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) Do not enter social security numbers on this form as it may be made public.

2022 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

| Check if a Address c Name cha | pplicáble: bange | C Name of or | leation OI | | | (#12//AU))))))))) | | | | | | | |
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| | hange. | - | | go Zoologica | al Society | | | | D Employ | er identi/ | fication nur | nber | |
| Name cha | ii.aii.g. | Doing busi | | | | | | | | | | | |
| | ange | • | nd street (or P.O. box if r | nail is not deliv | ered to street add | ress) Room/ | suite | | <u>36-21670</u> | | | | |
| | • | 3300 Golf I | | | | | | | E Telepho | me numb | er | | |
| nitial retu | m | City or tow | vn | | State | ZIP co | | ľ | 708-688- | 8300 | | | |
| inal return | terminated | Brookfield | austa name | Carales | L Incolatetalacumbs | 6051 | | codo | | 1 | | | |
| | | Foreign co | ountry name | roreign provi | ince/state/county | Foreig | n postal | | G »Gross» | ecelius s | | 78.5 | 52,041 |
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| Applicatio | n pending | 1 | , , | | | | | | - CONTRACTOR **** | 995 KG | | Yes | X No |
| | | Michael J / | Adkesson 3300 Go | of Road, Bro | ookfield, IL 60 | 0513 | | 1 | A 19 10 10 10 10 10 10 10 10 10 10 10 10 10 | | | Yes | No |
| Tax-exem | not status: | X 501(c | 501(c) (| (ins | sert no.) 49 | 947(a)(1) or | 527 | lt "l | Vo# attach | ilist. See | instructions | | |
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| artl | | | | | | | | | | | | | |
| 1 | • | | | | st significant a | ctivities: | To in | spire co | nservatio | n leade | ership by | | |
| | connect | ting people v | with wildlife and na | ture. | | | 4 - | | | | | | |
| | | | | | | | Situanus | 2.J | | | | | |
| 2 | Check t | his box | if the organiza | ition discon | tinued its ope | rations of dis | posed | of more | than 259 | % of its | net asset | S. | |
| 3 | Number | r of voting m | | | | | | | | ۔ ا | | | 43 |
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| R | Contrib | utions and c | rants (Part VIII lin | ie 1h) | 1922 | • | | | | | | | 399,887 |
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| | Investm | ent income | (Part VIII) column | /Δ\ lines 3 | 4. and 7d) | | • | | | | | | 365,021 |
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| art II | | | | | | | | | | | | | |
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| oener, it | is true, corr | rect, and compl | ete. Declaration of prep | arer (omer mar | onicer) is based | on an information | OF WAR | n prepare | nasany kr | iowieage. | | | |
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| | " | ture of officer | | | | | _ | | Dat | е | | | |
| ere: | Mich | | son | · | | | Pres | sident ai | nd CEO | | • | | |
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| aid | | Type or print int/Type prepare | | Pre | eparer's signature | | | | | Check self-en | if | | 76 |
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| | Tax-exen Website Form of a 1 2 3 4 5 6 7a b 10 11 12 13 14 15 16a b 17 18 19 20 21 22 21 21 22 | art I Su 1 Briefly Connect 2 Check to Sumble And Number Sumble | Application pending F Name and Michael J J Tax-exempt status: X 501(composition) Tax-exempt sta | F Name and address of principal office Michael J Adkesson 3300 Gottax-exempt status: X | F Name and address of principal officer: Michael J Adkesson 3300 Golf Road, Brown Tax-exempt status: X 501(c)(3) 501(c) ((instance) www.czs.org | F Name and address of principal officer: Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Adkesson 3300 Golf Road, Brookfield, IL 6/17 Michael J Association Michael J | Application pending F Name and address of principal officer: Michael J Adkesson 3300 Golf Road, Brookfield, IL 60513 Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or website: www.czs.org Form of organization: X Corporation Trust Association Other art I Summary 1 Briefly describe the organization's mission or most significant activities: connecting people with wildlife and nature. 2 Check this box if the organization discontinued its operations of dis Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 2a) 5 Total number of individuals employed in calendar year 2022 (Part VI, line 2a) 6 Total number of volunteers (estimate if necessary). 7a Total unrelated business revenue from Part VIII, column (C), line 12. b Net unrelated business taxable income from Form 990-T, Part I, line 11. 8 Contributions and grants (Part VIII, line 1h). 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d). 10 Other revenue (Part VIII, column (A), lines 3, 4, and 7d). 11 Other revenue (Part VIII, column (A), lines 5, 6d 8c, 9c, 10c, and 11e). 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12). 13 Grants and similar amounts paid (Part IX, column (A), line 4). 15 Salaries, other compensation, employee benefits (Part IX, column (A), line 11e). b Total fundraising expenses (Part IX, column (A), line 25). 16 Professional fundraising fees (Rart IX, column (A), line 25). 17 Other expenses (Part IX, column (A), line 11e). b Total fundraising expenses (Part IX, column (A), line 25). 18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25). 19 Revenue less expenses. Subtract line 18 from line 20. 20 Total assets (Part X, line 26). 21 Total liabilities (Part X, line 26). 22 Net assets on fund balances. Subtract line 21 from line 20. 21 Total revenue Block 22 repart line blaters of penyur, ideclare that thave examined this return, including accom | F Name and address of principal officer. Michael J Adkesson 3300 Golf Road, Brookfield, IL 60513 Tax-exempt status: X 501(c)(3) 501(c) ((insert no.) 4947(a)(1) or 527 Website: WWW.C2S.OTG Form of organization: X Corporation Trust Association Other L Yee art 1 Summary 1 Briefly describe the organization's mission or most significant activities: To ir connecting people with wildlife and nature. 2 Check this box if the organization discontinued its operations of disposed Number of voting members of the governing body (Part VI, line 1a) 4 Number of independent voting members of the governing body (Part VI, line 1b) 5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7a Total unrelated business revenue from Part VIII, column (C), line 12 b Net unrelated business taxable income from Form 990-T, Part J, line 11 8 Contributions and grants (Part VIII, line 1h) 9 Program service revenue (Part VIII, column (A), lines 3, 4, and 7d) 10 Other revenue (Part VIII, column (A), lines 3, 4, and 7d) 11 Other revenue (Part VIII, column (A), lines 5, 6d 8c, 9c, 10c, and 11e) 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), lines 1–3) 14 Benefits paid to or for members (Part IX, column (A), lines 1–3) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 16 Total fundraising expenses (Part IX, column (A), line 11e) 17 Other expenses (Part IX, column (A), line 11a–11d, 11f–24e) 18 Total expenses. Add lines 13–17 (mijst equal Part IX, column (A), line 25) 19 Revenue less expenses. Subtract line 18 from line 20 10 Total assets (Part X, line 26) 21 Total liabilities (Part X, line 26) 22 Net assets or fund balances. Subtract line 21 from line 20 311 | Page Page | F Name and address of principal officer. Michael J Adkesson 3300 Golf Road, Brookfield, IL 60513 H(b) Are all subsordinates exempt status: Solicical S | F Name and address of principal officer: H(a) is this agroupment of submitted in the principal officer: H(a) is this agroupment of submitted in the principal officer: H(b) Are all subordinates inclining the principal officer: H(b) Art all subordinates H(b | Application pending Michael J Adkesson 3300 Golf Road, Brookfield, IL 60513 Tax-exempt status: | Formation pending Formation Formatio |

(Expenses \$

Total program service expenses

0 including grants of \$

53,187,388

0)(Revenue \$

| SAN MARKANIA MARKA | outcozz) Cricago Zoological Society So-2167 | UIO | zonanomene zonanomene | age J |
|--------------------|---|-------------------------------------|--------------------------|------------|
| ai | M Checklist of Required Schedules | | | Γ |
| | | | Yes | Мо |
| 1 | Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," | | | |
| _ | complete Schedule A | 1 | X | |
| 2 | Is the organization required to complete Schedule B, Schedule of Contributors? See instructions | 2 | Χ | - |
| 3 | Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to | | | ١., |
| | candidates for public office? If "Yes," complete Schedule C, Part I | 3 | | 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? If "Yes," complete Schedule C, Part II | 4 | _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? If "Yes," complete Schedule C, Part III | 5 | | 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? If | | | |
| | "Yes," complete Schedule D, Part I | 6 | 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? If "Yes," complete Schedule D. Part II | 7 | | X |
| 8 | Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," | | | |
| | complete Schedule D, Part III | 8 | X | ļ |
| 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 | | | 1 |
| | negotiation services? If "Yes," complete Schedule D, Part IV | 9 | | X |
| 10 | Did the organization, directly or through a related organization, hold assets in donor-restricted endowments | | | |
| | or in quasi endowments? If "Yes," complete Schedule D, Part V | 10 | X | 20.0000000 |
| 11 | If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, | 7,000,000 7,000,000 7,000,000 | | |
| | VII, VIII, IX, or X, as applicable. | 10000000 | | 550 KS |
| а | Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete | | | |
| | Schedule D, Part VI | 11a | X | <u> </u> |
| b | Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more | 1 | | |
| | of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII | 11b | | X |
| С | 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? If "Yes," complete Schedule D, Part VIII | 11c | 1 | 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? If "Yes," complete Schedule D, Part IX | 11d | | X |
| е | Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X | 11e | Х | |
| 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)? If "Yes," complete Schedule D, Part X | 11f | | X |
| 12a | Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII. | | | |
| | Schedule D, Parts XI and XII | 12a | X | |
| b | Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," | | İ | |
| | and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional | 12b | Х | |
| 13 | Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E | 13 | | X |
| 14a | Did the organization maintain an office, employees, or agents outside of the United States? | 14a | | X |
| b | | | | 1 |
| | fundraising, business, investment, and program service activities outside the United States, or aggregate | | | |
| | foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV | 14b | 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? If "Yes," complete Schedule F, Parts II and IV | 15 | 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? If "Yes," complete Schedule F, Parts III and IV | 16 | 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? If "Yes," complete Schedule G, Part I. See instructions | 17 | 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? If "Yes," complete Schedule G, Part II | 18 | X | |
| 19 | Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? | 1 | | |
| | If "Yes," complete Schedule G, Part III | 19 | | X |
| 20a | Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H | 20a | | X |
| b | If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? | 20b | | |
| 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? If "Yes," complete Schedule I, Parts I and II | 21 | Х | |

reportable gaming (gambling) winnings to prize winners?

