

Return of Organization Exempt From Income Tax

Department of the Treasury Internal Revenue Service

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. Go to www.irs.gov/Form990 for instructions and the latest information.

A For the 2021 calendar year, or tax year beginning 07/01/2021 and ending 06/30/2022

Header section containing organization name (WILDLIFE CONSERVATION SOCIETY), address (2300 SOUTHERN BLVD, BRONX, NY 10460), principal officer (DR. CRISTIAN SAMPER PRES & CEO), and tax-exempt status (501(c)(3)).

Part I Summary

Summary table with columns for Activities & Governance, Revenue, Expenses, and Net Assets or Fund Balances. Includes rows for mission statement, membership counts, revenue (Total: 393,224,094), expenses (Total: 337,028,286), and net assets (Total: 928,277,831).

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.

Signature of officer Robert Calamo, dated May 9, 2023, with title VP & COMPROLLER.

Paid Preparer section for Felicia R. Tucker, KPMG LLP, dated 5/8/2023, with PTIN P00505155.

May the IRS discuss this return with the preparer shown above? See instructions. [X] Yes [ ] No

For Paperwork Reduction Act Notice, see the separate instructions. Form 990 (2021)

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 \$ 142,352,038. including grants of \$ 16,493,515. ) (Revenue \$ 39,721,529. )

GLOBAL CONSERVATION: 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 \$ 117,594,872. including grants of \$ ) (Revenue \$ 28,644,166. )

BRONX ZOO AND NEW YORK AQUARIUM: TOTAL ATTENDANCE AT ALL FIVE WCS FACILITIES WAS 3,222,467. AT THE BRONX ZOO ATTENDANCE TOTALED 1,560,815 AND AT THE NEW YORK AQUARIUM ATTENDANCE TOTALED 550,003. ACCOMPLISHMENTS CONTINUED SCHEDULE O.

4c (Code: ) (Expenses \$ 27,472,178. including grants of \$ ) (Revenue \$ 10,923,929. )

CITY ZOOS: CENTRAL PARK/PROSPECT PARK AND QUEENS ZOOS; CENTRAL PARK ZOO (CPZ) ATTENDANCE 677,976; PROSPECT PARK ZOO (PPZ) ATTENDANCE 217,168; QUEENS ZOO ATTENDANCE 216,505. ACCOMPLISHMENTS CONTINUED ON SCHEDULE O.

4d Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$ ) (Revenue \$ 11,363,363. )

4e Total program service expenses 287,419,088.

Part IV Checklist of Required Schedules

Table with 3 columns: Question ID, Question Text, and Yes/No response columns. Rows include questions 1 through 21 regarding organizational requirements and reporting.

Part IV Checklist of Required Schedules (continued)

Table with 3 columns: Question, Yes, No. Rows 22-38 covering various organizational requirements and schedules.

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 [X]

Table with 3 columns: Question, Yes, No. Rows 1a-1c regarding Form 1096, W-2G forms, and backup withholding rules.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

Table with columns for question number, question text, and Yes/No columns. Includes questions 2a through 17 regarding employee counts, tax returns, gross income, foreign accounts, prohibited transactions, and charitable contributions.

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 on 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 SEE SCHEDULE O
18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, 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.
19 Describe on 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, address, and telephone number of the person who possesses the organization's books and records

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 the 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, Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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.
- See the instructions for the order in which to list the persons above.

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/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(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) DR. CRISTIAN SAMPER PRESIDENT & CEO	40.00 NONE	X		X				975,986.	NONE	261,947.
(2) ROBERT MENZI EVP CHIEF OPERATING OFFICER	40.00 0.20			X				1,019,490.	NONE	182,762.
(3) PAULA HAYES EVP CHIEF OF GLOBAL RESOURCES	40.00 NONE			X				400,481.	NONE	174,218.
(4) CHRISTOPHER J. MCKENZIE SVP GENERAL COUNSEL	40.00 0.50			X				399,775.	NONE	145,999.
(5) JAMES J. BREHENY EVP DIRECTOR OF ZOOS/AQUARIUM	40.00 NONE			X				369,973.	NONE	173,177.
(6) JOHN F. CALVELLI EVP PUBLIC AFFAIRS	40.00 0.10			X				422,424.	NONE	104,478.
(7) JOSEPH WALSTON EVP FIELD CONSERVATION	40.00 0.30			X				344,002.	NONE	105,954.
(8) CRAIG PIPER DIRECTOR OF CITY ZOOS	40.00 NONE					X		300,815.	NONE	126,215.
(9) ROBERT CALAMO VP & COMPROLLER	40.00 0.50			X				306,395.	NONE	108,494.
(10) JELLE BOOT VP HUMAN RESOURCES	40.00 NONE					X		293,385.	NONE	115,346.
(11) LAURA STOLZENTHALER SVP & CFO	40.00 0.20			X				322,602.	NONE	83,502.
(12) NIKO RADJENOVIC VP BUSINESS SERVICES	40.00 NONE			X				298,037.	NONE	91,726.
(13) AMANDA FINE ASSOC DIR ASIA WILDLIFE HEALTH	40.00 NONE					X		281,705.	NONE	80,153.
(14) MARY DIXON SVP COMMUNICATIONS	40.00 NONE					X		262,210.	NONE	91,779.

**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 ) SUSAN CHIN VP OF PLANNING AND DESIGN	40.00 NONE					X	256,314.	NONE	81,586.	
( 16 ) ALEJANDRO SANTO DOMINGO CHAIR & TRUSTEE	4.00 NONE	X		X			NONE	NONE	NONE	
( 17 ) HAMILTON E. JAMES VICE CHAIR & TRUSTEE	2.00 NONE	X		X			NONE	NONE	NONE	
( 18 ) THOMAS J. EDELMAN TREASURER & TRUSTEE	2.00 NONE	X		X			NONE	NONE	NONE	
( 19 ) ELIZABETH AINSLIE SECRETARY	2.00 NONE	X		X			NONE	NONE	NONE	
( 20 ) ERIC ADAMS EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
( 21 ) BRAD LANDER EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
( 22 ) ADRIENNE E. ADAMS EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
( 23 ) SUSAN DONOGHUE EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
( 24 ) VANESSA L. GIBSON EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
( 25 ) ANTONIO REYNOSO EX OFFICIO TRUSTEE	0.50 NONE	X					NONE	NONE	NONE	
<b>1b Sub-total</b>							6,253,594.	NONE	1,927,336.	
<b>c Total from continuation sheets to Part VII, Section A</b>							NONE	NONE	NONE	
<b>d Total (add lines 1b and 1c)</b>							6,253,594.	NONE	1,927,336.	

**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 **▶** 177

	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>		
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>		
<b>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>		

**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			
( 26 ) GORDON E. DYAL ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 27 ) ANDREW H. TISCH ----- TRUSTEE	2.00 ----- NONE	X						NONE	NONE	NONE
( 28 ) DAVID B. SCHIFF ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 29 ) DUNCAN A. CHAPMAN ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 30 ) KATHERINE L. DOLAN ----- TRUSTEE	2.00 ----- NONE	X						NONE	NONE	NONE
( 31 ) CHRISTOPHER J. ELLIMAN ----- TRUSTEE	2.00 ----- NONE	X						NONE	NONE	NONE
( 32 ) RUDOLPH F. CREW ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 33 ) O. ANDREAS HALVORSEN ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 34 ) PAUL A. GOULD ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 35 ) PETER T. GRAUER ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 36 ) JUDITH H. HAMILTON ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
<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 ▶

	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> . . . . .		
<b>4</b> For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i> . . . . .		
<b>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> . . . . .		

**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 ) JOHN N. IRWIN III TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 38 ) ROSINA M. BIERBAUM TRUSTEE	2.00 NONE	X					NONE	NONE	NONE	
( 39 ) AMBROSE K. MONELL TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 40 ) ADEBAYO O. OGUNLESI TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 41 ) DAVID J. MILLSTONE TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 42 ) WALTER C. SEDGWICK TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 43 ) CAROLINE N. SIDNAM TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 44 ) ROSELINDE TORRES TRUSTEE	2.00 NONE	X					NONE	NONE	NONE	
( 45 ) JULIA MARTON-LEFEVRE TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 46 ) FREDERICK W. BEINECKE TRUSTEE	1.00 NONE	X					NONE	NONE	NONE	
( 47 ) ANTONIA M. GRUMBACH TRUSTEE	2.00 NONE	X					NONE	NONE	NONE	
<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

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

**Section B. Independent Contractors**

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

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

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 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 ) JONATHAN D. GREEN ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 49 ) KATHERINE SHERRILL ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 50 ) JUAN MANUEL SANTOS ----- TRUSTEE	2.00 ----- NONE	X						NONE	NONE	NONE
( 51 ) ROBERT B. ZOELLYCK ----- TRUSTEE	1.00 ----- NONE	X						NONE	NONE	NONE
( 52 ) JAN HATZIUS ----- TRUSTEE FROM 06/07/2022	1.00 ----- NONE	X						NONE	NONE	NONE
( 53 ) LORETTA M. STADLER ----- TRUSTEE FROM 03/01/2022	1.00 ----- NONE	X						NONE	NONE	NONE
( 54 ) MARCEL VAN POECKE ----- TRUSTEE FROM 10/26/2021	1.00 ----- NONE	X						NONE	NONE	NONE
( 55 ) AKIKO YAMAZAKI ----- TRUSTEE FROM 10/26/2021	1.00 ----- NONE	X						NONE	NONE	NONE
-----										
-----										
-----										
<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 ▶

	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
SEE SCHEDULE O		

**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 VIII Statement of Revenue

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

Table with columns: (A) Total revenue, (B) Related or exempt function revenue, (C) Unrelated business revenue, (D) Revenue excluded from tax under sections 512-514. Rows include Contributions, Gifts, Grants and Other Similar Amounts; Program Service Revenue; Other Revenue; and Miscellaneous Revenue.

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

Table with 5 columns: (A) Total expenses, (B) Program service expenses, (C) Management and general expenses, (D) Fundraising expenses. Rows include categories like Grants, Salaries, Pension, and Total functional expenses.

Part X Balance Sheet

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

Table with columns for Assets, Liabilities, and Net Assets or Fund Balances. Rows include items like Cash, Accounts receivable, Investments, and Total assets/liabilities. Includes sub-rows 10a and 10b for land/equipment.

Part XI Reconciliation of Net Assets

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

Table with 10 rows for reconciliation of net assets. Line 1: 393,224,094; Line 2: 337,028,286; Line 3: 56,195,808; Line 4: 881,740,973; Line 5: -16,743,509; Line 9: 7,084,559; Line 10: 928,277,831.

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 [X] Accrual [ ] Other
2a Were the organization's financial statements compiled or reviewed by an independent accountant?
2b Were the organization's financial statements audited by an independent accountant?
2c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
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?
3b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits.

Table with 3 columns: Question, Yes, No. Row 2a: Yes [ ], No [X]. Row 2b: Yes [X], No [ ]. Row 2c: Yes [X], No [ ]. Row 3a: Yes [X], No [ ]. Row 3b: Yes [X], No [ ].

**SCHEDULE A  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

**Public Charity Status and Public Support**

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

▶ Attach to Form 990 or Form 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Name of the organization

WILDLIFE CONSERVATION SOCIETY

Employer identification number

13-1740011

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

The organization is not a private foundation because it is: (For lines 1 through 12, 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 (Form 990).)
- 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 agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  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.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  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 on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations . . . . .
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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. Add lines 1 through 3; 5 The portion of total contributions by each person; 6 Public support. Subtract line 5 from line 4.

Section B. Total Support

Table with 7 columns: (a) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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. Do not include gain or loss from the sale of capital assets; 11 Total support. Add lines 7 through 10; 12 Gross receipts from related activities, etc.; 13 First 5 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 2 columns: Line number, Percentage. Rows include: 14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f)) - 92.31%; 15 Public support percentage from 2020 Schedule A, Part II, line 14 - 95.37%; 16a 33 1/3% support test - 2021 (checked); 16b 33 1/3% support test - 2020; 17a 10%-facts-and-circumstances test - 2021; 17b 10%-facts-and-circumstances test - 2020; 18 Private foundation.

Part III Support Schedule for Organizations Described in Section 509(a)(2)
(Complete only if you checked the box on line 10 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) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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. Add lines 1 through 5; 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) 2017, (b) 2018, (c) 2019, (d) 2020, (e) 2021, (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 5 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 2 columns: Line number, Percentage. Row 15: Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f)) 15 %; Row 16: Public support percentage from 2020 Schedule A, Part III, line 15 16 %

Section D. Computation of Investment Income Percentage

Table with 2 columns: Line number, Percentage. Row 17: Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f)) 17 %; Row 18: Investment income percentage from 2020 Schedule A, Part III, line 17 18 %

19a 33 1/3% support tests - 2021. 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 - 2020. 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 Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b <b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c <b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? <i>If "Yes," complete Part I of Schedule L (Form 990).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

Table with 3 columns: Question, Yes, No. Row 11: Has the organization accepted a gift or contribution from any of the following persons? Sub-rows 11a, 11b, 11c.

Section B. Type I Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? Row 2: Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization?

Section C. Type II Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)?

Section D. All Type III Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? Row 2: Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? Row 3: By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year?

Section E. Type III Functionally Integrated Supporting Organizations

Table with 3 columns: Question, Yes, No. Row 1: Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). Sub-rows a, b, c. Row 2: Activities Test. Answer lines 2a and 2b below. Sub-rows a, b. Row 3: Parent of Supported Organizations. Answer lines 3a and 3b below. Sub-rows a, b.

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (*explain in Part VI*). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	8	
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	<b>Total</b> (add lines 1a, 1b, and 1c)	1d	
e	<b>Discount</b> claimed for blockage or other factors ( <i>explain in detail in Part VI</i> ):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	<b>Minimum Asset Amount</b> (add line 7 to line 6)	8	
Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

Schedule A (Form 990) 2021

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

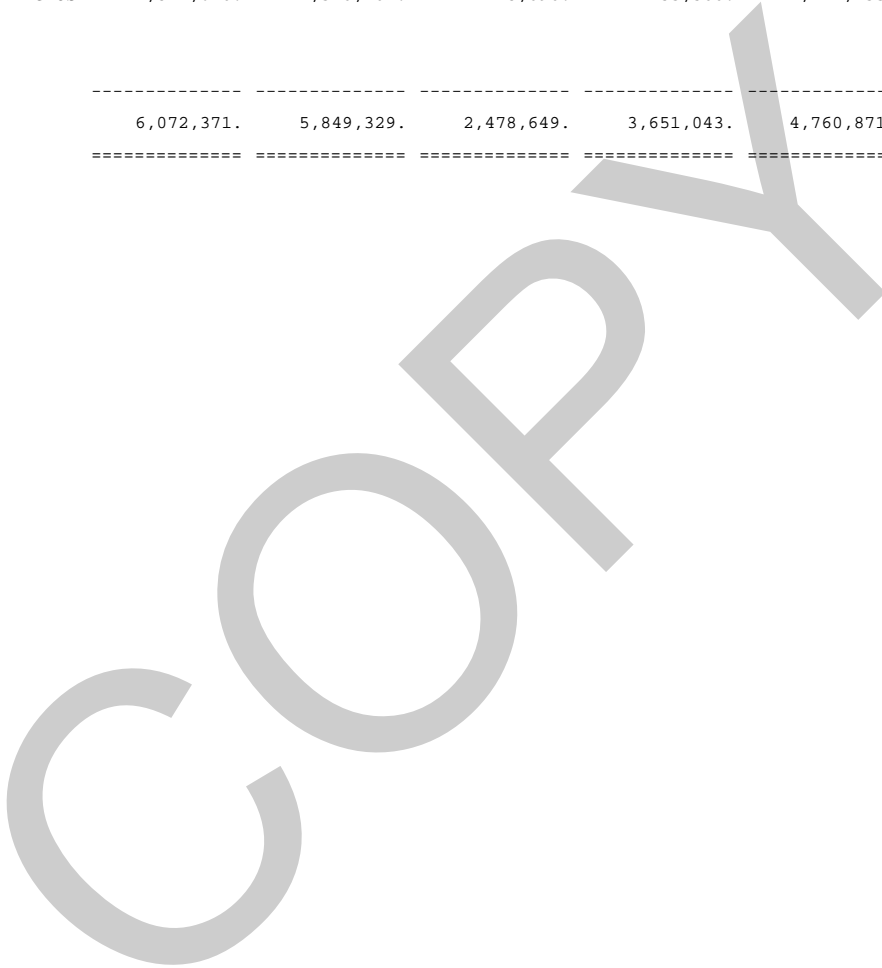
Section D - Distributions		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required - provide details in Part VI)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	<b>Total annual distributions.</b> Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2021 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E - Distribution Allocations (see instructions)		(i) Excess Distributions	(ii) Underdistributions Pre-2021	(iii) Distributable Amount for 2021
1	Distributable amount for 2021 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2021 (reasonable cause required - explain in Part VI). See instructions.			
3	Excess distributions carryover, if any, to 2021			
a	From 2016 . . . . .			
b	From 2017 . . . . .			
c	From 2018 . . . . .			
d	From 2019 . . . . .			
e	From 2020 . . . . .			
f	<b>Total</b> of lines 3a through 3e			
g	Applied to underdistributions of prior years			
h	Applied to 2021 distributable amount			
i	Carryover from 2016 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
4	Distributions for 2021 from Section D, line 7: \$			
a	Applied to underdistributions of prior years			
b	Applied to 2021 distributable amount			
c	Remainder. Subtract lines 4a and 4b from line 4.			
5	Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6	Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7	<b>Excess distributions carryover to 2022.</b> Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2017 . . . . .			
b	Excess from 2018 . . . . .			
c	Excess from 2019 . . . . .			
d	Excess from 2020 . . . . .			
e	Excess from 2021 . . . . .			

