.	1,424,397.	34,069.
13 Office expenses . . . . .	3,906,334.	2,735,413.	290,905.	880,016.
14 Information technology . . . . .	1,557,365.	990,336.	467,485.	99,544.
15 Royalties . . . . .	0			
16 Occupancy . . . . .	8,553,308.	8,460,199.	93,109.	
17 Travel . . . . .	11,048,050.	10,399,894.	486,763.	161,393.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0			
19 Conferences, conventions, and meetings . . . . .	1,606,320.	1,557,339.	29,993.	18,988.
20 Interest . . . . .	2,641,653.		2,641,653.	
21 Payments to affiliates . . . . .	0			
22 Depreciation, depletion, and amortization . . . . .	16,003,886.	14,051,036.	1,894,224.	58,626.
23 Insurance . . . . .	3,563,093.	3,434,115.	128,978.	
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 <u>FOOD AND FORAGE</u> . . . . .	2,163,801.	2,163,801.		
b <u>REPAIRS AND MAINTENANCE</u> . . . . .	4,022,926.	3,951,350.	71,576.	
c <u>COLLECTION ACCESSIONS</u> . . . . .	345,047.	345,047.		
d <u>DIRECT MAIL &amp; PRINTING</u> . . . . .	839,086.			839,086.
e All other expenses . . . . .	3,155,937.	2,550,560.	573,726.	31,651.
<b>25 Total functional expenses.</b> Add lines 1 through 24e	229,118,552.	188,423,802.	31,117,348.	9,577,402.
<b>26 Joint costs.</b> 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) . . . . .	0			

**Part X Balance Sheet**

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

		(A) Beginning of year		(B) End of year
<b>Assets</b>	<b>1</b> Cash - non-interest-bearing	25,087,991.	<b>1</b>	41,349,060.
	<b>2</b> Savings and temporary cash investments	30,358,831.	<b>2</b>	28,129,507.
	<b>3</b> Pledges and grants receivable, net	98,483,984.	<b>3</b>	112,490,805.
	<b>4</b> Accounts receivable, net	5,612,289.	<b>4</b>	3,617,072.
	<b>5</b> Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L	0	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use	2,166,037.	<b>8</b>	2,437,766.
	<b>9</b> Prepaid expenses and deferred charges	4,311,173.	<b>9</b>	6,117,154.
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	<b>10a</b> 476,930,081.		
	<b>b</b> Less: accumulated depreciation	<b>10b</b> 229,266,678.	228,976,041.	<b>10c</b> 247,663,403.
	<b>11</b> Investments - publicly traded securities	30,446,039.	<b>11</b>	34,715,505.
	<b>12</b> Investments - other securities. See Part IV, line 11	390,190,202.	<b>12</b>	437,925,523.
	<b>13</b> Investments - program-related. See Part IV, line 11	0	<b>13</b>	0
	<b>14</b> Intangible assets	0	<b>14</b>	0
	<b>15</b> Other assets. See Part IV, line 11	23,466,936.	<b>15</b>	55,546,803.
<b>16 Total assets.</b> Add lines 1 through 15 (must equal line 34)	839,099,523.	<b>16</b>	969,992,598.	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses	32,467,373.	<b>17</b>	37,143,334.
	<b>18</b> Grants payable	0	<b>18</b>	0
	<b>19</b> Deferred revenue	0	<b>19</b>	0
	<b>20</b> Tax-exempt bond liabilities	92,446,641.	<b>20</b>	151,708,623.
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D	0	<b>21</b>	0
	<b>22</b> Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L	0	<b>22</b>	0
	<b>23</b> Secured mortgages and notes payable to unrelated third parties	0	<b>23</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties	0	<b>24</b>	0
	<b>25</b> 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	33,975,770.	<b>25</b>	34,795,324.
	<b>26 Total liabilities.</b> Add lines 17 through 25	158,889,784.	<b>26</b>	223,647,281.
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow SFAS 117 (ASC 958), check here</b> <input checked="" type="checkbox"/> <b>and complete lines 27 through 29, and lines 33 and 34.</b>			
	<b>27</b> Unrestricted net assets	281,492,738.	<b>27</b>	309,945,407.
	<b>28</b> Temporarily restricted net assets	170,758,687.	<b>28</b>	188,115,639.
	<b>29</b> Permanently restricted net assets	227,958,314.	<b>29</b>	248,284,271.
	<b>Organizations that do not follow SFAS 117 (ASC 958), check here</b> <input type="checkbox"/> <b>and complete lines 30 through 34.</b>			
	<b>30</b> Capital stock or trust principal, or current funds		<b>30</b>	
	<b>31</b> Paid-in or capital surplus, or land, building, or equipment fund		<b>31</b>	
	<b>32</b> Retained earnings, endowment, accumulated income, or other funds		<b>32</b>	
	<b>33</b> Total net assets or fund balances	680,209,739.	<b>33</b>	746,345,317.
	<b>34</b> Total liabilities and net assets/fund balances	839,099,523.	<b>34</b>	969,992,598.

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	253,680,190.
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	229,118,552.
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	24,561,638.
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	<b>4</b>	680,209,739.
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	49,082,320.
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain in Schedule O)	<b>9</b>	-7,508,380.
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	<b>10</b>	746,345,317.

**Part XII Financial Statements and Reporting**

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

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

	Yes	No
<b>2a</b>		X
<b>2b</b>	X	
<b>2c</b>	X	
<b>3a</b>	X	
<b>3b</b>	X	

Form **990** (2013)

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

**Public Charity Status and Public Support**  
Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Information about Schedule A (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

<b>Name of the organization</b> WILDLIFE CONSERVATION SOCIETY	<b>Employer identification number</b> 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-Non-functionally integrated
- e  By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
  - (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? 

	Yes	No
11g(i)		
  - (ii) A family member of a person described in (i) above? 

	Yes	No
11g(ii)		
  - (iii) A 35% controlled entity of a person described in (i) or (ii) above? 

	Yes	No
11g(iii)		
- h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(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) 2013

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

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Tax revenues levied for the organization's benefit; 3 The value of services or facilities furnished by a governmental unit; 4 Total; 5 The portion of total contributions by each person; 6 Public support.

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 7 Amounts from line 4; 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 9 Net income from unrelated business activities; 10 Other income; 11 Total support; 12 Gross receipts from related activities; 13 First five years.

Section C. Computation of Public Support Percentage

Table with 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2013 (86.38%); 15 Public support percentage from 2012 Schedule A, Part II, line 14 (85.37%); 16a 33 1/3% support test - 2013; 16b 33 1/3% support test - 2012; 17a 10%-facts-and-circumstances test - 2013; 17b 10%-facts-and-circumstances test - 2012; 18 Private foundation.

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

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 1 Gifts, grants, contributions, and membership fees received; 2 Gross receipts from admissions, merchandise sold or services performed; 3 Gross receipts from activities that are not an unrelated trade or business; 4 Tax revenues levied for the organization's benefit; 5 The value of services or facilities furnished by a governmental unit; 6 Total; 7a Amounts included on lines 1, 2, and 3 received from disqualified persons; 7b Amounts included on lines 2 and 3 received from other than disqualified persons; 7c Add lines 7a and 7b; 8 Public support (Subtract line 7c from line 6).

Section B. Total Support

Table with 7 columns: (a) 2009, (b) 2010, (c) 2011, (d) 2012, (e) 2013, (f) Total. Rows include: 9 Amounts from line 6; 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources; 10b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975; 10c Add lines 10a and 10b; 11 Net income from unrelated business activities not included in line 10b; 12 Other income. Do not include gain or loss from the sale of capital assets; 13 Total support. (Add lines 9, 10c, 11, and 12.); 14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here.

Section C. Computation of Public Support Percentage

Table with 3 columns: Description, 2013, 2012. Row 15: Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)). Row 16: Public support percentage from 2012 Schedule A, Part III, line 15.

Section D. Computation of Investment Income Percentage

Table with 3 columns: Description, 2013, 2012. Row 17: Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)). Row 18: Investment income percentage from 2012 Schedule A, Part III, line 17.

19a 33 1/3% support tests - 2013. 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

19b 33 1/3% support tests - 2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

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

ATTACHMENT 1

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2009	2010	2011	2012	2013	TOTAL
MISCELLANEOUS REVENUE	1,441,027.	1,318,658.	2,018,056.	5,648,251.	3,232,142.	13,658,134.
SPONSORSHIP, LICENSING, ROYALT	1,590,011.	1,363,245.	1,649,220.	726,205.	930,908.	6,259,589.
SPECIAL EVENTS REVENUES - GROS	1,395,738.	1,412,337.	1,662,528.	1,524,054.	1,468,119.	7,462,776.
<b>TOTALS</b>	<u>4,426,776.</u>	<u>4,094,240.</u>	<u>5,329,804.</u>	<u>7,898,510.</u>	<u>5,631,169.</u>	<u>27,380,499.</u>

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

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**  
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
 ▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Department of the Treasury  
Internal Revenue Service

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

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

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

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

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

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

Name of organization <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)	-----			

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

Schedule C (Form 990 or 990-EZ) 2013

**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) . . . . .	67,603.													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	202,810.													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .	270,413.													
<b>d</b>	Other exempt purpose expenditures . . . . .	225,399,152.													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	225,669,565.													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	250,000.													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0	0												
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0	0												
<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) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000.
<b>c</b> Total lobbying expenditures	680,978.	470,395.	224,469.	270,413.	1,646,255.
<b>d</b> Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
<b>f</b> Grassroots lobbying expenditures	170,244.	117,599.	56,117.	67,603.	411,563.

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

Table with 3 main columns: Description, (a) Yes/No, and (b) Amount. Rows include questions about lobbying activities like influencing legislation, using volunteers, paid staff, media, mailings, publications, grants, and direct contact with legislators.