| | | | *************************************** | ampenessering |
|----------|--|---|---|---|
| Pai | Statements Regarding Other IRS Filings and Tax Compliance (continued) | The second of | Yes | No |
| 2a | Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax | 2000000 | | |
| | Statements, filed for the calendar year ending with or within the year covered by this return | Inches Control | | |
| b | If at least one is reported on line 2a, did the organization file all required federal employment tax returns? | 2b | Х | 1 |
| 3a | Did the organization have unrelated business gross income of \$1,000 or more during the year? | 3a | Χ | |
| b | If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O. | 3b | Х | |
| 4a | At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, | | | |
| | a financial account in a foreign country (such as a bank account, securities account, or other financial account)? | 4a | | Х |
| b | If "Yes," enter the name of the foreign country | 3/460A | | 156×1550 |
| | See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). | 30000 | | 3377 / ACC |
| 5a | Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? | 5a | 1/0025/010500 | Х |
| b | Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? | 5b | | X |
| C | If "Yes" to line 5a or 5b, did the organization file Form 8886-T? | 5c | | |
| 6a | Does the organization have annual gross receipts that are normally greater than \$100,000, and did the | 100 | | |
| 0a | organization solicit any contributions that were not tax deductible as charitable contributions? | 6a | | Х |
| h | If "Yes," did the organization include with every solicitation an express statement that such contributions or | 100 | | ^ |
| b | gifts were not tax deductible? | 6b | | |
| 7 | Organizations that may receive deductible contributions under section 170(c). | 000 | 2017/1122 2017/1122 | 33.532 |
| 7 | | | | |
| а | Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods | 7a | Х | 1020000 |
| | and services provided to the payor? | 7b | x | + |
| b | If "Yes," did the organization notify the donor of the value of the goods or services provided? | 10 | | |
| С | Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was | <u>"</u> _ | l | |
| | required to file Form 8282? | 7c | X | |
| d. | If "Yes," indicate the number of Forms 8282 filed during the year | | SERVICE VASSALITE | |
| e | Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? | 7e | | X |
| f | Did the organization, during the year, pay premiums, directly or indirectly on a personal benefit contract? | 7f | - | X |
| g | If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? | 7g | | \vdash |
| h | If the organization received a contribution of cars, boats, airplanes or other vehicles, did the organization file a Form 1098-C? | 7h | V700745(0) | 100000000000000000000000000000000000000 |
| 8 | Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the | 0 | : VECTOR | |
| _ | sponsoring organization have excess business holdings at any time during the year? | 8 | 1300 V 1100 V | |
| 9 | Sponsoring organizations maintaining donor advised funds. | 00 | | THE REAL PROPERTY. |
| a | Did the sponsoring organization make any taxable distributions under section 4966? | 9a | | \vdash |
| b | Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? | de d | Astronomy Baryanana | |
| 10 | Section 501(c)(7) organizations. Enter: | | | |
| a | Initiation fees and capital contributions included on Part VIII, line 12 | 0000000 0000000 0000000 | 7516773516 7516773516 | |
| b | Gross receipts, included on Form 990, Part VIII-line 12, for public use of club facilities | 1 | | |
| 11 | Section 501(c)(12) organizations. Enter: Gross income from members or shareholders | 4412504CC | | |
| a | A34 19032 | \dashv | | |
| b | Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.) | | | |
| 40- | against amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? | 12a | 30000 | 4 3379550 |
| 12a | If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b | 120 | 1260,000 | 81 40005E |
| b | Section 501(c)(29) qualified nonprofit health insurance issuers. | 100000000000000000000000000000000000000 | | 2 1 |
| 13 | · · · · · · · · · · · · · · · · · · · | 13a | 1100000 | |
| а | Is the organization licensed to issue qualified health plans in more than one state?. Note: See the instructions for additional information the organization must report on Schedule O. | IJa | | 5) (4)(E1)(I |
| h | Enter the amount of reserves the organization is required to maintain by the states in which | | | |
| b | the organization is licensed to issue qualified health plans | 100 March 100 M | | |
| _ | Enter the amount of reserves on hand | 700000 (Mg | 500000 | |
| с 14а | Did the organization receive any payments for indoor tanning services during the tax year? | 14a | : I significated | X |
| | | 14b | 1 | +^ |
| 15 | If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O | 140 | + | + |
| 15 | | 1 4- | | \ \ \ |
| | excess parachute payment(s) during the year? | 15 | r (3654347 | X |
| | If "Yes," see the instructions and file Form 4720, Schedule N. | 300 | | |
| 16 | Is the organization an educational institution subject to the section 4968 excise tax on net investment income? | 16 | 1 | X |
| | If "Yes," complete Form 4720, Schedule O. | | | |
| 17 | Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities | | 1 | |
| | that would result in the imposition of an excise tax under section 4951, 4952, or 4953? | 17 | | |
| | If "Yes," complete Form 6069. | | | |

Part VI

| Sect | ion A. Governing Body and Management | | <u> </u> | |
|----------|--|--|------------|--|
| | M Management of the second sec | | Yes | No |
| 1a | Enter the number of voting members of the governing body at the end of the tax year | 0.000 | | |
| | if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. | | | |
| b | Enter the number of voting members included on line 1a, above, who are independent 1b 42 | 2.065/2 | | 700 PASSON |
| 2 | Did any officer, director, trustee, or key employee have a family relationship or a business relationship with | 10000000 | | |
| 3 | any other officer, director, trustee, or key employee? | 2 | | Х |
| J | supervision of officers, directors, trustees, or key employees to a management company or other person? . 🧳 | 3 | Χ | |
| 4 | Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? | 4 | | X |
| 5 | Did the organization become aware during the year of a significant diversion of the organization's assets? | 5 | | <u> </u> |
| 6 | Did the organization have members or stockholders? | 6 | Χ | |
| 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? | 7a | Х | |
| b | Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? | 7b | | × |
| 8 | Did the organization contemporaneously document the meetings held or written actions undertaken during | | | |
| | the year by the following: | 100000 | | |
| а | The governing body? | 8a | Χ | |
| b | Each committee with authority to act on behalf of the governing body? | 8b | Χ | |
| 9 | Is there any officer, director, trustee, or key employee listed in PartVII, Section A, who cannot be reached | 1 1 | | |
| | at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O | 9 | | <u> </u> |
| Sect | ion 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? | 10a | | X |
| þ | 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? | 10b | | ļ |
| 11a | Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? | 11a | Χ | T don don don de |
| þ | Describe on Schedule O the process, if any, used by the organization to review this Form 990. | 2000 VI | | |
| 12a | Did the organization have a written conflict of interest policy? If "No," go to line 13 | 12a | X | ₩ |
| b | Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? | 12b | X | |
| С | Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done. | 120 | Х | |
| 42 | Did the organization have a written whistleblower policy? | 12c | x | |
| 13 | Did the organization have a written document retention and destruction policy? | 14 | x | |
| 14 15 | | 14 | A Services | a la |
| 10 | 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? | 77127 (S) | | |
| а | The organization's CEO, Executive Director, or top management official. | 15a | Χ | |
| a b | Other officers or key employees of the organization | 15b | X | \top |
| IJ | If "Yes" to line 15a or 16b, describe the process on Schedule O. See instructions. | 10000000000000000000000000000000000000 | | 70000 |
| 16a | | 0.00 | | |
| | with a taxable entity during the year? | 16a | 4 | Х |
| b | If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its | 4262/32 | | 57/00 |
| - | participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard | 1200 000 1200 000 1200 000 1000 000 | iga lagi | |
| | the organization's exempt status with respect to such arrangements? | 16b | | T |
| Sec | tion C. Disclosure | | | |
| 17 | List the states with which a copy of this Form 990 is required to be filed FL, IL, WI | | | |
| 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 X Upon request Other (explain on Schedule C | - | | |
| 19 | Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest po | olicy, | | |
| | 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 E. Burns 708-688-8387 | | | |
| | 3300 Golf Road, Brookfield, IL 60513 | | | |

Chicago Zoological Society
Statement of Revenue Form 990 (2022)

| lić:119 | ilianian said | Check if Schedule O con | | a respons | se or i | note to any line in | this Part VIII. | | | |
|---|---------------|---------------------------------|------------|------------------|----------------|------------------------|---|---|--|--|
| | | | | | | | (A) Total revenue | (B) Related or exempt function revenue | (C) Unrelated business revenue | (D) Revenue excluded from tax under sections 512–514 |
| 20 | 1a | Federated campaigns | , | | 1a | 0 | | | | a silveta (S. Historia est. Alban estatua estado est. |
| | b | Membership dues | | | 1b | 0 | | | | |
| Q 8 | C | Fundraising events | | | 1c | 1,875,013 | | | | |
| F F | d | Related organizations | | | 1d | . 0 | | | | |
| Ω ∰ | | Government grants (contrib | | | 1e | 15,407,626 | | | | |
| Sin | f | All other contributions, gifts, | | | | | | | | |
| ig E | | similar amounts not include | | | 1f | 9,417,248 | | 6. 40 | | |
| 1 2 | g | Noncash contributions inclu | | | | | 100 (2000) (2000) (2000) | | | |
| Contributions, Gifts, Grants and Other Similar Amounts | | lines 1a–1f | | | 1g | | | | | |
| | <u>h</u> | Total. Add lines 1a-1f | | <u> </u> | | Business Code | 26,699,887 | | | |
| 60 | ο- | O Adminstra | | | | EGENOHOUNTE | 7.000.574 | 7, 2 26,574 | | |
| Program Service Revenue | 2a | General Admissions | | | | 900099 900099 | 7,226,57 4 15,874,150 | 7636 | | |
| ž š | b | | | | | 900099 | 6,555,081 | \$ 10/A HAVE | | 4,939,430 |
| F 6 | ن | | | | | 900099 | 2,412,300 | | | 4,838,430 |
| Re | u | A finite at Dentaine | | | | 900099 | 2,465,507 | | | 2,465,507 |
| ě, | f | All other program service re | | | | 300033 | 1,375,732 | | 190,330 | 59,147 |
| ۵. | и , | Total. Add lines 2a–2f | | | | | 35,909,344 | | 100,000 | 00,111 |
| \neg | 3 | Investment income (includir | na divi | dends. in | teresi | and | A > | SWess (Instance Law over 1) and available (191) | - industrial and a second and a | Technological residence of sized probables 220 ct |
| | · | other similar amounts) | | | | | 2,450,233 | | | 2,450,233 |
| | 4 | Income from investment of | | | | > 0 | | | , , | |
| | 5 | Royalties | | | | A 983 | 0 | | | |
| | | , | | (i) Rea | al | (ii) P er sonal | War and a second | | | 1940: 50-100-100/200 |
| | 6a | Gross rents | 6a | 7: | 3,810 | | | | | |
| | b | Less: rental expenses | 6b | | 0 | <u> </u> | | | 55 42 55 32 19 48 | |
| | С | Rental income or (loss) | 6c | 7: | 3,810 | 0 | | 75 (3) (3) (3) (3) (4 (5) (4 | | |
| | d | Net rental income or (loss) | <u></u> | | | .4 9 . | 73,810 | | | 73,810 |
| | 7a | | | (i) Secur | ities | (ii) Other | (Company) | 150 M 14 15 15 15 15 15 15 15 15 15 15 15 15 15 | | |
| | | sales of assets | _ | 10.01 | | | | | | |
| o) | | other than inventory | 7a | 13,21 | 3;397 | 0 | | | | |
| Revenue | b | Less: cost or other basis | 7 | 13,29 | o coo | » | 25 7 52 7 52 7 7 1 1 55 4 53 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | All the second Chapter (and a second) or | | |
| šve | | and sales expenses | 7b 7c | 4 🖏 🙃 | 5,2 <u>1</u> 2 | | | | | |
| | C | Gain or (loss) | 10 | (§) ₹ | J, <u>4812</u> | | -85,212 | | | -85,212 |
| Other | d 8a | Gross income from fundrais | eina | Z | <u> </u> | 1 | -00,212 | | | -00,212 |
| ŏ | "" | events (not including \$ | | 875, 01 3 | | | | | | 200 mg |
| | | of contributions reported or | | | | | 15,000,000,000,000,000 | | | |
| | <u> </u> | See Part IV, line 18 | | . I | 8a | 205,370 | | | | |
| | b | Less: direct expenses . (| / 1 | | 8b | 659,026 | | | | |
| | C | Net income or (loss) from f | | | its . | | -453,656 | 8 | | -453,656 |
| | 9a | Gross income from gaming | activ | ities. | | | 100 mg | | Charles Charle | |
| |] | See Part IV, line 19 🔊 | | | 9a | 0 | | | | |
| | b | Less: direct expenses ✓. | | | 9b | 0 | | | | |
| | C | Net income or (loss) from g | | g activitie: | s <u></u> | | C | | | |
| | 10a | Gross sales of inventory, le | | | | | | | (\$7-79) -53-190 -533 (\$9-1) | |
| | | returns and allowances. | | | 10a | | - | | 100000000000000000000000000000000000000 | |
| | b | Less: cost of goods sold. | | | 10b | 1 | | | | |
| | С | Net income or (loss) from s | sales | of invento | ry | | (|) | | |
| ris Ins | 44 | | | | | Business Code | | | | |
| Miscellaneous Revenue | 11a | | | | | | | + | | 1 |
| lla Ven | b | | | . | | | (| - | | |
| Se Se | ر [| All other revenue | | | • | | | | + | |
| S - | e e | Total. Add lines 11a-11d. | | | • | L | · · | | | |
| | 12 | Total revenue. See instruc | | | | | 64,594,406 | | 190,330 | 9,449,259 |

following SOP 98-2 (ASC 958-720)