**Part VI Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II - OTHER INCOME

DESCRIPTION	2017	2018	2019	2020	2021	TOTAL
MISCELLANEOUS REVENUE	3,348,174.	2,261,446.	1,754,589.	2,956,954.	1,900,081.	12,221,244.
SPONSORSHIP, LICENSING	912,527.	1,267,482.	495,970.	440,589.	746,657.	3,863,225.
SPECIAL EVENTS REVENUES - GROS	1,811,670.	2,320,401.	228,090.	253,500.	2,114,133.	6,727,794.
<b>TOTALS</b>	<b>6,072,371.</b>	<b>5,849,329.</b>	<b>2,478,649.</b>	<b>3,651,043.</b>	<b>4,760,871.</b>	<b>22,812,263.</b>



**SCHEDULE C**  
**(Form 990)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2021**

**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.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

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

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

Name of organization WILDLIFE CONSERVATION SOCIETY	Employer identification number 13-1740011
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**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. See instructions for definition of "political campaign activities."
- 2 Political campaign activity expenditures. See instructions ▶ \$ \_\_\_\_\_
- 3 Volunteer hours for political campaign activities. See instructions \_\_\_\_\_

**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) 2021

**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> <b>(The term "expenditures" means amounts paid or incurred.)</b>		<b>(a) Filing organization's totals</b>	<b>(b) Affiliated group totals</b>
<b>1a</b> Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .		26,801.	26,801.
<b>b</b> Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .		406,744.	406,744.
<b>c</b> Total lobbying expenditures (add lines 1a and 1b) . . . . .		433,545.	433,545.
<b>d</b> Other exempt purpose expenditures . . . . .		336,594,741.	336,594,741.
<b>e</b> Total exempt purpose expenditures (add lines 1c and 1d) . . . . .		337,028,286.	337,028,286.
<b>f</b> Lobbying nontaxable amount. Enter the amount from the following table in both columns.		1,000,000.	1,000,000.
<b>If the amount on line 1e, column (a) or (b) is:</b>			
<b>The lobbying nontaxable amount is:</b>			
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.	250,000.
<b>h</b> Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .		NONE	NONE
<b>i</b> Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .		NONE	NONE
<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 separate instructions for lines 2a through 2f.)

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	<b>(a) 2018</b>	<b>(b) 2019</b>	<b>(c) 2020</b>	<b>(d) 2021</b>	<b>(e) Total</b>
<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	324,819.	446,198.	340,539.	433,545.	1,545,101.
<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	66,894.	48,332.	55,518.	26,801.	197,545.

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: (a) Yes/No, (b) Amount. Rows include: 1 During the year, did the filing organization attempt to influence foreign, national, state, or local legislation...; 2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?; 2b If "Yes," enter the amount of any tax incurred under section 4912; 2c If "Yes," enter the amount of any tax incurred by organization managers under section 4912; 2d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

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

Table with 3 columns: Question, Yes, No. Rows 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 campaign activity 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 main columns: Question, Amount. Rows 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, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SEE PAGE 4

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**Part IV** Supplemental Information (continued)

SCHEDULE C, PART II-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 SEND EMAILS TO FEDERAL ELECTED OFFICIALS. IN ADDITION, THE WEBSITE WAS UTILIZED FOR GRASSROOTS OUTREACH ON THE CITY AND STATE LEVEL IN REGARDS TO 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.

SCHEDULE C, PART II-A, LINE A

WCS HAS AFFILIATED ENTITIES, AS DESCRIBED IN IRC SECTION 4911(F), A LISTING OF WHICH MAY BE FOUND ON FORM 990, SCHEDULE R. WCS IS THE ONLY ENTITY IN THE GROUP WHICH CONDUCTS LOBBYING ACTIVITY, ALL OF WHICH IS REPORTED ON PART II-A, LINE 1.

SCHEDULE D (Form 990)

Supplemental Financial Statements

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

13-1740011

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?, 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements held by the organization (check all that apply), 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year, 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?, 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year, 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?, 9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items., 1b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (i) Revenue included on Form 990, Part VIII, line 1., (ii) Assets included in Form 990, Part X., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1., b Assets included in Form 990, Part X.

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

Schedule D (Form 990) 2021

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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 make 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 program
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" on 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 columns: Description, Amount
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, for escrow or custodial account liability?
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on 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 include: 1a Beginning of year balance, b Contributions, c Net investment earnings, gains, and losses, d Grants or scholarships, e Other expenditures for facilities and programs, f Administrative expenses, g 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 27.3000 %
b Permanent endowment 56.2800 %
c Term endowment 16.4200 %

The percentages on 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:

- (i) Unrelated organizations
(ii) Related organizations

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

b If "Yes" on line 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" on 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 include: 1a Land, b Buildings, c Leasehold improvements, d Equipment, e Other, Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)

**Part VII Investments - Other Securities.**

Complete if the organization answered "Yes" on 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	336,065,418.	FMV
(B) EQUITY/EQUITY FUNDS	79,750,270.	FMV
(C) ALTERNATIVE INVESTMENTS	63,663,128.	FMV
(D) NATURAL RESOURCES	3,201,678.	FMV
(E) SHORT TERM INVESTMENTS	22,336,387.	FMV
(F)		
(G)		
(H)		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . ▶	505,016,881.	

**Part VIII Investments - Program Related.**

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

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

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on 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 BEN OBLIGATION	45,883,859.
(3) ANNUITY LIABILITY	2,730,634.
(4) BONDS PAYABLE	164,923,219.
(5)	
(6)	
(7)	
(8)	
(9)	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . . ▶	213,537,712.

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 FASB 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" on Form 990, Part IV, line 12a.

Table with 5 main rows and sub-rows (a-e) for adjustments. Total revenue reported as 393,224,094.

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

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

Table with 5 main rows and sub-rows (a-e) for adjustments. Total expenses reported as 337,028,286.

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 SUPPLEMENTAL PAGE

**Part XIII Supplemental Information** (continued)

## SCHEDULE D, 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. THERE ARE CERTAIN TRANSACTIONS WHICH COULD BE DEEMED "UNRELATED BUSINESS INCOME" AND WOULD RESULT IN A TAX LIABILITY. MANAGEMENT REVIEWS TRANSACTIONS TO ESTIMATE THE POTENTIAL TAX LIABILITIES USING A THRESHOLD OF MORE LIKELY THAN NOT OF BEING SUSTAINED. IT IS MANAGEMENT'S ESTIMATION THAT THERE ARE NO MATERIAL TAX LIABILITIES THAT NEED TO BE RECORDED.

## SCHEDULE D, PART V - 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

POSTRETIREMENT-RELATED CHANGE	9,884,708
RESTAURANT, MERCHANDISE EXP	19,282,369
FOREIGN SUBSIDIARIES INCOME	7,367,352
US SUBSIDIARIES INCOME	72,800
	-----
TOTAL	36,607,229

## SCHEDULE D, PART XI, LINE 4B

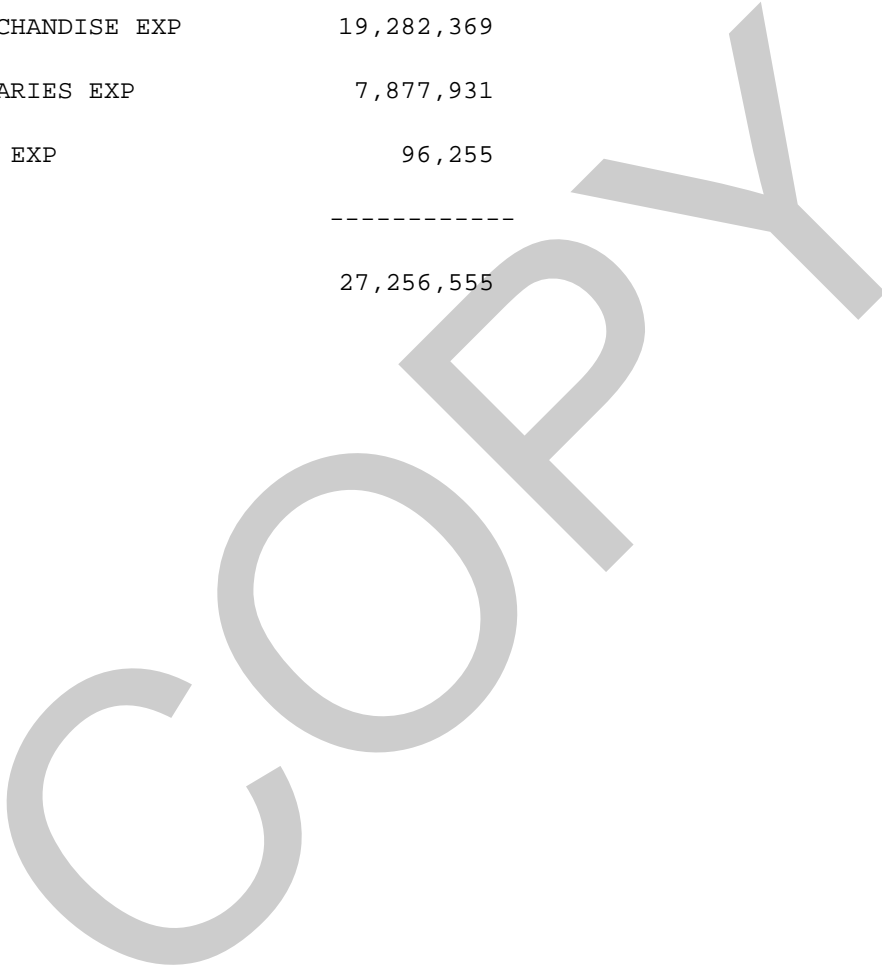
CAPITAL GAIN FROM K-1	1,085,990
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**Part XIII** Supplemental Information (continued)

ORDINARY GAIN FROM K-1	1,714,159
	-----
TOTAL	2,800,149

SCHEDULE D, PART XII, LINE 2D

RESTAURANT, MERCHANDISE EXP	19,282,369
FOREIGN SUBSIDIARIES EXP	7,877,931
US SUBSIDIARIES EXP	96,255
	-----
TOTAL	27,256,555



**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2021**

**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.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
<b>(1)</b> CENTRAL AMERICA/CARIBBEAN	4	85	PROGRAM SERVICES	CONSERVATION PROGRAM	5,138,067.
<b>(2)</b> CENTRAL AMERICA/CARIBBEAN			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	489,967.
<b>(3)</b> EAST ASIA AND THE PACIFIC	16	483	PROGRAM SERVICES	CONSERVATION PROGRAM	33,587,839.
<b>(4)</b> EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	1,832,703.
<b>(5)</b> EUROPE	2	20	PROGRAM SERVICES	CONSERVATION PROGRAM	202,635.
<b>(6)</b> EUROPE			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	725,785.
<b>(7)</b> RUSSIA/INDEPENDENT STATES	1	15	PROGRAM SERVICES	CONSERVATION PROGRAM	2,137,772.
<b>(8)</b> RUSSIA/INDEPENDENT STATES			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	6,474.
<b>(9)</b> SOUTH AMERICA	8	276	PROGRAM SERVICES	CONSERVATION PROGRAM	17,112,524.
<b>(10)</b> SOUTH AMERICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	1,556,605.
<b>(11)</b> SOUTH ASIA	5	181	PROGRAM SERVICES	CONSERVATION PROGRAM	2,424,079.
<b>(12)</b> SOUTH ASIA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	1,202,403.
<b>(13)</b> SUB-SAHARAN AFRICA	46	1,554	PROGRAM SERVICES	CONSERVATION PROGRAM	49,844,788.
<b>(14)</b> SUB-SAHARAN AFRICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	2,235,398.
<b>(15)</b> NORTH AMERICA	8	47	PROGRAM SERVICES	CONSERVATION PROGRAM	32,400.
<b>(16)</b> NORTH AMERICA			PROGRAM SERVICES	GRANTS & SCHOLARSHIPS	85,740.
<b>(17)</b> CENTRAL AMERICA/CARIBBEAN			INVESTMENTS		73,718,793.
<b>3a</b> Subtotal	90	2,661.			192,333,972.
<b>b</b> Total from continuation sheets to Part I					
<b>c</b> Totals (add lines 3a and 3b)	90.	2,661.			192,333,972.

