

PUBLIC DISCLOSURE

AMENDED RETURN

Form **990**

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2021

Department of the Treasury
Internal Revenue Service

▶ 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.

Open to Public Inspection

A For the 2021 calendar year, or tax year beginning **OCT 1, 2021** and ending **SEP 30, 2022**

B Check if applicable: Address change Name change Initial return Final return/terminated <input checked="" type="checkbox"/> Amended return Application pending	C Name of organization THE WILDERNESS SOCIETY Doing business as Number and street (or P.O. box if mail is not delivered to street address) Room/suite 1801 PENNSYLVANIA AVE, NW 200 City or town, state or province, country, and ZIP or foreign postal code WASHINGTON, DC 20006	D Employer identification number 53-0167933
	E Telephone number (202) 833-2300	G Gross receipts \$ 65,494,110.
	F Name and address of principal officer: JAMIE WILLIAMS SAME AS C ABOVE	H(a) Is this a group return for subordinates? Yes <input checked="" type="checkbox"/> No H(b) Are all subordinates included? Yes No If "No," attach a list. See instructions H(c) Group exemption number ▶
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) 501(c) () (insert no.) 4947(a)(1) or 527		
J Website: ▶ WWW.WILDERNESS.ORG		
K Form of organization: <input checked="" type="checkbox"/> Corporation Trust Association Other ▶		L Year of formation: 1937 M State of legal domicile: DC

Part I Summary

	1	Briefly describe the organization's mission or most significant activities: THE LEADING ORGANIZATION DEDICATED TO PROTECTING AMERICA'S WILD PLACES, THE WILDERNESS		
Activities & Governance	2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	31
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5	Total number of individuals employed in calendar year 2021 (Part V, line 2a)	5	179
	6	Total number of volunteers (estimate if necessary)	6	32
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	0.
	7b	Net unrelated business taxable income from Form 990-T, Part I, line 11	7b	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year 39,630,663.	Current Year 59,985,969.
	9	Program service revenue (Part VIII, line 2g)	126,223.	66,903.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	1,925,170.	2,256,298.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	332,638.	328,334.
	12	Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	42,014,694.	62,637,504.
	Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	3,094,707.
14		Benefits paid to or for members (Part IX, column (A), line 4)	0.	0.
15		Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	17,995,019.	21,454,007.
16a		Professional fundraising fees (Part IX, column (A), line 11e)	104,250.	151,525.
b		Total fundraising expenses (Part IX, column (D), line 25) ▶ 7,847,040.		
17		Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	14,054,951.	17,449,453.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	35,248,927.	42,780,220.
	19	Revenue less expenses. Subtract line 18 from line 12	6,765,767.	19,857,284.
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	Beginning of Current Year 92,421,140.	End of Year 95,687,234.
	21	Total liabilities (Part X, line 26)	11,085,616.	9,898,953.
	22	Net assets or fund balances. Subtract line 21 from line 20	81,335,524.	85,788,281.

Part II Signature Block

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

Sign Here	Signature of officer DAVID SEABROOK, EXECUTIVE VICE PRESIDENT Type or print name and title	Date
Paid Preparer Use Only	Print/Type preparer's name J. CALVIN MARKS	Preparer's signature
	Firm's name ▶ JOHNSON LAMBERT LLP	Date
	Firm's address ▶ 4242 SIX FORKS ROAD, SUITE 1500 RALEIGH, NC 27609	Check if self-employed <input type="checkbox"/>
		PTIN P01226973
		Firm's EIN ▶ 52-1446779
		Phone no. 919-719-6400

May the IRS discuss this return with the preparer shown above? See instructions Yes No

Product: **Exempt**
 Name: **The Wilderness Society**
 FEIN: *******7933**
 Bank Info:
 Fiscal Year Begin Date: **10/1/2021**
 IRS Message:

Category:
 Plan Number:
 Fiscal Year End Date: **9/30/2022**

IRS Center: **Ogden**
 e-Postmark: **6/9/2024 6:36 PM**
 Notification:
 eSigned:

Return Information

Date	Return ID	Type of Activity	Submission ID	Refund/(Due)	Updated By	eSign Date
07/20/2023	21X:530167933:V1	Upload Started			Marks,Calvin	
07/20/2023	21X:530167933:V1	Released for Transmission - Validation in Progress			Marks,Calvin	
07/20/2023	21X:530167933:V1	Ready to transmit - Validation Complete				
07/20/2023	21X:530167933:V1	Transmitted to FD	5637082023201032ae01			
07/20/2023	21X:530167933:V1	Accepted by FD on 7/20/2023				
06/09/2024	21X:530167933:V1	Upload Started - Amended Return			Marks,Calvin	
06/09/2024	21X:530167933:V1	Released for Transmission - Validation in Progress			Marks,Calvin	
06/09/2024	21X:530167933:V1	Ready to transmit - Validation Complete				
06/09/2024	21X:530167933:V1	Transmitted to FD	56370820241610328e01			
06/09/2024	21X:530167933:V1	Accepted by FD on 6/9/2024				

ID	Status Date	Status	State/Other	State Category	FBAR	FBAR BSA ID
----	-------------	--------	-------------	----------------	------	-------------

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

▶ **File a separate application for each return.**
▶ **Go to www.irs.gov/Form8868 for the latest information.**

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type or print	Name of exempt organization or other filer, see instructions. THE WILDERNESS SOCIETY	Taxpayer identification number (TIN) 53-0167933
File by the due date for filing your return. See instructions.	Number, street, and room or suite no. If a P.O. box, see instructions. 1801 PENNSYLVANIA AVE, NW, 200	
	City, town or post office, state, and ZIP code. For a foreign address, see instructions. WASHINGTON, DC 20006	

Enter the Return Code for the return that this application is for (file a separate application for each return) 0 1

Application Is For	Return Code	Application Is For	Return Code
Form 990 or Form 990-EZ	01	Form 1041-A	08
Form 4720 (individual)	03	Form 4720 (other than individual)	09
Form 990-PF	04	Form 5227	10
Form 990-T (sec. 401(a) or 408(a) trust)	05	Form 6069	11
Form 990-T (trust other than above)	06	Form 8870	12
Form 990-T (corporation)	07		

DAVID SEABROOK

- The books are in the care of ▶ **1801 PENNSYLVANIA AVE, NW, 200 - WASHINGTON, DC 20006**

Telephone No. ▶ **(202) 424-4400** Fax No. ▶ _____

- If the organization does not have an office or place of business in the United States, check this box
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) _____. If this is for the whole group, check this box . If it is for part of the group, check this box and attach a list with the names and TINs of all members the extension is for.

1 I request an automatic 6-month extension of time until **AUGUST 15, 2023**, to file the exempt organization return for the organization named above. The extension is for the organization's return for:

- ▶ calendar year _____ or
- ▶ tax year beginning **OCT 1, 2021**, and ending **SEP 30, 2022**.

2 If the tax year entered in line 1 is for less than 12 months, check reason: Initial return Final return Change in accounting period

3a If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions.	3a	\$	0.
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit.	3b	\$	0.
c Balance due. Subtract line 3b from line 3a. Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions.	3c	\$	0.

Caution: If you are going to make an electronic funds withdrawal (direct debit) with this Form 8868, see Form 8453-TE and Form 8879-TE for payment instructions.

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:
FOUNDED IN 1935 BY CONSERVATION VISIONARIES, THE WILDERNESS SOCIETY PROTECTS WILDERNESS AND UNITES PEOPLE TO PROTECT AMERICA'S WILD PUBLIC LANDS. WE WORK TO GUIDE ENERGY DEVELOPMENT TO THE RIGHT PLACES AND ENSURE THAT PUBLIC LANDS CONTRIBUTE TO CLIMATE SOLUTIONS. WE WORK TO

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

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? [] Yes [X] No
If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations 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 \$ 15,130,753. including grants of \$ 1,583,781.) (Revenue \$ 31,358.)
30 X 30: THE GOAL OF THE 30 X 30 MOVEMENT IS TO ADDRESS THE DEVASTATING LOSS OF NATURE ACROSS THE GLOBE. IN APPROXIMATELY THE LAST 20 YEARS, WE'VE LOST 1.2 MILLION SQUARE MILES OF THE WILD LAND WORLDWIDE - ABOUT THE SAME AS THE TOTAL AREA OF INDIA. IF DEVELOPMENT AND DESTRUCTION CONTINUE AT THAT RATE, SCIENTISTS SAY THERE WILL BE NO TRULY WILD PLACES LEFT WITHOUT HUMAN DISTURBANCES IN LESS THAN A CENTURY. THIS LOSS OF NATURE AFFECTS OUR SOURCES OF CLEAN AIR AND WATER AS WELL AS THE PLACES WE RECREATE. IT ALSO MEANS FEWER PLACES TO ACT AS REFUGE FOR PEOPLE AND WILDLIFE STRUGGLING TO ADAPT TO CLIMATE CHANGE. ADDITIONALLY, THIS TREND IS HURTING OUR ABILITY TO COMBAT CLIMATE CHANGE ITSELF, AS FORESTS AND OTHER LANDSCAPES WITH A GREAT CAPACITY TO ABSORB GREENHOUSE GAS EMISSIONS ARE BEING WIPED OUT.