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... (D) (B) Do not include amounts reported on lines 6b, 7b, Total expenses Program service Management and Fundraising 8b, 9b, and 10b of Part VIII. expenses general expenses expenses Grants and other assistance to domestic organizations 196,350 and domestic governments. See Part IV, line 21. 196,350 2 Grants and other assistance to domestic individuals. See Part IV, line 22 25,000 25,000 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 111,509 111,509 Compensation of current officers, directors. 652,535 797,058 271,948 trustees, and key employees 1,721,541 Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 7 Other salaries and wages 25,893,773 21,420,379 3,019,977 1,453,417 Pension plan accruals and contributions (include 493,890 69,632 33,511 section 401(k) and 403(b) employer contributions) . . . 597,033 **3,9**77,908 838,195 318,185 5,134,288 9 2,104,376 *1.*740,825 245,432 118,119 10 Fees for services (nonemployees): 11 ا<u>ن</u> و а 423,409 423,409 h 108,009 108,009 55,114 d Lobbying.......... 55,114 596,938 596.938 Professional fundraising services. See Part IV, line 17... 128,367 128,367 Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.) . . . 5,636,021 5,018,933 611,854 5,234 1,756,262 1,756,262 12 5,064,166 4,763,239 168,244 132,683 13 1,090,783 883,673 150,141 56,969 14 Information technology 6,014 15 6,014 1.281 2,752,244 2,737,192 13.771 16 278,043 20,753 239,888 17,402 17 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 155,254 59,749 68,237 27,268 19 Conferences, conventions, and meetings ... 566,555 566,555 20 21 Payments to affiliates 379,285 42,645 22 Depreciation, depletion, and amortization. 8,474,142 8,052,212 23 1,317,507 1,189,182 88,273 40,052 24 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.) Animal food and transport 1,448,510 1,448,510 281,840 281,840 Revenue Bond Maintenance Fees Gain/Loss on Retirment of Fixed Assets 54,513 34,239 20,274 Ç d UBIT Taxes 7,961 7,961 87,257 28,967 129,561 13,337 e All other expenses Miscellaneous 9,783,076 53,187,388 3,144,619 25 Total functional expenses. Add lines 1 through 24e. 66,115,083 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

Form 990 (2022) Chicago Zoological Society

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 |
| | 1 | Cash—non-interest-bearing | | 600,702 | 1 | 558,231 |
| | 2 | Savings and temporary cash investments | | 54,907,829 | 2 | 50,264,892 |
| | 3 | Pledges and grants receivable, net | | | 2 3 | 6,263,963 |
| | 4 | Accounts receivable, net | | | 3 4 | 3,395,610 |
| | 5 | Loans and other receivables from any current o | r former officer, directo | r, | | |
| | | trustee, key employee, creator or founder, subs | tantial contributor, or 3 | | W. 190 | |
| | | controlled entity or family member of any of the | se persons | | 5 | 0 |
| | 6 | Loans and other receivables from other disqualifi | ed persons (as defined | | | |
| | | under section 4958(f)(1)), and persons described | d in section 4958(c)(3)(1 | 3) | 6 | 0 |
| Assets | 7 | Notes and loans receivable, net | | |) 7 ⁾ | 0 |
| 155 | 8 | Inventories for sale or use | | | | 0 |
| 4 | 9 | Prepaid expenses and deferred charges | , , , | |) 9 | 1,821,069 |
| | 10a | Land, buildings, and equipment: cost or | | | | |
| | | other basis. Complete Part VI of Schedule D | | 92,222 | | |
| | b | Less: accumulated depreciation | | 88,610 112,786,46 | | 111,103,612 |
| | 11 | Investments—publicly traded securities | | | | 52,255,000 |
| | 12 | Investments-other securities. See Part IV, line | 11 | | 0 12 | 0 |
| | 13 | Investments—program-related. See Part IV, line | e 11 <i></i> . | | 0 13 | 0 |
| | 14 | Intangible assets | | | 0 14 | 0 |
| | 15 | Intangible assets . Other assets. See Part IV, line 11 | | 136,50 | | 367,623 |
| | 16 | | | | | 226,030,000 |
| | 17 | Accounts payable and accrued expenses | · · · · · · · · · · · · · · · · · · · | 5,743,22 | | 6,247,274 |
| | 18 | Grants payable | | » · · | 0 18 | 0 |
| | 19 | Deferred revenue | *************************************** | <u>17,167,99</u> <u>29,440,00</u> | | 14,671,837 |
| | 20 | Tax-exempt bond liabilities | | 28,920,000 | | |
| | 21 | Escrow or custodial account liability. Complete | 0 21 | 0 | | |
| Liabilities | 22 | Loans and other payables to any current or form | | | | |
| 熹 | | trustee, key employee, creator or founder, subs | | | | |
| jat | | controlled entity or family member of any of the | | | 0 22 | 0 |
| | 23 | Secured mortgages and notes payable to unre | | | 0 23 | 0 |
| | 24 | Unsecured notes and loans payable to unrelate | ed third parties | | 0 24 | 0 |
| | 25 | Other liabilities (including federal income tax, p | | | - | |
| | | parties, and other liabilities not included on line | \$ 17–24). Complete | 0.400.70 | م م | 0.070.000 |
| | | Part X of Schedule D | | | | 2,276,889 |
| | 26 | Total liabilities. Add lines 17 through 25 | | 54,781,00 | 0 26 | 52,116,000 |
| Ses | | Organizations that follow FASB/ASC 958, ch | eck here X | | | |
| aŭ | | and complete lines 27, 28, 32, and 33. | | | | |
| Sail | 27 | Net assets without donor restrictions | | | | 150,410,000 |
| Ö | 28 | 200 | | 24,786,00 | 0 28 | 23,504,000 |
| ä | | Organizations that do not follow FASB ASC | 958, check here | | | |
| F | | and complete lines 29 through 33. | | | | |
| Net Assets or Fund Balances | 29 | Capital stock or trust principal, or current funds | | | 0 29 | 0 |
| Se | 30 | Paid-in or capital surplus, or land, building, or e | | | 0 30 | 0 |
| As | 31 | Retained earnings, endowment, accumulated i | | | 0 31 | 0 |
| et | 32 | Total net assets or fund balances | | | | 173,914,000 |
| | 33 | Total liabilities and net assets/fund balances. | | 234,132,00 | 0 33 | 226,030,000 |
| | | | | | | Form 990 (2022) |

| | | | | ~ 3 | |
|-------------|--|-----|-------------|-------|--|
| Part | Reconciliation of Net Assets | | | | |
| | Check if Schedule O contains a response or note to any line in this Part XI. | | | . [| Χ |
| 1 | Total revenue (must equal Part VIII, column (A), line 12) | 1 | 64 | ,594 | ,406 |
| 2 | Total expenses (must equal Part IX, column (A), line 25) | 2 | 66 | 3,115 | ,083 |
| 3 | Revenue less expenses. Subtract line 2 from line 1 | 3 | -1 | ,520 | ,677 |
| 4 | Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A)) | 4 | 179 | ,351 | ,000 |
| 5 | Net unrealized gains (losses) on investments | 5 | -3 | 3,940 | ,913 |
| 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 | | 24 | ,590 |
| 10 | Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32) | , I | | | |
| 525VX10949X | column (B)) | 10 | 173 | 3,914 | ,000 |
| Part | XII Financial Statements and Reporting | 49 | | , | |
| | Check if Schedule O contains a response or note to any line in this Part XII. | | | | |
| 1 | Accounting method used to prepare the Form 990: Cash X Accrual Other If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O. | | | Yes | No |
| 2a | Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis | | . 2a | | X |
| b | Were the organization's financial statements audited by an independent accountant? | | . 2b | X | 15 - CC CS - (15) CG - (15 |
| 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 of selection process during the tax year, explain on Schedule O. As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the | | . 2c | X | |
| 3a | Uniform Guidance, 2 C.F.R. Part 200, Subpart F? | | . 3a | | Х |
| ď | 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 Q and describe any steps taken to undergo such audits. | | 3b | | |
| | . 🔌 🔛 | | Form | 990 | (2022 |

SCHEDULE A (Form 990)

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.

Open to Public

OM8 No. 1545-0047

Department of the Treasury

990 or Form 990-EZ. Inspection Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization Employer identification number 36-2167016 Chicago Zoological Society

| 20 | | Reason for Public Chari | | | | | | D1000011111111111111111111111111111111 | |
|-------|--|---|--|--|--------------------------|--|--|--|--|
| The o | orga | anization is not a private foundati | , | • | | • | | | |
| 1 | 닏 | A church, convention of churche | , | | | 70(b)(1)(| A)(i). | | |
| 2 | Щ | A school described in section 1 | , | • | | | | | |
| 3 | | A hospital or a cooperative hosp | = | | • | | ×83. | | |
| 4 | | A medical research organization hospital's name, city, and state: | | iction with a hospital de | escribed ir | section | 170(b)(1)(A)(iii). En | ter the | |
| 5 | | An organization operated for the section 170(b)(1)(A)(iv). (Comp | | e or university owned o | or operated | d by a gov | rernmentål unit desc | ribed in | |
| 6 | | A federal, state, or local governi | ment or government | tal unit described in se | ction 170 | (þ)(1)(A)(s | ⟨). → | | |
| 7 | Χ | An organization that normally redescribed in section 170(b)(1)(| | | m a gover | nmental u | hit or from the gener | al public | |
| 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 | y to test for public s afe | ty. See se | ction 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. | | | | | | | | |
| а | 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 organized control or management of the organization(s). You must c | e supporting organi | zation vested in the sa | | | | | |
| C | | Type III functionally integra its supported organization(s) | ated. A supporting of (see instructions). | rganization operated in You must complete P | n connecti art IV, Se | on with, a ctions A, | nd functionally integ D, and E. | rated with, | |
| d | | Type III non-functionally in that is not functionally integr | ate d , The organizat | ion generally must sati | sfy a distr | ibution red | quirement and an att | | |
| _ | | requirement (see instruction Check this box if the organiz | | | | | | a III | |
| е | | functionally integrated, or Ty | | | | | . Type I, Type II, Type | , iii | |
| f | | Enter the number of supported | | | | | | 0 | |
| g | | Provide the following information | n about the support (ii) EIN | ed organization(s). (iii) Type of organization | (iv) is the c | raspization | (v) Amount of monetary | (vi) Amount of | |
| | 11. | , wante of supported organization. | e (ii) Liiv | (described on lines 1–10 above (see instructions)) | listed in you | r governing ment? | support (see instructions) | other support (see instructions) | |
| | | ************************************** | | | Yes | No | | : | |
| (A) | | | | | | | | | |
| (B) | | | | | | | | | |
| (C) | | | | | | | | | |
| (D) | | | | | | | | | |
| (E) | | · | | | | | | | |
| Tota | al | | | | | | 0 | 0 | |
| | | | | | | PERSONAL PROPERTY AND A PROPERTY AND | | harman and a comment of the comment | |

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.)