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

Schedule F (Form 990) 2021

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**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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			CENT. AMERICA/CARIBBEAN	CONSERVATION	21,879.	CHECK/WIRE			
(2)			CENT. AMERICA/CARIBBEAN	CONSERVATION	17,051.	CHECK/WIRE			
(3)			CENT. AMERICA/CARIBBEAN	CONSERVATION	41,048.	CHECK/WIRE			
(4)			CENT. AMERICA/CARIBBEAN	CONSERVATION	20,000.	CHECK/WIRE			
(5)			CENT. AMERICA/CARIBBEAN	CONSERVATION	40,022.	CHECK/WIRE			
(6)			CENT. AMERICA/CARIBBEAN	CONSERVATION	7,650.	CHECK/WIRE			
(7)			CENT. AMERICA/CARIBBEAN	CONSERVATION	55,465.	CHECK/WIRE			
(8)			CENT. AMERICA/CARIBBEAN	CONSERVATION	11,200.	CHECK/WIRE			
(9)			CENT. AMERICA/CARIBBEAN	CONSERVATION	124,189.	CHECK/WIRE			
(10)			CENT. AMERICA/CARIBBEAN	CONSERVATION	9,548.	CHECK/WIRE			
(11)			CENT. AMERICA/CARIBBEAN	CONSERVATION	35,252.	CHECK/WIRE			
(12)			CENT. AMERICA/CARIBBEAN	CONSERVATION	13,935.	CHECK/WIRE			
(13)			CENT. AMERICA/CARIBBEAN	CONSERVATION	9,889.	CHECK/WIRE			
(14)			EAST ASIA/PACIFIC	CONSERVATION	20,000.	CHECK/WIRE			
(15)			EAST ASIA/PACIFIC	CONSERVATION	6,950.	CHECK/WIRE			
(16)			EAST ASIA/PACIFIC	CONSERVATION	25,000.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	CONSERVATION	78,463.	CHECK/WIRE			
(2)			EAST ASIA/PACIFIC	CONSERVATION	21,320.	CHECK/WIRE			
(3)			EAST ASIA/PACIFIC	CONSERVATION	49,455.	CHECK/WIRE			
(4)			EAST ASIA/PACIFIC	CONSERVATION	37,731.	CHECK/WIRE			
(5)			EAST ASIA/PACIFIC	CONSERVATION	9,986.	CHECK/WIRE			
(6)			EAST ASIA/PACIFIC	CONSERVATION	80,405.	CHECK/WIRE			
(7)			EAST ASIA/PACIFIC	CONSERVATION	17,276.	CHECK/WIRE			
(8)			EAST ASIA/PACIFIC	CONSERVATION	16,000.	CHECK/WIRE			
(9)			EAST ASIA/PACIFIC	CONSERVATION	25,000.	CHECK/WIRE			
(10)			EAST ASIA/PACIFIC	CONSERVATION	60,657.	CHECK/WIRE			
(11)			EAST ASIA/PACIFIC	CONSERVATION	6,560.	CHECK/WIRE			
(12)			EAST ASIA/PACIFIC	CONSERVATION	40,000.	CHECK/WIRE			
(13)			EAST ASIA/PACIFIC	CONSERVATION	279,000.	CHECK/WIRE			
(14)			EAST ASIA/PACIFIC	CONSERVATION	42,740.	CHECK/WIRE			
(15)			EAST ASIA/PACIFIC	CONSERVATION	36,025.	CHECK/WIRE			
(16)			EAST ASIA/PACIFIC	CONSERVATION	25,352.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EAST ASIA/PACIFIC	CONSERVATION	104,357.	CHECK/WIRE			
(2)			EAST ASIA/PACIFIC	CONSERVATION	29,873.	CHECK/WIRE			
(3)			EAST ASIA/PACIFIC	CONSERVATION	43,996.	CHECK/WIRE			
(4)			EAST ASIA/PACIFIC	CONSERVATION	26,227.	CHECK/WIRE			
(5)			EAST ASIA/PACIFIC	CONSERVATION	20,000.	CHECK/WIRE			
(6)			EAST ASIA/PACIFIC	CONSERVATION	121,709.	CHECK/WIRE			
(7)			EAST ASIA/PACIFIC	CONSERVATION	86,550.	CHECK/WIRE			
(8)			EAST ASIA/PACIFIC	CONSERVATION	50,004.	CHECK/WIRE			
(9)			EAST ASIA/PACIFIC	CONSERVATION	23,420.	CHECK/WIRE			
(10)			EAST ASIA/PACIFIC	CONSERVATION	59,689.	CHECK/WIRE			
(11)			EAST ASIA/PACIFIC	CONSERVATION	27,988.	CHECK/WIRE			
(12)			EAST ASIA/PACIFIC	CONSERVATION	106,886.	CHECK/WIRE			
(13)			EAST ASIA/PACIFIC	CONSERVATION	18,761.	CHECK/WIRE			
(14)			EAST ASIA/PACIFIC	CONSERVATION	12,000.	CHECK/WIRE			
(15)			NORTH AMERICA	CONSERVATION	61,344.	CHECK/WIRE			
(16)			NORTH AMERICA	CONSERVATION	6,300.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			NORTH AMERICA	CONSERVATION	16,016.	CHECK/WIRE			
(2)			RUSSIA/NEWLY IND. STATES	CONSERVATION	6,474.	CHECK/WIRE			
(3)			SOUTH AMERICA	CONSERVATION	6,534.	CHECK/WIRE			
(4)			SOUTH AMERICA	CONSERVATION	22,273.	CHECK/WIRE			
(5)			SOUTH AMERICA	CONSERVATION	78,652.	CHECK/WIRE			
(6)			SOUTH AMERICA	CONSERVATION	6,000.	CHECK/WIRE			
(7)			SOUTH AMERICA	CONSERVATION	9,850.	CHECK/WIRE			
(8)			SOUTH AMERICA	CONSERVATION	15,729.	CHECK/WIRE			
(9)			SOUTH AMERICA	CONSERVATION	42,593.	CHECK/WIRE			
(10)			SOUTH AMERICA	CONSERVATION	38,482.	CHECK/WIRE			
(11)			SOUTH AMERICA	CONSERVATION	33,123.	CHECK/WIRE			
(12)			SOUTH AMERICA	CONSERVATION	50,295.	CHECK/WIRE			
(13)			SOUTH AMERICA	CONSERVATION	22,730.	CHECK/WIRE			
(14)			SOUTH AMERICA	CONSERVATION	34,820.	CHECK/WIRE			
(15)			SOUTH AMERICA	CONSERVATION	17,166.	CHECK/WIRE			
(16)			SOUTH AMERICA	CONSERVATION	16,000.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	CONSERVATION	9,850.	CHECK/WIRE			
(2)			SOUTH AMERICA	CONSERVATION	24,000.	CHECK/WIRE			
(3)			SOUTH AMERICA	CONSERVATION	189,486.	CHECK/WIRE			
(4)			SOUTH AMERICA	CONSERVATION	19,996.	CHECK/WIRE			
(5)			SOUTH AMERICA	CONSERVATION	24,000.	CHECK/WIRE			
(6)			SOUTH AMERICA	CONSERVATION	19,050.	CHECK/WIRE			
(7)			SOUTH AMERICA	CONSERVATION	15,808.	CHECK/WIRE			
(8)			SOUTH AMERICA	CONSERVATION	46,449.	CHECK/WIRE			
(9)			SOUTH AMERICA	CONSERVATION	16,000.	CHECK/WIRE			
(10)			SOUTH AMERICA	CONSERVATION	25,288.	CHECK/WIRE			
(11)			SOUTH AMERICA	CONSERVATION	18,800.	CHECK/WIRE			
(12)			SOUTH AMERICA	CONSERVATION	28,873.	CHECK/WIRE			
(13)			SOUTH AMERICA	CONSERVATION	17,324.	CHECK/WIRE			
(14)			SOUTH AMERICA	CONSERVATION	12,292.	CHECK/WIRE			
(15)			SOUTH AMERICA	CONSERVATION	12,122.	CHECK/WIRE			
(16)			SOUTH AMERICA	CONSERVATION	31,415.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SOUTH AMERICA	CONSERVATION	21,617.	CHECK/WIRE			
(2)			SOUTH AMERICA	CONSERVATION	38,253.	CHECK/WIRE			
(3)			SOUTH AMERICA	CONSERVATION	40,961.	CHECK/WIRE			
(4)			SOUTH ASIA	CONSERVATION	1,166,570.	CHECK/WIRE			
(5)			SUB-SAHARAN AFRICA	CONSERVATION	5,882.	CHECK/WIRE			
(6)			SUB-SAHARAN AFRICA	CONSERVATION	65,571.	CHECK/WIRE			
(7)			SUB-SAHARAN AFRICA	CONSERVATION	82,178.	CHECK/WIRE			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	20,958.	CHECK/WIRE			
(9)			SUB-SAHARAN AFRICA	CONSERVATION	53,189.	CHECK/WIRE			
(10)			SUB-SAHARAN AFRICA	CONSERVATION	18,200.	CHECK/WIRE			
(11)			SUB-SAHARAN AFRICA	CONSERVATION	43,598.	CHECK/WIRE			
(12)			SUB-SAHARAN AFRICA	CONSERVATION	80,676.	CHECK/WIRE			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	974,048.	CHECK/WIRE			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	155,559.	CHECK/WIRE			
(15)			SUB-SAHARAN AFRICA	CONSERVATION	18,128.	CHECK/WIRE			
(16)			SUB-SAHARAN AFRICA	CONSERVATION	21,281.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			SUB-SAHARAN AFRICA	CONSERVATION	31,027.	CHECK/WIRE			
(2)			SUB-SAHARAN AFRICA	CONSERVATION	10,000.	CHECK/WIRE			
(3)			SUB-SAHARAN AFRICA	CONSERVATION	20,000.	CHECK/WIRE			
(4)			SUB-SAHARAN AFRICA	CONSERVATION	73,853.	CHECK/WIRE			
(5)			SUB-SAHARAN AFRICA	CONSERVATION	38,950.	CHECK/WIRE			
(6)			SUB-SAHARAN AFRICA	CONSERVATION	7,000.	CHECK/WIRE			
(7)			SUB-SAHARAN AFRICA	CONSERVATION	222,057.	CHECK/WIRE			
(8)			SUB-SAHARAN AFRICA	CONSERVATION	10,000.	CHECK/WIRE			
(9)			SUB-SAHARAN AFRICA	CONSERVATION	9,972.	CHECK/WIRE			
(10)			SUB-SAHARAN AFRICA	CONSERVATION	49,294.	CHECK/WIRE			
(11)			SUB-SAHARAN AFRICA	CONSERVATION	80,210.	CHECK/WIRE			
(12)			SUB-SAHARAN AFRICA	CONSERVATION	10,000.	CHECK/WIRE			
(13)			SUB-SAHARAN AFRICA	CONSERVATION	35,600.	CHECK/WIRE			
(14)			SUB-SAHARAN AFRICA	CONSERVATION	15,319.	CHECK/WIRE			
(15)			EUROPE/ICELAND/GREENLAND	CONSERVATION	20,000.	CHECK/WIRE			
(16)			EUROPE/ICELAND/GREENLAND	CONSERVATION	43,500.	CHECK/WIRE			

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization 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 noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			EUROPE/ICELAND/GREENLAND	CONSERVATION	197,887.	CHECK/WIRE			
(2)			EUROPE/ICELAND/GREENLAND	CONSERVATION	10,000.	CHECK/WIRE			
(3)			EUROPE/ICELAND/GREENLAND	CONSERVATION	62,428.	CHECK/WIRE			
(4)			EUROPE/ICELAND/GREENLAND	CONSERVATION	8,910.	CHECK/WIRE			
(5)			EUROPE/ICELAND/GREENLAND	CONSERVATION	114,797.	CHECK/WIRE			
(6)			EUROPE/ICELAND/GREENLAND	CONSERVATION	190,684.	CHECK/WIRE			
(7)			EUROPE/ICELAND/GREENLAND	CONSERVATION	15,702.	CHECK/WIRE			
(8)			EUROPE/ICELAND/GREENLAND	CONSERVATION	5,714.	CHECK/WIRE			
(9)			EUROPE/ICELAND/GREENLAND	CONSERVATION	8,000.	CHECK/WIRE			
(10)			EUROPE/ICELAND/GREENLAND	CONSERVATION	40,000.	CHECK/WIRE			
(11)			EUROPE/ICELAND/GREENLAND	CONSERVATION	5,158.	CHECK/WIRE			
(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 a tax exempt 501(c)(3) organization 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 . . . . . ▶ \_\_\_\_\_

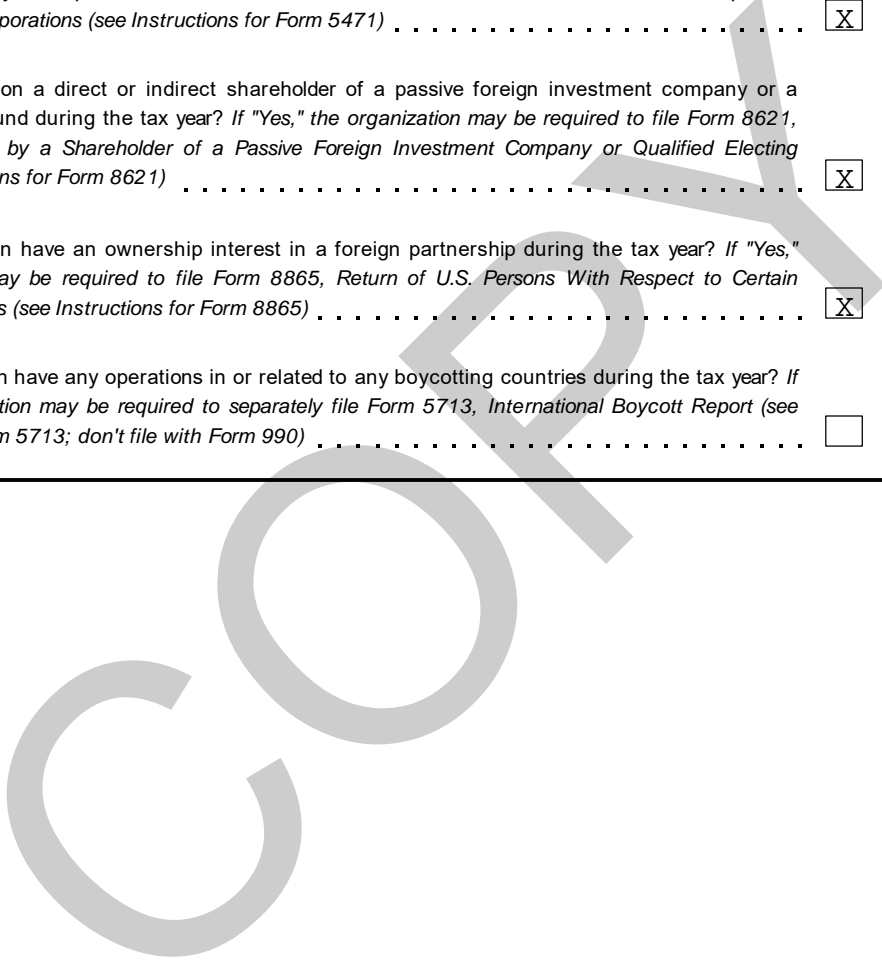
**Part III** **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 16.  
Part III can be duplicated if additional space is needed.

(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 noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) CONSERVATION-CA	CENT. AMERICA/CARIBBEAN	3	27,383.				
(2) SCHOLARSHIP-CA	CENT. AMERICA/CARIBBEAN	1	54,830.				
(3) SCHOLARSHIP-EA	EAST ASIA/PACIFIC	7	98,418.				
(4) CONSERVATION-EA	EAST ASIA/PACIFIC	20	109,141.				
(5) CONSERVATION-EU	EUROPE/ICELAND/GREENLAND	2	3,005.				
(6) CONSERVATION-NA	NORTH AMERICA	2	2,080.				
(7) CONSERVATION-SO AM	SOUTH AMERICA	20	498,349.				
(8) SCHOLARSHIP-SO AM	SOUTH AMERICA	3	44,475.				
(9) CONSERVATION-SO AS	SOUTH ASIA	5	4,101.				
(10) SCHOLARSHIP-SO AS	SOUTH ASIA	3	31,732.				
(11) CONSERVATION-SUB	SUB-SAHARAN AFRICA	15	24,923.				
(12) SCHOLARSHIP-SUB	SUB-SAHARAN AFRICA	3	50,711.				
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)* . . . . .  Yes  No
- 2 Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to separately 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; don't file with Form 990)* . . . . .  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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)* . . . . .  Yes  No

Schedule F (Form 990) 2021



**Part V Supplemental Information**

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. SUB GRANTEES GO THROUGH A PRE ASSESSMENT TO DETERMINE THE AMOUNT OF MONITORING REQUIRED. WCS USES THE ACCRUAL METHOD OF ACCOUNTING.

## PART I LINE 17 - INVESTMENTS

THIS AMOUNT REPRESENTS INVESTMENTS IN WCS'S LONG TERM PORTFOLIO DOMICILED IN THE REGION LISTED.

**SCHEDULE G  
(Form 990)**

**Supplemental Information Regarding Fundraising or Gaming Activities**

OMB No. 1545-0047

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

**2021**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

**Open to Public  
Inspection**

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

13-1740011

**Part I Fundraising Activities.** Complete if the organization answered "Yes" on 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 10 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			
SEE SUPPLEMENT INFORMATION 1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>				2,060,031.	1,321,071.	738,960.

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" on 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		
		FALL GALA (event type)	SPRING GALA (event type)	2 (total number)	(add col. (a) through col. (c))		
Revenue	1	Gross receipts	2,060,031.	2,196,237.	668,984.	4,925,252.	
	2	Less: Contributions	1,249,583.	1,086,000.	475,536.	2,811,119.	
	3	Gross income (line 1 minus line 2)	810,448.	1,110,237.	193,448.	2,114,133.	
Direct Expenses	4	Cash prizes					
	5	Noncash prizes					
	6	Rent/facility costs	257,784.	291,968.	19,425.	569,177.	
	7	Food and beverages	126,650.	148,049.	35,537.	310,236.	
	8	Entertainment					
	9	Other direct expenses	240,796.	178,905.	176,989.	596,690.	
	10	Direct expense summary. Add lines 4 through 9 in column (d)					1,476,103.
	11	Net income summary. Subtract line 10 from line 3, column (d)					638,030.