4b (Code:) (Expenses \$ 7,248,167. including grants of \$ 1,225,794.) (Revenue \$ 15,048.)
COMMUNITY LED CONSERVATION: ALL PEOPLE, OF EVERY RACE, GENDER, IMMIGRATION STATUS, PHYSICAL ABILITY OR INCOME LEVEL, SHOULD HAVE ACCESS TO NATURE. WE ARE WORKING TO TRANSFORM CONSERVATION POLICY AND PRACTICE SO THAT EVERYONE CAN GET OUTDOORS AND BENEFIT EQUITABLY FROM PUBLIC LANDS.

4c (Code:) (Expenses \$ 6,748,475. including grants of \$ 632,581.) (Revenue \$ 13,992.)
NET ZERO: WE STRIVE TO MAKE PUBLIC LANDS AND WATERS ENTIRELY POLLUTION-FREE. THE FIRST STEP IS TO MAKE PUBLIC LANDS A NET-ZERO SOURCE OF EMISSIONS BY 2030 AND SUPPORT A JUST TRANSITION FOR FOSSIL-FUEL-DEPENDENT COMMUNITIES. WE ALSO WANT TO BOOST RESPONSIBLE RENEWABLE ENERGY DEVELOPMENT IN THE RIGHT PLACES AND TO PROTECT FORESTS AND LANDSCAPES THAT PLAY AN IMPORTANT ROLE IN ABSORBING CLIMATE CHANGE EMISSIONS.

4d Other program services (Describe on Schedule O.)
(Expenses \$ 3,152,416. including grants of \$ 283,079.) (Revenue \$ 6,505.)

4e Total program service expenses 32,279,811.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions	X	
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	X	
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>	X	
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi endowments? <i>If "Yes," complete Schedule D, Part V</i>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>		X
c Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I.</i> See instructions	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	

Part IV Checklist of Required Schedules (continued)

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

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable	1a 139	
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable	1b 0	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c X	

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, unrelated business 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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
	1a 31		
b	Enter the number of voting members included on line 1a, above, who are independent		
	1b 31		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	X	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.		X

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

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

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **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.
 Own website Another's website Upon request Other (explain on Schedule O)
- 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 **DAVID SEABROOK - (202) 833-2300**
1801 PENNSYLVANIA AVE, NW, 200, WASHINGTON, DC 20006

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 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) JAMIE WILLIAMS PRESIDENT	39.00 1.00			X			395,476.	0.	48,381.	
(2) TERESA LANE VP, PHILANTHROPY	39.00 1.00			X			273,181.	0.	16,566.	
(3) KATHARINE L. THOMAS VP, EXTERNAL AFFAIRS	40.00				X		269,348.	0.	17,646.	
(4) MELYSSA L. WATSON EXECUTIVE DIRECTOR	40.00			X			266,226.	0.	33,793.	
(5) DAVID SEABROOK SVP, FINANCE & OPERATIONS	40.00			X			228,256.	0.	40,549.	
(6) DEBORAH LIU VP & GENERAL COUNSEL	40.00				X		226,713.	0.	39,415.	
(7) CHASE HUNTLEY VP, STRATEGY & POLICY	40.00				X		218,822.	0.	14,765.	
(8) MONIQUE DAILEY SVP FOR CONSERVATION PROGRAMS & POLI	40.00				X		185,613.	0.	13,578.	
(9) ALLEN MAY SR DIR, MEMBERSHIP & STRATEGIC SERVI	40.00					X	181,698.	0.	28,729.	
(10) JEANNA SINAGRA SR DIR, HUMAN RESOURCES & OPERATIONS	40.00					X	162,413.	0.	32,057.	
(11) ANDREW MCCONVILLE SR DIR, GOVERNMENT RELATIONS	40.00					X	158,221.	0.	35,475.	
(12) LAUREN GEPHART DEPUTY VP, MARKETING/DIGITAL ADVOCAC	40.00					X	154,856.	0.	38,104.	
(13) WORDNA MESKHENITEN VP FOR CULTURE & EQUITY	40.00					X	151,087.	0.	40,570.	
(14) CRANDALL C. BOWLES GOVERNING COUNCIL CHAIR (TO DEC '21)	2.00	X		X			0.	0.	0.	
(15) MICHAEL A. MANTELL GOVERNING COUNCIL CHAIR	2.00 1.00	X		X			0.	0.	0.	
(16) MOLLY MCUSIC VICE CHAIR	2.00 1.00	X		X			0.	0.	0.	
(17) WILLIAM J. CRONON VICE CHAIR	2.00	X		X			0.	0.	0.	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below 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			
(18) RUE MAPP VICE CHAIR	2.00	X		X				0.	0.	0.
(19) CATHY DOUGLAS STONE SECRETARY	2.00	X		X				0.	0.	0.
(20) DAVID BONDERMAN AT-LARGE	2.00	X		X				0.	0.	0.
(21) HANSJORG WYSS AT-LARGE	2.00	X		X				0.	0.	0.
(22) AUGUST BALL GOV COUNCIL MEMBER (FROM FEB '22)	2.00	X						0.	0.	0.
(23) THOMAS A. BARRON GOV COUNCIL MEMBER	2.00 1.00	X						0.	0.	0.
(24) FAITH BRIGGS GOV COUNCIL MEMBER (FROM	2.00	X						0.	0.	0.
(25) NORM CHRISTENSEN GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(26) DAVID CHURCHILL GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
1b Subtotal								2,871,910.	0.	399,628.
c Total from continuation sheets to Part VII, Section A								0.	0.	0.
d Total (add lines 1b and 1c)								2,871,910.	0.	399,628.

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 **58**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
PRODUCTION SOLUTIONS, INC 1953 GALLOWS RD, #850, VIENNA, VA 22182	DIRECT MAIL	1,790,242.
FACEBOOK, INC 1601 WILLOW ROAD, MENLO PARK, CA 94025	DIGITAL MARKETING	1,174,672.
M & R STRATEGIC SERVICES, 1101 CONNECTICUT AVE NW 7TH FLR, WASHINGTON, DC 20036	DIGITAL CONSULTING	819,681.
ROI SOLUTION, INC 200 RIVERS EDGE DR, MEDFORD, MA 02155	DATABASE MANAGEMENT SERVICES	394,288.
OFFICE ENVIRONMENTS INTERNATIONAL 2700 S QUINCY ST #320, ARLINGTON, VA 22206	OFFICE FURNISHING SERVICES	318,211.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **10**

SEE PART VII, SECTION A CONTINUATION SHEETS

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 line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) DANIEL CORDALIS GOV COUNCIL MEMBER (FROM JUN '22)	2.00	X						0.	0.	0.
(28) KIM ELLIMAN GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(29) JIM ENOTE GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(30) CARL FERENBACH GOV COUNCIL MEMBER	2.00 1.00	X		X				0.	0.	0.
(31) DAVID J. FIELD GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(32) CAROLINE M. GETTY GOV COUNCIL MEMBER	2.00	X		X				0.	0.	0.
(33) MARTINIQUE GRIGG GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(34) BEN JEALOUS GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(35) LISA KEITH GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(36) MARCIA KUNSTEL GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(37) KEVIN LUZAK GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(38) JACQUELINE BADGER MARS GOV COUNCIL MEMBER	2.00 1.00	X						0.	0.	0.
(39) JUAN MARTINEZ GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(40) DAVE MATTHEWS GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(41) JEFFREY RHODES GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(42) REBECCA L. ROM GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(43) THEODORE ROOSEVELT IV GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(44) JENNIFER PERKINS SPEERS GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
(45) AARON WERNHAM GOV COUNCIL MEMBER	2.00	X						0.	0.	0.
Total to Part VII, Section A, line 1c										