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

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

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

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

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, line 2; and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

**Part IV** Supplemental Information (continued)

SCHEDULE C, PART I-A, LINE 1

GRASSROOTS LOBBYING WCS CONDUCTS SEVERAL CAMPAIGNS ON FEDERAL LEGISLATION REGARDING WILDLIFE CONSERVATION SOCIETY PRIORITIES, 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. 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)

Supplemental Financial Statements

OMB No. 1545-0047

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.

2013

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Open to Public Inspection

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

Name of the organization: WILDLIFE CONSERVATION SOCIETY; Employer identification number: 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 1-4 for totals, 5-6 for questions about donor advisement.

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

Questions 1-9 regarding conservation easements, including checkboxes for types of easements and a table for held easements at the end of the tax year.

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.

Questions 1a-1b and 2 regarding collections of art and historical treasures, including amounts for revenues and assets.

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

- 3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
a Public exhibition
b Scholarly research
c Preservation for future generations
d Loan or exchange programs
e Other
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

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?
b If "Yes," explain the arrangement in Part XIII and complete the following table:

Table with 2 columns: Description, Amount. Rows: 1c Beginning balance, 1d Additions during the year, 1e Distributions during the year, 1f Ending balance.

- 2a Did the organization include an amount on Form 990, Part X, line 21?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII.

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

Table with 6 columns: (a) Current year, (b) Prior year, (c) Two years back, (d) Three years back, (e) Four years back. Rows: 1a Beginning of year balance, 1b Contributions, 1c Net investment earnings, gains, and losses, 1d Grants or scholarships, 1e Other expenditures for facilities and programs, 1f Administrative expenses, 1g End of year balance.

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

- a Board designated or quasi-endowment 35.7537 %
b Permanent endowment 52.4397 %
c Temporarily restricted endowment 11.8066 %
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:

Table with 2 columns: Yes, No. Rows: 3a(i) unrelated organizations, 3a(ii) related organizations, 3b.

- (i) unrelated organizations
(ii) related organizations
b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?
4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Table with 5 columns: (a) Cost or other basis (investment), (b) Cost or other basis (other), (c) Accumulated depreciation, (d) Book value. Rows: 1a Land, 1b Buildings, 1c Leasehold improvements, 1d Equipment, 1e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c)).

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely-held equity interests . . . . .		
(3) Other		
(A) MULTI ASSET CLASS	260,513,416.	FMV
(B) EQUITY/EQUITY FUNDS	95,335,125.	FMV
(C) ALTERNATIVE INVESTMENTS	43,648,758.	FMV
(D) NATURAL RESOURCES	9,193,492.	FMV
(E) SHORT TERM INVESTMENTS	29,234,732.	FMV
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) ▶	437,925,523.	

**Part VIII Investments - Program Related.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

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

**Part IX Other Assets.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) AMOUNTS HELD IN TRUST BY OTHER	2,109,321.
(2) FUNDS HELD BY BOND TRUSTEES	53,437,481.
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶	55,546,802.

**Part X Other Liabilities.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) POST RETIREMENT BENEFIT OBLIGATION	31,160,698.
(3) ANNUITY LIABILITY	3,634,626.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	34,795,324.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 253,680,190.

**Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.**

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 229,118,552.

**Part XIII Supplemental Information.**

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

SEE PAGE 5

**Part XIII** Supplemental Information (continued)

## 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 FURTHERING THE OVERALL MISSION OF WCS.

## SCHEDULE D, PART XI, LINE 2D

POST RETIREMENT RELATED EXPENSES	( 1,101,002)
RESTAURANT, MERCHANDISE	16,848,802
FOREIGN SUBSIDIARIES INCOME	4,994,171
US SUBSIDIARIES INCOME	63,600
ROUNDING	1
	-----
TOTAL	20,805,572

## SCHEDULE D, PART XI, LINE 4B

CAPITAL GAIN FROM K-1	6,906,305
ORDINARY LOSS FROM K-1	(253,904)
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TOTAL	6,652,601

**Part XIII** Supplemental Information (continued)

SCHEDULE D PART XII LINE 2D

RESTAURANT, MERCHANDISE EXP	16,915,743
FOREIGN SUBSIDIARIES EXP	5,421,568
US SUBSIDIARIES EXP	97,293
	<hr/>
	22,434,604

SCHEDULE D, PART XII, LINE 4B

PARKING EXPENSE	322,386
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**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2013**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.
- ▶ Attach to Form 990. ▶ See separate instructions.
- ▶ Information about Schedule F (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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" on 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>(1)</b> CENTRAL AMERICA/CARIBBEAN	4.	75.	PROGRAM SERVICES	CONSERVATION PROGRAM	3,814,205.
<b>(2)</b> SOUTH AMERICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	1,717,220.
<b>(3)</b> SUB-SAHARAN AFRICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	2,496,693.
<b>(4)</b> NORTH AMERICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	383,948.
<b>(5)</b> EUROPE	2.	4.	PROGRAM SERVICES	CONSERVATION PROGRAM	62,093.
<b>(6)</b> EAST ASIA AND THE PACIFIC	35.	488.	PROGRAM SERVICES	CONSERVATION PROGRAM	15,323,496.
<b>(7)</b> RUSSIA/INDEPENDENT STATES	3.	18.	PROGRAM SERVICES	CONSERVATION PROGRAM	1,000,253.
<b>(8)</b> SOUTH AMERICA	19.	115.	PROGRAM SERVICES	CONSERVATION PROGRAM	8,569,085.
<b>(9)</b> SOUTH ASIA	6.	126.	PROGRAM SERVICES	CONSERVATION PROGRAM	2,565,682.
<b>(10)</b> SUB-SAHARAN AFRICA	49.	764.	PROGRAM SERVICES	CONSERVATION PROGRAM	30,671,459.
<b>(11)</b> CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		69,426,000.
<b>(12)</b> CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	445,158.
<b>(13)</b> EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	1,098,671.
<b>(14)</b> EUROPE			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	373,461.
<b>(15)</b> NORTH AMERICA			PROGRAM SERVICES	CONSERVATION PROGRAM	21,865,144.
<b>(16)</b> RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	10,005.
<b>(17)</b> SOUTH ASIA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	977,936.
<b>3a</b> Sub-total . . . . .	118.	1,590.			160,800,509.
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c</b> Totals (add lines 3a and 3b)	118.	1,590.			160,800,509.

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

Schedule F (Form 990) 2013

**Part II** Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who 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)			CENT. AMERICA/CARIBBEAN	CONSERVATION	97,458.	WIRE/CHECK			
(2)			CENT. AMERICA/CARIBBEAN	CONSERVATION	70,563.	WIRE/CHECK			
(3)			CENT. AMERICA/CARIBBEAN	CONSERVATION	138,844.	WIRE/CHECK			
(4)			CENT. AMERICA/CARIBBEAN	CONSERVATION	7,000.	WIRE/CHECK			
(5)			CENT. AMERICA/CARIBBEAN	CONSERVATION	44,783.	WIRE/CHECK			
(6)			CENT. AMERICA/CARIBBEAN	CONSERVATION	49,783.	WIRE/CHECK			
(7)			CENT. AMERICA/CARIBBEAN	CONSERVATION	34,662.	WIRE/CHECK			
(8)			EAST ASIA/PACIFIC	CONSERVATION	44,118.	WIRE/CHECK			
(9)			EAST ASIA/PACIFIC	CONSERVATION	66,666.	WIRE/CHECK			
(10)			EAST ASIA/PACIFIC	CONSERVATION	41,250.	WIRE/CHECK			
(11)			EAST ASIA/PACIFIC	CONSERVATION	320,040.	WIRE/CHECK			
(12)			EAST ASIA/PACIFIC	CONSERVATION	41,883.	WIRE/CHECK			
(13)			EAST ASIA/PACIFIC	CONSERVATION	20,138.	WIRE/CHECK			
(14)			EAST ASIA/PACIFIC	CONSERVATION	97,322.	WIRE/CHECK			
(15)			EAST ASIA/PACIFIC	CONSERVATION	11,436.	WIRE/CHECK			
(16)			EAST ASIA/PACIFIC	CONSERVATION	142,217.	WIRE/CHECK			

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" on Form 990, Part IV, line 15, for any recipient who 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/PACIFIC	CONSERVATION	21,000.	WIRE/CHECK			
(2)			EAST ASIA/PACIFIC	CONSERVATION	15,509.	WIRE/CHECK			
(3)			EAST ASIA/PACIFIC	CONSERVATION	18,226.	WIRE/CHECK			
(4)			EAST ASIA/PACIFIC	CONSERVATION	6,617.	WIRE/CHECK			
(5)			EAST ASIA/PACIFIC	CONSERVATION	12,540.	WIRE/CHECK			
(6)			EAST ASIA/PACIFIC	CONSERVATION	35,000.	WIRE/CHECK			
(7)			EAST ASIA/PACIFIC	CONSERVATION	122,004.	WIRE/CHECK			
(8)			EAST ASIA/PACIFIC	CONSERVATION	40,457.	WIRE/CHECK			
(9)			EAST ASIA/PACIFIC	CONSERVATION	20,302.	WIRE/CHECK			
(10)			NORTH AMERICA	CONSERVATION	366,994.	WIRE/CHECK			
(11)			SOUTH AMERICA	CONSERVATION	63,199.	WIRE/CHECK			
(12)			SOUTH AMERICA	CONSERVATION	7,785.	WIRE/CHECK			
(13)			SOUTH AMERICA	CONSERVATION	55,147.	WIRE/CHECK			
(14)			SOUTH AMERICA	CONSERVATION	44,581.	WIRE/CHECK			
(15)			SOUTH AMERICA	CONSERVATION	23,000.	WIRE/CHECK			
(16)			SOUTH AMERICA	CONSERVATION	138,333.	WIRE/CHECK			