**Part III Gaming.** Complete if the organization answered "Yes" on 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 conducts gaming activities: \_\_\_\_\_

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

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

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

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

- 11 Does the organization conduct 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 conducted 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 provide any additional information (see instructions).

SCH G, PART I, LINE 2B, COL(III)

STAGECOACH DIGITAL LLC FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC SOLICITATION.

INTEGRAL DC - LLC FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC PLANNING.

INTEGRATED NONPROFIT FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC PLANNING.

THE EVENT SHOP FUNDS WERE SENT DIRECTLY TO WCS - GALA.

- 11 Does the organization conduct 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 conducted 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 provide any additional information (see instructions).

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

A.B. DATA LTD FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC PLANNING.

CARE2.COM INC FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC PLANNING.

INTEGRATED NONPROFIT FUNDS WERE SENT DIRECTLY TO WCS - STRATEGIC PLANNING.

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

=====

NAME:

STAGECOACH DIGITAL LLC

ADDRESS:

266 MAIN STREET  
BURLINGTON, VT 05401

ACTIVITY :

STRATEGIC

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

862,829.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-862,829.

NAME:

INTEGRAL DC - LLC

ADDRESS:

1203 19TH STREET, N.W.  
WASHINGTON, DC 20036

ACTIVITY :

STRATEGIC

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

195,000.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-195,000.

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

NAME:

INTEGRATED NONPROFIT

ADDRESS:

8801 EAST HAMPDEN AVENUE  
DENVER, CO 80231

ACTIVITY :

STRATEGIC

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

12,675.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-12,675.

NAME:

THE EVENT SHOP

ADDRESS:

8 HATHAWAY LANE  
VERONA, NJ 07044

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

2,060,031.

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

114,472.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

1,945,559.

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

=====

NAME:

PENTERA

ADDRESS:

8650 G COMMERCE PARK PLACE  
INDIANAPOLIS, IN 46268

ACTIVITY :

PLANNED GIV

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

67,808.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-67,808.

NAME:

A.B. DATA LTD

ADDRESS:

600 AB DATA DRIVE  
MILWAUKEE, WI 53217

ACTIVITY :

STRATEGIC

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

58,287.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-58,287.

FORM 990, SCHEDULE G, LINE 2B - HIGHEST PAID INDIVIDUALS/ENTITIES

=====

NAME:

CARE2.COM INC

ADDRESS:

203 REDWOOD SHORES PARKWAY  
REDWOOD CITY, CA 94065

ACTIVITY :

STRATEGIC

CUSTODY OR CONTROL OF CONTRIBUTION?

NO

GROSS RECEIPTS FROM ACTIVITY :

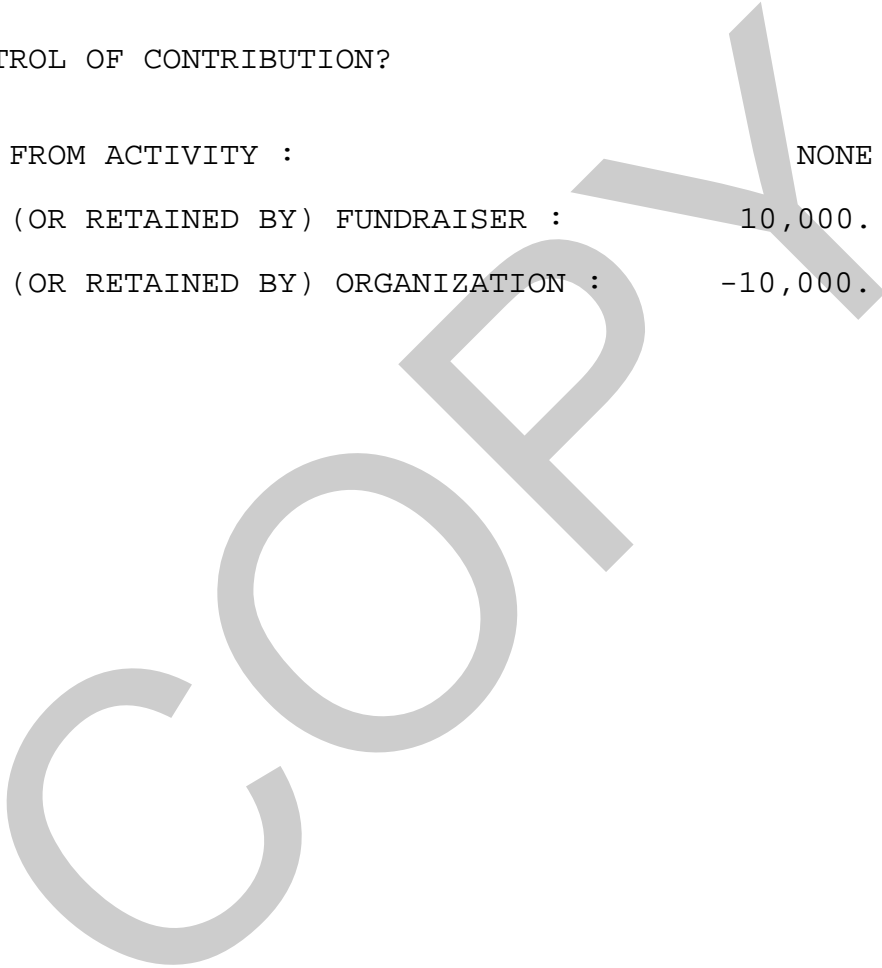
NONE

AMOUNT PAID TO (OR RETAINED BY) FUNDRAISER :

10,000.

AMOUNT PAID TO (OR RETAINED BY) ORGANIZATION :

-10,000.



**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> CORNELL UNIVERSITY 341 PINE TREE ROAD ITHACA, NY 14850	15-0532082	501(C)3	132,000.				CONSERVATION
<b>(2)</b> NATURE CONSERVANCY 4245 N FAIRFAX DR ARLINGTON, VA 22203	53-0242652	501(C)3	1,120,190.				CONSERVATION
<b>(3)</b> TROUT UNLIMITED 1777 N KENT ST, STE 100, ARLINGTON, VA 2220	38-1612715	501(C)3	99,724.				CONSERVATION
<b>(4)</b> WORLD WILDLIFE FUND 1250 24TH ST NW WASHINGTON, DC 20037	52-1693387	501(C)3	2,440,810.				CONSERVATION
<b>(5)</b> METHOW SALMON RECOVERY FOUNDATION PO BOX 755 TWISP, WA 98856	91-2141473	501(C)3	99,576.				CONSERVATION
<b>(6)</b> THE OCEAN FOUNDATION 1320 19TH ST NW WASHINGTON, DC 20036	71-0863908	501(C)3	175,000.				CONSERVATION
<b>(7)</b> AFRICAN WILDLIFE FOUNDATION 1400 16TH STREET WASHINGTON, DC 20036	52-0781390	501(C)3	416,452.				CONSERVATION
<b>(8)</b> JANE GOODALL INSTITUTE 1595 SPRING HILL ROAD VIENNA, VA 22182	94-2474731	501(C)3	133,992.				CONSERVATION
<b>(9)</b> WORLD RESOURCE INSTITUTE 10 G STREET WASHINGTON, DC 20002	52-1257057	501(C)3	224,606.				CONSERVATION
<b>(10)</b> BLACKFEET TRIBE PO BOX 1090 BROWNING, MT 59417	81-0212955	501(C)3	25,000.				CONSERVATION
<b>(11)</b> CONSERVATION INTERNATIONAL 2201 CRYSTAL DR ARLINGTON, VA 22202	52-1497470	501(C)3	164,649.				CONSERVATION
<b>(12)</b> NATIONAL AUDUBON SOCIETY, INC 225 VARICK STREET NEW YORK, NY 10014	13-1624102	501(C)3	77,123.				CONSERVATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 50

3 Enter total number of other organizations listed in the line 1 table ▶ 3

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

Schedule I (Form 990) 2021

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization

WILDLIFE CONSERVATION SOCIETY

Employer identification number

13-1740011

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

- 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
- 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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> FLORIDA INTERNATIONAL UNIVERSITY FOUNDATION 11200 SW 8TH ST MIAMI, FL 33199	23-7047106	501(C)3	200,483.				CONSERVATION
<b>(2)</b> UNIVERSITY OF MARYLAND CAMPUS DR COLLEGE PARK, MD 20742	52-1630673	501(C)3	9,519.				CONSERVATION
<b>(3)</b> ALASKA CONSERVATION FOUNDATION 1227 WEST 9TH AVE ANCHORAGE, AK 99501	92-0061466	501(C)3	22,296.				CONSERVATION
<b>(4)</b> CALIFORNIA WILDLIFE FOUNDATION 428 13TH STREET SUITE 10A OAKLAND, CA 94612	68-0234744	501(C)3	35,494.				CONSERVATION
<b>(5)</b> FRIENDS OF THE STATE BOTANICAL 2450 S MILLEDGE AVE ATHENS, GA 30605	23-7182479	501(C)3	14,144.				CONSERVATION
<b>(6)</b> LANDSWARD FOUNDATION 113 N SAN FRAN ST FLAGSTAFF, AZ 86001	86-0957662	501(C)3	44,749.				CONSERVATION
<b>(7)</b> MISSISSIPPI PARK CONNECTION 111 EAST KELLOGG BLVD SAINT PAUL, MN 55101	87-0786530	501(C)3	49,520.				CONSERVATION
<b>(8)</b> ONE EARTH CONSERVATION 82-52 211 ST HOLLIS HILLS, NY 11427	81-2059074	501(C)3	82,708.				CONSERVATION
<b>(9)</b> POINT BLUE CONSERVATION SCIENCE 3820 CYPRESS DR. #11 PETALUMA, CA 94954	94-1594250	501(C)3	84,190.				CONSERVATION
<b>(10)</b> CALIFORNIA OCEAN ALLIANCE 9099 SOQUEL DR APTO APTOS, CA 95003	81-3669877	501(C)3	22,319.				CONSERVATION
<b>(11)</b> INTERNATIONAL FUND FOR ANIMAL WELFARE 290 SUMMER STREET YARMOUTH PORT, MA 02675	31-1594197	501(C)3	41,088.				CONSERVATION
<b>(12)</b> PANTHERA 8 WEST 40TH STREET NEW YORK, NY 10018	20-4668756	501(C)3	12,607.				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) 2021

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

OMB No. 1545-0047

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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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> PAUL SMITHS COLLEGE OF ARTS AND SCIENCES PO BOX 265 PAUL SMITHS, NY 12970	15-0533545	501(C)3	27,490.				CONSERVATION
<b>(2)</b> WILDLIFE ALLIANCE INC 1441 BROADWAY NEW YORK, NY 10018	52-1934148	501(C)3	102,034.				CONSERVATION
<b>(3)</b> YELLOWSTONE TO YUKON CONSERV INITIATIVE PO BOX 157 BOZEMAN, MT 59771	81-0535303	501(C)3	33,333.				CONSERVATION
<b>(4)</b> GARDEN ISLAND RESOURCE 4253 RICE STREET LIHUE, HI 96766	99-0288553	501(C)3	173,250.				CONSERVATION
<b>(5)</b> BORDERLANDS RESTORATION NETWORK PO BOX 121 PATAGONIA, AZ 85624	47-2581032	501(C)3	163,189.				CONSERVATION
<b>(6)</b> CORENEWAL, INC. 59 SUMMERFIELD IRVINE, CA 92614	45-4660185	501(C)3	99,987.				CONSERVATION
<b>(7)</b> FARMS FOR ORPHANS 17756 LAURENCE CREEK LN LOVELAND, CO 80538	47-4045225	501(C)3	10,225.				CONSERVATION
<b>(8)</b> FLOWER HILL INSTITUTE PO BOX 692 JEMEZ PUEBLO, NM 87024	81-4300335	501(C)3	55,000.				CONSERVATION
<b>(9)</b> FUTURE WEST P.O. BOX 1253 BOZEMAN, MT 59771	27-1277635	501(C)3	24,000.				CONSERVATION
<b>(10)</b> INTERNATIONAL CONSERVATION CAUCUS FDN 1200 POTOMAC ST NW WASHINGTON, DC 20007	27-3152104	501(C)3	10,000.				CONSERVATION
<b>(11)</b> INTERTRIBAL BUFFALO COUNCIL 520 KANSAS CITY ST RAPID CITY, SD 57701	27-3029417	414(D)	25,000.				CONSERVATION
<b>(12)</b> INSIGHT CRIME INCORPORATED 4410 MASSACHUSETTS AVE WASHINGTON, DC 20016	82-3793490	501(C)3	43,384.				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) 2021

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> MOUNTAIN STUDIES INSTITUTE PO BOX 426 1315 SNOWDEN SILVERTON, CO 81433	73-1644103	501(C)3	166,569.				CONSERVATION
<b>(2)</b> NATURAL RESOURCES FOUNDATION 211 S PATERSON ST MADISON, WI 53703	39-1572034	501(C)3	100,000.				CONSERVATION
<b>(3)</b> NATIVE SCIENCE FIELD CENTER 504 SE BOUNDARY ST BROWNING, MT 59417	81-0378943	501(C)3	15,000.				CONSERVATION
<b>(4)</b> NATIVE VILLAGE OF KOTZEBUE PO BOX 296 KOTZENBUE, AR 99752	92-0060128	414(D)	8,800.				CONSERVATION
<b>(5)</b> NORTHWEST NATURAL RESOURCE GROUP 2701 1ST AVE, SUITE 240 SEATTLE, WA 98121	94-3172720	501(C)3	67,937.				CONSERVATION
<b>(6)</b> OCEAN EYE INC 2035 SUNSET LAKE RD NEWARK, DE 19702	32-0612449	C CORP	10,000.				CONSERVATION
<b>(7)</b> OIKONOS - ECOSYSTEM KNOWLEDGE PO BOX 1918 KAILUA, HI 96734	03-0385067	501(C)3	73,333.				CONSERVATION
<b>(8)</b> PIIKANI LODGE HEALTH INSTITUTE PO BOX 187 BROWNING, MT 59417	83-2766318	501(C)3	188,000.				CONSERVATION
<b>(9)</b> PRACTICAL FARMERS OF IOWA 1615 GOLDEN ASPEN AMES, IA 50010	42-1255174	501(C)3	166,667.				CONSERVATION
<b>(10)</b> ROCKEFELLER PHILANTHROPY ADVISORS 6 WEST 48TH ST NEW YORK, NY 10036	13-3615533	501(C)3	75,000.				CONSERVATION
<b>(11)</b> SOUTHWEST MICHIGAN LAND CONSERVANCY 70 BEESON RD NILES, MI 49120	46-1395796	501(C)3	89,910.				CONSERVATION
<b>(12)</b> THE CENTER FOR ADVANCED DEFENSE STUDIES 1201 I ST NW SUITE 200 WASHINGTON, DC 20005	73-1681366	501(C)3	137,117.				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) 2021

**SCHEDULE I  
(Form 990)**

**Grants and Other Assistance to Organizations,  
Governments, and Individuals in the United States**  
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

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Name of the organization

WILDLIFE CONSERVATION SOCIETY

Employer identification number

13-1740011

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

- 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
- 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 Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on 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 noncash assistance	(h) Purpose of grant or assistance
<b>(1)</b> TOLANI LAKE ENTERPRISES HC 61 BOX 320 WINSLOW, AZ 86047	86-0999543	501(C)3	166,667.				CONSERVATION
<b>(2)</b> TUCSON AUDUBON SOCIETY 300 E UNIVERSITY TUCSON, AZ 85705	86-6053779	501(C)3	100,000.				CONSERVATION
<b>(3)</b> WETLANDS WATCH 2601 GRANBY ST. NORFOLK, VA 23517	54-2005763	501(C)3	20,631.				CONSERVATION
<b>(4)</b> STONE BARNES CENTER FOR FOOD & AGRICULTURE 630 BEDFORD ROAD POCANTICO HILLS, NY 10591	13-4150082	501(C)3	100,000.				CONSERVATION
<b>(5)</b> NATIONAL WILDLIFE FEDERATION 11100 WILDLIFE CENTER RESTON, VA 20190	53-0204616	501(C)3	298,020.				CONSERVATION
<b>(6)</b>							
<b>(7)</b>							
<b>(8)</b>							
<b>(9)</b>							
<b>(10)</b>							
<b>(11)</b>							
<b>(12)</b>							