| Sec | tion A. Public Support | | | | | | |
|------|---|------------------------|----------------------|------------------------|---------------------------|------------------------|--|
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and | | | | | | |
| | membership fees received. (Do not | | | | | | |
| | include any "unusual grants.") | 23,367,263 | 23,516,558 | 1,851,264 | 29,624,590 | 12,543,166 | 90,902,841 |
| 2 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid | | | | | | |
| | to or expended on its behalf | 14,573,917 | 14,677,126 | 3,908,169 | 14,955,352 | 14,156,721 | 62,271,285 |
| 3 | The value of services or facilities | | | • | A. 4 | | |
| | furnished by a governmental unit to the | | | | | \ | |
| | organization without charge | | CH4000 | | | No. 1 | 0 |
| 4 | Total. Add lines 1 through 3 | 37,941,180 | 38,193,684 | 5,759,433 | 44,579,942 | > 26,699,887 | 153,174,126 |
| 5 | The portion of total contributions by | 185 (2000) | | | | | |
| | each person (other than a | | | 5 5 6 6 6 6 6 | | | |
| | governmental unit or publicly | | | | | | |
| | supported organization) included on | | | | | | |
| | line 1 that exceeds 2% of the amount | | | and the second second | | | |
| | shown on line 11, column (f) | | | a secondo de partir de | | | 458,123 |
| 6 | Public support. Subtract line 5 from line 4 | | | | | | 152,716,003 |
| Sec | ction B. Total Support | | | | 479 | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | ♦ (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 7 | Amounts from line 4 | 37,941,180 | 38,193,684 | 5, 759,433 | 44,579,942 | 26,699,887 | 153,174,126 |
| 8 | Gross income from interest, dividends, | | , 4 , 4 | * 3 A | | | |
| | payments received on securities loans, | | | | | | |
| | rents, royalties, and income from | | | | | | |
| | similar sources | 1,906,637 | 896, 7 35 | 0 | 1,020,225 | 2,524,043 | 6,347,640 |
| 9 | Net income from unrelated business | | **** | r | | | |
| | activities, whether or not the business is | | | | | | |
| | regularly carried on | 29,847 | 40,865 | 9,196 | 0 | 13,678 | 93,586 |
| 10 | Other income. Do not include gain or | | | | | | |
| | loss from the sale of capital assets | | | | | | |
| | (Explain in Part VI.) | * | *** | | | | 0 |
| 11 | Total support. Add lines 7 through 10 | | 6 | | | 5.39.20.30.30.00.20.20 | 159,615,352 |
| 12 | Gross receipts from related activities, etc. (s | ee instructions). | | | | 12 | 113,611,386 |
| 13 | First 5 years. If the Form 990 is for the orga | anization's first, sec | ond, third, fourth, | or fifth tax year as | a section 501(c)(3) |) | |
| | organization, check this box and stop here | . W. W | | | | | |
| Sec | ction C. Computation of Public Su | pport Pèrcent | age | | | | |
| 14 | Public support percentage for 2022 (line 6, | | | (f)) | | 14 | 95.68% |
| 15 | Public support percentage from 2021 Sched | | | | | 15 | 96.43% |
| 16a | 33 1/3% support test—2022. If the organiz | | | | | ck this box | |
| | and stop here. The organization qualifies a | | | | | | X |
| h | 33 1/3% support test—2021. If the organiz | | - | | | | ļ |
| | box and stop here. The organization gualific | | | | | | |
| 172 | 10%-facts-and-circumstances test—2022 | • | | | | | 1 |
| 174 | 10% or more, and if the organization meets | | | | | | |
| | Part VI how the organization meets the facts | | , | | | | |
| | organization | | - | | | | |
| b | 10%-facts-and-circumstances test—202 | 1. If the organization | on did not check a | box on line 13, 16a | , 16b, or 17a, and | line | <u>- </u> |
| | 15 is 10% or more, and if the organization n | neets the facts-and | -circumstances tes | st, check this box a | nd stop here . Exp | lain | |
| | in Part VI how the organization meets the fa | | _ | | | rted | _ |
| | organization | | | | | | |
| 18 | Private foundation. If the organization did | not check a box or | n line 13, 16a, 16b, | 17a, or 17b, check | k this box and see | | . — |
| | instructions | | | | | | , <u>L</u> |

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.)

| Sec | tion A. Public Support | and the same of th | | | | | |
|------|--|--|------------------------|--------------------|---------------------|------------------------|----------------------|
| | ıdar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 1 | Gifts, grants, contributions, and membership fees | 1 | | , - | , | | |
| | received. (Do not include any "unusual grants.") | | | | <u> </u> | | 0 |
| 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 | | | | | | 0 |
| 3 | Gross receipts from activities that are not an | | | | | | |
| | unrelated trade or business under section 513 | | | | . 20 | | 0 |
| 4 | Tax revenues levied for the | | | | | | |
| | organization's benefit and either paid to | | | | | > , <i>3</i> | |
| | or expended on its behalf | | | |) (N | > | . 0 |
| 5 | The value of services or facilities | | | | | | |
| | furnished by a governmental unit to the | | | | | | |
| | organization without charge | | | | N J | | 0 |
| 6 | Total. Add lines 1 through 5 | 0 | 0 | 0 | 0 | 0 | 0 |
| 7a | Amounts included on lines 1, 2, and 3 | | | <u> </u> | | | |
| | received from disqualified persons | | | | > | | 0 |
| Ь | Amounts included on lines 2 and 3 | | | N. | 117 | | |
| | received from other than disqualified | | | A Proceedings | | | |
| | persons that exceed the greater of \$5,000 | | | | The Car | | |
| | or 1% of the amount on line 13 for the year | | a) | | | | 0 |
| С | Add lines 7a and 7b | 0 | , ^今 0 | 0 💎 | 0 | 0 | 0 |
| 8- | Public support (Subtract line 7c from | | 5 10 10 4 4 4 4 | | | Processor of the | |
| | line 6.) | | | | | | 0 |
| Sec | ction B. Total Support | | | | | | |
| Cale | ndar year (or fiscal year beginning in) | (a) 2018 | (b) 2019 | (c) 2020 | (d) 2021 | (e) 2022 | (f) Total |
| 9 | Amounts from line 6 | 0 | 0 | 0 | 0 | 0 | 0 |
| 10a | Gross income from interest, dividends, | 4 | | | | | |
| | payments received on securities loans, rents, | | | | | | |
| | royalties, and income from similar sources | J. J. | | | | | 0 |
| b | Unrelated business taxable income (less | | | | | | |
| | section 511 taxes) from businesses | | | | | | |
| | acquired after June 30, 1975 | | | | | | 0 |
| ¢ | Add lines 10a and 10b | ₹ 000 | 0 | 0 | 0 | 0 | 0 |
| 11 | Net income from unrelated business | 1 | | | | | |
| | activities not included on line 10b, whether | | | 1 | | | |
| | or not the business is regularly carried on . | <u> </u> | | | | | 0 |
| 12 | Other income. Do not include gain or | PI | | | | | |
| | loss from the sale of capital assets | 1 | | | | | |
| | (Explain in Part VI.) | :P | | | | | 0 |
| 13 | Total support. (Add lines 9, 10c, 11, | | | | | | |
| | and 12.) | 0 | I | | | | 0 |
| 14 | First 5 years. If the Form 990 is for the org | | | = | | | Γ |
| | organization, check this box and stop here | | | | | | · · · · · <u>L</u> _ |
| Se | ction C. Computation of Public Su | | | | | 1 | |
| 15 | Public support percentage for 2022 (line 8, | | • | | | 15 | 0.00% |
| 16 | Public support percentage from 2021 Schei | | | | | 16 | 0.00% |
| Se | ction D. Computation of Investme | | | | | <u> </u> | |
| 17 | Investment income percentage for 2022 (lin | . , | • | • | | 17 | 0.00% |
| 18 | Investment income percentage from 2021 S | | | | | 18 | 0.00% |
| 19a | 33 1/3% support tests—2022. If the organ | | | | | | |
| | not more than 33 1/3%, check this box and | | | | - | | · · · · · L |
| b | 33 1/3% support tests—2021. If the organ | | | | | | |
| | line 18 is not more than 33 1/3%, check this | | | | | | |
| 20 | Private foundation. If the organization did | not check a box of | 1 line 14, 19a, or 19 | ed, check this box | and see instruction | 15 | |

Part IV

Supporting Organizations

(Complete only if you checked a box on line 12 of 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 | Section | A. All | Supp | orting | Orgai | nizations |
|---|---------|--------|------|--------|-------|-----------|
|---|---------|--------|------|--------|-------|-----------|

- Are all of the organization's supported organizations listed by name in the organization's governing documents? 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.
- Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If " answer lines 3b and 3c below.
- 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)? If "Yes," describe in Part VI when and how the organization made the determination.
- Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2) (B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? 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.
- 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)? 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.
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? 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).
- 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?
- 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? If "Yes," provide detail in Part VI.
- Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(©)), afamily member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).
- 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))? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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? If "Yes," provide detail in Part VI.
- 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)? If "Yes," answer line 10b below.
 - Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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| Paris | Supporting Organizations (continued) | | The state of the s | ellementers. |
|------------------|--|---|--|--|
| ales established | | poormanoo. | Yes | No |
| 11 | Has the organization accepted a gift or contribution from any of the following persons? | | | |
| а | A person who directly or indirectly controls, either alone or together with persons described on lines 11b and | 0.0000 | VIII 7 155 | |
| | 11c below, the governing body of a supported organization? | 11a | | |
| b | A family member of a person described on line 11a above? | 11b | restament | seconocers. |
| C | A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide | | | adirenti Adirenti |
| <u> </u> | detail in Part VI. | 11c | | |
| Sect | on B. Type I Supporting Organizations | | Yes | No |
| 4 | Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or | (1-100)/105 | 162 | INU |
| 1 | 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? 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 | 0.000 | (00 SE) | io valeta |
| | 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. | 1 | 120,000,1190,000 | 1002 (1101 N |
| 2 | Did the organization operate for the benefit of any supported organization other than the supported | | nones. | |
| | organization(s) that operated, supervised, or controlled the supporting organization? 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. | 2 | | |
| Sect | ion C. Type II Supporting Organizations | | | ATATA POLITICO |
| | | 220000000 | Yes | No |
| 1 | Were a majority of the organization's directors or trustees during the tax year also a majority of the directors | | | 504 600 A |
| | or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control | | | |
| | or management of the supporting organization was vested in the same persons that controlled or managed | | With Street | decora: |
| | the supported organization(s). | 1 | | |
| Sect | ion D. All Type III Supporting Organizations | | Von | Na |
| | Did the experimetion provide to each of its supported experimetions by the last day of the fifth month of the | | 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 | | Charletter | 2000 |
| | organization's governing documents in effect on the date of notification, to the extent not previously provided? | 1 | Sept. Carpor | 6041000044 |
| 2 | Were any of the organization's officers, directors, of trustees either (i) appointed or elected by the supported | 1000000000 | 500 ST | |
| _ | organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how | 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1 | | |
| | the organization maintained a close and continuous working relationship with the supported organization(s). | 2 | | 100000000000000000000000000000000000000 |
| 3 | By reason of the relationship described on line 2, above, did the organization's supported organizations have | 155.756 | | |
| | a significant voice in the organization's investment policies and in directing the use of the organization's | 117574 VIII | | 204177751 13 33 14 25 17 74 |
| | income or assets at all times during the tax vear? It "Yes." describe in Part VI the role the organization's | 10000000000 1000000000 | | |
| | supported organizations played in this regard. | 3 | | |
| Sect | ion 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 ins | truction | s). | |
| а | The organization satisfied the Activities Test. Complete line 2 below. | | | |
| b | The organization is the parent of each of its supported organizations. Complete line 3 below. | | | |
| С | The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (s | see instruct | ions). | |
| 2 | Activities Test. Answer lines 2a and 2b below. | | Yes | No |
| z a | Did substantially all of the organization's activities during the tax year directly further the exempt purposes of | | | 100000000000000000000000000000000000000 |
| a | the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify | 100 C | | 2030/2 |
| | those supported organizations and explain how these activities directly furthered their exempt purposes, | | POSTANIA EXCEPTION | \$00000000 0000000000000000000000000000 |
| | how the organization was responsive to those supported organizations, and how the organization determined | 100 000 000 000 000 000 000 000 000 000 | | |
| | that these activities constituted substantially all of its activities. | 2a | degradados. | [|
| b | Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, | 115.50 (15.50 (17.50) (15.50) | | |
| | one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in | 75.00 (A) 75.00 (A) 75.00 (A) | 377773 377773 377773 377773 | |
| | Part VI the reasons for the organization's position that its supported organization(s) would have engaged in | 100 (100 (100 (100 (100 (100 (100 (100 | 250 255 25 25 20 20 20 20 20 20 20 20 20 20 20 20 20 | |
| | these activities but for the organization's involvement. | 2b | | |
| 3 | Parent of Supported Organizations. Answer lines 3a and 3b below. | 100 Tay 100 Tay | 3011 Call of 100 C | |
| а | Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or | | 350000 | |
| | trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. | 3a | | |
| b | Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each | 2002/38 | 1000 | 300000 |
| | of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard. | 3b | | |