Part VIII Statement of Revenue

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

			(A)	(B)	(C)	(D)	
			Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c	39,751.				
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	59,946,218.				
	g Noncash contributions included in lines 1a-1f	1g	\$ 2,129,329.				
	h Total. Add lines 1a-1f			59,985,969.			
Program Service Revenue	2 a CONTRACTED SERVICES	Business Code	59,903.	59,903.			
	b ADVOCATE TRIPS		7,000.	7,000.			
	c						
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			66,903.			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,242,910.			1242910.	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties		128,543.			128,543.	
	6 a Gross rents	6a	(i) Real	27,820.			
		b Less: rental expenses	6b	0.			
		c Rental income or (loss)	6c	27,820.			
	d Net rental income or (loss)			27,820.			27,820.
	7 a Gross amount from sales of assets other than inventory	7a	(i) Securities	3,708,306.	161,688.		
		b Less: cost or other basis and sales expenses	7b	2,678,780.	177,826.		
		c Gain or (loss)	7c	1,029,526.	-16,138.		
	d Net gain or (loss)			1,013,388.			1013388.
	8 a Gross income from fundraising events (not including \$ 39,751. of contributions reported on line 1c). See Part IV, line 18	8a		0.			
		b Less: direct expenses	8b	0.			
c Net income or (loss) from fundraising events			0.				
9 a Gross income from gaming activities. See Part IV, line 19	9a						
	b Less: direct expenses	9b					
	c Net income or (loss) from gaming activities						
10 a Gross sales of inventory, less returns and allowances	10a						
	b Less: cost of goods sold	10b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue	11 a	Business Code					
	b						
	c						
	d All other revenue	900099	171,971.			171,971.	
	e Total. Add lines 11a-11d			171,971.			
12 Total revenue. See instructions			62,637,504.	66,903.	0.	2584632.	

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 X

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	3,690,235.	3,690,235.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	35,000.	35,000.		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	2,456,425.	1,929,223.	70,460.	456,742.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	14,726,329.	11,565,176.	422,292.	2,738,861.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	848,134.	666,408.	24,392.	157,334.
9 Other employee benefits	2,211,160.	1,737,384.	63,593.	410,183.
10 Payroll taxes	1,211,959.	952,278.	34,856.	224,825.
11 Fees for services (nonemployees):				
a Management				
b Legal	22,800.	15,099.	1,314.	6,387.
c Accounting	129,595.		129,595.	
d Lobbying	135,210.	135,210.		
e Professional fundraising services. See Part IV, line 17	151,525.			151,525.
f Investment management fees	174,918.		174,918.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Sch O.)	6,100,744.	4,180,641.	246,077.	1,674,026.
12 Advertising and promotion				
13 Office expenses	5,265,601.	2,764,348.	477,175.	2,024,078.
14 Information technology				
15 Royalties				
16 Occupancy	2,953,733.	2,090,587.	625,056.	238,090.
17 Travel	886,807.	759,631.	30,231.	96,945.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	2,506.	1,651.	401.	454.
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	485,116.	319,656.	77,586.	87,874.
23 Insurance	101,966.	80,202.	13,570.	8,194.
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DUES AND SUBSCRIPTIONS	593,700.	466,978.	79,010.	47,712.
b MAILING LIST RENTAL	311,860.	245,296.	41,502.	25,062.
c STAFF DEVELOPMENT	61,633.	48,478.	8,202.	4,953.
d PERSONNEL ACQUISITIONS	27,615.	21,721.	3,675.	2,219.
e All other expenses	195,649.	574,609.	129,464.	-508,424.
25 Total functional expenses. Add lines 1 through 24e	42,780,220.	32,279,811.	2,653,369.	7,847,040.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here <input checked="" type="checkbox"/> X if following SOP 98-2 (ASC 958-720)	7,250,970.	3,547,654.	774,886.	2,928,430.

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,270,657.	1	676,689.	
	2 Savings and temporary cash investments	11,150,705.	2	13,060,890.	
	3 Pledges and grants receivable, net	2,073,008.	3	17,663,208.	
	4 Accounts receivable, net	633,717.	4	211,194.	
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5		
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6		
	7 Notes and loans receivable, net		7		
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	1,592,747.	9	1,118,077.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 4,573,439.			
	b Less: accumulated depreciation	10b 1,088,245.	3,761,389.	10c 3,485,194.	
	11 Investments - publicly traded securities	66,313,713.	11	54,782,674.	
	12 Investments - other securities. See Part IV, line 11	307,104.	12	311,110.	
	13 Investments - program-related. See Part IV, line 11		13		
	14 Intangible assets		14		
	15 Other assets. See Part IV, line 11	5,318,100.	15	4,378,198.	
16 Total assets. Add lines 1 through 15 (must equal line 33)	92,421,140.	16	95,687,234.		
Liabilities	17 Accounts payable and accrued expenses	4,454,287.	17	3,376,317.	
	18 Grants payable		18		
	19 Deferred revenue	253,093.	19	265,945.	
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21		
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22		
	23 Secured mortgages and notes payable to unrelated third parties		23		
	24 Unsecured notes and loans payable to unrelated third parties		24		
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	6,378,236.	25	6,256,691.	
	26 Total liabilities. Add lines 17 through 25	11,085,616.	26	9,898,953.	
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.				
	27 Net assets without donor restrictions	48,789,104.	27	42,507,506.	
	28 Net assets with donor restrictions	32,546,420.	28	43,280,775.	
	Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.				
	29 Capital stock or trust principal, or current funds		29		
	30 Paid-in or capital surplus, or land, building, or equipment fund		30		
	31 Retained earnings, endowment, accumulated income, or other funds		31		
	32 Total net assets or fund balances	81,335,524.	32	85,788,281.	
33 Total liabilities and net assets/fund balances	92,421,140.	33	95,687,234.		

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	62,637,504.
2	Total expenses (must equal Part IX, column (A), line 25)	2	42,780,220.
3	Revenue less expenses. Subtract line 2 from line 1	3	19,857,284.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	81,335,524.
5	Net unrealized gains (losses) on investments	5	-13,516,553.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	-1,887,974.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	85,788,281.

Part XII Financial Statements and Reporting

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

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

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 for instructions and the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

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

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

The organization is not a private foundation because it is: (For lines 1 through 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		
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	40748496.	32907433.	33878375.	39630663.	59985969.	207150936
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	40748496.	32907433.	33878375.	39630663.	59985969.	207150936
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						35662123.
6 Public support. Subtract line 5 from line 4.						171488813

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
7 Amounts from line 4	40748496.	32907433.	33878375.	39630663.	59985969.	207150936
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	1554943.	1408898.	1388909.	1228352.	1399273.	6980375.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	90,626.	113,643.	19,967.	47,546.	171,971.	443,753.
11 Total support. Add lines 7 through 10						214575064
12 Gross receipts from related activities, etc. (see instructions)					12	764,109.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2021 (line 6, column (f), divided by line 11, column (f))	14	79.92 %
15 Public support percentage from 2020 Schedule A, Part II, line 14	15	85.35 %
16a 33 1/3% support test - 2021. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input checked="" type="checkbox"/>	
b 33 1/3% support test - 2020. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
17a 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
b 10% -facts-and-circumstances test - 2020. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization	▶ <input type="checkbox"/>	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions	▶ <input type="checkbox"/>	

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

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
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

15 Public support percentage for 2021 (line 8, column (f), divided by line 13, column (f))	15	%
16 Public support percentage from 2020 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2021 (line 10c, column (f), divided by line 13, column (f))	17	%
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

b 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 Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. 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)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? <i>If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI.</i>		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

	Yes	No
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? <i>If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.</i>		
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? <i>If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.</i>		
1		
2		

Section C. Type II Supporting Organizations

	Yes	No
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)? <i>If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).</i>		
1		

Section D. All Type III Supporting Organizations

	Yes	No
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?		
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? <i>If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).</i>		
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? <i>If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.</i>		
1		
2		
3		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.			
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.			
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).			
2 Activities Test. Answer lines 2a and 2b below.			
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? <i>If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.</i>			
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? <i>If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.</i>			
3 Parent of Supported Organizations. Answer lines 3a and 3b below.			
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>If "Yes" or "No" provide details in Part VI.</i>			
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? <i>If "Yes," describe in Part VI the role played by the organization in this regard.</i>			
2a			
2b			
3a			
3b			

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	Adjusted Net Income (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	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount 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	Minimum Asset Amount (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	Distributable Amount. 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).		

