See a Social Security Number? Say Something!
Report Privacy Problems to https://public.resource.org/privacy
Or call the IRS Identity Theft Hotline at 1-800-908-4490
Form 990-T
Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))  

**Amended Return**

<table>
<thead>
<tr>
<th>Name of organization</th>
<th>2002 WILDLIFE CONSERVATION SOCIETY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number, street, and room or suite no. (P.O. box, see page 7 of instructions)</td>
<td>2320 SOUTHERN BOULEVARD</td>
</tr>
<tr>
<td>City or town, state, and Zip code</td>
<td>BRONX, NEW YORK 10460</td>
</tr>
<tr>
<td>Employer identification number (Employer Identification Number for Block D on page 2)</td>
<td>1740011</td>
</tr>
<tr>
<td>Other exempt function line, activity code (See instructions for block E on page 7)</td>
<td>611120</td>
</tr>
</tbody>
</table>

**Part I**  
Unrelated Trade or Business Income

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Gross receipts or sales</td>
<td></td>
<td>1c</td>
<td></td>
</tr>
<tr>
<td>2. Less returns and allowances</td>
<td>2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Gross profit (subtract line 2 from line 1c)</td>
<td>3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Capital gain or net income (attach Schedule D)</td>
<td>4a</td>
<td>4b</td>
<td>4c</td>
</tr>
<tr>
<td>5. Income (loss) from partnerships and S corporations (attach statement)</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>6. Rent Income (Schedule C)</td>
<td>6</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Unrelated debt-financed income (Schedule E)</td>
<td>7</td>
<td></td>
<td></td>
</tr>
<tr>
<td>8. Interest, annuities, royalties, and rents from controlled organizations (Schedule F)</td>
<td>8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9. Investment Income of a section 501(c)(7), (9), or (17) organization (Schedule G)</td>
<td>9</td>
<td></td>
<td></td>
</tr>
<tr>
<td>10. Exploited exempt activity Income (Schedule I)</td>
<td>10</td>
<td>11</td>
<td>12</td>
</tr>
<tr>
<td>11. Advertising Income (Schedule J)</td>
<td>11</td>
<td>12</td>
<td>13</td>
</tr>
<tr>
<td>12. Other Income (see page 8 of the instructions—attach schedule)</td>
<td>12</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total (combine lines 1 through 12)</td>
<td>13</td>
<td>14</td>
<td></td>
</tr>
</tbody>
</table>

**Part II**  
Deductions Not Taken Elsewhere (See page 9 of the instructions for limitations on deductions.)

<table>
<thead>
<tr>
<th>Description</th>
<th>(A) Income</th>
<th>(B) Expenses</th>
<th>(C) Net</th>
</tr>
</thead>
<tbody>
<tr>
<td>14. Compensation of officers, directors, and trustees (Schedule K)</td>
<td></td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>15. Salaries and wages</td>
<td></td>
<td>15</td>
<td></td>
</tr>
<tr>
<td>16. Repairs and maintenance</td>
<td></td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>17. Bad debts</td>
<td></td>
<td>17</td>
<td></td>
</tr>
<tr>
<td>18. Interest (attach schedule)</td>
<td></td>
<td>18</td>
<td></td>
</tr>
<tr>
<td>19. Taxes and licenses</td>
<td></td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>20. Charitable contributions (see page 11 of the instructions for limitation rules)</td>
<td></td>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21. Depreciation (attach Form 4562)</td>
<td>21</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Less depreciation claimed on Schedule A and elsewhere in return</td>
<td>22</td>
<td></td>
<td></td>
</tr>
<tr>
<td>23. Depreciation</td>
<td>23</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Contributions to deferred compensation plans</td>
<td>24</td>
<td></td>
<td></td>
</tr>
<tr>
<td>25. Employee benefit programs</td>
<td></td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>26. Excess exempt expenses (Schedule L)</td>
<td>26</td>
<td></td>
<td></td>
</tr>
<tr>
<td>27. Excess unrecoverable costs (Schedule J)</td>
<td>27</td>
<td></td>
<td></td>
</tr>
<tr>
<td>28. Other deductions (attach schedule)</td>
<td>28</td>
<td></td>
<td></td>
</tr>
<tr>
<td>29. Total deductions (add lines 14 through 28)</td>
<td>29</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. Unrelated business taxable income before net operating loss deduction (subtract line 29 from line 13)</td>
<td>30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>31. Net operating loss deduction</td>
<td>31</td>
<td></td>
<td></td>
</tr>
<tr>
<td>32. Unrelated business taxable income before specific deduction (subtract line 31 from line 30)</td>
<td>32</td>
<td></td>
<td></td>
</tr>
<tr>
<td>33. Specific deduction (Generally $1,000, but see line 32 and instructions)</td>
<td>33</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34. Unrelated business taxable income (subtract line 32 from line 33 if greater than line 32, enter the smaller of zero or line 32)</td>
<td>34</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

For Paperwork Reduction Act Notice, see Instructions.