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" on Form 990, Part IV, line 15, for any recipient who 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	CONSERVATION	390,000.	WIRE/CHECK			
(2)			SOUTH AMERICA	CONSERVATION	20,000.	WIRE/CHECK			
(3)			SOUTH AMERICA	CONSERVATION	20,000.	WIRE/CHECK			
(4)			SOUTH AMERICA	CONSERVATION	24,342.	WIRE/CHECK			
(5)			SOUTH AMERICA	CONSERVATION	7,397.	WIRE/CHECK			
(6)			SOUTH AMERICA	CONSERVATION	9,200.	WIRE/CHECK			
(7)			SOUTH AMERICA	CONSERVATION	75,935.	WIRE/CHECK			
(8)			SOUTH AMERICA	CONSERVATION	7,977.	WIRE/CHECK			
(9)			SOUTH AMERICA	CONSERVATION	631,298.	WIRE/CHECK			
(10)			SOUTH AMERICA	CONSERVATION	40,000.	WIRE/CHECK			
(11)			SOUTH ASIA	CONSERVATION	622,424.	WIRE/CHECK			
(12)			SOUTH ASIA	CONSERVATION	11,844.	WIRE/CHECK			
(13)			SOUTH ASIA	CONSERVATION	11,844.	WIRE/CHECK			
(14)			SOUTH ASIA	CONSERVATION	45,000.	WIRE/CHECK			
(15)			SOUTH ASIA	CONSERVATION	10,000.	WIRE/CHECK			
(16)			SOUTH ASIA	CONSERVATION	35,437.	WIRE/CHECK			

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" on Form 990, Part IV, line 15, for any recipient who 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 ASIA	CONSERVATION	184,000.	WIRE/CHECK			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	11,177.	WIRE/CHECK			
(3)			SUB-SAHARAN AFRICA	CONSERVATION	8,041.	WIRE/CHECK			
(4)			SUB-SAHARAN AFRICA	CONSERVATION	5,311.	WIRE/CHECK			
(5)			SUB-SAHARAN AFRICA	CONSERVATION	9,551.	WIRE/CHECK			
(6)			SUB-SAHARAN AFRICA	CONSERVATION	8,204.	WIRE/CHECK			
(7)			SUB-SAHARAN AFRICA	CONSERVATION	12,545.	WIRE/CHECK			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	23,035.	WIRE/CHECK			
(9)			SUB-SAHARAN AFRICA	CONSERVATION	5,585.	WIRE/CHECK			
(10)			SUB-SAHARAN AFRICA	CONSERVATION	23,594.	WIRE/CHECK			
(11)			SUB-SAHARAN AFRICA	CONSERVATION	44,470.	WIRE/CHECK			
(12)			SUB-SAHARAN AFRICA	CONSERVATION	5,670.	WIRE/CHECK			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	64,000.	WIRE/CHECK			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	562,511.	WIRE/CHECK			
(15)			SUB-SAHARAN AFRICA	CONSERVATION	438,589.	WIRE/CHECK			
(16)			SUB-SAHARAN AFRICA	CONSERVATION	32,490.	WIRE/CHECK			

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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" on Form 990, Part IV, line 15, for any recipient who 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	CONSERVATION	23,760.	WIRE/CHECK			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	40,000.	WIRE/CHECK			
(3)			SUB-SAHARAN AFRICA	CONSERVATION	9,742.	WIRE/CHECK			
(4)			SUB-SAHARAN AFRICA	CONSERVATION	19,703.	WIRE/CHECK			
(5)			SUB-SAHARAN AFRICA	CONSERVATION	187,752.	WIRE/CHECK			
(6)			SUB-SAHARAN AFRICA	CONSERVATION	11,635.	WIRE/CHECK			
(7)			SUB-SAHARAN AFRICA	CONSERVATION	50,000.	WIRE/CHECK			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	575,758.	WIRE/CHECK			
(9)			SUB-SAHARAN AFRICA	CONSERVATION	95,160.	WIRE/CHECK			
(10)			SUB-SAHARAN AFRICA	CONSERVATION	50,000.	WIRE/CHECK			
(11)			SUB-SAHARAN AFRICA	CONSERVATION	12,134.	WIRE/CHECK			
(12)			SUB-SAHARAN AFRICA	CONSERVATION	10,675.	WIRE/CHECK			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	6,814.	WIRE/CHECK			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	7,845.	WIRE/CHECK			
(15)			SUB-SAHARAN AFRICA	CONSERVATION	45,000.	WIRE/CHECK			
(16)			SUB-SAHARAN AFRICA	CONSERVATION	11,201.	WIRE/CHECK			

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" on Form 990, Part IV, line 15, for any recipient who 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	CONSERVATION	15,000.	WIRE/CHECK			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	15,396.	WIRE/CHECK			
(3)			SUB-SAHARAN AFRICA	CONSERVATION	17,300.	WIRE/CHECK			
(4)			RUSSIA/NEWLY IND. STATES	CONSERVATION	5,755.	WIRE/CHECK			
(5)			EUROPE/ICELAND/GREENLAND	CONSERVATION	348,201.	WIRE/CHECK			
(6)			EUROPE/ICELAND/GREENLAND	CONSERVATION	17,000.	WIRE/CHECK			
(7)									
(8)									
(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. . . . . ▶

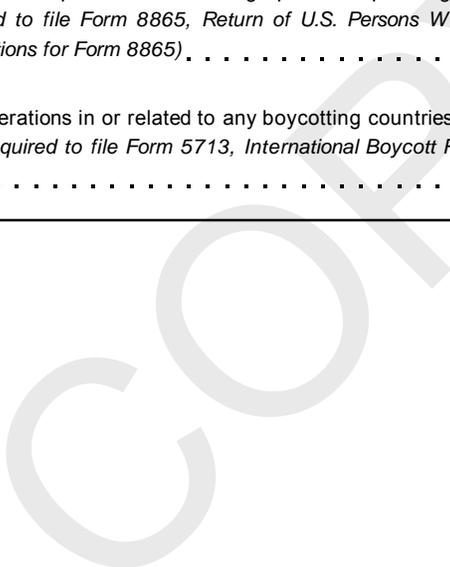
**Part III Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(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) CONSERVATION	CENT. AMERICA/CARIBBEAN	2.	815.	WIRE/CHECK			
(2) SCHOLARSHIPS	CENT. AMERICA/CARIBBEAN	1.	1,250.	WIRE/CHECK			
(3) CONSERVATION	EAST ASIA/PACIFIC	2.	2,035.	WIRE/CHECK			
(4) SCHOLARSHIPS	EAST ASIA/PACIFIC	12.	19,911.	WIRE/CHECK			
(5) SCHOLARSHIPS	EUROPE/ICELAND/GREENLAND	23.	8,260.	WIRE/CHECK			
(6) CONSERVATION	MIDDLE EAST/NORTH AFRICA	1.	1,250.	WIRE/CHECK			
(7) CONSERVATION	NORTH AMERICA	1.	13,954.	WIRE/CHECK			
(8) SCHOLARSHIPS	NORTH AMERICA	1.	3,000.	WIRE/CHECK			
(9) SCHOLARSHIPS	RUSSIA/NEWLY IND. STATES	2.	4,250.	WIRE/CHECK			
(10) CONSERVATION	SOUTH AMERICA	3.	47,821.	WIRE/CHECK			
(11) SCHOLARSHIPS	SOUTH AMERICA	10.	111,205.	WIRE/CHECK			
(12) CONSERVATION	SOUTH ASIA	3.	44,537.	WIRE/CHECK			
(13) SCHOLARSHIPS	SOUTH ASIA	5.	12,850.	WIRE/CHECK			
(14) SCHOLARSHIPS	SUB-SAHARAN AFRICA	4.	23,150.	WIRE/CHECK			
(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) 2013



**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 PROGRAMMATIC 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.



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

Department of the Treasury  
Internal Revenue Service

Name of the organization

WILDLIFE CONSERVATION SOCIETY

**Supplemental Information Regarding Fundraising or Gaming Activities**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

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				
<b>1</b> MARY KILBOURN	STRATEGIC		X		85,965.	-85,965.	
<b>2</b> SCHULTZ & WILLIAMS	MEMBERSHIP		X	5,474,644.	130,147.	5,344,497.	
<b>3</b> THE EVENT SHOP	GALA		X	1,136,027.	89,045.	1,046,982.	
<b>4</b> EYEBALL ON THE FLOOR INC	STRATEGIC		X		210,172.	-210,172.	
<b>5</b> DCM INC	TELEMARKETI		X	485,616.	13,704.	471,912.	
<b>6</b> M & R STRATEGIC SERVICES	STRATEGIC		X	6,252,517.	431,767.	5,820,750.	
<b>7</b> PENTERA INC.	PLANNED GIV		X		15,844.	-15,844.	
<b>8</b> BLUE EARTH CONSULTANTS, LLC	STRATEGIC		X		26,987.	-26,987.	
<b>9</b>							
<b>10</b>							
<b>Total</b> .....				▶	13,348,804.	1,003,631.	12,345,173.

**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	
		GALA (event type)	RUN FOR THR WI (event type)	2. (total number)	(add col. (a) through col. (c))	
Revenue	1	Gross receipts . . . . .	964,957.	753,445.	906,320.	2,624,722.
	2	Less: Contributions . . . . .	192,005.	447,212.	517,386.	1,156,603.
	3	Gross income (line 1 minus line 2). . . . .	772,952.	306,233.	388,934.	1,468,119.
Direct Expenses	4	Cash prizes . . . . .				
	5	Noncash prizes . . . . .				
	6	Rent/facility costs . . . . .	57,318.	117,939.	80,261.	255,518.
	7	Food and beverages . . . . .	161,946.		58,574.	220,520.
	8	Entertainment . . . . .				
	9	Other direct expenses . . . . .	116,104.	203,245.	257,727.	577,076.
	10	Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				1,053,114.
	11	Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				415,005.