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	Total annual distributions. 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	Total 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	Excess distributions carryover to 2022. 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		

Schedule B

(Form 990)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990 or Form 990-PF.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number

53-0167933

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(3) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

527 political organization

Form 990-PF

501(c)(3) exempt private foundation

4947(a)(1) nonexempt charitable trust treated as a private foundation

501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000; or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>10,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>8,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>5,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>3,000,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>2,600,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>2,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>1,500,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px; margin-bottom: 5px;"></div> <div style="background-color: black; width: 100%; height: 15px;"></div>	\$ <u>1,338,290.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
_____	_____ _____ _____	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

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

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
9	STOCK _____ _____ _____	\$ 518,937.	08/04/22
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____
_____	_____ _____ _____	\$ _____	_____

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

Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of **\$1,000 or less** for the year. (Enter this info. once.) ▶ \$ _____
 Use duplicate copies of Part III if additional space is needed.

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>	<hr/> <hr/> <hr/>
(e) Transfer of gift			
Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee	
<hr/> <hr/> <hr/>		<hr/> <hr/> <hr/>	

SCHEDULE C
(Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527
 ▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
 ▶ **Go to www.irs.gov/Form990 for instructions and the latest information.**

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 THE WILDERNESS SOCIETY	Employer identification number 53-0167933
-------------------------------------------------------	-----------------------------------------------------

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

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

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-.

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

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

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grassroots lobbying)	256,646.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	216,255.													
c	Total lobbying expenditures (add lines 1a and 1b)	472,901.													
d	Other exempt purpose expenditures	42,307,319.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	42,780,220.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	6,646.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		<input checked="" 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.)

Lobbying Expenditures During 4-Year Averaging Period					
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000.
c Total lobbying expenditures	385,381.	369,617.	391,585.	472,901.	1,619,484.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	133,365.	240,678.	240,988.	256,646.	871,677.

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

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

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

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

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

1 Dues, assessments and similar amounts from members	1	
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).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures. See instructions	5	

Part IV Supplemental Information

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.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ 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.

OMB No. 1545-0047

2021

Open to Public Inspection

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

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

	(a) Donor advised funds	(b) Funds and other accounts
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?		<input type="checkbox"/> Yes <input type="checkbox"/> No
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?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

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

Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area

Protection of natural habitat Preservation of a certified historic structure

Preservation of open space

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.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register	2d

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?

Yes No

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)?

Yes No

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.

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.

b 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

▶ \$ _____

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? Yes No

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? Yes No
- b If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|---------------------------------|--------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No
- 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.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	21,487,933.	18,845,207.	18,852,354.	19,761,603.	22,084,081.
b Contributions	25,253.	111,720.	59,259.	19,950.	17,896.
c Net investment earnings, gains, and losses	-3,466,655.	3,392,060.	851,326.	13,546.	-549,548.
d Grants or scholarships					
e Other expenditures for facilities and programs	879,853.	861,054.	917,732.	942,745.	913,902.
f Administrative expenses					
g End of year balance	17,166,678.	21,487,933.	18,845,207.	18,852,354.	20,638,527.

- 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a Board designated or quasi-endowment _____ %
 - b Permanent endowment 100 %
 - c Term endowment _____ %
- 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:
- | | Yes | No |
|---------------------------------------------------------------------------------------------------------------------|--------------------------|-------------------------------------|
| (i) Unrelated organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| (ii) Related organizations | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
- 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.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements		3,226,429.	298,775.	2,927,654.
d Equipment		834,970.	437,544.	397,426.
e Other		512,040.	351,926.	160,114.

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶ 3,485,194.

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)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		

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)		
Total. (Col. (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)	
Total. (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) DEFERRED RENT	4,198,061.
(3) PLANNED GIVING LIABILITIES	2,037,380.
(4) DEPOSITS	21,250.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	6,256,691.

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.

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

Part 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.

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

Part 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.

PART III, LINE 1A:

THE SOCIETY'S COLLECTIONS INCLUDE ARTWORK AND PHOTOGRAPHS THAT ARE HELD FOR EDUCATIONAL PURPOSES. EACH ITEM IS PRESERVED AND CARED FOR IN A MANNER SIMILAR TO WORKS OF ART HELD FOR PUBLIC EXHIBITION. THE COLLECTIONS, WHICH WERE ACQUIRED THROUGH VARIOUS DONATIONS SINCE THE SOCIETY'S INCEPTION, ARE NOT RECOGNIZED AS ASSETS ON THE STATEMENTS OF FINANCIAL POSITION.

PART V, LINE 4:

THE SOCIETY'S ENDOWMENT CONSISTS OF INDIVIDUAL FUNDS ESTABLISHED FOR A VARIETY OF PURPOSES AND ARE DONOR-RESTRICTED. AS REQUIRED BY GAAP, NET ASSETS ASSOCIATED WITH ENDOWMENT FUNDS ARE CLASSIFIED AND REPORTED BASED ON THE EXISTENCE OR ABSENCE OF DONOR-IMPOSED RESTRICTIONS.

Part XIII Supplemental Information (continued)

GENERAL ENDOWMENT FUNDS HAVE BEEN ESTABLISHED OVER THE YEARS TO PROVIDE DONORS WITH AN OPTION TO PROVIDE THE SOCIETY WITH A LONG-LASTING BENEFIT TO THE ORGANIZATION.

GENERAL ENDOWMENT FUNDS ARE AGGREGATED FOR INVESTMENT PURPOSES AND THE ACCUMULATED EARNINGS AND LOSSES FROM THESE INVESTMENTS ARE ACCOUNTED FOR AS TERM ENDOWMENT FUNDS, WITH SPECIFIC TIME AND PURPOSE RESTRICTIONS GOVERNING THEIR USE.

THE AVAILABILITY OF TERM FUNDS IS DETERMINED BY A GOVERNING COUNCIL APPROVED POLICY, SUBJECT TO PERIODIC REVIEW AND CHANGES DUE TO FINANCIAL CONDITIONS. SINCE 1998, THE POLICY HAS PROVIDED FUNDS TO FUND PROGRAM AND SUPPORT FUNCTIONS. WHERE SPECIFIC USE OF THESE EARNINGS HAS BEEN REQUESTED BY THE DONOR, SUCH AS IN SUPPORT OF A SPECIFIC REGION OR BODY OF WORK, THE FUNDS ARE HELD IN RESTRICTION UNTIL THE PURPOSE IS SATISFIED.

PART X, LINE 2:

MANAGEMENT HAS CONCLUDED THAT THE SOCIETY HAS PROPERLY MAINTAINED ITS EXEMPT STATUS AND THERE ARE NO UNCERTAIN TAX POSITIONS AS OF SEPTEMBER 30, 2022.

**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

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

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

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
- 2 a 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			
K2D STRATEGIES LLC - 4075 WILSON BLVD, 8TH FLOOR,	CONSULTING		X	0.	151,525.	151,525.
Total					151,525.	151,525.

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

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 (add col. (a) through col. (c))	
		SILENT AUCTION		NONE		
		(event type)	(event type)	(total number)		
Revenue	1	Gross receipts	39,751.		39,751.	
	2	Less: Contributions	39,751.		39,751.	
	3	Gross income (line 1 minus line 2)				
Direct Expenses	4	Cash prizes				
	5	Noncash prizes				
	6	Rent/facility costs				
	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses				
	10	Direct expense summary. Add lines 4 through 9 in column (d)				
	11	Net income summary. Subtract line 10 from line 3, column (d)				

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

Name ▶ _____

Address ▶ _____

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

Name ▶ _____

Address ▶ _____

16 Gaming manager information:

Name ▶ _____

Gaming manager compensation ▶ \$ _____

Description of services provided ▶ _____

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

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

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information. See instructions.

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: K2D STRATEGIES LLC

(I) ADDRESS OF FUNDRAISER:

4075 WILSON BLVD, 8TH FLOOR, ARLINGTON, VA 22203

PART I, LINE 2B, COLUMN (V):

THE WILDERNESS SOCIETY USES DIRECT RESPONSE MAILINGS AND DIGITAL EFFORTS VIA EMAIL, SOCIAL MEDIA, PAID SEARCH, AND OTHER CHANNELS TO RAISE FUNDS

Part IV Supplemental Information *(continued)*

FOR THE ORGANIZATION'S CONSERVATION EFFORTS. CAMPAIGNS TO ACQUIRE NEW MEMBERS ARE TYPICALLY BUDGETED AT AN INITIAL NET LOSS BUT THAT INVESTMENT IS EXPECTED TO BE RETURNED WITHIN 12-24 MONTHS. APPEALS FOR SUPPORT TO EXISTING MEMBERS ARE INTENDED TO PROVIDE ADDITIONAL NET REVENUE FOR THE WILDERNESS SOCIETY.