Cat. No. 11281J

Form 990-T (2002)
Part III  Tax Computation

35  Organizations Taxable as Corporations (see instructions for tax computation on page 12).
   a. Enter your share of the $50,000, $25,000, and $9,925,000 taxable income brackets (in that order):
      (i) $50,000 __________  (ii) $25,000 __________  (iii) $9,925,000 __________
   b. Enter organization's share of: (i) additional 5% tax (not more than $11,750) __________  (ii) additional 3% tax (not more than $100,000) __________  (iii) income tax on the amount on line 34 __________
   c. Income tax on the amount on line 34 __________
   d. Trusts Taxable at Trust Rates (see instructions for tax computation on page 13) income tax on the amount on line 34 from: □ Tax rate schedule or □ Schedule D (Form 1041) __________
   37  Proxy tax (see page 13 of the instructions) __________
   38  Alternative minimum tax __________
   39  Total (add lines 37 and 38 to line 35c or 36, whichever applies) __________

Part IV  Tax and Payments

40a  Foreign tax credit (corporations attach Form 1116; trusts attach Form 1116A) __________
   b. Other credits (see page 13 of the instructions) __________
   c. General business credit—Check here and indicate which forms are attached: □ Form 8830 □ Form(s) (specify) __________
   d. Credit for prior year minimum tax (attach Form 8801 or 8827) __________
   e. Total credits (add lines 40a through 40d) __________
   f. Subtract line 40e from line 39 __________
   g. Other taxes. Check if from: □ Form 4525 □ Form 8931 □ Form 8897 □ Form 8886 □ Other (attach schedule) __________
   h. Total tax (add lines 41 and 42) __________
   44  Payments: a 2001 overpayment credited to 2002 __________
   b. 2002 estimated tax payments __________
   c. Tax deposited with Form 8868 __________
   d. Foreign organizations—Tax paid or withheld at source (see instructions) __________
   e. Backup withholding (see instructions) __________
   f. Other credits and payments (see instructions) __________
   g. Total payments (add lines 44a through 44f) __________
   46  Estimated tax penalty (see page 4 of the instructions). Check □ if Form 2220 is attached __________
   47  Tax due—if line 45 is less than the total of lines 43 and 45, enter amount owed __________
   48  Overpayment—if line 45 is larger than the total of lines 43 and 45, enter amount overpaid __________
   49  Enter the amount of tax-exempt interest received or accrued during the tax year __________

Part V  Statements Regarding Certain Activities and Other Information (See instructions on page 15.)

1  At any time during the 2002 calendar year, did the organization have an interest in or a signature or authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? □ Yes □ No __________
   If "Yes," the organization may have to file Form TD F 90-22.1. If "Yes," enter the name of the foreign country here __________
   2  During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? □ Yes □ No __________
   3  Enter the amount of tax-exempt interest received or accrued during the tax year __________

Schedule A—Cost of Goods Sold (See instructions on page 18.)

Method of Inventory valuation (specify) □

1  Inventory at beginning of year __________
   2  Purchases __________
   3  Cost of labor __________
   4a  Additional section 263A costs (attach schedule) __________
   4b  Other costs (attach schedule) __________
   5  Total (add lines 4a through 4b) __________

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.

Signature of officer

Preparer's signature __________
Preparer's SSN or PTIN __________
Preparer's name (if self-employed), address, and ZIP code __________
Preparer's phone number __________

Form 880-T 2002
Schedule C—Rent Income (From Real Property and Personal Property Leased With Real Property)  
(See Instructions on page 16.)

1 Description of property

2 Rents received or accrued

<table>
<thead>
<tr>
<th>Description of rent</th>
<th>Deductions directly connected with the income in columns 2a) and 2b) (attach schedule)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5 Total income (Add totals of columns 2a) and 2b): Enter here and on line 6, column (A). Part I, page 1.

Schedule E—Unrelated Debt-Financed Income (See Instructions on page 17.)

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

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 3a) and 3(b)

9 Totals

Schedule F—Interest, Annuities, Royalties, and Rents From Controlled Organizations (See Instructions on page 16.)