**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) 2021

**Part III Grants and Other Assistance to Domestic Individuals.** 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	10,416.			
2 SCHOLARSHIPS	2	58,720.			
3					
4					
5					
6					
7					

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

PART I, LINE 2

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 GRANT MANAGER IN THE RESPECTIVE FUNCTIONAL AREA OF THE WILDLIFE CONSERVATION SOCIETY. REPORTS ARE REVIEWED AND CHECKED OVER FOR ACCURACY AND BUDGETARY COMPLIANCE BEFORE REIMBURSEMENTS ARE ISSUED. IN CASES WHERE THE ORGANIZATION HAS BEEN ADVANCED FUNDS FOR THE GRANT, EXPENSE REPORTS ARE REQUIRED ON A QUARTERLY BASIS AND ARE REVIEWED BEFORE FURTHER ADVANCES

**Part III Grants and Other Assistance to Domestic Individuals.** 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					
2					
3					
4					
5					
6					
7					

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

CAN BE ISSUED. THE WCS GLOBAL SCHOLARSHIP PROGRAM PROVIDES SUPPORT FOR YOUNG CONSERVATION PROFESSIONALS. SCHOLARS ARE NOMINATED BY WCS GLOBAL CONSERVATION STAFF AND ARE SELECTED BASED ON THEIR EXCEPTIONAL ABILITIES AND POTENTIAL TO BECOME LEADERS OF THE CONSERVATION MOVEMENT IN THEIR HOME COUNTRIES. THE WCS RESEARCH FELLOWSHIP PROGRAM (RFP) IS ONE OF THE OLDEST AND MOST PRESTIGIOUS SMALL GRANTS PROGRAMS IN THE FIELD OF WILDLIFE CONSERVATION. GRANTS ARE DESIGNED TO BUILD CAPACITY FOR THE NEXT GENERATION OF GLOBAL CONSERVATION LEADERS BY SUPPORTING INDIVIDUAL FIELD RESEARCH PROJECTS THAT HAVE A CLEAR APPLICATION TO THE CONSERVATION OF THREATENED WILDLIFE AND WILD PLACES.

**SCHEDULE J  
(Form 990)**

**Compensation Information**

OMB No. 1545-0047

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

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

▶ Attach to Form 990.

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**2021**

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Department of the Treasury  
Internal Revenue Service

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 on 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 (such as 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 on line 1a?

**3** Indicate which, if any, of the following the 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 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 on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? **4a**  Yes  No
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? **4b**  Yes  No
- c** Participate in or receive payment from an equity-based compensation arrangement? **4c**  Yes  No
- 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.**

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

- a** The organization? **5a**  Yes  No
- b** Any related organization? **5b**  Yes  No
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization? **6a**  Yes  No
- b** Any related organization? **6b**  Yes  No
- If "Yes" on line 6a or 6b, describe in Part III.

**7** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III. **7**  Yes  No

**8** Were any amounts reported on 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. **8**  Yes  No

**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? **9**  Yes  No

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

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

Schedule J (Form 990) 2021

**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 on 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 aren't 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 and/or 1099-NEC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
DR. CRISTIAN SAMPER 1 PRESIDENT & CEO	(i)	679,483.	NONE	296,503.	227,107.	34,840.	1,237,933.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOHN F. CALVELLI 2 EVP PUBLIC AFFAIRS	(i)	401,192.	NONE	21,232.	69,638.	34,840.	526,902.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
PAULA HAYES 3 EVP CHIEF OF GLOBAL RESOURCES	(i)	397,673.	NONE	2,808.	139,378.	34,840.	574,699.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ROBERT CALAMO 4 VP & COMPTRROLLER	(i)	299,537.	NONE	6,858.	83,194.	25,300.	414,889.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JAMES J. BREHENY 5 EVP DIRECTOR OF ZOOS/AQUARIUM	(i)	347,499.	NONE	22,474.	137,209.	35,968.	543,150.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
LAURA STOLZENTHALER 6 SVP & CFO	(i)	321,360.	NONE	1,242.	82,964.	538.	406,104.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CHRISTOPHER J. MCKENZI 7 SVP GENERAL COUNSEL	(i)	387,720.	10,000.	2,055.	115,378.	30,621.	545,774.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
ROBERT MENZI 8 EVP CHIEF OPERATING OFFICER	(i)	435,192.	NONE	584,298.	147,922.	34,840.	1,202,252.	510,275.
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
NIKO RADJENOVIC 9 VP BUSINESS SERVICES	(i)	257,043.	39,274.	1,720.	57,675.	34,051.	389,763.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JOSEPH WALSTON 10 EVP FIELD CONSERVATION	(i)	343,192.	NONE	810.	71,114.	34,840.	449,956.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
JELLE BOOT 11 VP HUMAN RESOURCES	(i)	291,428.	NONE	1,957.	92,546.	22,800.	408,731.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
CRAIG PIPER 12 DIRECTOR OF CITY ZOOS	(i)	281,404.	NONE	19,411.	91,967.	34,248.	427,030.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
MARY DIXON 13 SVP COMMUNICATIONS	(i)	257,736.	NONE	4,474.	80,073.	11,706.	353,989.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
AMANDA FINE 14 ASSOC DIR ASIA WILDLIFE HEALTH	(i)	278,023.	NONE	3,682.	63,193.	16,960.	361,858.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
SUSAN CHIN 15 VP OF PLANNING AND DESIGN	(i)	253,992.	NONE	2,322.	69,380.	12,206.	337,900.	NONE
	(ii)	NONE	NONE	NONE	NONE	NONE	NONE	NONE
16	(i)							
	(ii)							

**Part III Supplemental Information**

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

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(FOR WCS PRESIDENT ONLY), HEALTH AND LIFE INSURANCE); 3) IN CERTAIN CIRCUMSTANCES, DEFERRED COMPENSATION.

THE FOLLOWING PROVIDES REQUIRED RESPONSES TO PART I LINES 1A, 4B, AND 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, 2021 AS REPORTED ON THE EMPLOYEES' W-2 BOX 5. BASE COMPENSATION EXCLUDES PRE-TAX DEDUCTIONS FOR HEALTH INSURANCE PREMIUMS AND FLEXIBLE SPENDING

**Part III Supplemental Information**

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

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: THE TOTALS IN COLUMN BIII INCLUDE THE FOLLOWING COMPONENTS OF TAXABLE INCOME REPORTED ON THE EMPLOYEE'S W-2 FOR 2021: FOR PRESIDENT AND CEO CRISTIAN SAMPER THE FAIR MARKET VALUE OF HOUSING, TOTALING \$156,000. DR. SAMPER ALSO RECEIVED \$99,866 IN REIMBURSEMENTS FOR CHILDREN'S TUITION EXPENSE PURSUANT TO HIS EMPLOYMENT AGREEMENT. MR. MENZI RECEIVED \$48,000 IN REIMBURSEMENT FOR A HOUSING ALLOWANCE PURSUANT TO HIS EMPLOYMENT AGREEMENT.

ANY PAYMENTS FOR COMPENSATION UNDER MULTI-YEAR SUPPLEMENTAL NON-QUALIFIED COMPENSATION PLANS WHICH VESTED ARE REPORTED IN COLUMN BIII. THESE PAYMENTS WERE REPORTED AS TAXABLE INCOME ON THE EMPLOYEE'S W-2 FOR 2021. FOR ROBERT MENZI THE PAYMENT WAS \$510,275 OF WHICH \$510,275 WAS REPORTED AS DEFERRED COMPENSATION IN PREVIOUS YEARS.

**Part III Supplemental Information**

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

COLUMN BIII ALSO INCLUDES 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 EMPLOYEES. AUTOMOBILE AND CELL PHONE ALLOWANCE, IF PROVIDED, ARE MADE IN LIEU OF REIMBURSEMENT FOR THOSE BUSINESS EXPENSES. AS A CONDITION OF EMPLOYMENT AND FOR THE CONVENIENCE OF WCS, THE PRESIDENT AND CEO IS REQUIRED TO RESIDE IN A WCS-OWNED APARTMENT AT WHICH FUNDRAISING AND OTHER MEETINGS ARE HELD FOR WCS'S PURPOSE AND BENEFIT. THE APARTMENT IS CENTRALLY LOCATED TO FACILITATE TRAVEL TO ALL OF WCS'S NEW YORK CITY LOCATIONS. WCS TREATS THE RENTAL VALUE OF THE APARTMENT AS A TAXABLE BENEFIT.

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

**Part III Supplemental Information**

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

CALENDAR 2021, 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. 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. EIGHT INDIVIDUALS PARTICIPATED IN THESE PLANS DURING THE REPORTING PERIOD, AND THE ESTIMATED ACCRUALS NOT YET VESTED ARE A COMPONENT OF DEFERRED COMPENSATION REPORTED IN COLUMN C FOR EIGHT OF THE INDIVIDUALS: (NOTE THAT THESE ACCRUALS ARE REPORTED AGAIN BELOW IN THE DISCLOSURE FOR PART I, LINE 4.) CRISTIAN SAMPER, PRESIDENT AND CEO \$146,049; ROBERT MENZI, EXECUTIVE VICE PRESIDENT AND CHIEF OPERATING OFFICER \$64,190; JOHN F. CALVELLI, EXECUTIVE VICE PRESIDENT FOR PUBLIC AFFAIRS -\$14,094; JAMES J. BREHENY, EXECUTIVE VICE PRESIDENT AND GENERAL DIRECTOR ZOOS AND

**Part III Supplemental Information**

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

AQUARIUM AND DIRECTOR, BRONX ZOO \$41,413; CHRISTOPHER J. MCKENZIE, SENIOR VICE PRESIDENT AND GENERAL COUNSEL \$36,880; JOSEPH WALSTON, VICE PRESIDENT OF FIELD CONSERVATION \$7,937; LAURA STOLZENTHALER, SENIOR VICE PRESIDENT AND CHIEF FINANCIAL OFFICER \$9,259, PAULA HAYES, EXECUTIVE VICE PRESIDENT AND CHIEF OF GLOBAL RESOURCES \$75,805.

SUPPLEMENTAL INFORMATION ON NON-TAXABLE BENEFITS (COLUMN D) AND DISCLOSURE REQUIRED FOR PART I, LINE 1A: COLUMN D INCLUDES THE VALUE OF QUALIFIED HEALTH, DENTAL AND LONG-TERM DISABILITY INSURANCE PROVIDED TO WCS EMPLOYEES AND PRE-TAX EMPLOYEE CONTRIBUTIONS TO HEALTH INSURANCE PREMIUMS AND FLEXIBLE SPENDING PLANS. FOR JAMES BREHENY, EXECUTIVE VICE PRESIDENT AND GENERAL DIRECTOR ZOOS AND AQUARIUM AND DIRECTOR, BRONX ZOO, COLUMN D INCLUDES \$24,000 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 III Supplemental Information**

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

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

	SEVERANCE	NON-QUALIFIED	EQUITY-BASED
CRISTIAN SAMPER	0	146,049	0
ROBERT MENZI	0	64,190	0
JOHN F. CALVELLI	0	-14,094	0
JAMES J. BREHENY	0	41,413	0
CHRISTOPHER J. MCKENZIE	0	36,880	0
JOSEPH WALSTON	0	7,937	0
LAURA STOLZENTHALER	0	9,259	0
PAULA HAYES	0	75,805	0

## PART I, LINE 7 -NON-FIXED PAYMENTS PROVIDED

ONE SENIOR VICE PRESIDENT RECEIVED A NON-FIXED PAYMENT IN CALENDAR YEAR 2021, CHRISTOPHER MCKENZIE, SENIOR VICE PRESIDENT, GENERAL COUNSEL RECEIVED \$10,000. THIS WAS A ONE-TIME DISCRETIONARY BONUS IN RECOGNITION OF EXTRAORDINARY ACCOMPLISHMENTS DURING THE PRIOR YEAR. THE

**Part III Supplemental Information**

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

PAYMENT WAS REPORTED AS TAXABLE INCOME ON THE EMPLOYEE'S 2021 W-2.

PART I, LINE 6A

DISCLOSURE REQUIRED FOR PART I, LINE 6A REGARDING CONTINGENT COMPENSATION (COLUMN BII); THIS COLUMN REPORTS \$39,274 INCENTIVE PAYMENT TO NIKO RADJENOVIC, VICE PRESIDENT FOR BUSINESS SERVICES, FOR THE PREVIOUS FISCAL YEAR. AS A CONDITION OF HIS EMPLOYMENT, MR. RADJENOVIC 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 \$39,274 PAYMENT WAS MADE FOR THE FISCAL YEAR ENDING JUNE 30, 2021 AND WAS REPORTED AS TAXABLE INCOME ON MR. RADJENOVIC'S 2021 W-2.

**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2021**

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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.
- ▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

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	80	68,528,833.	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 V, Donee Acknowledgement . . . . . **29**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't 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 nonstandard contributions? . . . . .	X	
32a 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 didn't 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) 2021

JSA

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**Part II** **Supplemental Information.** 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.

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

OMB No. 1545-0047

**2021**

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13-1740011

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

1. THE WILDLIFE CONSERVATION SOCIETY'S NIGERIA PROGRAM USED A SERIES OF CAMERA TRAPS TO CAPTURE IMAGES FROM NIGERIA'S AFI MOUNTAIN WILDLIFE SANCTUARY REVEALING AN ARRAY OF PRIMATES AND OTHER WILDLIFE THAT LIVE IN THIS 100 SQUARE KILOMETER (38.6 SQUARE MILE) PROTECTED AREA. THE IMAGES SHOW CROSS RIVER GORILLAS (GORILLA GORILLA DIEHLI) - THE RAREST GORILLA SUBSPECIES ON THE PLANET WHOSE TOTAL POPULATION NUMBERS PERHAPS 300 INDIVIDUALS - ALONG WITH NIGERIA-CAMEROON CHIMPANZEES (PAN TROGLODYTES ELLIOTI), DRILLS (MANDRILLUS LEUCOPHAEUS), AND RED RIVER HOGS (POTAMOCHOERUS PORCUS).

AFI MOUNTAIN WILDLIFE SANCTUARY WAS ESTABLISHED BY CROSS RIVER STATE GOVERNMENT IN 2000 TO PROTECT CROSS RIVER GORILLAS AND OTHER ENDANGERED WILDLIFE. IT IS CURRENTLY PROTECTED BY 13 COMMUNITY RANGERS - ONE FROM EACH OF THE 13 COMMUNITIES THAT SURROUND THE SANCTUARY -EMPLOYED BY THE WCS NIGERIA PROGRAM. THE RANGERS PATROL THE SANCTUARY TO DISCOURAGE HUNTING, AND LAST YEAR ALONE REMOVED 2,405 WIRE SNARES. ALTHOUGH THESE SNARES ARE SET FOR SMALL GAME SUCH AS PORCUPINES, HYRAX AND CANE-RATS THEY CAN ALSO TRAP INFANT GORILLAS AND SO REPRESENT A SERIOUS THREAT TO THE SPECIES RECOVERY. LOGGING AND ILLEGAL FARMS ARE ALSO A MAJOR PROBLEM AT AFI, PARTICULARLY IN THE SURROUNDING LOWLANDS. IN ADDITION TO RANGER PATROLS WCS IS ALSO WORKING WITH COCOA FARMERS AROUND THE SANCTUARY TO IMPROVE THE SUSTAINABILITY OF CURRENT FARMING PRACTICES AND REDUCE RATES OF FOREST LOSS BY MAKING EXISTING COCOA FARMS MORE PRODUCTIVE.

