

AMENDED RETURN

Form **990-T**

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

OMB No 1545-0687

2013

Open to Public Inspection for 501(c)(3) Organizations Only

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

▶ See separate instructions.

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.
▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section</p> <table style="width: 100%;"> <tr> <td><input checked="" type="checkbox"/> 501(C)(3)</td> <td><input type="checkbox"/> 220(e)</td> </tr> <tr> <td><input type="checkbox"/> 408(e)</td> <td><input type="checkbox"/> 530(a)</td> </tr> <tr> <td><input type="checkbox"/> 408A</td> <td></td> </tr> <tr> <td><input type="checkbox"/> 529(a)</td> <td></td> </tr> </table> <p>C Book value of all assets at end of year</p> <p>969,992,598.</p>	<input checked="" type="checkbox"/> 501(C)(3)	<input type="checkbox"/> 220(e)	<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)	<input type="checkbox"/> 408A		<input type="checkbox"/> 529(a)		Print or Type	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions)</p> <p style="text-align: center;">WILDLIFE CONSERVATION SOCIETY</p> <p>Number, street, and room or suite no. If a P O box, see instructions</p> <p style="text-align: center;">2300 SOUTHERN BLVD</p> <p>City or town, state or province, country, and ZIP or foreign postal code</p> <p style="text-align: center;">BRONX, NY 10460</p> <p>F Group exemption number (See instructions) ▶</p> <p>G Check organization type ▶ <input checked="" type="checkbox"/> 501(c) corporation <input type="checkbox"/> 501(c) trust <input type="checkbox"/> 401(a) trust <input type="checkbox"/> Other trust</p>	<p>D Employer identification number (Employees' trust, see instructions)</p> <p style="text-align: center;">13-1740011</p> <p>E Unrelated business activity codes (See instructions)</p> <p style="text-align: center;">453220 525990</p>
<input checked="" type="checkbox"/> 501(C)(3)	<input type="checkbox"/> 220(e)										
<input type="checkbox"/> 408(e)	<input type="checkbox"/> 530(a)										
<input type="checkbox"/> 408A											
<input type="checkbox"/> 529(a)											

H Describe the organization's primary unrelated business activity ▶ **ATTACHMENT 1**

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No
If "Yes," enter the name and identifying number of the parent corporation ▶

J The books are in care of ▶ **ROBERT CALAMO** Telephone number ▶ **718-741-8211**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales <u>1,621,749.</u>			
b	Less returns and allowances			
	c Balance ▶	1c <u>1,621,749.</u>		
2	Cost of goods sold (Schedule A, line 7)	2 <u>1,829,363.</u>		
3	Gross profit Subtract line 2 from line 1c	3 <u>-207,614.</u>		-207,614.
4a	Capital gain net income (attach Form 8949 and Schedule D)	4a <u>6,906,305.</u>		6,906,305.
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5 <u>-253,704.</u>	ATCH 2	-253,704.
6	Rent income (Schedule C)	6		
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions, attach schedule)	12		
13	Total Combine lines 3 through 12	13 <u>6,444,987.</u>		6,444,987.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)		(A) Income	(B) Expenses	(C) Net
14	Compensation of officers, directors, and trustees (Schedule K)			
15	Salaries and wages			
16	Repairs and maintenance			
17	Bad debts			
18	Interest (attach schedule)		ATTACHMENT 3	23,750.
19	Taxes and licenses		ATTACHMENT 7	150,974.
20	Charitable contributions (See instructions for limitation rules)		ATTACHMENT 8	85,101.
21	Depreciation (attach Form 4562)		STATUTE UNIT RECEIVED	
22	Less depreciation claimed on Schedule A and elsewhere on return		MAY 17 2019	
23	Depletion		TPR BRANCH OGDEN	
24	Contributions to deferred compensation plans		ATTACHMENT 4	
25	Employee benefit programs			
26	Excess exempt expenses (Schedule I)			
27	Excess readership costs (Schedule J)			
28	Other deductions (attach schedule)			454,967.
29	Total deductions. Add lines 14 through 28			714,792.
30	Unrelated business taxable income before net operating loss deduction Subtract line 29 from line 13			5,730,195.
31	Net operating loss deduction (limited to the amount on line 30)		ATTACHMENT 9	4,963,290.
32	Unrelated business taxable income before specific deduction Subtract line 31 from line 30			766,905.
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)			1,000.
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32			765,905.