THE AMOUNT PAID TO OR RETAINED BY FUNDRAISERS REFLECTS FEES FOR FUNDRAISING SERVICES. THESE FUNDRAISERS ALSO RECEIVE REIMBURSEMENTS FOR EXPENSES.

SCHEDULE I
(Form 990)

Department of the Treasury
Internal Revenue Service

**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.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2021

Open to Public
Inspection

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

Part I General Information on Grants and Assistance

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

Part II Grants and Other Assistance to 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 noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
THE WILDERNESS SOCIETY ACTION FUND 1801 PENNSYLVANNIA AVE NW SUITE 200 WASHINGTON, DC 20006	82-1742996	501(C)(4)	320,000.	0.			CONSERVATION PROJECTS
COTTONWOOD GULCH EXPEDITIONS 9223 4TH STREET NW ALBUQUERQUE, NM 87114	43-6005587	501(C)(3)	213,300.	0.			CONSERVATION PROJECTS
APPALACHIAN MOUNTAIN CLUB 10 CITY SQUARE BOSTON, MA 02129	04-6001677	501(C)(3)	176,000.	0.			CONSERVATION PROJECTS
RESOURCES FOR THE FUTURE 1616 P ST NE, SUITE 600 WASHINGTON, DC 20036	53-0220900	501(C)(3)	160,024.	0.			CONSERVATION PROJECTS
GREEN LATINOS 1919 14TH STREET SUITE 700 BOULDER, CO 80302	26-3386082	501(C)(3)	145,000.	0.			CONSERVATION PROJECTS
YMCA OF GREATER SEATTLE 909 FOURTH AVENUE SEATTLE, WA 98104	91-0482710	501(C)(3)	125,000.	0.			CONSERVATION PROJECTS

- 2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ **108.**
- 3 Enter total number of other organizations listed in the line 1 table ▶ **2.**