1 Name of Controlled Organization

2 Employer Identification Number

3 Net unrelated income (less) (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)

Nonexempt Controlled Organizations

7 Taxable income

8 Net unrelated income (less) (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)

12 Totals


Add columns 8 and 11. Enter here and on line 6, Column (B). Part I, page 1.
1. Notices and communications. Original notices and other written communications will be sent to you and a copy to the first representative listed on line 2.
   a. If you also want the second representative listed to receive a copy of notices and communications, check this box.
   b. If you do not want any notices or communications sent to your representative, check this box.

2. Reinstatement/Revocation of prior power(s) of attorney. The filing of this power of attorney automatically revokes all prior power(s) of attorney on file with the Internal Revenue Service for the same tax matter and years or periods covered by this document. If you do not want to revoke a prior power of attorney, check here.

YOU MUST ATTACH A COPY OF ANY POWER OF ATTORNEY YOU WANT TO REMAIN IN EFFECT.

9. Signature of taxpayer(s). If a tax matter concerns a joint return, both husband and wife must sign if joint representation is requested, otherwise, see the Instructions. If signed by a corporate officer, partner, guardian, tax matters partner, executor, receiver, administrator, or trustee on behalf of the taxpayer, I certify that I have the authority to execute this form on behalf of the taxpayer.

IF NOT SIGNED AND DATED, THIS POWER OF ATTORNEY WILL BE RETURNED.

ROBERT CALABO

WILDLIFE CONSERVATION SOCIETY

Print name

Print name of taxpayer from line 1 if other than Individual

Declaration of Representative

Certifies: Student(s) with a special order to represent taxpayers in qualified Low Income Taxpayer Clinics or the Student Tax Clinic Program (Part II) and (if applicable), see the Instructions for Part II.

Under penalties of perjury, I declare that:

a. I am not currently under suspension or disbarment from practice before the Internal Revenue Service;

b. I am aware of regulations contained in Circular 230 (51 CFR, Part 11), as amended, concerning the practice of attorneys, certified public accountants, enrolled agents, enrolled actuaries, and others;

c. I am authorized to represent the taxpayer(s) identified in Part I for the tax matter(s) specified there; and

d. I am one of the following:

  a. Attorney—a member in good standing of the bar of the highest court of the jurisdiction shown below.

  b. Certified Public Accountant—only qualified to practice as a certified public accountant in the jurisdiction shown below.

  c. Enrolled Agent—enrolled as an agent under the requirements of Circular 230.

  d. Officer—a bona fide officer of the taxpayer's organization.

  e. Full-Time Employee—a full-time employee of the taxpayer.

  f. Family Member—a member of the taxpayer's immediate family (for example, spouse, parent, child, brother, or sister).

  g. Enrolled Actuary—enrolled as an actuary by the Joint Board for the Enrollment of Actuaries under 39 U.S.C. 3324 (the authority to practice before the Internal Revenue Service is limited by section 10.3(a) of Circular 230).

  h. Unenrolled Return Preparer—the authority to practice before the Internal Revenue Service is limited by Circular 230, section 10.7(b)(1)(i)(B). You must have prepared the return in question and the return must be under examination by the IRS. See Unenrolled Return Preparer on page 1 of the Instructions.

  i. Student Attorney—student who receives permission to practice before the IRS by virtue of their status as a law student under section 10.7(c) of Circular 230.

  j. Student CPA—student who receives permission to practice before the IRS by virtue of their status as a CPA student under section 10.7(c) of Circular 230.

  k. Enrolled Retirement Plan Agent—enrolled as a retirement plan agent under the requirements of Circular 230 (the authority to practice before the Internal Revenue Service is limited by section 10.3(a)).

IF THIS DECLARATION OF REPRESENTATIVE IS NOT SIGNED AND DATED, THE POWER OF ATTORNEY WILL BE RETURNED. See the Part II Instructions.
Form 2848

Power of Attorney and Declaration of Representative

Name and address of taxpayer(s) and representative(s)

WILDLIFE CONSERVATION SOCIETY
2306 SOUTHERN BLVD
BRONX, NY 10469

Social security numbers

Employer identification number

Date

hereby appoint(s) the following representative(s) as attorney(s)-in-fact:

Name and address

D. GREG GOLLER
348 PARK AVENUE
NEW YORK, NY 10016

Telephone No. 212-701-2555
Fax No. 212-701-2560

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

ROBERT ROBBINS
1686 WALT WHITMAN ROAD
HEMEL HEATH, NEW YORK 11747

Telephone No. 914-941-7625
Fax No. 914-941-7629

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Name and address

CAE No. 4025-39534R
Telephone No. 718-334-5911
Fax No. 718-334-5916

Check if new Address ☐ Telephone No. ☐ Fax No. ☐

Type of tax (Income, Employment, Estate, etc.) or civil penalty

Tax Form Number

Year(s) or Period(s)

INCOME AND FOREIGN FILING

amended 990-T, 925, 5471, 1065
2003-2004

Specific use not recorded on Centralized Authorization File (CAF). If the power of attorney is for a specific use, not recorded on CAF, check this box. See the instructions for Line 4, Specific Use Not Recorded on CAF.