RECEIVED

MAY 13 2019

OGDEN, UT

IRS-OS

STATUTE UNIT RECEIVED

MAY 17 2019

TPR BRANCH OGDEN

ENVELOPE FOOTMARK DATE MAY 07 2019 61027 1 2 MAY 12 MAY 13 5 36 04 SCANNED MAY 23 2019 011-010

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AMENDED RETURN

Part III Tax Computation

35 Organizations Taxable as Corporations. See Instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> See Instructions and		
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order)		
(1) \$ _____ (2) \$ _____ (3) \$ _____		
b Enter organization's share of (1) Additional 5% tax (not more than \$11,750)	\$ _____	
(2) Additional 3% tax (not more than \$100,000)	\$ _____	
c Income tax on the amount on line 34		35c 260,408.
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)		36
37 Proxy tax. See instructions		37
38 Alternative minimum tax		38
39 Total. Add lines 37 and 38 to line 35c or 36, whichever applies		39 260,408.

Part IV Tax and Payments

40 a Foreign tax credit (corporations attach Form 1118, trusts attach Form 1116)	40a		
b Other credits (see instructions)	40b		
c General business credit. Attach Form 3800 (see instructions)	40c		
d Credit for prior year minimum tax (attach Form 8801 or 8827)	40d		
e Total credits. Add lines 40a through 40d	40e		
41 Subtract line 40e from line 39	41		260,408.
42 Other taxes. Check if from <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8811 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	42		
43 Total tax. Add lines 41 and 42	43		260,408.
44 a Payments A 2012 overpayment credited to 2013	44a		
b 2013 estimated tax payments	44b		
c Tax deposited with Form 8868	44c		
d Foreign organizations' Tax paid or withheld at source (see instructions)	44d		
e Backup withholding (see instructions)	44e		
f Credit for small employer health insurance premiums (Attach Form 8941)	44f		
g Other credits and payments <input type="checkbox"/> Form 4136 <input checked="" type="checkbox"/> Form 2439 <input type="checkbox"/> Other _____ Total ▶	44g	396,698	
45 Total payments. Add lines 44a through 44g	45		
46 Estimated tax penalty (see instructions). Check if Form 2220 is attached.	46		
47 Tax due. If line 45 is less than the total of lines 43 and 46, enter amount owed	47		NONE
48 Overpayment. If line 45 is larger than the total of lines 43 and 46, enter amount overpaid	48		136,290
49 Enter the amount of line 48 you want Credited to 2014 estimated tax ▶ Refunded ▶	49		

Part V Statements Regarding Certain Activities and Other Information (see instructions)

1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here ▶ SEE ATTACHMENT# 6	Yes	No
	X	
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year ▶ \$		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation ▶

1 Inventory at beginning of year	1		6	
2 Purchases	2	446,173.	7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2,	7 1,829,363.
3 Cost of labor	3	332,884.	8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	Yes No
4 a Additional section 263A costs (attach schedule)	4a			X
b Other costs (attach schedule)	4b*	1,050,306.		
5 Total. Add lines 1 through 4b	5	1,829,363.		

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 taxpayer) is based on all information of which preparer has any knowledge.

Sign Here Date 5/6/2019 Title VP AND COMPTROLLER May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only Print/Type preparer's name DAVID M. HIGHFILL Preparer's signature Date 5/6/2019 Check if self-employed PTIN _____
 Firm's name ▶ KPMG LLP Firm's EIN ▶ 13-5565207
 Firm's address ▶ 345 PARK AVENUE Phone no. 212-758-9700

** ATCH 5 NEW YORK, NY 10154-0102 Form 990-T (2013)

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

Form 990-T (2013)

Page **3**

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

- (1) N/A
- (2)
- (3)
- (4)

2. Rent received or accrued		3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	
(1)		
(2)		
(3)		
(4)		
Total		
(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) ▶		(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) ▶

Schedule E - Unrelated Debt-Financed Income (see instructions)

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals ▶			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8 ▶				

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1 Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3 Net unrelated income (loss) (see instructions)	4 Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7 Taxable Income	8 Net unrelated income (loss) (see instructions)	9 Total of specified payments made	10 Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				
Totals ▶			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A)	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B)

AMENDED RETURN

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Totals ▶		Enter here and on page 1, Part I, line 9, column (A)		Enter here and on page 1, Part I, line 9, column (B)

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals ▶		Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)			Enter here and on page 1, Part II, line 26

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5)) . . . ▶						

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col 2 minus col 3) If a gain, compute cols 5 through 7	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Totals from Part I						
Totals, Part II (lines 1-5) . . . ▶		Enter here and on page 1, Part I, line 11, col (A)	Enter here and on page 1, Part I, line 11, col (B)			Enter here and on page 1, Part II, line 27