Schedule A (Form 990) 2022

36-2167016

| Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organical Part V Type III Non-Functionally Integrated 509(a)(3) | gan | izations | |
|--|-------|--|--|
| 1 Check here if the organization satisfied the Integral Part Test as a qualifying | | | |
| instructions. All other Type III non-functionally integrated supporting organize | atio | ns 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 | | 3-1 |
| 2 Recoveries of prior-year distributions | 2 | | |
| 3 Other gross income (see instructions) | 3 | | |
| 4 Add lines 1 through 3. | 4 | 0 | 0 |
| 5 Depreciation and depletion | 5 | | |
| 6 Portion of operating expenses paid or incurred for production or collection of | | A | |
| gross income or for management, conservation, or maintenance of property | | | |
| held for production of income (see instructions) | 6 | | |
| 7 Other expenses (see instructions) | 7 | 100m. Dr. 1 | |
| 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) | 8 | » (| 0 |
| Section B - Minimum Asset Amount | | (A) Prior Year | (B) Current Year (optional) |
| 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 | WAY-WELLOW WORK WORK WORK WORK WORK WORK WORK WO | |
| 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 | 0 | 0 |
| e Discount claimed for blockage or other factors | | | Section 1985 and 1985 |
| (explain in detail in Part VI): | | | |
| 2 Acquisition indebtedness applicable to non-exempt-use assets | 2 | | |
| 3 Subtract line 2 from line 1d. | 3 | 0 | 0 |
| 4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, | | | |
| see instructions). | 4 | 0 | 0 |
| 5 Net value of non-exempt-use assets (subtract line 4 from line 3) | 5 | 0 | 0 |
| 6 Multiply line 5 by 0.035. | 6 | 0 | 0 |
| 7 Recoveries of prior-year distributions | 7 | 0 | 0 |
| 8 Minimum Asset Amount (add line 7 to line 6) | 8 | 0 | 0 |
| Section C - Distributable Amount | | | Current Year |
| 1 Adjusted net income for prior year (from Section A, line 8, column A) | 1 | The second secon | 0 |
| 2 Enter 0.85 of line 1. | 2 | | 0 |
| 3 Minimum asset amount for prior year (from Section B, line 8, column A) | 3 | | 0 |
| 4 Enter greater of line 2 or line 3. | 4 | | 0 |
| 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 | | 0 |
| 7 Check here if the current year is the organization's first as a non-functionally instructions) | / int | egrated Type III supporting | organization (see |

36-2167016

| | Type III Non-Functionally Integrated 509(a)(3) | Supporting Organia | zations (continue | <u>(a)</u> | |
|----------|---|--|--|-----------------------|--|
| Sectio | on D - Distributions | | | | Current Year |
| 1 | Amounts paid to supported organizations to accomplish exe | mpt purposes | | 1 | |
| 2 | Amounts paid to perform activity that directly furthers exemp | t purposes of supported | | | |
| | organizations, in excess of income from activity | | 2 | | |
| 3 | Administrative expenses paid to accomplish exempt purpose | es of supported organiza | ntions | 3 | |
| 4 | Amounts paid to acquire exempt-use assets | | | 4 | |
| 5 | Qualified set-aside amounts (prior IRS approval required—p | rovide details in Part VI |) | 5 | - totmaninemacaninemass |
| 6 | Other distributions (describe in Part VI). See instructions. | | | 6 | |
| 7 | Total annual distributions. Add lines 1 through 6. | | <u>&</u> | 7 | 0 |
| 8 | Distributions to attentive supported organizations to which the | ne organization is respor | nsive | N | |
| | (provide details in Part VI). See instructions. | CHARMIT OTTO THE COLUMN TO THE | | 8. | |
| 9 | Distributable amount for 2022 from Section C, line 6 | | | 9 | 0 |
| 10 | Line 8 amount divided by line 9 amount | | | 10 | 0.000 |
| 9 | Section E - Distribution Allocations (see instructions) | (i) Excess Distributions | (ii) Underdistributio Pre-2022 | ns | (iii) Distributable Amount for 2022 |
| 1 | Distributable amount for 2022 from Section C, line 6 | | | | 0 |
| 2 | Underdistributions, if any, for years prior to 2022 | | | | |
| | (reasonable cause required—explain in Part VI). See | | N | | |
| | instructions. | | À | | |
| 3 | Excess distributions carryover, if any, to 2022 | in the | | Baranga Ur Santas | |
| а | From 2017 | | Sandificación autorização planta de restricio | | |
| b | From 2018 | | | | |
| СС | From 2019 | | | | |
| d | From 2020 | | | jerise. | ing established and established |
| e | From 2021 | | (1) 12 / 12 (1) 15 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) | | |
| f | Total of lines 3a through 3e | <u>0</u> | | | |
| g | Applied to underdistributions of prior years | | | 0 | |
| h | Applied to 2022 distributable amount | 3 | | | 0 |
| i | Carryover from 2017 not applied (see instructions) | | | | |
| <u>j</u> | Remainder. Subtract lines 3g, 3h, and 3i from line 3f | 0 | | | 7257098405046000000000000000000000 |
| 4 | Distributions for 2022 from Section D, line 7: \$ 0 | | | 0.74 | |
| а | Applied to underdistributions of prior years | | | 0 | |
| b | Applied to 2022 distributable amount | | 100000000000000000000000000000000000000 | | 0 |
| С | Remainder. Subtract lines 4a and 4b from line 4 | 0 | | | |
| 5 | Remaining underdistributions for years prior to 2022, if | | | | |
| | any. Subtract lines 3g and 4a from line 2. For result | | | | |
| | greater than zero, explain in Part VI. See instructions. | To the state of th | | 0 | |
| 6 | Remaining underdistributions for 2022 Subtract lines 3h | | | | |
| | and 4b from line 1. For result greater than zero, explain | | | | |
| | in Part VI. See instructions | | | governos Portugues | 0 |
| 7 | Excess distributions carryover to 2023. Add lines 3j | | | | |
| | and 4c. | О | | | |
| 8 | Breakdown of line 7 | 71.331.0027.002.003 | 1 0 7 0 0 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 | | Agranded to age of the control of th |
| а | Excess from 2018 0 | | | | |
| b | Excess from 2019 | | | 0/58/1 | |
| C | Excess from 2020 0 | | The state of the s | | |
| d | Excess from 2021 | condition to be a record or more consideration and management of | | | The second secon |
| е | Excess from 2022 | | 1000 St. 55 St. 66 St. 66 St. 66 | | They was sent to the manufacture of |

| III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 2, 5, and 6. Also complete this part for any additional information. (| d 3; Part IV, Section E, lines 1c, 2a, 2b, nes 5, 6, and 8; and Part V, Section E, |
|--|---|
| Part II Section A Line 1-4: The 2020 amounts reflect the short year period from | |
| 1/1/21-3/31/21 due a change in accounting period. | |
| Part II Section B Line 7-10 The 2020 amounts reflect the short year period from | <u> </u> |
| 1/1/21-3/31/21 due a change in accounting period. | |
| · | |
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SCHEDULE C (Form 990)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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. Donot complete Part II-A.

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

| _ • S | ection 501(c)(4), (5), or (6) or | ganizations: Complete Part III. | | | |
|-------------|----------------------------------|---|------------------------------------|--|--|
| Nam | e of organization | | | Employe | r identification number |
| Chic | ago Zoological Society | | | | 36-2167016 |
| Ga | Complete if the | he organization is exempt und | er section 501(| c) or is a section 527 o | organization. |
| 1 | Provide a description of th | ne organization's direct and indirect p | olitical campaign a | activitie <mark>s in Part IV.</mark> See inst | ructions for |
| | definition of "political camp | paign activities." | | A. | |
| 2 | Political campaign activity | expenditures. See instructions | | , \$ | |
| 3 | | al campaign activities. See instruction | | <u> </u> | |
| Pa | | he organization is exempt und | | | |
| 1 | Enter the amount of any e | excise tax incurred by the organization | n under section 49 | 955) \$ | |
| 2 | Enter the amount of any e | excise tax incurred by organization ma | anagers u nde r se r | stion 4955 \$ | |
| 3 | If the organization incurre | d a section 4955 tax, did it file Form | 4720 for this year? | , , , <i>, , , ,</i> , , , , , , , , | . Yes No |
| 4a | Was a correction made?. | | N | | . Yes No |
| b | If "Yes," describe in Part I | V. | | | |
| Pa | tI-C Complete if t | he organization is exempt und | er section 501 | c), except section 501 | (c)(3). |
| 1 | | expended by the filing organization for | | | |
| | - | · · · · · · · · · · · · · · · · · · · | | \$ | |
| 2 | Enter the amount of the fi | ling organization's funds contributed | to other organizati | ons for section | |
| | | rities | | | |
| 3 | Total exempt function exp | enditures. Add lines 1 and 2. Enter h | ere and on Form | 1120-POL, | |
| | line 17b | | | \$ | 0 |
| 4 | Did the filing organization | file Form 1120-POL for this year?. | | | . Yes No |
| 5 | Enter the names, address | ses and employer identification numb | er (EIN) of all sect | tion 527 political organizatio | ons to which the filing |
| | organization made payme | ents. For each organization listed, en | ter the amount pai | d from the filing organization | n's funds. Also enter |
| | the amount of political cor | ntributions r ècé ive d t hat were prompt | tly and directly del | ivered to a separate politica | al organization, such |
| | as a separate segregated | I fund or a political action committee | (PAC). If additiona | I space is needed, provide | information in Part IV. |
| | (a) Name | (b) Address | (c) EIN | (d) Amount paid from | (e) Amount of political |
| | | | | filing organization's funds. If none, enter -0 | contributions received and promptly and directly |
| | B | | | ibilas. Il none, enter -o | delivered to a separate |
| | / | | | 1 | political organization. If none, enter -0 |
| | | | | | 110110, 01107 0 . |
| 14) | | À | | | |
| (1) | <u> </u> | M. | ` | | |
| (2) | Ţ | | | | |
| | | | | | |
| (3) | | | | | |
| <u> </u> | | | | | |
| (4) | | | | | |
| | | | | | |
| (5) | | | 1 | | |
| | | | 1 | | ## |
| (6) | | } | 1 | } | |

| SCIL | eoule C (Form 990) 2022 | | | ES/ADDUCTION OF THE PROPERTY O | | Page 2 |
|--------------|---|--|---|--|--|---|
| P | crt II-A Complete if the organization under section 501(h)). | ı is exempt | under section 5 | 01(c)(3) and filed | Form 5768 (elec | tion |
| Α | Check if the filing organization belong name, address, EIN, expense | | | | ed group member's | *************************************** |
| В | Check if the filing organization check | | | • | | |
| L | Limits on Lobb (The term "expenditures" ma | ying Expendit | lures | | (a) Filing organization's totals | (b) Affiliated group totals |
| 1a | Total lobbying expenditures to influence pub | lic opinion (gra | ssroots lobbying) . | | | 0 |
| b | Total lobbying expenditures to influence a leg | - | | | <u> </u> | 0 |
| С | Total lobbying expenditures (add lines 1a an | | | | 0 | 0 |
| d | Other exempt purpose expenditures | | | | | 0 |
| e | Total exempt purpose expenditures (add line | - | | // | 0 | <u> </u> |
| f | Lobbying nontaxable amount. Enter the amount columns. | ount from the ic | ollowing table in bo | tn 🦸 | 0 | 0 |
| ı | If the amount on line 1e, column (a) or (b) is: | The lebbyin | ng nontaxable amo | untie: | <u> </u> | 0 |
| ŀ | Not over \$500,000 | | imount on line 1e. | <u>unicis.</u> | | |
| ł | Over \$500,000 but not over \$1,000,000 | | us 15% of the excess | s over \$500,000. | | |
| | Over \$1,000,000 but not over \$1,500,000 | | us 10% of the exces | | 90 60 30 0000000000000000000000000000000 | |
| | Over \$1,500,000 but not over \$17,000,000 | \$225,000 plu | us 5% of the excess | over \$1,500,000. | | |
| | Over \$17,000,000 | \$1,000,000. | | | | |
| g | Grassroots nontaxable amount (enter 25% of | of line 1f) | | | 0 | 0 |
| h | Subtract line 1g from line 1a. If zero or less, | enter -0- | | (· · · » · · · · · | 0 | 0 |
| i | Subtract line 1f from line 1c. If zero or less, | | | | 0 | 0 |
| j | If there is an amount other than zero on eith | | | ,53t | | □ Vaa □ Na |
| | section 4911 tax for this year? | | | <u> </u> | <u>L</u> | Yes No |
| | | | g Period Under Se | • • | of the five columns i | a a laur |
| | (Some organizations that made a se | | election do not na structions for lines | | or the five columns i | selow. |
| | See th | e separate ilis | aructions for inter | s za miougii zi.) | | |
| | Lobbyir | ng Expenditur | es Dûring 4-Year | Averaging Period | | |
| | Calendar year (or fiscal year beginning in) | (a) 2019 | (b) 2020 | (c) 2021 | (d) 2022 | (e) Total |
| 2a | Lobbying nontaxable amount | | | | 0 | 0 |
| _b | Lobbying ceiling amount (150% of line 2a, column(e)) | | | | | 0 |
| _c | Total lobbying expenditures | Ď | | | . 0 | 0 |
| d | Grassroots nontaxable amount | | | | 0 | 0 |
| е | Grassroots ceiling amount (150% of line 2d, column (e)) | | | | | 0 |
| f | Grassroots lobbying expenditures | tive to the second seco | Mycornolisanos saltan santan santa | | 0 | 0 |
| | | | | | Sched | ule C (Form 990) 2022 |