**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. Subtract line 7 from line 1, column (d) . . . . . ▶				

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

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

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

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

CUSTODY OF 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

EYEBALL ON THE FLOOR INC. FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC &

MARKETING CONSULTING FOR NYA

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

a The organization's facility	13a	%
b An outside facility	13b	%
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

DCM INC. FUNDS WERE SENT DIRECTLY TO WCS AS PART OF SEVERAL INITIATIVES & TELEMARKETING.

M & R STRATEGIC SERVICES FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC SOLICITATION

PENTERA INC FUNDS WERE SENT DIRECTLY TO WCS - DEVELOPED PLANNED GIVING INITIATIVES

BLUE EARTH CONSULTANTS LLS, FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC

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

a The organization's facility	<b>13a</b>	%
b An outside facility	<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 ▶ \_\_\_\_\_

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

FUNDRAISING

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2013**

**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.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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. 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) AMERICAN RIVERS 1101 14TH STREET NW NO 1400	23-7305963	501(C)3	192,464.				CONSERVATION
(2) CALIFORNIA INVASIVE PLANT COUNCIL 1442 WALNUT STREET BERKELEY, CA 94709	68-0289333	501(C)3	127,662.				CONSERVATION
(3) CAL POLY CORPORATION CORPORATION ADMIN BUILDING 15	95-1648180	501(C)3	57,923.				CONSERVATION
(4) CHILDREN'S HOSPITAL CORPORATION 300 LONGWOOD AVENUE BOSTON, MA 02115	04-2774441	501(C)3	114,461.				CONSERVATION
(5) CODE RED 242 REDWOOD HIGHWAY FRONTAGE ROAD	46-0888828	501(C)3	17,014.				CONSERVATION
(6) CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA, NY 14850	15-0532082	501(C)3	29,540.				CONSERVATION
(7) GRAND CANYON TRUST 2601 N FORT VALLEY RD FLAGSTAFF, AZ 86001	86-0512633	501(C)3	43,200.				CONSERVATION
(8) HAWAIIAN SILVERSWORD FOUNDATION 721 N. FORGEUS AVE. TUCSON, AZ 85716	86-0879183	501(C)3	50,000.				CONSERVATION
(9) INTERNATIONAL SOCIETY FOR INFECTIONS DISEASE 9 BABCOCK STREET UNIT 3	22-2473000	501(C)3	46,800.				CONSERVATION
(10) L-A-D FOUNDATION 705 OLIVE ST NO 724 ST LOUIS, MO 63101	43-6036974	501(C)3	77,708.				CONSERVATION
(11) NATURE CONSERVANCY 4245 NORTH FAIRFAX DRIVE	53-0242652	501(C)3	487,962.				CONSERVATION
(12) SAN DIEGO ZOO GLOBAL 15600 SAN PASQUAL VALLEY RD	95-1648219	501(C)3	158,720.				CONSERVATION

- 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) (2013)

**SCHEDULE I  
(Form 990)**

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

OMB No. 1545-0047

**2013**

**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.

▶ Information about Schedule I (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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. 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) SATTER FOUNDATION 500 NORTH MICHIGAN AVENUE CHICAGO, IL 60611	13-3936468	501(C)3	24,213.				CONSERVATION
(2) SCENIC HUDSON INC ONE CIVIC CENTER PLAZA NO 200	13-2898799	501(C)3	10,136.				CONSERVATION
(3) TROUT UNLIMITED 1300 17TH ST N NO 500 ARLINGTON, VA 22209	38-1612715	501(C)3	199,288.				CONSERVATION
(4) TRUST FOR CONSERVATION INNOVATION 150 POST STREET SAN FRANCISCO, CA 94108	91-2166435	501(C)3	62,811.				CONSERVATION
(5) UNIVERSITY OF ARIZONA FOUNDATION 1111 NORTH CHERRY AVENUE TUCSON, AZ 85721	86-6050388	501(C)3	16,500.				CONSERVATION
(6) UNIVERSITY OF VERMONT AND STATE 411 MAIN STREET BURLINGTON, VT 05401	45-1556038	501(C)3	61,150.				CONSERVATION
(7) WILDLIFE CONSERVATION GLOBAL 1615 RIVERSIDE AVE JACKSONVILLE, FL 32204	26-0035224	501(C)3	19,200.				CONSERVATION
(8) WILDLIFE DIRECT 306 5TH STREET WASHINGTON, DC 20003	30-0256542	501(C)3	25,000.				CONSERVATION
(9) WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037	52-1693387	501(C)3	352,017.				CONSERVATION
(10) YALE UNIVERSITY PO BOX 208239 NEW HAVEN, CT 06520	06-0646973	501(C)3	20,000.				CONSERVATION
(11) _____							
(12) _____							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ..... 22.

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) (2013)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance
1 CONSERVATION	1.	8,650.			
2 CONSERVATION BIOLOGY AND ACADEMIC EXCHANGES.	1.	24,856.			
3 SCHOLARSHIPS	20.	134,969.			
4					
5					
6					
7					

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

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, EXPENSES 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

**Compensation Information**

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

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

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Name of the organization

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.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Yes	No
<b>1b</b>	X	
<b>2</b>	X	
<b>4a</b>		X
<b>4b</b>	X	
<b>4c</b>		X
<b>5a</b>		X
<b>5b</b>		X
<b>6a</b>	X	
<b>6b</b>		X
<b>7</b>	X	
<b>8</b>		X
<b>9</b>		

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

Schedule J (Form 990) 2013

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported as deferred in prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 CRISTIAN SAMPER PRESIDENT & CEO	(i)	559,327.	0	239,115.	133,069.	31,628.	963,139.	0
	(ii)	0	0	0	0	0	0	0
2 JOHN F CALVELLI EVP PUBLIC AFFAIRS	(i)	344,518.	0	20,152.	174,749.	24,936.	564,355.	0
	(ii)	0	0	0	0	0	0	0
3 PATRICIA CALABRESE EVP & CFO	(i)	369,188.	20,000.	3,564.	183,348.	24,706.	600,806.	0
	(ii)	0	0	0	0	0	0	0
4 JOHN G ROBINSON EVP CONSERVATION	(i)	371,186.	0	3,564.	204,302.	24,700.	603,752.	0
	(ii)	0	0	0	0	0	0	0
5 BERTINA CECCARELLI EVP GLOBAL RESOURCES	(i)	335,488.	0	529.	104,979.	28,892.	469,888.	0
	(ii)	0	0	0	0	0	0	0
6 ROBERT A MOSKOVITZ SVP BUSINESS	(i)	279,649.	2,100.	3,522.	60,794.	18,436.	364,501.	0
	(ii)	0	0	0	0	0	0	0
7 ROBERT CALAMO VP & COMPROLLER	(i)	247,674.	10,000.	1,053.	60,643.	25,032.	344,402.	0
	(ii)	0	0	0	0	0	0	0
8 JAMES J BREHENY EVP, DIRECT ZOOS	(i)	275,864.	0	20,207.	59,436.	31,363.	386,870.	0
	(ii)	0	0	0	0	0	0	0
9 JOSHUA R GINSBERG SVP GLOBAL	(i)	204,103.	0	1,052.	38,747.	12,730.	256,632.	0
	(ii)	0	0	0	0	0	0	0
10 LAURA STOLZENTHALER VP BUDGET & FIN PLAN	(i)	195,828.	0	260.	23,906.	686.	220,680.	0
	(ii)	0	0	0	0	0	0	0
11 CHRISTOPHER J MCKENZIE SVP GENERAL COUNSEL	(i)	308,876.	0	475.	53,946.	24,471.	387,768.	0
	(ii)	0	0	0	0	0	0	0
12 HERMAN SMITH VP HUMAN RESOURCES	(i)	243,306.	0	1,010.	56,478.	11,491.	312,285.	0
	(ii)	0	0	0	0	0	0	0
13 MARY DIXON VP COMMUNICATIONS & PUBLIC AFF	(i)	201,041.	0	1,329.	32,953.	8,942.	244,265.	0
	(ii)	0	0	0	0	0	0	0
14 SEAN COVER DIRECTOR OF TREASURY	(i)	169,529.	0	339.	25,805.	22,247.	217,920.	0
	(ii)	0	0	0	0	0	0	0
15 SUSAN CHIN VP PLANNING & DESIGN	(i)	167,886.	0	522.	22,983.	10,638.	202,029.	0
	(ii)	0	0	0	0	0	0	0
16 PATRICK THOMAS VP & GENERAL CURATOR, ASS DIR	(i)	192,655.	0	1,112.	37,128.	22,331.	253,226.	0
	(ii)	0	0	0	0	0	0	0

**Part III Supplemental Information**

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 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., AUTOMOBILE ALLOWANCE) AND, IN CERTAIN CIRCUMSTANCES, TAXABLE TUITION ALLOWANCE, INCENTIVE COMPENSATION AND DISCRETIONARY PERFORMANCE BONUSES; (2) NON-CASH TAXABLE AND NON-TAXABLE BENEFITS (E.G., GROUP LIFE, TAX PREPARATION, HEALTH AND LIFE INSURANCE); 3) IN CERTAIN CIRCUMSTANCES, DEFERRED COMPENSATION. THE FOLLOWING PROVIDES REQUIRED RESPONSES TO PART I LINES 1A, 4B, 6A AS WELL AS OTHER 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, 2013 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 DISCLOSURE REQUIRED FOR PART I. LINE 1A ON HOUSING USE AND TAX INDEMNIFICATION: THE TOTALS IN COLUMN BIII

**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.

INCLUDE THE FOLLOWING COMPONENTS OF TAXABLE INCOME REPORTED ON THE EMPLOYEE'S W-2 FOR 2013: 1) FOR PRESIDENT AND CEO CRISTIAN SAMPER THE FAIR MARKET VALUE OF HOUSING, TOTALING \$138,000. DR. SAMPER ALSO RECEIVED \$50,393 IN REIMBURSEMENTS FOR CHILDREN'S TUITION EXPENSE PURSUANT TO HIS EMPLOYMENT AGREEMENT. ANY PAYMENTS FOR COMPENSATION UNDER MULTI-YEAR SUPPLEMENTAL NON-QUALIFIED COMPENSATION PLANS WHICH VESTED. THIS IS NOT APPLICABLE FOR EMPLOYEES LISTED IN PART II FOR 2013 CALENDAR YEAR; THE VALUE OF TAXABLE GROUP LIFE PREMIUMS; AND ANY TUITION REIMBURSEMENT AND TAXABLE ALLOWANCES FOR AUTOMOBILE AND CELL PHONE USE, AND IN THE CASE OF THE PRESIDENT AND CEO, A TAX PREPARATION FEE WHICH IS A NON-CASH TAXABLE BENEFIT, PROVIDED TO CERTAIN OFFICERS AND KEY EMPLOYEE IS REPORTED ON SCHEDULE J, PART II. AUTOMOBILE AND CELL PHONE ALLOWANCE, IF PROVIDED, ARE MADE IN LIEU OF REIMBURSEMENT FOR THOSE BUSINESS EXPENSES. THE LARGEST COMPONENT OF OTHER REPORTABLE INCOME (COLUMN BIII) FOR DR. SAMPER WAS THE RENTAL VALUE OF HOUSING \$138,000. 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

**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.

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.