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

Schedule I (Form 990) 2021

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WESTERN ENVIRONMENTAL LAW CENTER 120 SHELTON MCMURPHEY BLVD STE 340 EUGENE, OR 97401	93-1010269	501(C)(3)	120,000.	0.			CONSERVATION PROJECTS
THE KEYSTONE CENTER 1627 SAINTS JOHNS ROAD KEYSTONE, CO 80435	84-0688506	501(C)(3)	110,800.	0.			CONSERVATION PROJECTS
NATIONAL ASSOC OF TRIBAL HISTORIC PRESERVATION OFFICERS - 1255 22ND ST NW NO. 19189 - WASHINGTON, DC 20036	74-2893040	501(C)(3)	103,000.	0.			CONSERVATION PROJECTS
YOUTH OUTDOOR EXPERIENCE 738 N 5TH AVE UNIT 101 TUCSON, AZ 85705	46-4125968	501(C)(3)	83,840.	0.			CONSERVATION PROJECTS
NATIVE AMERICAN RIGHTS FUND 1506 BROADWAY BOULDER, CO 80302	84-0611876	501(C)(3)	75,000.	0.			CONSERVATION PROJECTS
RESOURCE LEGACY FUND 555 CAPITAL MALL, SUITE 1095 SACRAMENTO, CA 95814	95-4703838	501(C)(3)	58,000.	0.			CONSERVATION PROJECTS
FLOODLIGHT INC 1010 G STREET NE APT 201 WASHINGTON, DC 20002	86-1433162	501(C)(3)	50,000.	0.			CONSERVATION PROJECTS
NATIVE AMERICAN LAND CONSERVANCY PO BOX 3074 INDO, CA 92202	83-1445511	501(C)(3)	50,000.	0.			CONSERVATION PROJECTS
FRIENDS OF VALLE DE ORO 7851 2ND STREET SW ALBUQUERQUE, NM 87105	46-2102958	501(C)(3)	47,900.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONFEDERATED SALISH & KOOTENAI TRIBES OF THE FLATHEAD RESRV - 51383 HWY93N- PO BOX 278 - PABLO, NM 59855	81-0230409	115	45,000.	0.			CONSERVATION PROJECTS
HIGH COUNTRY CONSERVATION ADVOCATES - PO BOX 1066 - CRESTED BUTTE, CO 81224	84-0772688	501(C)(3)	40,000.	0.			CONSERVATION PROJECTS
SHIVWITS BAND OF PAIUTES 6060 W. 3650 N IVINS, UT 84738	46-4051837	115	40,000.	0.			CONSERVATION PROJECTS
WILD EARTH SOCIETY 329 W PERPOINT AVE SUITE 300 SALT LAKE CITY, UT 84101	16-1402497	501(C)(3)	37,000.	0.			CONSERVATION PROJECTS
DOLORES RIVER BOATING ADVOCATES PO BOX 1173 DOLORES, CO 81323	45-4046629	501(C)(3)	36,000.	0.			CONSERVATION PROJECTS
RANGELEY LAKES HERITAGE TRUST 2424 MAIN STREET RANGELEY, ME 04970	01-0472641	501(C)(3)	35,000.	0.			CONSERVATION PROJECTS
SPATIAL INFORMATION GROUP - NATURALASSETS LABORATORY - 2529 YOLANDA COURT - PLEASANTON, CA 94566	45-4219184	501(C)(3)	35,000.	0.			CONSERVATION PROJECTS
UNIV OF MONTANA FOUNDATION PO BOX 7159 MISSOULA, MT 59807	81-0362989	501(C)(3)	35,000.	0.			CONSERVATION PROJECTS
MONTANA WILDERNESS ASSOCIATION 80 S. WARREN STREET HELENA, MT 59601	51-0198932	501(C)(3)	32,500.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
HISPANIC ACCESS FOUNDATION 1030 15TH STREET NW SUITE B/1 #150 WASHINGTON, DC 20005	27-2589206	501(C)(3)	30,000.	0.			CONSERVATION PROJECTS
OUTDOOR AFRO 2323 BROADWAY OAKLAND, CA 94612	47-3094045	501(C)(3)	30,000.	0.			CONSERVATION PROJECTS
SUBLETTE CONSERVATION ADVOCATES PO BOX 511 BONDURANT, WY 82922	88-1324408	501(C)(3)	30,000.	0.			CONSERVATION PROJECTS
NACA INSPIRED SCHOOL NETWORK 1000 INDIAN SCHOOL ROAD NW ALBUQUERQUE, NM 87104	47-2981893	501(C)(3)	27,400.	0.			CONSERVATION PROJECTS
7G FOUNDATION PO BOX 671 PAUMA VALLEY, CA 92061	82-5118817	501(C)(3)	27,000.	0.			CONSERVATION PROJECTS
CONSERVATION LEGACY 701 CAMINO DEL RIO, SUITE 101 DURANGO, CO 81301	84-1450808	501(C)(3)	25,500.	0.			CONSERVATION PROJECTS
CONTINENTAL DIVIDE TRAIL COALITION 710 10TH STREET STE 200 GOLDEN, CO 80401	45-5051775	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
HEART OF THE ROCKIES INITIATIVE 120 HICKORY STREET, SUITE B MISSOULA, MT 59801	46-3635624	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
NATIVE ORGANIZER ALLIANCE 3518 SOUTH EDMUNDS STREET SEATTLE, WA 98118	91-1635554	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
RAPPAHANNOCK TRIBE 5036 INDIAN NECK ROAD INDIAN NECK, VA 23148	82-5042075	115	25,000.	0.			CONSERVATION PROJECTS
SKY ISLAND ALLIANCE 3127 N. CHERRY AVE TUCSON, AZ 85719	86-0796748	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
SONORAN INSTITUTE 100 N STONE AVE, SUITE 1001 TUCSON, AZ 85701	86-0684610	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
VIRGINIA ORGANIZING INC 703 CONCORD AVE CHARLOTTESVILLE, VA 22903	54-1674992	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
VOLCAN MOUNTAIN FOUNDATION 2015 MAIN STREET STE C JULIAN, CA 92036	33-0329894	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
WEST VIRGINIA RIVERS COALITION INC 3501 MACCORKLE AVE SUITE 129 CHARLESTON, WV 25304	52-1736621	501(C)(3)	25,000.	0.			CONSERVATION PROJECTS
ENVIRONMENTAL LEARNING FOR KIDS PO BOX 21679 DENVER, CO 80221	84-1436605	501(C)(3)	23,500.	0.			CONSERVATION PROJECTS
SEATTLE PARKS FOUNDATION 1501 E MADISON ST SUITE 510 SEATTLE, WA 98122	91-1998597	501(C)(3)	23,500.	0.			CONSERVATION PROJECTS
WYOMING WILDERNESS ASSOCIATION PO BOX 6588 SHERIDAN, WY 82801	38-3667856	501(C)(3)	23,500.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
THE INTERNATIONAL SONORAN DESERT ALLIANCE - 38 N PLAZA STREET - AJO , AZ 85321	86-0778917	501(C)(3)	23,000.	0.			CONSERVATION PROJECTS
WILDERNESS WORKSHOP 520 S 3RD STREET STE 27 CARBONDALE, CO 81623	74-1900412	501(C)(3)	22,500.	0.			CONSERVATION PROJECTS
VIRGINIA WILDERNESS COMMITTEE 229 CRANBERRY DRIVE STUARTS DRAFT, VA 24479	31-1641293	501(C)(3)	20,762.	0.			CONSERVATION PROJECTS
CALIFORNIA WILDERNESS COALITION 520 THIRD STREET SUITE 208 OAKLAND, CA 94607	51-0183228	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
DIVISION OF HOMELAND MINISTRIES 1099 N. MERIDAN STREET, SUITE 700 INDIANAPOLIS, IN 46206	35-1290911	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
ELLIOTSVILLE FOUNDATION INC PO BOX 148 PORLTAND, ME 04112	13-4223002	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
GEORGIA FOREST WATCH 81 CROWN MOUNTAIN PLACE BLDG C SUIT DAHLONEGA, GA 30533	58-2188475	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
GRAND STAIRCASE ESCALANTE PARTNERS PO BOX 53 KANAB , UT 84741	34-1987583	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
GREEN 2.0 1730 RHODE ISLAND AVE NW SUITE 610 WASHINGTON, DC 20036	46-5220283	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
LANDBERRY LIMITED 5612 VANTGAE POINT ROAD COLUMBIA, MD 21044	85-2531000	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
MONTANA WILDERNESS SCHOOL PO BOX 1183 BOZEMAN, MT 59771	46-4371734	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
NATIVE MOVEMENT PO BOX 83467 FAIRBANKS, AK 99708	68-0535413	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
NEW MEXICO INTERFAITH POWER & LIGHT - PO BOX 27162 - ALBUQUERQUE, NM 87125	26-4654545	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
NEW MEXICO WILDERNESS ALLIANCE 317 COMMERICAL ST NE STE 300 ALBUQUERQUE, NM 87102	85-0457916	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
REGION 10 TRIBAL OPERATIONS COMM CONSORTIUM - PO BOX 689 - SPOKANE, WA 99210	86-2477182	115	20,000.	0.			CONSERVATION PROJECTS
SITKA CONSERVATION SOCIETY 201 LINCOLN STREET SUITE 4 SITKA, AK 99835	92-0096633	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
SUSTAINABLE MARKETS FOUNDATION 45 WEST 36TH ST FL 6 NEW YORK, NY 10018	13-4188834	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
SWANN VALLEY CONNECTIONS 6887 MY HWY 83 CONDON, MT 59826	81-0512368	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
WABANAKI ALLIANCE C/O DRUMMOND WOODSUM, 84 MARGINAL W PORTLAND, ME 04101	85-1408286	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
WESTERN RESOURCE ADVOCATES 2260 BASELINE ROAD STE 200 BOULDER, CO 80302	84-1113831	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
YUROK TRIBE PO BOX 1027 KLAMATH, CA 95548	68-0178020	501(C)(3)	20,000.	0.			CONSERVATION PROJECTS
NDPOINCS - EAST COAST INDIGENIUS LANDSCAPES - 513 BEATY HOLLOW ROAD - LEXINGTON, VA 24450	47-2531760	501(C)(3)	16,000.	0.			CONSERVATION PROJECTS
EASTERN WOODLAND LACROSSE 5123 N NC HWY 119 MEBANE, NC 27302	83-2021161	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
ENVIRONMENTAL SCIENCE CENTER 126 SW 148TH ST SUITE C100-90 BURIEN, WA 98166	91-2010658	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
FRIENDS OF ORGAN MOUNTAINS DESERT PEAKS WILDERNESS - PO BOX 2676 - LAS CRUCES, NM 88004	27-5027211	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
GLACIER TWO MEDICINE ALLIANCE PO BOX 181 EAST GLACIER PARK, MT 59434	81-0437595	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
LIVING RIVERS PO BOX 466 MOAB, UT 84532	87-0668658	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
MASHPEE WAMPANOAG TRIBE 483 GREAT NECK ROAD SOUTH MASHPEE, MA 02649	14-2001428	115	15,000.	0.			CONSERVATION PROJECTS
NATIONAL WILDLIFE FEDERATION - RESTON - 11100 WILDLIFE CENTER DRIVE - RESTON, VA 20190	53-0204616	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
NEW MEXICO COMMUNITY CAPITAL 301 GOLD AVENUE SW SUITE 102 ALBUQUERQUE, NM 87102	20-1798654	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
NORTHERN ARAPHO TRIBE PO BOX 508 FT WASHAKIE, WY 82514	83-0254253	115	15,000.	0.			CONSERVATION PROJECTS
OREGON NATURAL DESERT ASSOCIATION 50 SW BOND STREET SUITE 4 BEND, OR 97702	94-3098621	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
PACIOMA BEAUTIFUL 12510 VAN NUYS BLVD, SUITE 302 PACOIMA, CA 91331	95-4770745	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
THE UCLA FOUNDATION 10889 WILSHIRE BLVD SUITE 1100 LOS ANGELES, CA 90024	95-2250801	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
UPPER GILA WATERSHED ALLIANCE PO BOX 1536 SILVER CITY, NM 88062	85-0441412	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS
WYOMING WILDLIFE FEDERATION PO BOX 1312 LANDER, WY 82520	23-7002578	501(C)(3)	15,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CENTER FOR CIVIC POLICY 625 SILVER AVENUE SW SUITE 320 ALBUQUERQUE, NM 87102	01-0869701	501(C)(3)	14,500.	0.			CONSERVATION PROJECTS
ENVIRONMENTAL COALITION OF SOUTH SEATTLE - 1011 SW KLICKITAT WAY, SUITE 201 - SEATTLE, WA 98134	91-1613460	501(C)(3)	13,000.	0.			CONSERVATION PROJECTS
PINEHURST COMMUNITY ACTION 2614 SCHOOL HOUSE ROAD COLUMBIA, SC 29204	85-1928863	501(C)(3)	13,000.	0.			CONSERVATION PROJECTS
FRIENDS OF KATAHDIN WOODS & WATERS PO BOX 18177 PORTLAND, ME 04112	81-5102906	501(C)(3)	11,750.	0.			CONSERVATION PROJECTS
ROCKY MOUNTAIN WILD 1536 WYNKOOP ST SUITE 900 DENVER, CO 80202	84-1512852	501(C)(3)	10,200.	0.			CONSERVATION PROJECTS
BETTER WYOMING PO BOX 1443 LARAMIE, WY 82073	47-3490919	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
CENTER FOR SOUTHWEST CULTURE 505 MARQUETTE AVE NW SUITE 1610 ALBUQUERQUE, NM 87012	85-0402832	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
CENTRAL COUNCIL TINGIT & HAIDA INDIAN TRIBES OF ALASKA - PO BOX 25500 - JUNEAU, AK 99802	92-0036505	115	10,000.	0.			CONSERVATION PROJECTS
CHILDREN'S ENVIRONMENTAL HEALTH NETWORK - 110 MARYLAND AVENUE, NE, SUITE 404 - WASHINGTON, DC 20002	52-2305620	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DOMINQUEZ ARCHAEOLOGICAL RESEARCH GROUP - 2832 UNAWEEP AVE - GRAND JUNCTION, CO 81503	87-0693566	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
GREATER GALLATIN UNITED WAY 945 TECHNOLOGY BLVD SUITE 101F BOZEMAN, MT 59718	81-0384820	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
HEALTH EQUITY COUNCIL 220 ADAMS SE SUITE A ALBUQUERQUE, NM 87108	47-3237659	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
LATINO COMMUNITY FUND OF WASHINGTON STATE - PO BOX 30669 - SEATTLE, WA 98103	20-5987399	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
LOS PADRES FOREST WATCH PO BOX 831 SANTA BARBARA, CA 93102	20-1531390	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
METHOW VALLEY CITIZENS COUNCIL PO BOX 774 TWISP, WA 98856	91-1061350	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
NATIVE AMERICAN JOURNALIST ASSOC 395 W. LINDSEY STREET NORMAN, OK 73019	52-6105010	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
NORTH AMERICAN CARIBOU CONFERENCE 939 W 5TH AVE ANCHORAGE, AK 99501		OTHER	10,000.	0.			SPONSORSHIP OF CONFERENCE
NORTHERN ALASKA ENVIROMENTAL CENTER - 830 COLLEGE ROAD - FAIRBANKS, AK 99701	23-7438038	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PIKANII LODGE HEALTH INSTITUTE PO BOX 187 BROWNING, MT 59417	83-2766318	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
PROYECTO PASTORAL 135 N MISSION ROAD LOS ANGELES, CA 90033	95-3213958	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
RIVER & BIRDS- CERRO DE LA OLLA PO BOX 819 ARROYO SECO, NM 87514	85-0457644	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
STATE OF NEW MEXICO - NEW MEXICO ECONOMIC DEVELOPMENT DEPT OUTDOOR REC - 1100 S ST FRANCIS DR - SANTA FE, NM 87505	85-6000565	115	10,000.	0.			CONSERVATION PROJECTS
THE CONSERVATION ALLIANCE PO BOX 1275 BEND , OR 97709	94-3100867	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
THE FRONTERA LAND ALLIANCE 3800 N MESA ST SUITE A2-258 EL PASO, TX 79902	42-1645381	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
WABANAKI YOUTH IN SCIENCE PO BOX 215 INDIAN ISLAND, ME 04468	47-5239057	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
YOUTH EXPERIENTAL TRAINIGN INSTITUTE - 226 SW 171 STREET - NORMANDY PARK, WA 98166	27-3193281	501(C)(3)	10,000.	0.			CONSERVATION PROJECTS
UPPER COLUMBIA SALMON RECOVERY BOARD - 123 EASY STREET - WENATCHEE, WA 98801	20-4703769	501(C)(3)	9,967.	0.			CONSERVATION PROJECTS