Power to receive and assist the power of attorney holder to perform any legal act that I (we) can perform with respect to the tax matters described on line 3. For example, the authority to sign any agreements, contracts, or other documents. The authority does not include the power to receive refund checks (see line 8 below) or the power to execute an additional representative or add additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of the returns of return of return information to a third party. See the instructions for line 5 for more information.

The authority does not include the power to receive refund checks (see line 8 below) or the power to execute an additional representative or add additional representatives, the power to sign certain returns, or the power to execute a request for disclosure of the returns of return information to a third party. See the instructions for line 5 for more information.

List any specific additions to the acts otherwise authorized in this power of attorney:

Receipt of refund checks. If you want to authorize a representative named on line 2 to receive, BUT NOT TO ENDORSE OR CASH, refund checks, initial here ———— and list the name and address of the person authorized below.

Name of representative to receive refund checks

For Privacy Act and Paperwork Reduction Act Notice, see page 4 of the Instructions. Cat. No. 110-014 Form 2848 (Rev. 5-2004)
Form 990-T (2002)

Schedule G—Investment Income of a Section 501(c)(7), (8), or (17) Organization
(See instructions on page 18.)

<table>
<thead>
<tr>
<th>Description of Income</th>
<th>Amount of Income</th>
<th>Deductions directly connected with production of unrelated business income</th>
<th>Excess of unrelated business income over unrelated trade or business (column 4 minus column 3)</th>
<th>Net Income from unrelated trade or business (column 2 minus column 3)</th>
<th>Related Income (column 4)</th>
<th>Expenses attributable to unrelated business income (column 5 minus column 6)</th>
<th>Total Income (column 1 plus column 2 plus column 6)</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
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<tr>
<td>Totals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule I—Exploited Exempt Activity Income, Other Than Advertising Income
(See instructions on page 18.)

<table>
<thead>
<tr>
<th>Description of exploited activity</th>
<th>Amount of Income</th>
<th>Expenses directly connected with production of unrelated business income</th>
<th>Net Income from exempt activity that is not unrelated business income (column 2 minus column 3)</th>
<th>Expenses attributable to exempt activity (column 4 minus column 5)</th>
<th>Excess exempt expenses (row 5 minus column 6, but not more than column 4)</th>
<th>Column totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
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<td>(4)</td>
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</tr>
<tr>
<td>Column totals</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Schedule J—Advertising Income
(See instructions on page 18.)

Part I Income from Periodicals Reported on a Consolidated Basis

<table>
<thead>
<tr>
<th>Name of Periodical</th>
<th>Gross advertising Income</th>
<th>Direct Advertising Costs</th>
<th>Advertising gains or (losses) (column 2 minus column 3)</th>
<th>Circulation Income</th>
<th>Readership Costs</th>
<th>Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
<th>Column totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>WILDLIFE CONSERVATION</td>
<td>197,291</td>
<td>234,768</td>
<td>(37,487)</td>
<td>451,252</td>
<td>627,272</td>
<td></td>
<td>197,291</td>
</tr>
<tr>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
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<tr>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Column totals (carry to Part II, line (5))</td>
<td>197,291</td>
<td>234,768</td>
<td>(37,487)</td>
<td>451,252</td>
<td>627,272</td>
<td>(37,487)</td>
<td>197,291</td>
</tr>
</tbody>
</table>

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.)

<table>
<thead>
<tr>
<th>Name of Periodical</th>
<th>Gross advertising Income</th>
<th>Direct Advertising Costs</th>
<th>Advertising gains or (losses) (column 2 minus column 3)</th>
<th>Circulation Income</th>
<th>Readership Costs</th>
<th>Excess readership costs (column 6 minus column 5, but not more than column 4)</th>
<th>Column totals</th>
</tr>
</thead>
<tbody>
<tr>
<td>(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2)</td>
<td></td>
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<tr>
<td>Totals from Part I</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

Column totals, Part II | 197,291 | 234,768 | (37,487) | 451,252 | 627,272 | (37,487) | 197,291 |

Schedule K—Compensation of Officers, Directors, and Trustees (See instructions on page 19.)

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Percentage of time devoted to business</th>
<th>Compensation attributable to unrelated business</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>%</td>
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<td>%</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>Enter here and on line 14, Part II, page 1.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>