THERE IS NO OTHER REPORTABLE INCOME FOR 2013.

SUPPLEMENTAL INFORMATION ON RETIREMENT AND OTHER DEFERRED COMPENSATION

(COLUMN C), INCLUDING DISCLOSURE REQUIRED FOR PART I, LINE 4B ON

NON-QUALIFIED RETIREMENT PLANS; COLUMN C HAS TWO COMPONENTS: THE

ESTIMATED PRESENT VALUE OF ACCRUED QUALIFIED PENSION BENEFIT EARNED IN

CALENDAR 2013, 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: 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.

**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.

AS NOTED BELOW, SEVEN 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.)

CRISTIAN SAMPER, PRESIDENT AND CEO \$56,318;

JOHN G. ROBINSON, EXECUTIVE VICE PRESIDENT FOR CONSERVATION AND SCIENCE \$108,323;

PATRICIA CALABRESE, EXECUTIVE VICE PRESIDENT FOR ADMINISTRATION AND CHIEF FINANCIAL OFFICER \$83,425;

JOHN F. CALVELLI, EXECUTIVE VICE PRESIDENT FOR PUBLIC AFFAIRS \$122,824;

BERTINA CECCARELLI, EXECUTIVE VICE PRESIDENT FOR GLOBAL RESOURCES \$56,307;

JAMES J. BREHENY, EXECUTIVE VICE PRESIDENT AND GENERAL DIRECTOR ZOOS AND AQUARIUM AND DIRECTOR, BRONX ZOO \$9,778;

CHRISTOPHER J. MCKENZIE, SENIOR VICE PRESIDENT AND GENERAL COUNSEL \$11,545.

SUPPLEMENTAL INFORMATION ON NON-TAXABLE BENEFITS (COLUMN D) AND

**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: 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 \$22,000 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 NON-TAXABLE BENEFIT.

PART I, LINE 4 - SEVERANCE, NONQUALIFIED, AND EQUITY-BASED PAYMENTS

	SEVERANCE	NON-QUALIFIED	EQUITY-BASED
CRISTIAN SAMPER	0	56,318	0
JOHN G. ROBINSON	0	108,323	0
PATRICIA CALABRESE	0	83,425	0
JOHN F. CALVELLI	0	122,824	0
BERTINA CECCARELLI	0	56,307	0
JAMES J. BREHENY	0	9,778	0
CHRISTOPHER J. MCKENZIE	0	11,545	0

**Part III Supplemental Information**

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

COMPENSATION CONTINGENT UPON NET EARNINGS OF ORGANIZATION

DISCLOSURE REQUIRED FOR PART I, LINE 6A REGARDING CONTINGENT COMPENSATION

(COLUMN BII); THIS COLUMN REPORTS \$2,100 INCENTIVE PAYMENT TO ROBERT MOSKOVITZ, SENIOR VICE PRESIDENT FOR BUSINESS SERVICES, FOR THE FISCAL YEAR ENDING JUNE 30, 2013. AS A CONDITION OF HIS EMPLOYMENT, MR. MOSKOVITZ RECEIVES A PORTION OF HIS COMPENSATION AS A VARIABLE INCENTIVE PAYMENT DETERMINED BY A FORMULA BASED ON NET INCOME RESULTS OF CERTAIN AUXILIARY SERVICES DEPARTMENTS IN HIS DIVISION DURING THE FISCAL YEAR. THE REPORTED \$2,100 PAYMENT WAS MADE FOR THE FISCAL YEAR ENDING JUNE 30, 2013 AND WAS REPORTED AS TAXABLE INCOME ON MR. MOSKOVITZ'Z 2013 W-2.

PART I, LINE 7 - NON-FIXED PAYMENTS PROVIDED

ONE EXECUTIVE AND A VICE PRESIDENT RECEIVED NON-FIXED PAYMENTS IN 2013, PATRICIA CALABRESE, EXECUTIVE VICE PRESIDENT AND CHIEF FINANCIAL OFFICER, RECEIVED \$20,000, AND ROBERT CALAMO, VICE PRESIDENT AND COMPTROLLER, RECEIVED \$10,000. THESE PAYMENTS WERE ONE-TIME DISCRETIONARY BONUSES IN RECOGNITION OF EXTRAORDINARY ACCOMPLISHMENTS DURING THE PRIOR YEAR. THESE PAYMENTS WERE REPORTED AS TAXABLE INCOME ON THE EMPLOYEES' 2013 W-2.

**SCHEDULE K  
(Form 990)**

**Supplemental Information on Tax-Exempt Bonds**

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

▶ **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.**

▶ **Information about Schedule K (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Department of the Treasury  
Internal Revenue Service

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
<b>A</b> TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY	91-1882413	649717S82	03/12/2013	92,906,479.	REFUNDING & CAPITAL IMPROVEMENTS	X			X		X
<b>B</b> TRUST FOR CULTURAL RESOURCES OF THE CITY OF NY	91-1882413	649717SP1	02/13/2014	47,539,846.	CAPITAL IMPROVEMENTS		X		X		X
<b>C</b>											
<b>D</b>											

**Part II Proceeds**

	A		B		C		D	
<b>1</b> Amount of bonds retired								
<b>2</b> Amount of bonds legally defeased	58,715,000.							
<b>3</b> Total proceeds of issue	92,406,479.	47,539,846.						
<b>4</b> Gross proceeds in reserve funds								
<b>5</b> Capitalized interest from proceeds	2,816,541.	6,647,041.						
<b>6</b> Proceeds in refunding escrows								
<b>7</b> Issuance costs from proceeds	1,205,778.	725,700.						
<b>8</b> Credit enhancement from proceeds								
<b>9</b> Working capital expenditures from proceeds								
<b>10</b> Capital expenditures from proceeds	3,247,657.	3,324,048.						
<b>11</b> Other spent proceeds	68,874,974.	167,105.						
<b>12</b> Other unspent proceeds	16,761,529.	36,675,952.						
<b>13</b> Year of substantial completion								
	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>	<b>Yes</b>	<b>No</b>
<b>14</b> Were the bonds issued as part of a current refunding issue?		X		X				
<b>15</b> Were the bonds issued as part of an advance refunding issue?	X			X				
<b>16</b> Has the final allocation of proceeds been made?		X		X				
<b>17</b> Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X					

**Part III Private Business Use**

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

Part III Private Business Use (Continued)

TAX EXEMPT BONDS

Table with 9 rows and 8 columns (A, B, C, D). Rows include questions about management contracts, research agreements, and percentages of financed property used.

Part IV Arbitrage

Table with 10 rows and 8 columns (A, B, C, D). Rows include questions about Form 8038-T, arbitrage rebates, and qualified hedges.



**Part VI Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions) *(Continued)*

## SCHEDULE K - ADDITIONAL INFORMATION

PART 1 A (F) THE PROCEEDS OF THE SERIES 2013A BONDS WERE OR WILL BE USED TO (A) FINANCE OR REIMBURSE A PORTION OF THE COSTS OF THE CONSTRUCTION, IMPROVEMENT, FURNISHING AND EQUIPPING OF FACILITIES OF WCS LOCATED AT THE BRONX ZOO (B) PAY CAPITALIZED INTEREST ON A PORTION OF THE SERIES 2013A BONDS, (C) REFUND AND DEFEASE ALL OF THE SERIES 2004 BONDS (ISSUED MARCH 11, 2004), AND (D) PAY CERTAIN COSTS AND EXPENSES INCIDENTAL TO THE ISSUANCE OF THE SERIES 2013A BONDS AND RELATED PURPOSES.

THE PROCEEDS OF THE SERIES 2014A BONDS WERE OR WILL BE USED OR CONSTRUCTION, RENOVATION AND EXPANSION OF FACILITIES AND THE ACQUISITION OF EQUIPMENT.

PART II (3) THE DIFFERENCE BETWEEN ISSUE PRICE \$92,906,479 (PART I) AND TOTAL PROCEEDS OF ISSUANCE \$92,446,641 (PART II LINE 3) IS DUE TO THE AMORTIZATION OF THE BOND PREMIUM AMOUNTING TO \$459,838.

PART II (13) THE BOND FINANCED PROJECT FOR BOTH BONDS (2013A AND 2014A) ARE EXPECTED TO REACH SUBSTANTIAL COMPLETION IN 2016.

LINE 11 COLUMN A

\$68,558,338 OF THE OTHER SPENT PROCEEDS WERE USED TO REFUND THE 3/11/04 BONDS.

LINE 11 COLUMN B

**Part VI** **Supplemental Information.** Provide additional information for responses to questions on Schedule K (see instructions) *(Continued)*

\$161,075 WAS SPENT ON AN ISSUER FEE.