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ARCHAEOLOGY SOUTHWEST 300 NORTH ASH ALY TUCSON, AZ 85701	86-0640183	501(C)(3)	8,500.	0.			CONSERVATION PROJECTS
PROGRESSNOW NEW MEXICO EDUCATION FUND - 625 SILVER AVE SW SUITE 320 - ALBUQUERQUE, NM 87102	45-4128254	501(C)(3)	8,000.	0.			CONSERVATION PROJECTS
LINCOLN PUBLIC SCHOOLS PO BOX 39 LINCOLN, MT 59639	81-6000574	115	7,000.	0.			CONSERVATION PROJECTS
PARTNERSHIP FOR COMMUNITY ACTION 772 ISLETA BLVD SW ALBUQUERQUE, NM 87105	31-1815692	501(C)(3)	5,700.	0.			CONSERVATION PROJECTS
UNIV OF WISCONSIN-STEVENSON POINT FOUNDATION - 2100 MAIN STREET NO 134 - STEVENSON POINT, WI 54481	39-6098038	501(C)(3)	5,200.	0.			GENERAL SUPPORT

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 noncash assistance
SCHOLARSHIPS	3	35,000.	0.		

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:

GRANT AND AWARDS TO OTHER ORGANIZATIONS ARE REQUESTED AND MONITORED BY PROGRAM STAFF. THE PRIMARY CRITERION FOR AN AWARD IS THE RECEIVING ORGANIZATION WILL USE THE FUNDS FOR ACTIVITIES WHICH SUPPORT THE SOCIETY'S MISSION. A REQUEST IS SENT TO THE TWS FINANCE DEPARTMENT WITH THE FOLLOWING INFORMATION: 1) AN OUTLINE OF THE PROPER USE OR RESTRICTIONS FOR THE USE OF THE FUNDS BY THE RECEIVING ORGANIZATION; 2) A LIST OF THE RECEIVING ORGANIZATIONS BOARD MEMBERSHIP; 3) ANY KNOWN OVERLAPPING BOARD OR EMPLOYEE RELATIONSHIPS; 4) A STATEMENT FROM THE TWS STAFF MEMBER STATING

Part IV Supplemental Information

THAT THERE EXISTS NO CONFLICT OF INTEREST BETWEEN THE SOCIETY AND THE RECEIVING ORGANIZATION, BETWEEN THE EMPLOYEE OR THEIR FAMILY MEMBERS AND THE RECEIVING ORGANIZATION, OR ANY BOARD MEMBER; 5) A COPY OF THE RECEIVING ORGANIZATION'S ANNUAL BUDGET. REVIEWS ARE DONE BY FINANCE STAFF TO ENSURE THAT GRANTS ARE MADE IN COMPLIANCE WITH THE SOCIETY'S MISSION AND CONFLICT OF INTEREST POLICY. ONCE THE FUNDING IS APPROVED AND ISSUED, PROGRAM STAFF MONITOR THAT THE RECEIVING ORGANIZATION HAS USED THE FUNDS AS AGREED. ON ACCEPTANCE OF PROPOSAL, THE RECEIVING ORGANIZATION MUST SIGN A LETTER OF AGREEMENT, WHICH OUTLINES THE TERMS AND CONDITIONS FOR THE AWARD, RESTRICTIONS PLACED ON THE USE OF THE FUNDS, INCLUDING LOBBYING RESTRICTIONS, DUE DATES FOR INTERIM AND FINAL NARRATIVES, FINANCIAL REPORTS, AND TANGIBLE SUCCESSES ACHIEVED WITH THE FUNDING, INCLUDING ANY UNEXPECTED CHALLENGES ENCOUNTERED DURING THE GRANT PERIOD. THE NARRATIVE AND ACCOUNTING ARE REVIEWED BY TWS PROGRAM STAFF TO ENSURE PROPER USE AND ACCOMPLISHMENT OF GOALS. WHERE APPROPRIATE, A MORE DETAILED EXPLANATION FOR EXPENDITURE AND ACCOMPLISHMENTS MAY BE REQUESTED.

Multiple horizontal lines for supplemental information.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2021

Open to Public Inspection

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

Department of the Treasury
Internal Revenue Service

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

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 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 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 type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input 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?
- b** Participate in or receive payment from a supplemental nonqualified retirement plan?
- c** Participate in or receive payment from an equity-based compensation arrangement?
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 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?
- b** Any related organization?
- 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?
- b** Any related organization?
- 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

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

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

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

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				
(1) JAMIE WILLIAMS PRESIDENT	(i)	395,476.	0.	0.	17,400.	30,981.	443,857.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) TERESA LANE VP, PHILANTHROPY	(i)	271,181.	2,000.	0.	16,317.	249.	289,747.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) KATHARINE L. THOMAS VP, EXTERNAL AFFAIRS	(i)	240,348.	29,000.	0.	16,184.	1,462.	286,994.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) MELYSSA L. WATSON EXECUTIVE DIRECTOR	(i)	266,226.	0.	0.	16,200.	17,593.	300,019.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) DAVID SEABROOK SVP, FINANCE & OPERATIONS	(i)	226,256.	2,000.	0.	14,112.	26,437.	268,805.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) DEBORAH LIU VP & GENERAL COUNSEL	(i)	226,713.	0.	0.	14,195.	25,220.	266,128.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) CHASE HUNTLEY VP, STATEGY & POLICY	(i)	216,822.	2,000.	0.	13,152.	1,613.	233,587.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) MONIQUE DAILEY SVP FOR CONSERVATION PROGRAMS & POLI	(i)	183,463.	2,150.	0.	4,548.	9,030.	199,191.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) ALLEN MAY SR DIR, MEMBERSHIP & STRATEGIC SERVI	(i)	179,698.	2,000.	0.	11,057.	17,672.	210,427.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) JEANNA SINAGRA SR DIR, HUMAN RESOURCES & OPERATIONS	(i)	160,413.	2,000.	0.	9,964.	22,093.	194,470.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) ANDREW MCCONVILLE SR DIR, GOVERNMENT RELATIONS	(i)	157,221.	1,000.	0.	10,255.	25,220.	193,696.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) LAUREN GEPHART DEPUTY VP, MARKETING/DIGITAL ADVOCAC	(i)	154,856.	0.	0.	10,053.	28,051.	192,960.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) WORDNA MESKHENITEN VP FOR CULTURE & EQUITY	(i)	149,087.	2,000.	0.	9,589.	30,981.	191,657.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2021

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

- ▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
- ▶ Attach to Form 990.
- ▶ Go to www.irs.gov/Form990 for instructions and the latest information.