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14 ▶			

AMENDED RETURN

**SCHEDULE D
(Form 1120)**

Capital Gains and Losses

OMB No 1545-0123

Department of the Treasury
Internal Revenue Service

▶ Attach to Form 1120, 1120-C, 1120-F, 1120-FSC, 1120-H, 1120-IC-DISC, 1120-L, 1120-ND, 1120-PC, 1120-POL, 1120-REIT, 1120-RIC, 1120-SF, or certain Forms 990-T
▶ Information about Schedule D (Form 1120) and its separate instructions is at www.irs.gov/form1120.

2013

Name **WILDLIFE CONSERVATION SOCIETY** Employer identification number **13-1740011**

Part I Short-Term Capital Gains and Losses - Assets Held One Year or Less

See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
1a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				165,843.
4 Short-term capital gain from installment sales from Form 6252, line 26 or 37			4	
5 Short-term capital gain or (loss) from like-kind exchanges from Form 8824			5	
6 Unused capital loss carryover (attach computation)			6	()
7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column h			7	165,843.

Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year

See instructions for how to figure the amounts to enter on the lines below This form may be easier to complete if you round off cents to whole dollars	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
8a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				4,950,450.
11 Enter gain from Form 4797, line 7 or 9			11	1,790,012.
12 Long-term capital gain from installment sales from Form 6252, line 26 or 37			12	
13 Long-term capital gain or (loss) from like-kind exchanges from Form 8824			13	
14 Capital gain distributions (see instructions)			14	
15 Net long-term capital gain or (loss) Combine lines 8a through 14 in column h			15	6,740,462.

Part III Summary of Parts I and II

16 Enter excess of net short-term capital gain (line 7) over net long-term capital loss (line 15)			16	165,843.
17 Net capital gain Enter excess of net long-term capital gain (line 15) over net short-term capital loss (line 7)			17	6,740,462.
18 Add lines 16 and 17 Enter here and on Form 1120, page 1, line 8, or the proper line on other returns			18	6,906,305.

Note. If losses exceed gains, see Capital losses in the instructions

For Paperwork Reduction Act Notice, see the Instructions for Form 1120.

Schedule D (Form 1120) (2013)

AMENDED RETURN

Form **8949**

Sales and Other Dispositions of Capital Assets

OMB No 1545-0074

2013

Attachment Sequence No **12A**

Department of the Treasury
Internal Revenue Service

Information about Form 8949 and its separate instructions is at www.irs.gov/form8949

File with your Schedule D to list your transactions for lines 1b, 2, 3, 8b, 9, and 10 of Schedule D.

Name(s) shown on return

WILDLIFE CONSERVATION SOCIETY

Social security number or taxpayer identification number

13-1740011

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box A, B, or C below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part I Short-Term. Transactions involving capital assets you held one year or less are short-term. For long-term transactions, see page 2.

Note. You may aggregate all short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 1a, you are not required to report these transactions on Form 8949 (see instructions).

You **must** check Box A, B, or C below. Check only one box. If more than one box applies for your short-term transactions, complete a separate Form 8949, page 1, for each applicable box. If you have more short-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (A) Short-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (B) Short-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (C) Short-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss. If you enter an amount in column (g), enter a code in column (f). See the separate instructions		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	MAKENA CAPITAL SPLITTER X L P							165,843
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 1b (if Box A above is checked), line 2 (if Box B above is checked), or line 3 (if Box C above is checked).								165,843

Note If you checked Box A above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

AMENDED RETURN

Form 8949 (2013)

Attachment Sequence No **12A**

Page **2**

Name(s) shown on return (Name and SSN or taxpayer identification no. not required if shown on other side)

Social security number or taxpayer identification number

WILDLIFE CONSERVATION SOCIETY

13-1740011

Most brokers issue their own substitute statement instead of using Form 1099-B. They also may provide basis information (usually your cost) to you on the statement even if it is not reported to the IRS. Before you check Box D, E, or F below, determine whether you received any statement(s) and, if so, the transactions for which basis was reported to the IRS. Brokers are required to report basis to the IRS for most stock you bought in 2011 or later.

Part II Long-Term. Transactions involving capital assets you held more than one year are long term. For short-term transactions, see page 1.

Note. You may aggregate all long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS and for which no adjustments or codes are required. Enter the total directly on Schedule D, line 8a, you are not required to report these transactions on Form 8949 (see instructions).