COPY

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2013**

**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.
- ▶ Information about Schedule M (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).

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 . . . . .	X	70.	2,920,092.	MARKET VALUE
10 Securities - Closely held stock . . . . .				
11 Securities - Partnership, LLC, or trust interests . . . . .				
12 Securities - Miscellaneous . . . . .				
13 Qualified conservation contribution - Historic structures . . . . .				
14 Qualified conservation contribution - Other . . . . .				
15 Real estate - Residential . . . . .				
16 Real estate - Commercial . . . . .				
17 Real estate - Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ ( _____ )				
26 Other ▶ ( _____ )				
27 Other ▶ ( _____ )				
28 Other ▶ ( _____ )				

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

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

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

Schedule M (Form 990) (2013)

JSA

3E1298 1.000

**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.

PART 1 COLUMN B

THE NUMBER IN COLUMN B REPRESENTS THE NUMBER OF CONTRIBUTIONS.

COPY

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

Department of the Treasury  
Internal Revenue Service

Name of the organization

WILDLIFE CONSERVATION SOCIETY

**Supplemental Information to Form 990 or 990-EZ**

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

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Employer identification number

13-1740011

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT CONTINUED

HERE IS A SAMPLE OF ACHIEVEMENTS THIS YEAR:

1. WCS LAUNCHED ITS 96 ELEPHANTS CAMPAIGN TO STOP THE KILLING, STOP THE TRAFFICKING, AND STOP THE DEMAND. THE CAMPAIGN, NAMED AFTER THE NUMBER OF ELEPHANTS GUNNED DOWN EACH DAY BY POACHERS IN AFRICA, IS DESIGNED TO BRING TOGETHER WORLD CITIZENS, PARTNERS, THOUGHT LEADERS AND CHANGE LAW MAKERS TO LEVERAGE COLLECTIVE INFLUENCE TO PROTECT KEY ELEPHANT POPULATIONS AND REDUCE IVORY TRAFFICKING AND DEMAND. IN FY 2014, THE WCS 96 ELEPHANT CAMPAIGN HAD 118 PARTNERS (AND GROWING) AND 130,000+ PEOPLE HAD SENT LETTERS TO THE U.S. ADMINISTRATION ASKING FOR A MORATOTIUM ON IVORY SALES. THE CAMPAIGN'S NEXT STEP IS TO PASS STATE MORATORIA LEGISLATION IN THE UNITED STATES AND TO CLOSE LOOPHOLES THAT WOULD ALLOW IVORY TO CONTINUE TO BE TRADED, AS WELL AS WORK WITH OTHER NATIONS AND KEY STATES.
2. ELEPHANT CONSERVATION IS SUCCEEDING IN ASIA. THE WCS INDIA PROGRAM, HAD CONSERVED THE LARGEST WILD ASIAN ELEPHANT POPULATION - MORE THAN 5,000 ANIMALS IN THE WESTERN GHATS OF KARNATAKA AND ADJACENT AREAS. THE WORK INCLUDED STRONG ENFORCEMENT, VOLUNTARY RELOCATION OF FAMILIES AWAY FROM ELEPHANT HABITATS, MITIGATION OF DEVELOPMENT AND INFRASTRUCTURE PROJECT IMPACTS, AND BETTER RESOLUTION OF HUMAN-ELEPHANT CONFLICT.
3. WCS IMPLEMENTED A MULTIFACTED STRATEGY TO IMPROVE THE CONSERVATION OF THE ATLANTIC HUMPBACK DOLPHIN IN GABON AND CONGO; STRENGTHENING ENFORCEMENT OF MARINE PROTECTION IN BOTH COUNTRIES IS KEY TO SUCCESS. TO PROTECT ATLANTIC HUMPBACK DOLPHINS AND OTHER MARINE SPECIES FROM BYCATCH,

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
-----------------------------------------------------------	----------------------------------------------

WCS AND CONGOLESE PARK AUTHORITIES BEGAN CONDUCTING ROUTINE AND FREQUENT SURVEILLANCE PATROLS IN CONKOUATI-DOULI NATIONAL PARK WATERS.

4. WCS AND THE REPUBLIC OF CONGO SIGNED A PUBLIC-PRIVATE PARTNERSHIP AGREEMENT REGARDING MANAGEMENT OF THE NOUABALE-NDOKI NATIONAL PARK. NOUABALE-NDOKI NATIONAL PARK IS ONE OF THE WORLD'S MOST PRISTINE NATURAL AREAS AND A HOTBED OF BIODIVERSITY. THIS IS ONE OF THE MOST IMPORTANT REMAINING STRONGHOLDS FOR GORILLAS AND FOREST ELEPHANTS IN CENTRAL AFRICA. THE AGREEMENT CONTINUES WCS'S HISTORY OF CONSERVATION IN THE REPUBLIC OF CONGO, DATING BACK TO THE 1900'S.

5. WCS WORKED IN CENTRAL AFRICA TO IDENTIFY AND IMPLEMENT STRATEGIES TO MITIGATE THE IMPACTS OF THE EBOLA VIRUS DISEASE (EVD) ON APE POPULATIONS AND TO REDUCE THE OCCURRENCE OF HUMAN OUTBREAKS. WCS ANNOUNCED THE DEVELOPMENT OF A POTENTIAL GAME-CHANGER IN THE STUDY OF EBOLA VIRUS: A NEW METHOD THAT USES FECAL SAMPLES FROM WILD GREAT APES TO IDENTIFY POPULATIONS LIKELY TO HAVE BEEN EXPOSED TO THE VIRUS. THIS METHOD COULD REDEFINE THE WAY EBOLA VIRUS IS STUDIED AND IMPROVE UNDERSTANDING OF THE MYSTERIOUS VIRUS' DISTRIBUTION - A MATTER OF GREAT IMPORTANCE TO BOTH HUMAN HEALTH AND CONSERVATION COMMUNITIES.

6. WCS UGANDA PROGRAM AND THE UGANDA WILDLIFE AUTHORITY (UWA) COLLABORATED TO PRODUCE AN ONLINE TOOL THAT WILL ALLOW LAW ENFORCEMENT OFFICIALS TO ACCESS A DATABASE THAT TRACKS OFFENDERS OF WILDLIFE CRIME IN REAL-TIME AND ACROSS THE COUNTRY. THE DATABASE WILL ENABLE BETTER MONITORING OF ARRESTS AND IDENTIFICATION OF REPEAT OFFENDERS AND THEIR ASSOCIATES. WCS IS TRAINING UWA STAFF AND THE DATABASE IS EXPECTED TO BE LAUNCHED SHORTLY.

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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7. WCS HELPED CELEBRATE NATIONAL BISON DAY WITH A SERIES OF EVENTS AND SOCIAL MEDIA INITIATIVES IN EARLY NOVEMBER. THIS PAST YEAR, WCS COORDINATED 19 DIFFERENT EVENTS IN 15 STATES. NOVEMBER 1ST WAS DESIGNATED AS NATIONAL BISON DAY BY AN OFFICIAL US SENATE RESOLUTION INTRODUCED WITH THE HELP OF WCS AND ITS FELLOW VOTE BISON COALITION MEMBERS AND PASSED BY BISON CHAMPIONS IN CONGRESS.

8. WCS HAS PRIORITIZED SAVING SHARKS AND RAYS AS PART OF A GLOBAL COMMITMENT TO PROMOTE THE RECOVERY OF DEPLETED AND THREATENED POPULATIONS OF MARINE SPECIES, HALT THE DECLINE OF FRAGILE MARINE ECOSYSTEMS, AND IMPROVE THE LIVELIHOODS OF COASTAL COMMUNITIES ALONG THE WORLD'S OCEANS. IN NOVEMBER, THE MINISTRY OF MARINE AFFAIRS AND FISHERIES OF THE REPUBLIC OF INDONESIA AND THE WCS WILDLIFE CRIMES UNIT ANNOUNCED THE LARGEST CONFISCATION OF ILLEGAL MANTA RAY PARTS AS PART OF A MAJOR ENFORCEMENT ACTION AGAINST ILLEGAL TRADE OF SHARKS AND RAYS IN INDONESIA, HOME TO THE LARGEST SHARK FISHERIES ON EARTH.

9. WCS PLAYED A CRITICAL TECHNICAL ROLE ON THE DESIGNATION OF ARGENTINA'S PENÍNSULA VALDÉS AS A BIOSPHERE RESERVE BY THE UNITED NATIONS ENVIRONMENTAL, SCIENTIFIC AND CULTURAL ORGANIZATION (UNESCO). PENÍNSULA VALDÉS PROTECTS A TREMENDOUS VARIETY OF SEABIRDS AND MARINE MAMMALS INCLUDING MAGELLANIC PENGUINS, SOUTHERN ELEPHANT SEALS AND SOUTHERN RIGHT WHALES AND INLAND SPECIES LIKE GUANACO AND DARWIN'S RHEAS.

10. THE AFGHANISTAN GOVERNMENT ESTABLISHED THE ENTIRE WAKHAN DISTRICT, ONE OF THE MOST REMOTE AREAS OF THE COUNTRY, AS THE NATION'S SECOND NATIONAL PARK., PROTECTING OVER 70 PERCENT OF SNOW LEOPARD HABITAT AND BRINGING SERVICES TO SOME OF THE POOREST AND MOST ISOLATED PEOPLE IN THE

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
-----------------------------------------------------------	----------------------------------------------

COUNTRY. WCS HAS BEEN CONDUCTING CONSERVATION AND GOVERNANCE BUILDING WORK WITH LOCAL COMMUNITIES IN THE WAKHAN DISTRICT SINCE 2006.