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

Part I Types of Property	(a) Check if applicable	(b) Number of contributions or items contributed	(c) 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	37	2,089,578.	RESALE 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 (EXPERIENCES)	X	46	39,751.	RESALE VALUE
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.		

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.

SCHEDULE M, PART I, COLUMN (B):

COLUMN (B) REFLECTS THE NUMBER OF CONTRIBUTIONS, NOT THE NUMBER OF ITEMS RECEIVED.

**SCHEDULE O
(Form 990)**

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No. 1545-0047

2021

Open to Public
Inspection

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number
53-0167933

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

SOCIETY WORKS STRATEGICALLY AND COLLABORATIVELY WITH LAWMAKERS, LAND MANAGERS, LOCAL COALITIONS, AND INTERESTED CITIZENS TO LEAD NATIONAL POLICY ISSUES ON WILDERNESS AND PUBLIC LANDS. TO FIND OUT MORE ABOUT OUR AMAZING 80-YEAR HISTORY OF SUCCESSES AND THE MANY PROGRAMS AND PLACES WE WORK, VISIT WWW.WILDERNESS.ORG.

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

ENSURE THAT ALL PEOPLE CAN ACCESS AND SHARE THE BENEFITS OF THE OUTDOORS, FROM THE URBAN TO THE WILD. IN 1964, WE LED THE EFFORT TO ESTABLISH THE NATIONAL WILDERNESS PRESERVATION SYSTEM, WHICH HAS NOW GROWN TO 109 MILLION ACRES OF PERMANENTLY PROTECTED WILDLANDS THAT PRESERVE AMERICA'S NATURAL HERITAGE. FEDERAL PUBLIC LANDS, WHICH BELONG TO ALL AMERICANS, FACE GROWING THREATS. THOSE ACRES AND MILLIONS MORE REQUIRE ACTION TO CONSERVE THEIR NATURAL CHARACTER. SEE WWW.WILDERNESS.ORG.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

CRITICAL MASS: IN ORDER TO ACHIEVE OUR AMBITIOUS STRATEGIC GOALS, WE REQUIRE CRITICAL MASS OF PEOPLE REFLECTING AMERICA'S DIVERSITY, TAKING ACTION TO PROTECT WILDERNESS AND PUBLIC LANDS. THROUGH NATIONAL AND LOCAL STRATEGIC PARTNERSHIPS, CAMPAIGNS AND PUBLIC AWARENESS INITIATIVES, WE WORK TO BUILD A SUSTAINABLE LONG-TERM MOVEMENT.

EXPENSES \$ 3,152,416. INCLUDING GRANTS OF \$ 283,079. REVENUE \$ 6,505.

FORM 990, PART VI, SECTION A, LINE 2:

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

Schedule O (Form 990) 2021

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

DAVID BONDERMAN AND RICHARD BLUM ARE RELATED THROUGH A BUSINESS RELATIONSHIP.

CAROLINE GETTY AND MICHAEL MANTELL ARE RELATED THROUGH A BUSINESS RELATIONSHIP.

FORM 990, PART VI, SECTION B, LINE 11B:

AFTER FORM 990 HAS BEEN PREPARED, IT IS EXAMINED BY THE VICE PRESIDENT OF FINANCE FOR ACCURACY AND COMPLETENESS. THE DOCUMENT IS THEN PRESENTED TO AND REVIEWED BY OUR EXECUTIVE TEAM. SUBSEQUENTLY, IN ADDITION, FORM 990 IS PROVIDED TO THE GOVERNING COUNCIL FOR A FURTHER REVIEW BEFORE IT IS FILED.

FORM 990, PART VI, SECTION B, LINE 12C:

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

FORM 990, PART VI, SECTION B, LINE 15:

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

EXECUTIVE COMPENSATION IS EXAMINED ANNUALLY AT THE WILDERNESS SOCIETY BY THE COMPENSATION COMMITTEE, WHICH REVIEWS AND APPROVES THE COMPENSATION OF THE PRESIDENT AND OFFICERS EACH YEAR. AN INDEPENDENT CONSULTING FIRM THAT REGULARLY PROVIDES EXECUTIVE COMPENSATION STUDIES FOR TAX EXEMPT ENTITIES IS ALSO ENGAGED NO LESS THAN EVERY THREE YEARS TO PROVIDE AN ASSESSMENT. THE FIRM PROVIDES MARKET ANALYSIS ON OUR POSITIONS USING COMPARABLE ORGANIZATIONS, MATCHING POSITIONS DIRECTLY TO SALARY DATA, AND UTILIZING A 'TOP PAID' ANALYSIS IN THE FINAL REPORT OF MARKET FINDINGS.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

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

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS FINANCIAL STATEMENTS AND FORM 990 AVAILABLE TO THE PUBLIC ON ITS WEBSITE. FORM 1023 AND THE CONFLICT OF INTEREST POLICY ARE AVAILABLE UPON REQUEST.

FORM 990, PART IX, LINE 11G, OTHER FEES:

VOLUNTEER EXPENSES:

PROGRAM SERVICE EXPENSES	58,215.
MANAGEMENT AND GENERAL EXPENSES	5,067.
FUNDRAISING EXPENSES	24,624.
TOTAL EXPENSES	87,906.

DIRECT MAIL:

PROGRAM SERVICE EXPENSES	546,992.
MANAGEMENT AND GENERAL EXPENSES	47,613.

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

FUNDRAISING EXPENSES	231,371.
-----------------------------	-----------------

TOTAL EXPENSES	825,976.
-----------------------	-----------------

PRODUCTION/ DESIGN:

PROGRAM SERVICE EXPENSES	110,281.
---------------------------------	-----------------

MANAGEMENT AND GENERAL EXPENSES	9,599.
----------------------------------------	---------------

FUNDRAISING EXPENSES	46,648.
-----------------------------	----------------

TOTAL EXPENSES	166,528.
-----------------------	-----------------

COMPUTER SERVICE:

PROGRAM SERVICE EXPENSES	511,385.
---------------------------------	-----------------

MANAGEMENT AND GENERAL EXPENSES	44,513.
----------------------------------------	----------------

FUNDRAISING EXPENSES	216,310.
-----------------------------	-----------------

TOTAL EXPENSES	772,208.
-----------------------	-----------------

CONSULTANTS:

PROGRAM SERVICE EXPENSES	2,953,768.
---------------------------------	-------------------

MANAGEMENT AND GENERAL EXPENSES	139,285.
----------------------------------------	-----------------

FUNDRAISING EXPENSES	1,155,073.
-----------------------------	-------------------

TOTAL EXPENSES	4,248,126.
-----------------------	-------------------

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A	6,100,744.
---------------------------------------------------------------	-------------------

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN BENEFICIAL INTEREST	-1,245,089.
--------------------------------------	--------------------

PLEDGE ALLOWANCE	-642,885.
-------------------------	------------------

RETURN GRANTS

TOTAL TO FORM 990, PART XI, LINE 9	-1,887,974.
-------------------------------------------	--------------------

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

FORM 990, PART XII:

THE FORM 990 HAS BEEN AMENDED TO CORRECT THE NONTAXABLE EMPLOYEE
BENEFITS REPORTED ON PART VII AND THE DISCLOSURE OF LOBBYING EXPENSES
ON SCHEDULE C.

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 for instructions and the latest information.

Name of the organization

THE WILDERNESS SOCIETY

Employer identification number
53-0167933

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

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
THE WILDERNESS SOCIETY ACTION FUND - 82-1742996, 1801 PENNSYLVANIA AVE, NW STE 200, WASHINGTON, DC 20006	ADVOCACY AND AWARENESS	DISTRICT OF COLUMBIA	501(C)(4)		TWS		X
THE WILDERNESS SOCIETY ACTION FUND PAC - 87-2579930, 1801 PENNSYLVANIA AVE, NW STE 200, WASHINGTON, DC 20006	CONSERVATION ADVOCACY	DISTRICT OF COLUMBIA	527		N/A		X

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	

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

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.

1 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?

	Yes	No
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)	X	
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)	X	
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	X	
o Sharing of paid employees with related organization(s)	X	
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses	X	
r Other transfer of cash or property to related organization(s)		X
s 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) THE WILDERNESS SOCIETY ACTION FUND	B	320,000.	
(2)			
(3)			
(4)			
(5)			
(6)			

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) <small>Are all partners sec. 501(c)(3) orgs.?</small>		(f) Share of total income	(g) Share of end-of-year assets	(h) <small>Dispropor- tionate allocations?</small>		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) <small>General or managing partner?</small>		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