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Department of the Treasury  
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2. THE WILDLIFE CONSERVATION SOCIETY (WCS), THE EUROPEAN UNION (EU), AND THE FISHERIES ADMINISTRATION OF THE MINISTRY OF AGRICULTURE, FORESTRY AND FISHERIES, RELEASED 51 CRITICALLY ENDANGERED ROYAL TURTLES INTO THE SRE AMBEL RIVER SYSTEM IN CHAMKAR LUONG COMMUNE, KAMPONG SEILA DISTRICT OF PREAH SIHANOUK PROVINCE. ALL THE 51 ROYAL TURTLES, GLOBALLY KNOWN AS SOUTHERN RIVER TERRAPIN (BATAGUR AFFINIS), WERE COLLECTED IMMEDIATELY AFTER EMERGING FROM THEIR NESTS ALONG THE SRE AMBEL RIVER AND KAMPONG LEU RIVER IN KOH KONG AND PREAH SIHANOUK PROVINCES FROM 2006 TO 2015 AND SENT TO KOH KONG REPTILE CONSERVATION CENTER IN TUOL KORKI VILLAGE, TUOL KORKI COMMUNE OF MONDUL SEIMA DISTRICT, WHERE THEY HAVE BEEN CARED FOR AND PREPARED FOR A LIFE IN THE WILD.

THE TURTLES, 31 FEMALES AND 20 MALES, RANGE IN AGE FROM 6 TO 15 YEARS-OLD. EACH TURTLE WAS IMPLANTED WITH A MICROCHIP, AND AN ACOUSTIC TRANSMITTER WAS ATTACHED TO THEIR SHELL. THESE MEASURES WILL ALLOW THE CONSERVATION TEAM TO MONITOR EACH INDIVIDUAL AND TRACK THEIR MOVEMENTS THROUGH THE RIVER SYSTEM. THE EUROPEAN UNION IS FUNDING THIS WILDLIFE CONSERVATION PROJECT, IN WHICH WCS AND THE FIA PARTNER WITH LOCAL COMMUNITIES TO COUNTER ILLEGAL WILDLIFE TRAFFICKING AND TO PROTECT ENDANGERED SPECIES. IN ADDITION TO SUPPORTING THIS WORK, THE EUROPEAN UNION IS ALSO A KEY DEVELOPMENT PARTNER TO SUSTAINABLE FISHERIES MANAGEMENT IN CAMBODIA.

THE ROYAL TURTLE IS AMONG THE WORLD'S 25 MOST ENDANGERED TORTOISES AND FRESHWATER TURTLES, LISTED ON THE IUCN RED LIST AS CRITICALLY

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ENDANGERED. THE ROYAL TURTLE WAS BELIEVED EXTINCT IN CAMBODIA UNTIL 2000, WHEN A SMALL POPULATION WAS REDISCOVERED BY FISHERIES ADMINISTRATION (FIA) AND WCS IN THE SRE AMBEL RIVER. SINCE THEN, WCS AND FIA HAVE BEEN WORKING TOGETHER TO PROTECT THE SPECIES FROM EXTINCTION. CONSERVATION ACTIVITIES INCLUDE A NEST PROTECTION PROGRAM, HEAD-STARTING OF YOUNG TURTLES, LAW ENFORCEMENT, RESEARCH AND MONITORING, PREVENTION OF ILLEGAL TRADE, AND OUTREACH AND LIVELIHOOD SUPPORT. THE CONTINUED SAND DREDGING, ILLEGAL FISHING, OVEREXPLOITATION AND LOSS OF HABITAT RESULTING FROM LAND GRABBING AND CLEARANCE OF RIPARIAN FLOODED FOREST, ARE MAJOR THREATS TO THE SURVIVAL OF THESE SPECIES WHICH REMAINS AT GREAT RISK OF EXTINCTION.

3. THE WILDLIFE CONSERVATION SOCIETY IS SCALING UP CONSERVATION EFFORTS IN THE CONGO BASIN AND ANDEAN-AMAZON COUNTRIES, WITH SUPPORT FROM THE BEZOS EARTH FUND TO WORK IN PARTNERSHIP WITH GOVERNMENTS, INDIGENOUS PEOPLES AND LOCAL COMMUNITIES (IPLCS) AND OTHER ORGANIZATIONS.

THE EARTH FUND WILL PROVIDE SUPPORT FOR WCS'S EFFORTS IN THE ANDES-AMAZON AND FOR WCS'S EFFORTS IN THE CONGO BASIN TO SUPPORT THE CONSERVATION AND PRESERVATION OF AT LEAST 30 PERCENT OF THE PLANET BY 2030, ALSO KNOWN AS 30X30. STUDIES SHOW THAT PROTECTED AREAS ARE ONE OF THE MOST COST-EFFECTIVE WAYS TO SAFEGUARD NATURE, PROTECT VULNERABLE HUMAN POPULATIONS, AND TACKLE CLIMATE CHANGE, PROVIDED THEY ARE LOCATED IN THE MOST IMPORTANT PLACES, ARE WELL-MANAGED, AND RESPECT THE RIGHTS AND NEEDS OF IPLCS. IN ADDITION TO PROTECTED AREAS, THIS FUNDING WILL EXPLORE NEW MECHANISMS TO SUPPORT IPLCS IN SECURING AND MANAGING THEIR TRADITIONAL FORESTS.

**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**

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WCS TEAMS HAVE WORKED IN THE ANDES-AMAZON AND THE CONGO BASIN FOR MORE THAN 30 YEARS IN SOME OF THE REGIONS' MOST ECOLOGICALLY INTACT FORESTS. THE ANDES-AMAZON IS THE MOST BIODIVERSE REGION IN THE WORLD AND HOLDS SOME OF THE MOST IMPORTANT CARBON STOCKS IN SOUTH AMERICA. THE CONGO BASIN IS THE MOST BIODIVERSE REGION IN AFRICA AND THE WORLD'S SINGLE LARGEST TROPICAL NET CARBON SINK.

4. THE WILDLIFE CONSERVATION SOCIETY (WCS) AND THE THAI GOVERNMENT HAVE SEEN SUCCESS IN USING A PASSIVE FENCE THAT GUIDES ELEPHANTS AWAY FROM AGRICULTURAL FIELDS ADJACENT TO THAILAND'S LARGEST NATIONAL PARK. THESE FENCES HAVE SHARPLY REDUCED CROP-RAIDING INCIDENTS. THE FENCE GUIDES ELEPHANTS TO KEEP THEM INSIDE THE PARK WHILE STILL ALLOWING FOR OTHER SMALLER WILDLIFE - INCLUDING BABY ELEPHANTS - TO PASS THROUGH. OVERALL, THE NUMBER OF HUMAN-ELEPHANT INCIDENTS IN THE AREA HAVE DECREASED BY AROUND 90 PERCENT-BASED ON THIS SUCCESS, THE DEPARTMENT OF NATIONAL PARKS, WILDLIFE AND PLANT CONSERVATION IS NOW EXTENDING AN ADDITIONAL 43-KILOMETERS (26.7 MILES) OF FENCING ON BOTH THE EASTERN AND WESTERN EDGES OF THE ENCLAVE, ALLOWING HUMANS AND ELEPHANTS TO SHARE THE LANDSCAPE WITH REDUCED NEGATIVE IMPACTS ON BOTH SIDES. HUMAN-ELEPHANT CONFLICT, ESPECIALLY CROP RAIDING, GENERATES ANTAGONISTIC ATTITUDES TOWARD ELEPHANTS AND CAN LEAD TO FARMERS KILLING ELEPHANTS AND/OR DESTROYING THEIR HABITAT. IN KAENG KRACHAN NATIONAL PARK ELEPHANTS HAVE HISTORICALLY ENGAGED IN RAIDING FIELDS OF BANANA AND PINEAPPLE AROUND A KEY AGRICULTURAL ENCLAVE IN THE SOUTH OF THE PARK.

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

1. THE WILDLIFE CONSERVATION SOCIETY'S (WCS'S) BRONX ZOO IS WORKING WITH PARTNERS ON A MULTI-YEAR PROGRAM TO SAVE THE EASTERN HELLBENDER, AN AQUATIC AMPHIBIAN SPECIES AND ONE OF THE WORLD'S LARGEST SALAMANDERS. AS PART OF THIS CONSERVATION EFFORT, 124 EASTERN HELLBENDERS RAISED AT THE BRONX ZOO WERE RELEASED INTO STREAMS IN THE UPPER SUSQUEHANNA RIVER WATERSHED. NATIVE TO NEW YORK STATE AND MUCH OF THE NORTHEASTERN UNITED STATES, THEY ARE A SPECIES OF GIANT SALAMANDER THAT CAN MEASURE NEARLY TWO FEET IN LENGTH AS ADULTS. ONLY TWO LARGER SALAMANDER SPECIES ARE KNOWN - THE JAPANESE GIANT SALAMANDER AND THE CHINESE HELLBENDER - BOTH CAN GROW UP TO SIX FEET LONG. NEW YORK STATE LISTS THE EASTERN HELLBENDER AS A SPECIES OF SPECIAL CONCERN. POPULATIONS ARE DECLINING DUE TO SEVERAL FACTORS INCLUDING DISEASE, POLLUTION, AND HABITAT DESTRUCTION. THE BRONX ZOO IS WORKING WITH PARTNERS FROM LYCOMING COLLEGE IN WILLIAMSPORT, PA; SUNY COLLEGE OF ENVIRONMENTAL SCIENCE AND FORESTRY IN SYRACUSE, NY; AND THE WETLAND TRUST BASED IN BURDETTE, NY TO INCREASE THE NUMBER OF HELLBENDERS IN THE UPPER SUSQUEHANNA RIVER WATERSHED. DURING THEIR TIME AT THE BRONX ZOO, THE ZOO'S HERPETOLOGY DEPARTMENT STAFF OVERSAW THE HUSBANDRY AND MANAGEMENT OF THE SPECIES TO ENSURE THEIR HEALTH AND DEVELOPMENT. THE OFF-EXHIBIT AMPHIBIAN PROPAGATION CENTER AT THE BRONX ZOO IS A FACILITY WITH A CUSTOM BUILT WATER PURIFICATION SYSTEM THAT KEEPS THE WATER CHEMISTRY AT OPTIMAL CONDITIONS FOR THE SPECIES.

2. THE NEW YORK AQUARIUM HAD TWO CALIFORNIA SEA LION (ZALOPHUS CALIFORNIANUS) BIRTHS. DORY GAVE BIRTH TO A HEALTHY FEMALE PUP THIS IS

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HER THIRD PREGNANCY SINCE SHE CAME TO THE NEW YORK AQUARIUM IN 2017.

TWELVE-YEAR-OLD HARBOR SEAL (PHOCA VITULINA) KORDY GAVE BIRTH TO A

HEALTHY FEMALE PUP "LUNA" THIS IS HER FIRST PREGNANCY SINCE SHE ARRIVED

FROM THE ALASKA SEALIFE CENTER.

3. THE BRONX ZOO WELCOMED A COQUEREL'S SIFAKA (PROPTHECUS COQUERELI).

THE BIRTH IS THE RESULT OF THE HARD WORK AND HUSBANDRY EXPERTISE OF THE

BRONX ZOO'S KEEPERS. THE BRONX ZOO BREEDS SIFAKAS AS PART OF THE SPECIES

SURVIVAL PLAN (SSP) PROGRAM, A COOPERATIVE BREEDING PROGRAM ADMINISTERED

BY THE ASSOCIATION OF ZOOS AND AQUARIUMS (AZA) TO MAINTAIN GENETIC

DIVERSITY AND DEMOGRAPHIC STABILITY IN ZOO POPULATIONS. SIX SPECIES OF

LEMURS, INCLUDING COQUEREL'S SIFAKAS, CAN BE SEEN IN THE ZOO'S

MADAGASCAR! EXHIBIT. EXHIBIT TIMES FOR THE BABY MAY VARY AS IT CONTINUES

TO ACCLIMATE AND BOND WITH ITS MOTHER. LIKE ALL LEMUR SPECIES,

COQUEREL'S SIFAKAS ARE FOUND ONLY ON THE ISLAND NATION OF MADAGASCAR. THE

SPECIES IS CLASSIFIED AS CRITICALLY ENDANGERED BY THE INTERNATIONAL UNION

FOR CONSERVATION OF NATURE (IUCN). NUMBERS IN THE WILD ARE DECREASING DUE

TO DEFORESTATION AND OTHER HUMAN ACTIVITIES.

4. THE NEW YORK AQUARIUM ACQUIRED AN EGG MASS OF FLAMBOYANT CUTTLEFISH

(METASEPIA PFEFFERI) AS A DONATION FROM MONTEREY BAY. THE EGGS DEVELOPED

AND HATCHLINGS WERE COLLECTED. THESE HATCHLINGS PROVIDE A NEW GENETIC

SUBGROUP AS WE CONTINUE TO PROPAGATE THIS SPECIES. NYA IS ONE OF ONLY

FOUR NORTH AMERICAN INSTITUTIONS THAT SUCCESSFULLY PROPAGATE THIS

SPECIES. THE OTHERS INCLUDE MONTEREY BAY AQUARIUM, MOTE MARINE LAB &

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AQUARIUM IN SARASOTA, FL, AND MARINE BIOLOGICAL LABORATORY IN WOODS HOLE, MA. THE AQUARIUM ALSO ACQUIRED AN EGG MASS OF DWARF CUTTLEFISH (SEPIA BANDENSIS) AS A DONATION FROM COLUMBIA UNIVERSITY. ACQUISITIONS FROM COLUMBIA AND OTHERS WILL HELP US DIVERSIFY THE GENETICS OF OUR GROUP IN ORDER TO ENHANCE THE BREEDING PROGRAM SUCCESS.

5. THE BRONX ZOO COLLABORATED WITH THE HUMANE SOCIETY OF THE UNITED STATES (HSUS), NEW YORK STATE DEPARTMENT OF ENVIRONMENTAL CONSERVATION (NYSDEC), AND THEN NEW YORK CITY POLICE DEPARTMENT (NYPD) TO REMOVE AN 11-MONTH-OLD, APPROXIMATELY 80-POUND, FEMALE COUGAR FROM A NEW YORK CITY HOME. THE HSUS WAS ON SCENE WITH THE OWNER WHO SURRENDERED THE COUGAR. THE NYSDEC AND NYPD WORKED TO COORDINATE THE SAFE REMOVAL OF THE BIG CAT FROM THE HOME AND TRANSPORT HER TO THE BRONX ZOO WHERE SHE WAS CARED FOR BY VETERINARIANS AND ANIMAL CARE STAFF UNTIL HER TRANSPORT TO AN ARKANSAS ANIMAL SANCTUARY. THE COUGAR IS NOW AT TURPENTINE CREEK, AN ACCREDITED SANCTUARY WHERE SHE WILL RECEIVE LIFELONG CARE. THE BRONX ZOO HAS LONG HISTORY OF ASSISTING IN CASES INVOLVING DANGEROUS ANIMALS IN PRIVATE RESIDENCES THAT THREATEN PUBLIC SAFETY.

6. THE NEW YORK AQUARIUM STAFF PARTICIPATED IN SEVERAL RESEARCH TRIPS. ONE OF WHICH WAS A NY SEASCAPE SAND TIGER SHARK HABITAT USE AND HEALTH SAMPLING STUDIES. A POP-UP SATELLITE TAG WAS ATTACHED TO A JUVENILE SAND TIGER SHARK IN HOPES OF LEARNING MORE ABOUT THE SPECIES WINTER NURSERY AREAS. ON ANOTHER TRIP, ACOUSTIC RECEIVERS WERE ALSO ATTACHED TO TWO COAST GUARD BUOYS. TEAM MEMBERS ALSO PARTICIPATED ON A TRIP TO MONITOR

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SHORTFIN MAKO SHARKS AND TO ATTACH SATELLITE TAGS TO STUDY THE SPECIES  
MIGRATION PATTERN. WHILE THE TEAM DID NOT LOCATE MAKO SHARKS ON THIS  
TRIP, THEY DID CATCH A JUVENILE THRESHER SHARK THAT WAS RELEASED.