FORM 990, PART III, LINE 4B - SECOND ACCOMPLISHMENT CONTINUED

HERE IS A SAMPLE OF ACHIEVEMENTS AT THE BRONX ZOO AND THE NEW YORK AQUARIUM:

1. THREE KOMODO DRAGONS (TWO MALE AND ONE FEMALE), THE WORLD LARGEST SPECIES OF LIZARDS, RETURNED TO THE BRONX ZOO IN THE SPRING OF 2014. FEWER THAN 2,500 KOMODO DRAGONS ARE ESTIMATED TO REMAIN IN THE WORLD, AND THIS IS THE FIRST TIME THEY'VE BEEN EXHIBITED AT THE BRONX ZOO SINCE THE 1950S.
2. TWO GIANT ALDABRA TORTOISES-WHICH CAN WEIGH 500 POUNDS OR MORE-MADE THEIR DEBUT AT THE BRONX ZOO IN 2014. ALDABRA TORTOISES CAN LIVE FOR OVER 100 YEARS. CLASSIFIED AS "VULNERABLE" BY THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE (IUCN), THESE REPTILES ARE ONE OF JUST TWO REMAINING SPECIES OF GIANT TORTOISES (THE OTHER BEING THE GALAPAGOS TORTOISE).
3. TWO SNOW LEOPARD CUBS WERE BORN AT THE BRONX ZOO IN THE SPING 2014. THEY ARE A PART OF A BREEDING PROGRAM THAT HAS SEEN OVER 70 SNOW LEOPARDS BORN AT THE BRONX ZOO, MORE THAN ANY OTHER ZOO IN THE COUNTRY. WCS ALSO PARTICIPATED IN A NUMBER OF SNOW LEOPARD CONSERVATION PROGRAMS WITH PROJECTS CURRENTLY IN PAKISTAN, AFGHANISTAN AND WESTERN CHINA.
4. TWO BABY WESTERN LOWLAND GORILLAS WERE BORN AT THE BRONX ZOO IN SPRING 2014. THE NEWBORNS, WHICH ARE PART OF A COOPERATIVE BREEDING PROGRAM TO ENHANCE GENETIC VIABILITY OF ZOO ANIMALS, WERE THE FIRST GORILLAS BORN AT

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
-----------------------------------------------------------	----------------------------------------------

THE BRONX ZOO SINCE 2006. THE BABIES REPRESENT THE 14TH AND 15TH BORN AT THE ZOO'S CONGO GORILLA FOREST EXHIBIT SINCE IT OPENED IN 1991. FIFTY GORILLAS HAVE BEEN BORN AT THE ZOO SINCE 1972.

5. A GREATER ONE-HORNED RHINOCEROS (RHINOCEROS UNICORNIS), OR INDIAN RHINO CALF, WAS BORN IN SUMMER 2013. THIS IS THE 13TH INDIAN RHINO BORN AT THE BRONX ZOO SINCE 1986, AND SHE IS ONE OF 56 INDIAN RHINOS IN ACCREDITED ZOOS THROUGHOUT NORTH AMERICA. HER BIRTH IS PART OF THE ASSOCIATION OF ZOOS AND AQUARIUMS' (AZA) BREEDING PROGRAM TO ENSURE THE SURVIVAL OF THREATENED AND ENDANGERED SPECIES. THERE ARE FEWER THAN 3,000 INDIAN RHINOS LEFT IN THE WILD, ACCORDING TO ESTIMATES. THE SPECIES IS NATIVE TO THE GRASSLANDS AND SWAMPY AREAS OF NORTHERN INDIAN AND SOUTHERN NEPAL, BUT NEARLY 70% OF THE REMAINING POPULATION LIVES IN INDIA'S KAZIRANGA NATIONAL PARK. THEY ARE LISTED AS "ENDANGERED" BY THE U.S. FISH AND WILDLIFE SERVICE AND "VULNERABLE" BY THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE (IUCN).

6. THERE WERE A NUMBER OF ADDITIONAL SIGNIFICANT BIRTHS AND HATCHINGS THIS PAST SPRING/SUMMER AT THE BRONX ZOO: SEA LIONS, GIRAFFES, MARKHORS, FENNEC FOXES, ANGOLAN COLOBUS, TIMOR PYTHONS, KING COBRAS, LESSER BIRDS OF PARADISE AND AN ELEGANT CRESTED TINAMOUS.

7. THE WILDLIFE CONSERVATION SOCIETY'S NEW YORK AQUARIUM CELEBRATED IN WINTER 2014, THE GROUNDBREAKING OF OCEAN WONDERS: SHARKS!, A 57,000-SQUARE-FOOT BUILDING THAT WILL HOUSE MORE THAN 115 SPECIES OF MARINE WILDLIFE, INCLUDING SHARKS, SKATES, AND RAYS. THIS HISTORIC EVENT MARKS THE BEGINNING OF THE REBUILDING AND TRANSFORMATION OF THE NEW YORK AQUARIUM, POST HURRICANE SANDY.

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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8. THE NEW YORK AQUARIUM WELCOMED A HARBOR SEAL PUP IN SPRING 2014, ONLY THE SECOND HARBOR SEAL BORN THERE IN THE LAST 15 YEARS. THE AQUARIUM HAS THREE HARBOR SEALS WHICH SHARED THE 300-FOOT-LONG SEA CLIFFS HABITAT WITH PENGUINS, OTTERS AND WALRUSES. THE HABITAT IS DESIGNED TO EVOKE THE "NORTH PACIFIC'S ROCKY COASTLINE".

FORM 990, PART III, LINE 4C - THIRD ACCOMPLISHMENT CONTINUED

A SAMPLE OF ACHIEVEMENTS IN 2014:

1. CENTRAL PARK ZOO IS A BREEDING GROUND FOR SOME OF THE MOST BEAUTIFUL AND ENDANGERED WATERFOWL FROM THE WORLD, WITH EIGHT RARE OR ENDANGERED SPECIES PRODUCING CHICKS THIS PAST YEAR. SPECIES BREEDING SUCCESSFULLY INCLUDE SCALY-SIDED MERGANSER, LONG-TAILED DUCK, SPECTACLED EIDER, BAER'S POCHARD, PACIFIC COMMON EIDER, PINK-EARED DUCK, RADJAH SHELDUCK, AND RED-BREASTED MERGANSER. CENTRAL PARK ZOO BEGAN ITS WATERFOWL BREEDING PROGRAM FOUR YEARS AGO AND THE RATE OF SUCCESS HAS BEEN STEADILY INCREASING SINCE THE INCEPTION OF THE PROGRAM. CENTRAL PARK ZOO HAS 23 DUCK SPECIES ON EXHIBIT AND BOASTS THE LARGEST PUBLIC COLLECTION OF SEA DUCKS BOTH BY NUMBER OF INDIVIDUALS AND SPECIES REPRESENTED IN THE WORLD.

2. QUEENS ZOO SUCCESSFULLY BRED CRITICALLY ENDANGERED PUERTO RICAN CRESTED TOADS (PELTOPHRYNE LEMUR) FOR REINTRODUCTION TO THEIR NATIVE PUERTO RICO. THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE (IUCN) LISTS THE PUERTO RICAN CRESTED TOAD AS CRITICALLY ENDANGERED. THE QUEENS ZOO STARTED BREEDING THE SPECIES IN 2014 AS PART OF A COLLABORATIVE EFFORT WITH ASSOCIATION OF ZOOS AND AQUARIUMS (AZA) ZOOS TO BOOST THE WILD POPULATION. RAINY-SEASON CONDITIONS WERE SIMULATED AND BREEDING

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CALLS PLAYED TO ENCOURAGE MATING. APPROXIMATELY 2,400 TADPOLES WERE THEN INTRODUCED TO THEIR ROCKY HABITAT IN PUERTO RICO.

3. A SOUTHERN PUDU FAWN, THE SMALLEST SPECIES OF DEER IN THE WORLD, WAS BORN AT THE QUEENS ZOO IN SPRING 2014. SOUTHERN PUDU ARE NATIVE TO CHILE AND ARGENTINA AND ARE DESIGNATED AS VULNERABLE BY THE INTERNATIONAL UNION FOR CONSERVATION OF NATURE (IUCN).

4. SEA LIONS DEBUTED AT WCS ZOOS IN SPRING 2014 - TWO FEMALE SEA LIONS AT PROSPECT PARK ZOO AND TWO ADULT MALES AT QUEENS ZOO. THESE ADDITIONS WILL SIGNIFICANTLY HELP BOLSTER THE SUSTAINABILITY OF SEA LIONS AT OUR PARKS.

5. THERE HAS BEEN A NUMBER OF SIGNIFICANT BIRTHS/HATCHING THIS PAST SPRING/SUMMER, NAMELY, SNOW LEOPARDS, RED PANDAS, BANDED MONGOOSE, KING PENGUIN, SCALY-SIDED MERGANSERS, PINK-EARED DUCKS AND BAER'S POCHARDS ALL AT CENTRAL PARK ZOO AND A ROOSEVELT ELK AT QUEENS ZOO.

FORM 990, PART III, LINE 4D - OTHER ACCOMPLISHMENT

WCS UGANDA WON A FOUR-YEAR AWARD TO ESTABLISH A CONSERVATION TRUST FUND (CTF) WHICH WILL OFFER AN INDEPENDENT AND ACCOUNTABLE ALTERNATIVE FOR FOUNDATIONS, PRIVATE DONORS, AND CORPORATIONS SEEKING TO FUND BIODIVERSITY AND NATURAL RESOURCE PROJECTS IN UGANDA. THE FUND WILL HELP CLOSE UGANDA'S CONSERVATION FUNDING GAP AND ENSURE THE LONG-TERM SURVIVAL OF ITS PROTECTED AREAS, FORESTS, AND WETLANDS.

WCS TANZANIA RECEIVED AN AWARD OVER A FIVE YEARS PERIOD FOR WORK IN THE SOUTHERN HIGHLANDS AND RUAHA-KATAVI LANDSCAPES, INCLUDING DIRECT ELEPHANT PROTECTION, PROMOTION OF SUSTAINABLE NATURAL RESOURCE USE AND ALTERNATIVE LIVELIHOODS, COMMUNITY ENGAGEMENT IN LAND MANAGEMENT PLANNING, AND

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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IMPROVED BIODIVERSITY CONSERVATION ACROSS A SWATH OF LAND THE SIZE OF OHIO.

FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES  
AFGHANISTAN, ARGENTINA, BELIZE, BOLIVIA, BURMA, CAMBODIA, CONGO  
(DEMOCRATIC REPUBLIC), CHINA, CHILE, CAMEROON, COLOMBIA, 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 NO STOCKHOLDERS. THE  
ELECTED TRUSTEES OF WCS CONSTITUTE THE MEMBERS OF WCS, WITH FULL VOTING  
RIGHTS AND SUCH OTHER POWERS AND AUTHORITY RESERVED TO "MEMBERS" UNDER  
THE NEW YORK NOT-FOR-PROFIT CORPPORATION LAW.

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  
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

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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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 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  
INDIVIDUAL WITH A CONFLICT 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 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.

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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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 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.  
 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

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
-----------------------------------------------------------	----------------------------------------------

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 9 OTHER CHANGES IN NET ASSETS EXPLANATION

CAPITAL GAIN ON K-1'S (6,906,305)

ORDINARY LOSS FROM K-1 253,704

POST RETIREMENT RELATED CHARGES (1,101,002)

RESTAURANT, MERCHANDISE NET (66,940)

PARKING EXPENSE 322,386

NET SUBSIDIARY ACTIVITY (10,223)

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TOTAL PART XI LINE 9 (7,508,380)

FORM 990, PART VI, LINE 4

THE WCS BYLAWS WERE AMENDED TO (1) REMOVE THE CHARTERS OF CERTAIN PROGRAM COMMITTEES FROM THE BYLAWS, AND REPLACE THEM WITH PROVISIONS GIVING THE BOARD THE AUTHORITY TO CREATE OTHER COMMITTEES, (2) RENAME CERTAIN COMMITTEES AND REVISE THEIR CHARTERS, (3) MAKE OTHER CHANGES TO SUPPORT EFFICIENT FUNCTIONING OF THE BOARD AND TO ADDRESS ANTICIPATED STATUTORY CHANGES.

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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ATTACHMENT 1FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

AFGHANISTAN

ARGENTINA

BELIZE

BOLIVIA

CAMBODIA

CHINA

CHILE

CAMEROON

COLOMBIA

ECUADOR

ATTACHMENT 2FORM 990, PART VI, LINE 17 - STATES

AL, AK, AR, CA, CO, CT, DE,

DC, FL, GA, HI, ID, IL, KS, KY, ME, MD, MA, MI,

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

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

ATTACHMENT 3990, PART VII- COMPENSATION OF THE FIVE HIGHEST PAID IND. CONTRACTORS

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
SITA 347 ELIZABETH AVE SOMERSET, NJ 08873	SOFTWARE INTEGRATION	1,653,222.
FREEZE FRAME LLC 1601 AMELIA STREET ORLANDO, FL 32803	PHOTO SERVICES	730,119.

Name of the organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
-----------------------------------------------------------	----------------------------------------------

ATTACHMENT 3 (CONT'D)

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

<u>NAME AND ADDRESS</u>	<u>DESCRIPTION OF SERVICES</u>	<u>COMPENSATION</u>
TURNER CONSTRUCTION 375 HUDSON STREET NEW YORK, NY 10014	CONSTRUCTION	16,792,187.
FGI CORPORATION 1901 AMETHYST STREET BRONX, NY 10462	CONSTRUCTION	1,332,579.
PG ARCHITECTS LANDSCAPE ARCHITECTS 1500 4TH AVE SEATTLE, WA 98102	ARCHITECTURAL	1,039,746.

COPY

**SCHEDULE R  
(Form 990)**

**Related Organizations and Unrelated Partnerships**

OMB No. 1545-0047

**2013**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

- ▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.**
- ▶ **Attach to Form 990.**      ▶ **See separate instructions.**
- ▶ **Information about Schedule R (Form 990) and its instructions is at [www.irs.gov/form990](http://www.irs.gov/form990).**

Name of the organization

WILDLIFE CONSERVATION SOCIETY

Employer identification number

13-1740011

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

(a) Name, address, and EIN (if applicable) 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, NY 10460 24-4470986	CONSERVATION	DE			WCS
(2) TIERRA DE GUANACOS LLC 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	DE			TIERRAS LL
(3) TIERRA DE TRUCHAS LLC 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	DE			TIERRAS LL
(4) TIERRAS LLC 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	DE			WCS
(5) CONSERVATION LIVELIHOODS INT'L LLC 2300 SOUTHERN BLVD BRONX, NY 10460	LIVLIHOODS	DE			WCS
(6)					

**Part II Identification of Related Tax-Exempt Organizations** Complete if the organization answered "Yes" on 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 M5S 2T9 85-4255882	CONSERVATION	CA			WCS	X	
(2) ZOOLOGICAL KINGDOM, INC. 2300 SOUTHERN BLVD BRONX, NY 10460 13-7220020	INACTIVE	NY	501(C)(3)	7	WCS	X	
(3) WILD LANDS CONSERVATION SOCIETY 2300 SOUTHERN BLVD BRONX, NY 10460 20-1262383	INACTIVE	DE	501(C)(3)	7	WCS	X	
(4) WCS ASSOCIACAO CONSERVACAO DA VIDA SILVE RUA JARDIM BOTANICO 674 22461	CONSERVATION	BR			WCS	X	
(5) WCS EUROPE ZXL OUTER CIRCLE NW14RY	CONSERVATION	UK			WCS	X	
(6) WILDLIFE CONSERVATION SOC SINGAPORE 1 RAFFLES PLACE 48919	CONSERVATION	SN			WCS	X	
(7)							

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

Schedule R (Form 990) 2013

**Part III Identification of Related Organizations Taxable as a Partnership** Complete if the organization answered "Yes" on 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) 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	
(1) -----												
(2) -----												
(3) -----												
(4) -----												
(5) -----												
(6) -----												
(7) -----												

**Part IV Identification of Related Organizations Taxable as a Corporation or Trust** Complete if the organization answered "Yes" on 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	(i) Section 512(b)(13) controlled entity?	
								Yes	No
(1) 182 FLIGHT CORP. ----- 13-4120289 2300 SOUTHERN BLVD BRONX, NY 10460	AIRCRAFT	DE	WCS	C			100.0000	X	
(2) WILDLIFE CONSERV & SCIENCE (MALAYSIA) ----- 99-9999999 7 JALAN RIDGEWAY 93450 SARAWAK, MY	CONSERVATION	MY	WCS	C	911,176.	237,099.	83.3333	X	
(3) TIERRA DE GUANACOS LLC UNO LIMITADA ----- 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	CI	TRUCH & GU	C			100.0000	X	
(4) TIERRA DE GUANACOS LLC DOS LIMITADA ----- 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	CI	TRUCH & GU	C			100.0000	X	
(5) WILDLIFE CONSERVATION SOCIETY - IND ----- 1669, 31ST CROSS, 16TH MAIN 560070 BANGALORE, IN	CONSERVATION	IN	WCS	C					X
(6) PROFESSIONAL HOUSING CORPORATION ----- 13-3546032 2300 SOUTHERN BLVD BRONX, NY 10460	REAL ESTATE	DE	WCS	C	63,600.	671,622.	100.0000	X	
(7) -----									

**Part V Transactions With Related Organizations** Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, 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 (i) interest (ii) annuities (iii) royalties or (iv) 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> Dividends from related organization(s)		X
<b>g</b> Sale of assets to related organization(s)		X
<b>h</b> Purchase of assets from related organization(s)		X
<b>i</b> Exchange of assets with related organization(s)		X
<b>j</b> Lease of facilities, equipment, or other assets to related organization(s)		X
<b>k</b> Lease of facilities, equipment, or other assets from related organization(s)	X	
<b>l</b> Performance of services or membership or fundraising solicitations for related organization(s)		X
<b>m</b> Performance of services or membership or fundraising solicitations by related organization(s)	X	
<b>n</b> Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
<b>o</b> Sharing of paid employees with related organization(s)	X	
<b>p</b> Reimbursement paid to related organization(s) for expenses	X	
<b>q</b> Reimbursement paid by related organization(s) for expenses	X	
<b>r</b> Other transfer of cash or property to related organization(s)	X	
<b>s</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 related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) WCS WILDLIFE CONSERV SOC CANADA	B	405,134.	FMV
(2) WCS ASSOCIACAO CONSERVACAO DA VIDA	B	540,000.	FMV
(3) WILDLIFE CONSERVATION & SCIENCE (MALAYSIA)	B	550,000.	FMV
(4) WCS EUROPE	B	309,480.	FMV
(5) COMMUNITY MARKETS FOR CONSERVATION	B	130,974.	FMV
(6)			

**Part VI** Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on 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) -----													
(12) -----													
(13) -----													
(14) -----													
(15) -----													
(16) -----													

**Part VII Supplemental Information**

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

## 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 PROPERTY FOR WILDLIFE CONSERVATION PURPOSES IN CHILE, AND EACH AS 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, WHOSE TAX EXEMPTION AS A TITLE HOLDING COMPANY UNDER SECTION 501(C)(2) WAS REINSTATED ON JULY 17, 2013. IT HOLDS TITLE TO REAL PROPERTY FOR, AND HAS

**Part VII Supplemental Information**

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

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 ORGANIZATION, ORGANIZED UNDER THE LAWS OF THE STATE OF RIO DE JANIERO, 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. WCS EUROPE IS A COMPANY LIMITED BY GUARANTEE UNDER THE LAW OF ENGLAND AND 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

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NATURAL ENVIRONMENT, IN PARTICULAR TO (I) PRESERVE WILDLIFE AND WILD PLACES AND (II) PROTECT AND CONSERVE, CARE FOR 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.

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