| *********** | (election under section 501(h)). | | a) | (b) | | | |
|-------------|--|-----------------------|--|---------------|----------|-------|-------|
| | each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed ription of the lobbying activity. | Yes | No | | | ount | |
| 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: | | 60 de 1 | | | | |
| а | Volunteers? | Χ | 207000000002 | | | | |
| b | Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? | X | | | | | |
| C | Media advertisements? | | Х | | | | |
| d | Mailings to members, legislators, or the public? | X | | Ī | | | 1,087 |
| e | e Publications, or published or broadcast statements? | | | | | | 4,073 |
| f | Grants to other organizations for lobbying purposes? | Х | | | | 17 | 5,000 |
| g | Direct contact with legislators, their staffs, government officials, or a legislative body? | X | | | | 14 | 7,453 |
| h | Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? | | Х | | | | |
| i | Other activities? | | Х | | | | |
| j | Total. Add lines 1c through 1i | 200257/2) 200427/2 | | L | | 32 | 7,613 |
| 2a | Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? | | Х | | | | |
| b | If "Yes," enter the amount of any tax incurred under section 4912 | | | | | | |
| С | If "Yes," enter the amount of any tax incurred by organization managers under section 4912 | | 22003000 2200920 | | | | |
| d | If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? | | | 35,453 | 203.7676 | | |
| Par | III-A Complete if the organization is exempt under section 501(c)(4), section 501(| c)(5) | , or s | ect | ion | | |
| | 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 ye | ar? . | | | 3 | | |
| Par | Complete if the organization is exempt under section 501(c)(4), section 501(501(c)(6)) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" Canswered "Yes." | | | | | ine | 3, is |
| | (CA) (2000) | | 1 4 | $\overline{}$ | | | |
| 1 2 | Dues, assessments and similar amounts from members | | 1 | | | | |
| _ | | | 2a | 1 | | | |
| a h | Current year | • | 2b | \vdash | | | |
| b | | | 2c | \vdash | | | |
| с 3 | Total | | 3 | \vdash | | | |
| 4 | If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the | • | | | | | |
| 7 | excess does the organization agree to carryover to the reasonable estimate of nondeductible | | 50000000000000000000000000000000000000 | | | | |
| | lobbying and political expenditures next year? | | 4 | 1 | | | |
| 5 | Taxable amount of lobbying and political expenditures. See instructions | | 5 | 十 | | | |
| Par | TOTAL MODEL (III | | | | | | |
| Prov | ide 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 | d |
| | ee instructions); and Part II-B, fine 1. Also, complete this part for any additional information. | | | | | | |
| Part | II-B Line 1 A-J: The Chicago Zoological Society is a private non profit organization that | | | | | | |
| oper | ates Brookfield Zoo on land owned by the Forest Preserve District of Cook County. Brookfield Zoo | | | | | | |
| was | created through an act of the Illinois Legislature and the Society annually receives partial | | | | | | |
| fund | ing from the Cook County Forest Preserves to maintain and operate the Zoo. Occasionally, the | | | | | | |
| laws | and regulations under which the Society was organized and is funded and operated require | | | | | | |
| upda | ating. The Society may advise and assist appropriate legislative bodies in this activity. It may | | - - | | | | |
| also | advocate the adoption or rejection of legislation. By virtue of a management agreement with the | | | | | | |

| Part IV Supplemental Information (continued) |
|--|
| District, the Society is periodically called upon to advise on matters of public policy. The Society |
| also employs certain staff and consultants to communicate with the State of Illinois, federal |
| officials, county commissioners and other government officials, to inform those parties of the |
| activities of the Society. Additionally, as required during the year, the Society's President and |
| designated staff attend national and international professional group meetings and otherwise |
| communicate with those groups on various matters, including the expression of opinions to |
| appropriate congressional representatives, congressional committees or other deliberative bodies |
| that influence public policy concerning species in danger of extinction, environmental management, |
| the biological sciences (and kindred subject), and federal regulatory agency activities affecting |
| wildlife and its management. Also, as needed from time to time, the Society may contact its members, |
| staff and volunteers to encourage them to express their views on pending legislation that may have a |
| direct impact on the Society and its conservation programs. In FY23, the Society engaged in a |
| county-wide referendum effort, which required the investment of additional funding and staff time. |
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SCHEDULE D (Form 990)

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

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

| Name o | of the organization | | Employer identification number |
|--------|--|--|--|
| Chica | go Zoological Society | | 36-2167016 |
| Pari | | Advised Funds or Other Similar Fun | |
| | Complete if the organization answere | | |
| | Complete in the organization another | (a) Donor advised funds | (b) Funds and other accounts |
| 1 | Total number at end of year | (-) | 2 |
| 2 | Aggregate value of contributions to (during year) | | 149,734 |
| 3 | Aggregate value of grants from (during year) | | 92,450 |
| 4 | Aggregate value at end of year | | 2,935,848 |
| 5 | Did the organization inform all donors and donors | or advisors in writing that the assets held in | |
| 3 | funds are the organization's property, subject to | | |
| 6 | Did the organization inform all grantees, donors | e and donor advisors in writing that grant- | inds can be used |
| v | only for charitable purposes and not for the ber | nefit of the donor or donor advisor, or for ar | ny other nurnose |
| | conferring impermissible private benefit? | | |
| | | | · · · · · · · · · · · · · · · · · · · |
| | Conservation Easements. | d "Voo" on Form 000 Bort IV line 7 | |
| | Complete if the organization answere | | |
| 1 | Purpose(s) of conservation easements held by | | on of a historically important land area |
| | Preservation of land for public use (for examp | | on of a historically important land area |
| | Protection of natural habitat | Preservation | on of a certified historic structure |
| | Preservation of open space | | |
| 2 | Complete lines 2a through 2d if the organizatio | n held a qualified conservation contribution | n in the form of a conservation |
| | easement on the last day of the tax year. | | Held at the End of the Tax Year |
| а | Total number of conservation easements | | . 2a |
| b | Total acreage restricted by conservation easen | nents & | . 2b |
| С | Number of conservation easements on a certifi | | 2c |
| d | Number of conservation easements included in | | |
| | on a historic structure listed in the National Reg | gister 🐙 . ຼ | 2d |
| 3 | Number of conservation easements modified, t | transferred, released, extinguished, or term | ninated by the organization during |
| | the tax year | | |
| 4 | Number of states where property subject to co | nservation easement is located | |
| 5 | Does the organization have a written policy reg | garding the periodic monitoring, inspection, | , handling of |
| | violations, and enforcement of the conservation | n easements it holds? | Yes No |
| 6 | Staff and volunteer hours devoted to monitoring in | specting, handling of violations, and enforcing o | conservation easements during the year |
| | · | za J | |
| 7 | Amount of expenses incurred in monitoring, inspec | ting, handling of violations, and enforcing cons | ervation easements during the year |
| | | | |
| 8 | Does each conservation easement reported or | n line 2(d) above satisfy the requirements o | |
| | | | Yes No |
| 9 | In Part XIII, describe how the organization repo | | |
| | balance sheet, and include, if applicable, the te | | ancial statements that describes the |
| | organization's accounting for conservation eas | ements. | |
| Par | Organizations Maintaining Collect | ions of Art, Historical Treasures, o | r Other Similar Assets. |
| | | ed "Yes" on Form 990, Part IV, line 8. | |
| 1a | If the organization elected, as permitted under | | |
| | works of art, historical treasures, or other simil | | |
| | public service, provide in Part XIII the text of the | | |
| b | If the organization elected, as permitted under | | |
| | works of art, historical treasures, or other simil | | ion, or research in furtherance of |
| | public service, provide the following amounts of | relating to these items: | |
| | (i) Revenue included on Form 990, Part VIII, I | ine 1 | <i>.</i> \$ |
| | (ii) Assets included in Form 990, Part X | | \$ <u></u> _ |
| 2 | If the organization received or held works of a | | |
| | following amounts required to be reported und | ler FASB ASC 958 relating to these items: | |
| а | Revenue included on Form 990, Part VIII, line | 1 | \$ |
| b | Assets included in Form 990, Part X | atricus (si prospigua si marina minima m | \$ |

| | Onicago zoological C | Judicity | | | | | 00-21070 | 10 | Γ (| age as |
|------------------|--|---------------------------------------|---------------------------------------|--|--|--|---|-------------------|-------------|------------|
| Ear | Organizations Maintaining C | ollections of Ar | t, Histor | ical Trea | asures, or C | Other S | imilar Assets | (contin | ued) | |
| 3 | Using the organization's acquisition, acc | | | | | | | | | |
| | collection items (check all that apply): | | | | | | | | | |
| а | X Public exhibition | | d X | Loan or | exchange pro | gram | | | | |
| b | X Scholarly research | | е | Other | | | | | | |
| С | X Preservation for future generations | | | • | | | • | | | |
| 4 | Provide a description of the organization | he collections and | avnlain ho | ow thay fu | rther the area | nization | 's evemnt nurnes | e in Pa | rt | |
| -4 | XIII. | i s collections and | explaining | W they lu | irtiici tiic oiga | ii iizalloi | is exempt purpos | ,C III I di | | |
| 5 | During the year, did the organization sol | icit or receive dons | ations of a | rt historia | cal treasures | or other | eimilar | | | |
| Ū | assets to be sold to raise funds rather th | | | | | | | ☐ Ye | s X | No |
| Part | AND | | - ao part | | | | | | رين و | |
| | Complete if the organization ar | | n Form 9 | 90 Part | IV line 9 or | r renor | ed an amount o | on Forr | n | |
| | 990, Part X, line 21. | iswered res or | I I OIIII J | 50, i ait | 17, 1810 0, 01 | 1CPOIL | Cy an amount | <i>7</i> 11 1 011 | | |
| 1a | Is the organization an agent, trustee, cu | etodian or other in | termedian | , for contr | ibutions or other | horacee | ate hot | | | THE PLANTS |
| ıa | included on Form 990, Part X? | | | | | i ici asse | SIS HER | ☐ Ye | | No |
| b | If "Yes," explain the arrangement in Par | | | | - 186F | | | | · | 110 |
| | in 100, oxplain the arrangement in 1 ar | Critical and complete | 1110 101101 | viilg (abio. | ` \ \ | | Aı | nount | | |
| С | Beginning balance | | | | | 1c | | | | |
| d | Additions during the year | | | | | 1d | | | | |
| е | Distributions during the year | | | | | 1e | | | | |
| f | Ending balance | | | | \\)\) | 1f | | | | 0 |
| 2a | Did the organization include an amount | on Form 990. Parl | : X. line 21 | l. for escr | ow or custodia | al accou | int liability? | Ye | s \square | No |
| b | If "Yes," explain the arrangement in Par | | | | | | | | Ħ | |
| 50000000000 | WWW. | TAIII. OHOOK HOLO I | T tito expig | A COUNTY OF | Specii piorii | 300 011 1 | Care Amir. | · · · | | |
| Part | Complete if the organization a | newared "Vee" a | n Eor∰n O | റ്റെ മക | ≫ IV/ line 10 | | | | | |
| | Complete if the organization at | (a) Current year | | oryear ≫ | (c) Two years | hack | (d) Three years back | (a) En | ır years | hark |
| 1a | Beginning of year balance | 24,740,000 | | ,383,000 | | | 22,362,000 | + | 19,13 | |
| b | Contributions | 3,000 | Last and | > 28,000 | | 3,000 | 172,000 | | | 1,000 |
| c | Net investment earnings, gains, | 0,000 | 27 | <i>∞y</i> 20,000 | | 0,000 | 172,000 | † | | 1,000 |
| · | and losses | -1,419,00 0 | \delta \cdot | 256,000 | 83 | 1,000 | 2,998,000 | | 3,802 | 2.000 |
| d | Grants or scholarships | , , , , , , , , , , , , , , , , , , , | | 0 | | 0 | 0 | 1 | , | C |
| е | Other expenditures for facilities | | A | | | | | | | |
| | and programs | ♦ (5,00 0) | • | 874,000 | | o | 927,000 | | 849 | 9,000 |
| f | Administrative expenses | 44:000 | | 53,000 | 1 | 3,000 | 43,000 | | 4: | 3,000 |
| g | End of year balance | 23,275, 000 | 24 | ,740,000 | 25,38 | 3,000 | 24,562,000 | | 22,362 | 2,000 |
| 2 | Provide the estimated percentage of the | e cûrrent year end | balance (| line 1g, co | olumn (a)) hel | d as: | | | | |
| а | Board designated or quasi-endowment | , 23 | 3% | | | | | | | |
| b | Permanent endowment | <u>44%</u> | | | | | | | | |
| C | Term endowment | | | | | | | | | |
| _ | The percentages on lines 2a, 2b, and 2 | | | | | | | | | |
| 3a | Are there endowment funds not in the p | bossession of the c | rganizatio | on that are | e held and adr | ninister | ed for the | Г | · I | |
| | organization by: | | | | | | | 2-(1) | Yes | No |
| | (i) Unrelated organizations | | | | | | | 3a(i) | Х | |
| L | 3-72 | anni-ationa liatad a | | | | | | 3a(ii) 3b | | <u>X</u> |
| b | If "Yes" on line 3a(ii), are the related or Describe in Part XIII the intended uses | _ | | | | | | SD | | |
| 4 | 3000000000 | | i s endowi | nent iuna | 8. | | | | | |
| النكدا | Land, Buildings, and Equipm | | n Form (| 200 Dad | HV line 11e | S00 F | form 000 Bort | Y lino | 10 | |
| | Complete if the organization a | | | 1 | - | | | | | |
| | Description of property | (a) Cost or of | | | or other basis (other) | | Accumulated epreciation | (a) Bo | ook value | ; |
| 1a | Land | (4140301 | 0 | <u> </u> | 0 | 200 (100 (100 (100 (100 (100 (100 (100 (| | | | |
| na b | Buildings | | 0 | | 0 | 22. 22. CM/W | 0 | | | - (|
| c D | Leasehold improvements | • • | 0 | + | 281,840,568 | | 175,468,555 | | 106,37 | 2 011 |
| d | Equipment | | 0 | 1 | 9,806,111 | | 8,620,055 | | | 6,056 |
| e | Other | | 0 | | 3,545,543 | | 0,020,033 | | | 5,540 |
| | al. Add lines 1a through 1e. (Column (d) n | | <u> </u> | | | | | | 111,10 | |
| #1112172FE/-7032 | | | · · · · · · · · · · · · · · · · · · · | COLUMN TO THE OWNER OF THE OWNER | andria and a succession of the | | CONTRACTOR OF THE PROPERTY OF | | | |