You **must** check Box D, E, or F below. Check only one box. If more than one box applies for your long-term transactions, complete a separate Form 8949, page 2, for each applicable box. If you have more long-term transactions than will fit on this page for one or more of the boxes, complete as many forms with the same box checked as you need.

- (D) Long-term transactions reported on Form(s) 1099-B showing basis was reported to the IRS (see Note above)
- (E) Long-term transactions reported on Form(s) 1099-B showing basis was not reported to the IRS
- (F) Long-term transactions not reported to you on Form 1099-B

1	(a) Description of property (Example 100 sh XYZ Co)	(b) Date acquired (Mo, day, yr)	(c) Date sold or disposed (Mo, day, yr)	(d) Proceeds (sales price) (see instructions)	(e) Cost or other basis. See the Note below and see Column (e) in the separate instructions	Adjustment, if any, to gain or loss If you enter an amount in column (g), enter a code in column (f). See the separate instructions.		(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
						(f) Code(s) from instructions	(g) Amount of adjustment	
	MARATHON REAL ESTATE OPPTY							4,715,943
	MAKENA CAPITAL SPLITTER X L P							234,507
2 Totals. Add the amounts in columns (d), (e), (g), and (h) (subtract negative amounts). Enter each total here and include on your Schedule D, line 8b (if Box D above is checked), line 9 (if Box E above is checked), or line 10 (if Box F above is checked) ▶								4,950,450

Note. If you checked Box D above but the basis reported to the IRS was incorrect, enter in column (e) the basis as reported to the IRS, and enter an adjustment in column (g) to correct the basis. See Column (g) in the separate instructions for how to figure the amount of the adjustment.

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

ATTACHMENT 2

FORM 990T - LINE 5 -INCOME (LOSS) FROM PARTNERSHIPS

MARATHON REAL ESTATE OPPORTUNITY	-225,918.
MAKENA CAPITAL SPLITTER	-29,686.
BROOKSIDE CPG	2,521.
DAVIDSON KEMPNER INSTITUTIONAL	-621.
INCOME (LOSS) FROM PARTNERSHIPS	<u>-253,704.</u>

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

ATTACHMENT 3

FORM 990T - PART II - LINE 18 - INTEREST

MAKENA CAPITAL SPLITTER

23,750.

PART II - LINE 18 - INTEREST

23,750.

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

ATTACHMENT 4

FORM 990T - PART II - LINE 28 - TOTAL OTHER DEDUCTIONS

MAKENA CAPITAL SPLITTER

454,967.

PART II - LINE 28 - OTHER DEDUCTIONS

454,967.

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

ATTACHMENT 5

FORM 990T - SCHEDULE A - LINE 4B - OTHER COSTS

OTPS	253,535.
BUSINESS SERVICES OVERHEAD	55,041.
CORPORATE OVERHEAD	199,146.
CATERING EXPENSE	542,584.
TOTAL OTHER COSTS	<u>1,050,306.</u>

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

Form 990T Part V Line 1 – Financial accounts in Foreign

Countries Attachment #6

AFGHANISTAN, ARGENTINA, BELIZE, BOLIVIA, BURMA, CAMBODIA, CONGO
(DEMOCRATIC REPUBLIC), CHINA, CHILE, CAMEROON, COLUMBIA, ECUADOR,
FIJI, GABON, GUATEMALA, INDONESIA, KENYA, LAOS, MADAGASCAR, MONGOLIA,
NIGERIA, NICARAGUA, PARAGUAY, PERU, PAKISTAN, PAPUA NEW GUINEA,
RUSSIA, RWANDA, SUDAN, THAILAND, TANZANIA, UGANDA, UNITED KINGDOM,
VENEZUELA, VIETNAM, ZAMBIA

AMENDED RETURN

WILDLIFE CONSERVATION SOCIETY

13-1740011

FORM 990T - PART II - LINE 19 - TAXES AND LICENSES

NEW YORK STATE
TOTAL TAXES

150,974
150,974

AMENDED RETURN

FORM 990-T, PART II, LINE 20 - CHARITABLE CONTRIBUTION

Charitable contributions carried forward to 12/31/2015

YEAR GENERATED	CONTRIBUTION AMOUNT PAID	YEAR UTILIZED	UTILIZED AMOUNT 10% LIMITATION ON TAXABLE INCOME	CARRYFORWARD AMOUNT	5 YEAR CARRYFORWARD
6/30/2014	2,193,769	2013	(85,101)	2,108,668	3/30/2019
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TOTAL CARRYFORWARD TO 06/30/2015				2,108,668	