7. SIX KOMODO DRAGONS (VARANUS KOMODOENSIS) HAVE HATCHED AT THE BRONX  
ZOO, THE FIRST TIME THIS SPECIES HAS SUCCESSFULLY BRED IN THE 122-YEAR  
HISTORY OF THE ZOO. THE SUCCESSFUL BREEDING IS THE RESULT OF YEARS OF  
WORK BY THE ZOO'S HERPETOLOGY DEPARTMENT STAFF. KEEPERS HAVE TO  
CAREFULLY MONITOR THE ADULT KOMODOS WHEN THEY ARE PAIRED FOR MATING AS  
COURTSHIP BEHAVIORS CAN SOMETIMES BECOME AGGRESSIVE. AFTER A SUCCESSFUL  
INTRODUCTION, THE PAIR OF KOMODOS BRED AND THE FEMALE LAID A CLUTCH OF  
EGGS. THE EGGS WERE PLACED IN AN INCUBATOR WHERE THEY WERE CAREFULLY  
MONITORED FOR APPROXIMATELY SEVEN MONTHS BEFORE THEY HATCHED. THE  
HATCHING OF THESE KOMODOS IS AN OUTCOME OF THE SPECIES SURVIVAL PLAN  
(SSP), A COOPERATIVE BREEDING AND MANAGEMENT PROGRAM ADMINISTERED BY THE  
ASSOCIATION OF ZOOS AND AQUARIUMS (AZA) TO MAINTAIN GENETIC DIVERSITY AND  
DEMOGRAPHIC STABILITY IN ZOO POPULATIONS. THE BRONX ZOO OPENED THE KOMODO  
DRAGON EXHIBIT IN ZOO CENTER IN 2014, WHICH MARKED THE FIRST TIME THE  
SPECIES WAS HOUSED IN THE ZOO SINCE THE 1950S. THE ADULT KOMODOS CAN BE  
SEEN IN ZOO CENTER, WHILE SOME OF THE NEW HATCHLINGS ARE ON EXHIBIT IN  
THE BRONX ZOO'S WORLD OF REPTILES. KOMODO DRAGONS ARE THE WORLD'S  
LARGEST LIVING LIZARD SPECIES. AS ADULTS THEY CAN WEIGH MORE THAN 150 LBS  
AND MEASURE UP TO 10 FEET IN LENGTH. THEY ARE NATIVE TO THE EASTERN  
INDONESIAN ISLANDS OF KOMODO, FLORES, RINCA, PADAR, GILI MOTANG, AND NUSA  
KODE. THE SPECIES IS CLASSIFIED AS ENDANGERED BY THE INTERNATIONAL UNION

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FOR CONSERVATION OF NATURE (IUCN). SOME ESTIMATES INDICATE THERE ARE FEWER THAN 2,500 KOMODO DRAGONS REMAINING IN THE WILD, WITH POSSIBLY AS FEW AS 350 BREEDING FEMALES.

8. DIVERS FROM NEW AQUARIUM MADE UP OF VOLUNTEERS AND STAFF CONDUCTED FOUR DAYS OF DIVING OFF CONEY ISLAND BEACH TO ASSESS THE SITE'S VIABILITY FOR FUTURE COLLECTIONS AND TRAINING. A SPECIES LIST WAS ESTABLISHED AND THE DEBRIS FIELD FOR THE OLD DREAMLAND PIER WAS LOCATED. AFTER THE DREAMLAND AMUSEMENT PARK BURNED DOWN IN 1911, THE PIER RUINS WERE LEFT ON THE SEA FLOOR NEAR THE CURRENT ENTRANCE TO NYA, WHERE THEY ARE NOW HOME TO SEA URCHINS, STONY CORAL, AND MUCH MORE. FUTURE DIVES WILL FOCUS ON DEVELOPING A YEAR-ROUND SPECIES INVENTORY AND MAPPING THE HISTORICAL SITE.

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

1. THE QUEENS ZOO WELCOMED TWO ANDEAN BEAR CUBS, A MALE AND A FEMALE, WERE BORN TO DAM, NICOLE, AND SIRE, BOUBA. THIS IS THE THIRD SUCCESSFUL LITTER FOR NICOLE AND BOUBA, WHO HAVE NOW PRODUCED FIVE OFFSPRING. AFTER SPENDING THEIR FIRST MONTHS IN A DEN NURSING AND BONDING WITH THEIR MOTHER, THE CUBS HAVE NOW STARTED TO VENTURE INTO THE ZOO'S OUTDOOR BEAR HABITAT AND ARE ACTIVELY EXPLORING THEIR NEW SURROUNDINGS. QUEENS ZOO GUESTS CAN NOW SEE THE CUBS, BUT EXHIBIT TIMES WILL VARY AS THEY CONTINUE TO ACCLIMATE TO THEIR EXHIBIT. THE QUEENS ZOO IS BREEDING ANDEAN BEARS AS PART OF THE SPECIES SURVIVAL PLAN (SSP), A COOPERATIVE BREEDING AND MANAGEMENT PROGRAM ADMINISTERED BY THE ASSOCIATION OF ZOOS AND AQUARIUMS (AZA) TO MAINTAIN GENETIC DIVERSITY AND DEMOGRAPHIC STABILITY IN ZOO

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POPULATIONS. ANDEAN BEARS FACE SIGNIFICANT CHALLENGES IN THE WILD DUE TO HABITAT FRAGMENTATION AND POACHING. ANDEAN BEARS ARE THE ONLY BEAR SPECIES NATIVE TO SOUTH AMERICA. THEY ARE ALSO KNOWN AS SPECTACLED BEARS DUE TO THE MARKINGS ON THEIR FACES THAT SOMETIMES RESEMBLE EYEGLASSES. THEY HAVE CHARACTERISTICALLY SHORT FACES AND ARE RELATIVELY SMALL IN COMPARISON TO SOME OTHER BEAR SPECIES. AS ADULTS, MALES WEIGH BETWEEN 250-350 POUNDS WHILE ADULT FEMALES RARELY EXCEED 200 POUNDS. ANDEAN BEARS ARE CLASSIFIED AS VULNERABLE BY THE INTERNATIONAL UNION FOR THE CONSERVATION OF NATURE (IUCN). ESTIMATES INDICATE THAT THERE ARE FEWER THAN 18,000 REMAINING IN THE WILD. WILDLIFE CONSERVATION SOCIETY SCIENTISTS WORK ACTIVELY TO MONITOR AND PROTECT HABITAT FOR ANDEAN BEARS AND A HOST OF OTHER SPECIES THROUGHOUT THE ANDES.

2. THE CENTRAL PARK ZOO HAD SEVERAL NEW ADDITIONS. A COTTON-TOP TAMARIN (SAGUINUS OEDIPUS) WAS BORN TO THEIR RESIDENT BREEDING PAIR. THEY HATCHED FOUR CHINSTRAP PENGUINS (PYGOSCELIS ANTARCTICUS). TWO OF THESE CHICKS CAME FROM NEWLY FORMED PAIRS AND ARE CONSIDERED GENETICALLY SIGNIFICANT HATCHES FOR THE AZA SSP POPULATION. THEY SUCCESSFULLY INCORPORATED A HAND-REARED MACARONI PENGUIN (EUDYPTES CHRYSOLOPHUS) THAT ARRIVED AS AN EGG FROM SEA WORLD SAN DIEGO INTO THE PENGUIN COLONY. ALSO RECEIVED HARLEQUIN SHEEP (OVIS ARIES) FROM A FARM IN THE SHENANDOAH VALLEY REGION OF VIRGINIA, NOT FAR FROM WHERE THE BREED WAS FIRST DEVELOPED. HARLEQUIN SHEEP ARE SMALL, DOCILE SHEEP WITH A CALM DISPOSITION WHICH MAKES THEM PERFECT FOR INTERACTING WITH YOUNG CHILDREN. THEY ARE KNOWN FOR THE VARIETY OF COLORS IN THEIR COATS AND THEIR FINE

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WOOL. THE FOUR NEW SHEEP NOW RESIDE WITH OUR RESIDENT BABYDOLL AND  
SHETLAND SHEEP AT THE TISCH CHILDREN'S ZOO.

3. THE PROSPECT PARK ZOO RECEIVED SEVERAL NEW ANIMALS AS PART OF AN SSP  
RECOMMENDATION INCLUDING A NEW FEMALE REEVE'S MUNTJAC (MUNTIACUS  
REEVESI), A NEW FEMALE TUFTED DEER (ELAPHODUS CEPHALOPHUS) AND TWO NEW  
MALE HAMADRYAS BABOON (PAPIO HAMADRYAS) FROM THE OAKLAND ZOO. IN  
ADDITION THEY WERE ALSO INCUBATING FOUR HENKEL'S LEAF-TAILED GECKO  
(UROPLATUS HENKELI) EGGS. AS WELL AS THEIR DEMOISELLE CRANES (GRUS VIRGO)  
INCUBATING TWO EGGS.

4. THE QUEEN'S ZOO'S NEW ENGLAND COTTONTAIL (SYLVILAGUS TRANSITIONALIS)  
BREEDING PROGRAM PRODUCED 12 RABBITS THIS SEASON FOR WILD RELEASE. THEIR  
RELEASE BY STATE WILDLIFE AGENCIES IS ACCOMPANIED BY THE RELEASE OF THE  
BREEDING PAIRS THAT HAVE BEEN HOUSED AT QZ FOR THE PAST TWO YEARS. AS  
PART OF THE BREEDING PROGRAM PROTOCOLS, THE FOUNDER ANIMALS ARE HELD BY  
THE ZOO FOR TWO YEARS AND THEN RELEASED. TRAPPING WILL BEGIN IN THE FIVE  
PARTICIPATING STATES FOR A NEW ROUND OF UP TO 20 RABBITS THAT WILL SERVE  
AS FOUNDERS FOR THE LONG-TERM BREEDING PROGRAM. PARTICIPATING STATES FOR  
A NEW ROUND OF UP TO 20 RABBITS THAT WILL SERVE AS FOUNDERS FOR THE  
LONG-TERM BREEDING PROGRAM.

5. THE CENTRAL PARK ZOO RECEIVED THREE FEMALE GRIZZLY BEARS, (URSUS  
ARCTOS HORRIBILIS) LUNA, AMBER, AND TREENA. ALL THREE BEARS ARE BUSY  
EXPLORING THE ENTIRE EXHIBIT AND HAVE BEEN BUSY SWIMMING, DIGGING, AND

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NAPPING IN THE SUNSHINE. US FISH AND WILDLIFE SERVICE AND MONTANA FISH,  
WILDLIFE AND PARKS DEPARTMENT STAFF RESCUED THE THREE AS CUBS IN 2013.  
TWO OF THE BEARS, AMBER AND LUNA, ARE SISTERS ORPHANED WHEN THEIR MOTHER  
WAS ILLEGALLY SHOT. TREENA IS AN UNRELATED BEAR WHOSE MOTHER WAS  
EUTHANIZED BY WILDLIFE OFFICIALS AFTER REPEATEDLY FORAGING FOR FOOD IN A  
RESIDENTIAL AREA. THE BEARS WERE TOO YOUNG TO FEND FOR THEMSELVES IN THE  
WILD, SO WCS AGREED TO PROVIDE HOMES FOR THEM.

6. THE PROSPECT PARK ZOO OPENED A NEW EXHIBIT IN THE HISTORIC,  
BLUE-DOMED ANIMAL LIFESTYLES BUILDING. THE FORMER EXHIBIT FOR PALLAS' CAT  
(OTOCOLOBUS MANUL), NOW FEATURED IN AN OUTDOOR EXHIBIT, NOW HOUSES A TRIO  
OF YOUNG MALE SAND CATS (FELIS MARGARITA HARRISONI), BORN AT ZOO BOISE.  
THEY REPRESENT A THIRD SPECIES OF SMALL WILD CAT AT PROSPECT PARK ZOO IN  
ADDITION TO PALLAS' CATS AND BLACK-FOOTED CATS (FELIS NIGRIPES). SEVERAL  
PPZ HABITATS LEND THEMSELVES WELL TO HOUSE SMALL CAT SPECIES THAT WARRANT  
INCREASED WORK IN ZOOS. SAND CATS ARE SMALL 5-6-POUND CATS NATIVE TO THE  
DRY ROCKY DESERTS OF NORTHERN AFRICA AND SOUTHWEST AND CENTRAL ASIA.  
THEIR ADDITION TO THE ANIMAL LIFESTYLES BUILDING ALONG WITH SEVERAL  
EXHIBITS IS DESIGNED TO INTRODUCE GUESTS TO A VARIETY OF HABITATS AND THE  
UNIQUE ADAPTATIONS OF ANIMALS FOUND IN EACH HABITAT.

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

IN JANUARY 2020, THE WORLD HEALTH ORGANIZATION RECOGNIZED THE NOVEL  
STRAIN OF CORONAVIRUS, COVID-19, AS A PANDEMIC. WCS'S ZOOS AND AQUARIUM  
WERE SUBJECT TO OPERATION RESTRICTIONS AND OTHER SAFETY PROTOCOLS IN  
ACCORDANCE WITH THE NEW YORK STATE EXECUTIVE ORDERS AND GUIDANCE RELATED

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TO THE PANDEMIC. THIS NEGATIVELY AFFECTED WCS'S OPERATING RESULTS,  
PARTICULARLY IN THE YEARS ENDED JUNE 30, 2020 AND 2021, WITH THE GREATEST  
IMPACTS ON ATTENDANCE DRIVEN REVENUE INCLUDING GATE ADMISSIONS,  
MEMBERSHIP FEES AND RESTAURANT AND MERCHANDISE SALES. THE OPERATIONS OF  
WCS'S GLOBAL CONSERVATION PROGRAMS WERE ALSO AFFECTED BY LOCAL  
GOVERNMENTAL AND OTHER GUIDANCE AND REQUIREMENTS, WHICH IN SOME CASES  
DISRUPTED PLANNED PROGRAMMATIC ACTIVITY. WHILE IT IS POSSIBLE THAT THE  
EFFECTS OF COVID-19 MAY CONTINUE TO NEGATIVELY AFFECT WCS'S FINANCIAL  
POSITION, RESULTS OF OPERATIONS AND CASH FLOWS, THE TREND IN ATTENDANCE  
DRIVEN REVENUES HAS BEEN POSITIVE IN 2022 AND IS EXPECTED TO CONTINUE.

**FORM 990, PART V, LINE 4B - FINANCIAL ACCOUNTS IN FOREIGN COUNTRIES**

AFGHANISTAN, ARGENTINA, BANGLADESH, BELIZE, BOLIVIA, CAMBODIA, CAMEROON,  
CENTRAL AFRICA REPUBLIC, CHILE, CHINA, COLOMBIA, CONGO (REPUBLIC OF  
CONGO), DEMOCRATIC REPUBLIC OF CONGO, ECUADOR, FIJI, GABON, GUATEMALA,  
HONDURAS, INDONESIA, KENYA, LAOS, MADAGASCAR, MOZAMBIQUE, MONGOLIA,  
MYANMAR, NIGERIA, NICARAGUA, PARAGUAY, PERU, PAKISTAN, PAPUA NEW GUINEA,  
RWANDA, SINGAPORE, SOLOMON ISLANDS, SOUTH SUDAN, THAILAND, TANZANIA,  
UGANDA, UNITED KINGDOM, VIETNAM. THE LIST ON ATTACHMENT 1 IS LIMITED TO  
10 COUNTRIES, THIS IS A COMPLETE LIST.

**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 CORPORATION LAW.

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▶ Attach to Form 990 or 990-EZ.

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

OMB No. 1545-0047

**2021**

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Inspection**

**WILDLIFE CONSERVATION SOCIETY**

Employer identification number

**13-1740011**

**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  
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, THE  
OFFICE OF GENERAL COUNSEL AND BY WCS'S OUTSIDE AUDITORS. BEFORE FILING  
WITH THE IRS, THE DRAFT 990 IS REVIEWED BY THE AUDIT COMMITTEE AND  
PROVIDED TO THE ENTIRE BOARD OF TRUSTEES BY POSTING ON A SECURE WEBSITE  
ACCESSIBLE TO ALL THE TRUSTEES.

**FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY**

WCS'S BOARD OF TRUSTEES HAS ADOPTED A WRITTEN CONFLICTS OF INTEREST  
POLICY APPLICABLE TO TRUSTEES, OFFICERS AND KEY EMPLOYEES 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

**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.

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

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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.

**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, EXCEPT THE PRESIDENT AND CHIEF EXECUTIVE OFFICER, AN EX OFFICIO MEMBER OF THE COMMITTEE, WHO IS RECUSED FROM ALL DECISIONS RELATED TO HIS COMPENSATION. 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. THIS REVIEW IS DONE EVERY YEAR.

**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 AND ARE FURNISHED UPON REQUEST. THE IRS 990 IS ALSO POSTED ON GUIDESTAR. GOVERNING DOCUMENTS AND CONFLICT OF INTEREST

**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.

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

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Employer identification number

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POLICY ARE 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 - 0.1 HRS/WK

JOSEPH WALSTON - 0.3 HRS/WK

CHRISTOPHER J. MCKENZIE - 0.5 HRS/WK

ROBERT CALAMO - 0.5 HRS/WK

ROBERT G. MENZI - 0.2 HRS/WK

LAURA STOLZENTHALER - 0.2 HRS/WK

**FORM 990, PART XI, LINE 9-OTHER CHANGES IN NET ASSETS EXPLANATION**

CAPITAL GAIN ON K-1'S (1,085,990)

ORDINARY GAIN FROM K-1 (1,714,159)

POSTRETIREMENT-RELATED CHANGE 9,884,708

TOTAL PART XI LINE 9 (7,084,559)

**FORM 990, PARTS VIII, IX, X AND SCHEDULES**

EFFECTS OF COVID-19 ON WCS ACTIVITIES

SEE NARRATIVE SCHEDULE O PART III LINE 4D

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

13-1740011

FORM 990, PART V, LINE 4B - FOREIGN COUNTRIES

=====

- AFGHANISTAN
- BANGLADESH
- BELIZE
- BOLIVIA
- CAMBODIA
- CAMEROON
- FIJI
- GABON
- GUATEMALA
- CHILE

COPY

Name of the organization

Employer identification number

WILDLIFE CONSERVATION SOCIETY

13-1740011

FORM 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,

COPY

Name of the organization

**WILDLIFE CONSERVATION SOCIETY**

Employer identification number

**13-1740011**

## FORM 990, PART VII-COMPENSATION OF THE 5 HIGHEST PAID IND. CONTRACTORS

NAME AND ADDRESS	DESCRIPTION OF SERVICES	COMPENSATION
TURNER CONSTRUCTION 375 HUDSON STREET NEW YORK, NY 10014	CONSTRUCTION	13,664,477.
DI DOMENICO + PARTNERS LLP 3743 CRESECENT STREET LONG ISLAND CITY, NY 11101	CONSTRUCTION	1,452,082.
FGI CORPORATION 1901 AMETHYST STREET BRONX, NY 10462	CONSTRUCTION	1,324,420.
ENDANGERD SPECIES PROTECTION 180 PICCADILLY LONDON UNITED KINGDOM W1J 9HF	CONSULTANTS	1,136,897.
STAGECOACH DIGITAL 266 MAIN STREET BURLINGTON, VT 05401	CONSULTANTS	610,481.

**SCHEDULE R  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

WILDLIFE CONSERVATION SOCIETY

**Related Organizations and Unrelated Partnerships**

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2021**

**Open to Public  
Inspection**

Employer identification number

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**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) SEE SUPPLEMENTAL PAGE					
(2)					
(3)					
(4)					
(5)					
(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) SEE SUPPLEMENTAL PAGE							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							

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

Schedule R (Form 990) 2021

**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) SEE SUPPLEMENTAL PAGE									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									

WILDLIFE CONSERVATION SOCIETY

13-1740011

990 SCH R, PART IV-IDENTIFICATION OF REL. ORG. TAXABLE AS CORP/TRUST

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) DIRECT CONTROLLING	(E) ENTITY TYPE	(F) SHARE OF TOT INCOME	(G) SHARE OF EOY	(H) % OWNERSHIP	(I) SEC 512(B)(13) YES NO
182 FLIGHT CORP. 2300 SOUTHERN BLVD BRONX, NY 10460	13-4120289 AIRCRAFT	DE	WCS	C			100.0000	X
WILDLIFE CONSERV & SCIENCE (MALAYSIA) 7 JALAN RIDGEWAY SARAWAK, MY 93450	CONSERVATION	MY	WCS	C	805,621.	717,703.	83.3330	X
TIERRA DE GUANACOS LLC UNO LIMITADA 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	CI	TRUCH & GU	C				X
TIERRA DE GUANACOS LLC DOS LIMITADA 2300 SOUTHERN BLVD BRONX, NY 10460	CONSERVATION	CI	TRUCH & GU	C				X
CHARITABLE REMAINDER TRUSTS (1)	N/A	NY	WCS	TRUST				X
POOLED INCOME FUNDS (8)	N/A	NY	WCS	TRUST				X
BATAGUR CO, LTD. ST 21, SANGKAT TONIE CHAMKAMORN PHNOM PENH, CAMBODIA CB	CONSERVATION	CB	WCS	C			49.0000	X
IBIS RICE CONSERVATION CO, LTD NO. 74, ST.464, SANGKAT TOUL TOMPON KHAN CHAMKAR MON, PHN	AGRICULTURE	CB	WCS	C			100.0000	X
SVC SAM VEASNA CONSERVATION TOURS CO., L #0552, STREET 26, GROUP 12 WAT BO, SIEM REAP CB	ECOTOURISM	CB	WCS CONSERVATIO	C			100.0000	X

**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) IBIS RICE CONSERVATION CO LTD	B	360,000.	FMV
(2) WCS ASSOCIACAO CONSERVACAO DA VIDA SILVE(BRAZ	B	646,543.	FMV
(3) WILDLIFE CONSERVATION & SCIENCE (MALAYSIA)	B	587,913.	FMV
(4) WCS ANO	B	650,093.	FMV
(5) WCS EU	B	524,987.	FMV
(6) SANSOM MLUP PREY (SMP)	B	55,438.	FMV

**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 sections 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**

Provide additional information for responses to questions on Schedule R. See instructions.

## SCHEDULE R- 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, SEIMA CARBON COMPANY LLC, CONSERVATION LIVELIHOODS INTERNATIONAL LLC, TIERRAS LLC, CONSERVATION FLIGHT LLC AND WCS CONSERVATION ENTERPRISES 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 AND SEIMA WERE FORMED TO CARRY ON WILDLIFE CONSERVATION IN MADAGASCAR AND CAMBODIA, RESPECTIVELY, THROUGH MEASURES DEALING WITH CLIMATE CHANGE.

CONSERVATION LIVELIHOODS INTERNATIONAL LLC 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.

WCS CONSERVATION ENTERPRISES LLC WAS ORGANIZED TO SUPPORT, PROMOTE AND PARTICIPATE IN CONSERVATION PROGRAMS AND ACTIVITIES WORLDWIDE, INCLUDING THROUGH INVESTMENTS IN CONSERVATION ENTERPRISES THAT ARE COMPATIBLE WITH THE CONSERVATION AND PROTECTION OF THE NATURAL ENVIRONMENT.

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

CONSERVATION FLIGHT LLC HOLDS TITLE TO AIRCRAFT USED IN CONNECTION WITH WCS'S GLOBAL CONSERVATION PROGRAMS AND OPERATIONS.

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 HAS 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, AND IS A TITLE HOLDING COMPANY UNDER SECTION 501(C)(2). IT HOLDS TITLE TO REAL PROPERTY FOR, AND HAS DIRECTORS AND OFFICERS WHO ARE EMPLOYEES OF WCS.

182 FLIGHT CORP. IS A NOT FOR PROFIT CORPORATION FORMED IN DELAWARE, WITH A SINGLE MEMBER, WCS. IN CONNECTION WITH WCS PROGRAM ACTIVITIES, 182 FLIGHT CORP HOLDS AIRCRAFT, AND HAS DIRECTORS AND OFFICERS WHO ARE EMPLOYEES OF WCS.

WILD LANDS CONSERVATION SOCIETY WAS A NOT FOR PROFIT CORPORATION FORMED IN DELAWARE, WITH A SINGLE MEMBER, WCS, AND WAS A PUBLIC CHARITY. THE ENTITY WAS DISSOLVED ON DECEMBER 31, 2021.

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

WCS WILDLIFE CONSERVATION SOCIETY CANADA IS A NOT FOR PROFIT 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 ORGANIZATION, ORGANIZED UNDER THE LAWS OF THE STATE OF RIO DE JANEIRO, BRAZIL. IT CARRIES ON WILDLIFE CONSERVATION IN BRAZIL AND HAS WCS AS A MEMBER AND WCS EMPLOYEES ON ITS GOVERNING BODY.

WILDLIFE CONSERVATION AND SCIENCE (MALAYSIA) BHD IS A MALAYSIA COMPANY LIMITED BY GUARANTEE, WITH MEMBERS AND DIRECTORS WHO ARE EMPLOYEES OF WCS, FORMED TO PROTECT WILDLIFE AND WILD PLACES IN MALAYSIA.

WCS GLOBAL CONSERVATION UK IS A REGISTERED CHARITY IN THE UNITED KINGDOM. IT 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.

AUTONOMOUS NON-COMMERCIAL ORGANIZATION WILDLIFE CONSERVATION SOCIETY (WCS ANO) IS A NON-MEMBERSHIP, UNITARY, AUTONOMOUS, NON-COMMERCIAL ORGANIZATION ORGANIZED UNDER THE LAWS OF THE RUSSIAN FEDERATION, FOR THE PURPOSE OF SAVING WILDLIFE AND WILD PLACES IN RUSSIA THROUGH SCIENCE, CONSERVATION ACTION, EDUCATION, AND INSPIRING PEOPLE TO VALUE NATURE.

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

BATAGUR CO, LTD. IS A PRIVATE LIMITED COMPANY ORGANIZED UNDER CAMBODIAN LAW TO HOLD LAND FOR CONSERVATION PURPOSES.

SANSOM MLUP PREY (SMP) IS A NONPROFIT ORGANIZATION CREATED UNDER CAMBODIAN LAW TO PROMOTE WILDLIFE CONSERVATION THROUGH VARIOUS MEANS AND INITIATIVES INCLUDING BY SUPPORTING LOCAL COMMUNITIES IN THEIR EFFORTS TO PRODUCE AND MARKET WILDLIFE FRIENDLY PRODUCTS.

YAYASAN CELEBICA (CELEBICA) IS A NONPROFIT FOUNDATION ORGANIZED UNDER THE LAWS OF INDONESIA PRINCIPALLY TO HOLD LAND FOR CONSERVATION PURPOSES.

IBIS RICE CONSERVATION CO., LTD. IS A PRIVATE LIMITED COMPANY ORGANIZED UNDER CAMBODIAN LAW PRINCIPALLY TO SUPPORT LOCAL COMMUNITIES AND BIODIVERSITY THROUGH THE PROMOTION OF SUSTAINABLE AGRICULTURAL ACTIVITIES AND COMMERCIAL DEVELOPMENT OF AGRICULTURAL COMMODITIES.

WCS EU IS AN INTERNATIONAL NON-PROFIT ORGANIZATION ORGANIZED UNDER LAWS OF BELGIUM.

SVC SAM VEASNA CONSERVATION TOURS CO., LTD. IS A SINGLE MEMBER PRIVATE LIMITED COMPANY ORGANIZED UNDER CAMBODIAN LAW TO SUPPORT LOCAL COMMUNITIES AND BIODIVERSITY THROUGH THE PROMOTION OF ECOTOURISM AND RELATED ACTIVITIES.

HENRY L. HEYMANN WILDLIFE PRESERVATION FOUNDATION IS A NONPROFIT NONSTOCK CORPORATION FORMED IN DELAWARE, AND IS A TAX-EXEMPT PUBLIC CHARITY UNDER 501(C)(3) AND A SUPPORTING ORGANIZATION UNDER SECTION 509(A)(3), WITH WCS

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

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AS ONE OF TWO SUPPORTED ORGANIZATIONS. THE FOUNDATION HAS DIRECTORS AND OFFICERS WHO ARE EMPLOYEES OF WCS.

SCHEDULE R, PART IV

AS OF JUNE 30, 2022, WILDLIFE CONSERVATION SOCIETY HELD MORE THAN A 50% BENEFICIAL INTEREST IN 1 CHARITABLE REMAINDER TRUST DOMICILED IN NEW YORK AND 8 POOLED INCOME FUNDS DOMICILED IN NEW YORK.

COPY

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

## PART I - IDENTIFICATION OF DISREGARDED ENTITIES

(A) NAME/ADDRESS/EIN	(B) PRIMARY ACTIVITY	(C) LEGAL DOMICILE	(D) TOTAL INCOME	(E) EOY ASSETS	(F) DIRECT CONTROL
MAKIRA CARBON COMPANY LLC		24-4470986 2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE	31,330.	52,521.	WCS
TIERRA DE GUANACOS LLC		2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE			TIERRAS LL
TIERRA DE TRUCHAS LLC		2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE			TIERRAS LL
TIERRAS LLC		2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE			WCS
CONSERVATION LIVELIHOODS INT'L LLC		2300 SOUTHERN BLVD		BRONX, NY 10460	
	LIVELIHOODS	DE			WCS
SEIMA CARBON COMPANY LLC		47-4909194 2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE	11,454,300.	30,260,330.	WCS
CONSERVATION FLIGHT LLC		81-3820120 2300 SOUTHERN BLVD		BRONX, NY 10460	
	AIRCRAFT	DE		NONE	WCS
WCS CONSERVATION ENTERPRISES LLC		2300 SOUTHERN BLVD		BRONX, NY 10460	
	CONSERVATION	DE		NONE	WCS

**Part VII Supplemental Information**

Provide additional information for responses to questions on Schedule R. See instructions.

## PART II - IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS

(A) NAME\ADDRESS\EIN	(B) ACTIVITY	(C) LEGAL DOMICILE	(D) EXEMPT CODE	(E) CHARITY STATUS	(F) DIRECT CONTROLLING	(G) SEC 512 YES NO
WCS WILDLIFE CONSERV SOC CANADA 720 SPADINA AVENUE	85-4255882 CONSERVATION	CA			WCS	X
WILD LANDS CONSERVATION SOCIETY 2300 SOUTHERN BLVD	20-1262383 BRONX, NY 10460 INACTIVE	DE	501(C)(3)	12A(I)	WCS	X
WCS ASSOCIACAO CONSERVACAO DA VIDA SILVE RUA JARDIM BOTANICO 674 BR	, RIO DE JANIERO BR 22461 CONSERVATION	BR			WCS	X
WCS GLOBAL CONSERVATION UK 10 QUEEN STREET PLACE	, LONDON UK EC4R1BE CONSERVATION	UK			WCS	X
PROFESSIONAL HOUSING CORPORATION 2300 SOUTHERN BLVD	13-3546032 BRONX, NY 10460 REAL ESTATE	DE	501(C)(2)		WCS	X
WCS ANO 24 OVCHINNIKOVA STR., FLAT 14	VLADIVOSTOK, RS 690048 CONSERVATION	RS			WCS	X
SANSOM MLUP PREY (SMP) 552, ST 26 WAT BO	SIEM REAP, CB CONSERVATION	CB			WCS	X
YAYASAN CELEBICA PESONA KHAYANGAN V BLOK AK/8	RUKUN TETANGGA, ID 001 CONSERVATION	ID			WCS	X
WCS EU BOULEVARD LOUIS SCHMIDT, 64	BRUSSELS, BE 1040 CONSERVATION	BE			WCS	X
HENRY L. HEYMANN WILDLIFE PRESERVATION F 2300 SOUTHERN BLVD	87-1701363 BRONX, NY 10460 CONSERVATION	DE	501(C)3	12A(I)	WCS	X