| Part VIII | Investments—Other Securities. | | | |
|------------|--|--------------------|--|--|
| | Complete if the organization answered ' | 'Yes" on Form 990, | Part IV, line 11b. See Form 9 | 90, Part X, line 12. |
| | (a) Description of security or category (including name of security) | (b) Book value | (c) Method of val Cost or end-of-year n | |
| • | al derivatives | 0 | | |
| | held equity interests | 0 | | |
| (3) Other | *************************************** | | | |
| (A) | | | | |
| | | | | |
| (C) | | | <u> </u> | ************************************** |
| (D) | | | | |
| (E) | | | | |
| (F) | | | | <u>}</u> |
| (G) (H) | | | , sill 200 | W |
| | nn (b) must equal Form 990, Part X, col. (B) line 12.). | 0 | A. · | |
| Part VIII | | | A STATE OF THE PARTY OF THE PAR | ANTERNAS DE LA CONTRACTION DEL CONTRACTION DE LA |
| | Complete if the organization answered | "Yes" on Form 990, | Part IV, line 11c. See Form 9 | 90, Part X, line 13. |
| | (a) Description of investment | (b) Book value | (c) Method of va Cost or end-of-year n | |
| (1) | | | | |
| (2) | | | | |
| (3) | | | | |
| (4) | | ♦ | | |
| (5) | | | | |
| <u>(6)</u> | | 7 | | |
| <u>(7)</u> | | | 7 | |
| (8) | | | | |
| (9) | nn (b) must equal Form 990, Part X, col. (B) line 13.) . | > 0 | | |
| Part IX | Other Assets. Complete if the organization answered, | | The state of the s | 90, Part X, line 15. |
| | (a) Descr | ption | | (b) 8ook value |
| (1) | | | | |
| _(2) | | | | |
| _(3) | | N | | |
| (4) | | | | |
| (5) | | | | |
| (6) | | | | |
| <u>(7)</u> | | <u> </u> | | |
| (8) | | | | |
| (9) | umn (b) must equal Form 990, Part X, col. (B) | line 15) | | 0 |
| Part X | Other Liabilities. | | <u>. , , , , , , , , , , , , , , , , , , ,</u> | |
| | Complete if the organization answered line 25. | "Yes" on Form 990, | Part IV, line 11e or 11f. See F | Form 990, Part X, |
| 1. | (a) Descrip | otion of liability | | (b) Book value |
| | al income taxes | | | 0 |
| | ed Post Retirement Benefit Obligation | | | 1,209,268 |
| | ed Sick Pay Benefit Obligation | | | 1,029,973 |
| | table Gift Annuity Obligation | | | 151,281 |
| | nortized Bond Issue Costs | | | -110,968 |
| (6) Other | | | | -2,665 |
| (7) | | | | |
| (8) | | | | |
| | lumn (b) must equal Form 990, Part X, col. (B) | line 25) | | 2,276,889 |
| Total (OO) | unin (b) must oquar i onin 330, i art A, COL (b). | | <u> </u> | 2,210,003 |

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 . . X

| Pari | Reconciliation of Revenue per Audited Financial Statements With Revenue per Ref Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | turn. |
|--------|--|---|
| 1 | Total revenue, gains, and other support per audited financial statements | 1 61,387,000 |
| 2 | Amounts included on line 1 but not on Form 990, Part VIII, line 12: | 07,007,000 |
| | Net unrealized gains (losses) on investments | |
| a | Donated services and use of facilities | |
| b | | |
| ۲ C | · ' ' • | |
| d | - was an | 2.050.244 |
| e | Add lines 2a through 2d | 2e -3,650,311 3 65,037,311 |
| 3 | Subtract line 2e from line 1 | 3 65,037,311 |
| 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 | |
| b | Other (Describe in Part XIII.) | 440.005 |
| _ C | 9 V3 V F | 4c -442,905 |
| 5 | Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) | 5 64,594,406 |
| Pari | entistation of the state of the | Return. |
| | Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. | |
| 1 | Total expenses and losses per audited financial statements | 1 66,647,000 |
| 2 | Amounts included on line 1 but not on Form 990, Part IX, line 25: | |
| a | Donated services and use of facilities | |
| b | Prior year adjustments | 2007/0000 2007/0000 |
| С | Other losses | - 66 AL |
| d | Other (Describe in Part XIII.) | |
| е | Add lines 2a through 2d | 2e 660,284 |
| 3 | Subtract line 2e from line 1 | 3 65,986,716 |
| 4 | Amounts included on Form 990, Part IX, line 25, but not on line 1: | |
| а | Investment expenses not included on Form 990, Part VIII, line 7b | |
| þ | Other (Describe in Part XIII.) | |
| C | Add lines 4a and 4b | 4c 128,367 |
| _ 5 | Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) | 5 66,115,083 |
| Par | XIII Supplemental Information. | |
| Provi | de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Par | t V, line 4; Part X, line |
| 2; Pa | rt XI, lines 2d and 4b; and Part XII, lines 2d and 4b, Also complete this part to provide any additional informa | ition. |
| Part | Line 5 and 6: The Society does not maintain any donor advised funds. Other Funds | |
| 1.011 | Elife o dita o. The occord does not maintain diff across datas. Other i ditas | |
| cons | st of the Chicago Board of Trade Endangered Species Fund and the CZS Women's Board | |
| | | |
| Fund | . Contributions to these funds come from donors as well as proceeds from fundraising | |
| | | |
| even | ts and investment income. Grants are decided by committees as described in Schedule I. | |
| | | |
| At tin | nes, donors who have given money to the fund may also sit on the granting committee | |
| | | |
| but n | o one donor may decide on the grant awards. All grants awarded must follow the | |
| | | |
| guide | elines and processes established by CZS. CZS Board of Trustees has final approval of | |
| | | |
| all C | nicago Board of Trade Endangered Species Fund Committee recommended grant awards. CZS | |
| | | |
| Man | agement has final approval of all CZS Women's Board recommended grant awards. | |
| | | |
| Part | III Line 1A: Animal Collections, which were acquired through breeding loans, | |
| | | |
| purc | nases and contributions, are not recognized as assets on the Statement of Financial | |
| | | |
| Posi | ion. Costs to acquire collection items are recorded as decreases in unrestricted net | |
| | | |
| | | |

| FaitAll Supplemental information (continued) |
|--|
| reflected as increases in the appropriate net asset class. The Society's animal collection |
| consists of specimens with numerous attributes including taxonomic group, age, sex, |
| relationship and value to other animals, endangered status and breeding potential. The |
| Society retains a record of every animal in a permanent file. An inventory of the |
| collection is prepared annually. Professionally trained keeper staff and population |
| managers provide daily care for the collection and determine population needs. |
| Part III Line 4: The more than 2500 ambassadors of the animal kingdom which make up the |
| CZS collection provide our visitors a rare opportunity to see species from around the |
| globe. The collection, in connection with our education programs, provides CZS the |
| opportunity to teach guests about animals and nature, conservation and other related |
| topics. |
| Part V Line 4: The Society's endowment consists of different funds established to support |
| a variety of CZS programs including conservation and research, education and outreach, |
| care of the animal collection and grounds, and general operations. Additionally, the |
| Society is the designated beneficiary of the interest income on a \$1 million endowment |
| established and maintained by the Chicago Community Trust. The CCT maintains variance |
| power over this endowment and, accordingly, the Society has not included it in its |
| financial statements. |
| Part VI Line 1A-E: The Society operates a zoological park on land owned by the Forest |
| Preserve District of Cook County, IL which is provided to the Society at no charge. The |
| land site of the Zoo, accordingly, is not recorded on the Society's financial statements. |
| All park improvements acquired by the Society are legally owned by the District. All park |
| improvements acquired by the Society, including those acquired with District funds, are |
| recorded as park improvements on the Society's financial statements. The amount in Other |
| represents construction in progress on capital assets. Once a capital asset is complete |
| and in use, the total amount for that project is closed out of construction in progress |
| and transferred to park improvements. |
| Part X Line 2: The Society is a not-for-profit corporation and is exempt from tax under |

SCHEDULE F (Form 990)

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

OMB No. 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Name of the organization Employer identification number Chicago Zoological Society 36-2167016 Part General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to l x l Yes No 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (e) If activity listed in (d) is (a) Region (b) Number of (c) Number of (d) Activities conducted in the (f) Total a program service, describe specific type of region (by type) (such as, offices in the employees, expenditures for agents, and and investments region fundraising, program services, service(s) in the region independent investments, grants to recipients in the region contractors located in the region) in the region Europe (Including attend conservation related program services (1) Iceland and Greenland) conferences 0 3,285 Europe (Including program services memberships in Iceland and Greenland) conservation organizations 0 9,105 Russia and the grants to recipients for (3) Neighboring States fieldwork in the region 0 6,700 South America program services conservation fieldwork (4) 0 16,906 South America grants to recipients for o fieldwork in the region (5) 34,631 South Asia grants to recipients for fieldwork in the region 0 (6) 16,700 Sub-Saharan Africa program services conservation education _(7) 0 0 1,591 Sub-Saharan Africa program services attend conservation related conferences (8) 12,857 Sub-Saharan Africa grants to recipients for fieldwork in the region (9) 53,478 (10)(11)(12)

0

0

155.253

155,253

(13)

(14)

(15)

(16)

(17)

3a Subtotal

b Total from continuation sheets to Part I. . . C Totals (add lines 3a and 3b)

Chicago Zoological Society Schedule F (Form 990) 2022

(i) Method of valuation (book, FMV, appraisal, other) Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, (h) Description of noncash assistance ۵ Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed (g) Amount of noncash assistance exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter. Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax (f) Manner of disbursement wire transfer 42 check 2,000 6,700 20,226 6,700 6,500 6,908 7,000 7,000 (e) Amount of cash grant conservation fieldwork (d) Purpose of grant Sub-Saharan Africa 🐃 Sub-Saharan Africa Sub-Saharan Africa Sub-Saharan Africa Sub-Saharan Africa Sub-Saharan Africa Enter total number of other organizations or entities Neighboring States Russia and the (c) Region South America South Asia South Asia (b) IRS code section and EIN (if applicable) (a) Name of organization Part II 9 (12)(13) <u>1</u>4 <u> 3</u> € 8 6 ${f \Xi}$ \mathbf{S} ල € 3 9 N ო

Schedule F (Form 990) 2022

Chicago Zoological Society

Page 3

36-2167016

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, Schedule F (Form 990) 2022

Part III

Schedule F (Form 990) 2022 (h) Method of valuation (book, FMV, appraisal, other) (g) Description of noncash assistance (f) Amount of noncash assistance (e) Manner of cash disbursement Wire transfer Wire transfer 14,405 5,000 (d) Amount of cash grant line 16. Part III can be duplicated if additional space is needed. ო (c) Number of recipients Sub-Saharan Africa (b) Region South America (a) Type of grant or assistance conservation fieldwork conservation fieldwork (10) (11) (16) (11) (18) 9 9 9 (12) (13) 14 (15) <u>ල</u> 0 (8) (6) থ

| Part | N Foreign Forms | | |
|------|---|-------|------|
| 1 | Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) | Yes | X No |
| 2 | Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990) | Yes | X No |
| 3 | Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations. (see Instructions for Form 5471) | Yes | X No |
| 4 | Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) | Yes | X No |
| 5 | Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships. (see Instructions for Form 8865) | Yes | X No |
| 6 | Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 57.13, International Boycott Report (see | □ vaa | √ No |

Schedule F (Form 990) 2022

Part V Su

Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

| Part I Line 2: The Society awards grants through its Chicago Board of Trade Endangered |
|--|
| Species Fund (CBT ESF). The grant cycle is 2 times per year. Grant proposals are reviewed |
| by a team of four. Proposals may be endorsed by an IUCN Species Survival Committee or |
| other major, internationally known conservation organization, the AZA/WAZA, or other major |
| zoo organization. For any individuals/organizations who are not US Citizens/entities, the |
| Society checks the most recent OFAC Control List of Specifically Designated and Blocked |
| Persons as well as the Consolidated List established and maintained by the 1267 Committee |
| with respect to Al-Qaida, Osama Bin Laden, and the Taliban and other individuals, groups, |
| undertakings and entities associated with them. Approximately \$50,000 is awarded each |
| cycle, usually in amounts of \$3000 to \$7000 per grant. Final award recommendations are |
| presented to the Executive Committee of the Board of Trustees by the CBOT Committee |
| members. Final reports are due 1 year after the receipt of the funds along with a final |
| accounting of the grant funds expended. In addition, other grant funds are given by the |
| Society to major, internationally known conservation organizations in support of their |
| general conservation mission. These contributions are determined by Society management. |
| They are approved by the Board either as part of the annual operating budget process or as |
| part of a periodic spending authorization from the Society's Board Designated Conservation |
| Fund. |
| Part I Line 2: (cont'd) The Society also holds funds raised for avian conservation and |
| pangolin conservation programs. A small number of research grants are awarded from these |
| funds each year. The grants awarded from these funds are approved by the Avian Scientific |
| Advisory Group and the Pangolin Consortium Group. These groups are composed of staff from |
| the Society and other like-minded institutions. Both groups have written grant |
| application, awarding, tracking and reporting processes in place. All grant payments |
| approved by the groups must follow the Society's established internal procedures before |
| payment is made. |
| Part I Line 3, Col F: , Part II Line 1, and Part III: All expenditures are reported using |

Part V Sup

| Sup | olemental | Informa | tion |
|-----|-----------|---------|------|
|-----|-----------|---------|------|

| Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; |
|--|
| amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); |
| and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any |
| additional information. See instructions |

| the accrual method of accounting. |
|-----------------------------------|
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SCHEDULE G (Form 990)

Supplemental Information Regarding Fundralsing or Gaming Activities

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

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

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

Employer identification number

| Chicago Zoological Society | | | | | 36-216 | |
|---|------------------------|------------------------|-------------|-----------------------------|--|----------------------------------|
| Partil Fundraising Activities. Co | omplete if the o | organizati | on answe | ered "Yes" on For | m 990, Part IV, Iir | ne 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 X Mail solicitations | | = | | of non-government g | | |
| b X Internet and email solicitations | | = | | of government grants | s | |
| c X Phone solicitations | | g X Sp | ecial fund | raising events | | |
| d X In-person solicitations | | | | | | |
| 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, | | | | | | |
| or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes X No | | | | | | |
| b If "Yes," list the 10 highest paid indiv | | - | ers) pursua | ant to agreem ents u | nder which the fund | raiser is to |
| be compensated at least \$5,000 by | the organization. | | | 1 | | |
| | | | | <u> </u> | 1 | |
| (1) Name and address of individual | | (III) Did fund | raiser have | (iv) Gross receipts | (v) Amount paid to (or retained by) | (vi) Amount paid to |
| (i) Name and address of individual or entity (fundraiser) | (ii) Activity | custody or contribu | | from activity | fundraiser listed in | (or retained by) organization |
| | | | | | col. (i) | |
| | | Yes | No | | | |
| 1 A&Z Resources, Inc. | fundraising consulting | | × 4 | | 199,694 | 0 |
| 14110 W 167 Street Homer Glen IL 60491 2 Miles River Direct | fundraising | | X | 0 | 199,094 | 0 |
| 19 Boardman Lane Hamilton MA 01982 | consulting | | ٠.x> | 0 | 15,000 | 0 |
| 3 Community Counselling Service Co. Lt | | À | | > <u> </u> | ,0,000 | |
| 527 Madison Ave, Fifth Floor New York NY | | A. | AX X | 0 | 382,244 | 0 |
| 4 | | | 7 | | | |
| | | | <u></u> | 0 | 0 | 0 |
| 5 | | 1 a | | | | • |
| | 9 | <u> </u> | | 0 | 0 | 0 |
| 6 | 4227m | | | 0 | 0 | 0 |
| 7 | 1 | | | , | , | |
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| 8 | | | ,,,,,,, | | | |
| | 1 N N 1 | | | 0 | 0 | 0 |
| 9 | | | | | | |
| | | | | 0 | 0 | 0 |
| 10 | | | | | 0 | 0 |
| | 1_3 | 1 | <u></u> | | 0 | <u> </u> |
| Total | | | | | | |
| 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. | | | | | | |
| FL, IL, IN, WI | | | | | | |
| | | | | | | |
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36-2167016 Page **2** Schedule G (Form 990) 2022 Chicago Zoological Society 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 receip | ots greater than \$5,000 | O | | | |
|--|-------|--|------------------------------|--|----------------------------|---|--|
| | | | (a) Event#1 | (b) Event #2 | (c) Other events | (d) Total events | |
| - 1 | | | Whirl Gala | tion Leadership Awar | 7 | (add col. (a) through col. (c)) | |
| ஓ | | | (event type) | (event type) | (total number) | | |
| Revenue | 1 | Gross receipts | 1,434,758 | 286,957 | 358,668 | 2,080,383 | |
| מ | 2 | Less: Contributions | 1,348,258 | 268,307 | 258,448 | 1,875,013 | |
| | 3 | Gross income (line 1 minus line 2) | 86,500 | 18,650 | 100,220 | 205,370 | |
| | 4 | Cash prizes | | | O O | 0 | |
| | 5 | Noncash prizes | 5,924 | HOASIA | 0 | 5,924 | |
| suses | 6 | Rent/facility costs | 8,271 | 12,137 | 2,000 | 22,408 | |
| Direct Expenses | 7 | Food and beverages | 144,595 | 47,674 | 84,559 | 276,828 | |
| Direct | 8 | Entertainment | 11,000 | | 320 | 11,320 | |
| | 9 | Other direct expenses | 179,723 | . utend and | 133,793 | 342,546 | |
| | 10 | Direct expense summary. Add | Llines 4 through 9 in colu | | | (659,026) | |
| | 11 | Net income summary. Subtract | ct line 10 from line 3, colu | mn (d) | | -453,656 | |
| Pε | ri II | | e organization answe | red Yes" on Form 990 |), Part IV, line 19, or re | eported more than | |
| | | \$15,000 on Form 990-E | Z, line 6a. | | | | |
| Revenue | | | (a) Bingo | (b) Pull tabs/instant bingo/progressive bingo | (c) Other gaming | (d) Total gaming (add col. (a) through col. (c)) | |
| Rev | 1 | Gross revenue | * C | | | 0 | |
| ses | 2 | Cash prizes | | | | 0 | |
| Direct Expenses | 3 | Noncash prizes | | | | 0 | |
| irect E | 4 | Rent/facility costs | | | | 0 | |
| _ | 5 | Other direct expenses | 136 | | | 0 | |
| | 6 | Volunteer labor | Yes % | Yes % | Yes % No | | |
| | 7 | Direct expense summary Ado | Lines 2 through 5 in colu | ımn (d) | | (0) | |
| | 8 | Net gaming income summary | . Subtract line 7 from line | 1, column (d) | <u> </u> | 0 | |
| 9 Enter the state(s) in which the organization conducts gaming activities: | | | | | | | |
| | | Is the organization licensed to co | | | ***** | | |
| | | - | | | | | |
| | | | | | | | |
| 10 | | Were any of the organization's g If "Yes," explain: | | | | | |
| | | , , , , , , , , , , , , , , , , , , | | | | | |

| Does the organization conduct gaming activities with nonmembers? | Yes No |
|--|---|
| | |
| 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 |
| | , [] 100 [] 110 |
| | 13a % |
| An outside facility | 13b % |
| Enter the name and address of the person who prepares the organization's gaming/special events books a records: | and |
| Name | |
| Address | \ |
| | Yes No |
| | |
| If "Yes," enter name and address of the third party: | |
| Name | |
| Address | |
| Gaming manager information: | |
| Name | |
| Gaming manager compensation \$ | |
| Description of services provided | |
| ☐ Director/officer ☐ Employee ☐ Independent contractor | |
| Mandatory distributions: | |
| | Yes No |
| | |
| spent in the organization's own exempt activities during the tax year \$ | 0 |
| Part III, lines 9, 9b, 10b 15b 15c, 16, and 17b, as applicable. Also provide any addition | |
| A A | |
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| | |
| | formed to administer charitable gaming? Indicate the percentage of gaming activity conducted in: The organization's facility An outside facility Enter the name and address of the person who prepares the organization's gaming/special events books a records: Name Address Does the organization have a contract with a third party from whom the organization receives gaming revenue? If "Yes," enter the amount of gaming revenue received by the organization \$ 0 and the amount of gaming revenue retained by the third party If "Yes," enter name and address of the third party: Name Address Gaming manager information: Name Gaming manager compensation Description of services provided Director/officer Employee Independent contractor Mandatory distributions: Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Enter the amount of distributions required under state law to be distributed to other exempt organizations spent in the organization's own exempt activities during the tax year. \$ Supplemental Information. Provide the explanations required by Part I, line 2b, column |

SCHEDULE (Form 990) Department of the Treasury Internal Revenue Service

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

Complete if the organiza

Attach to Form 990.

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| 990, | |
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| ition answered "Yes" on Form 990, Part IV, line 21 or 22. | • |
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भारता है। Inspection としていると

OMB No. 1545-0047

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

2 Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form X Yes Employer identification number 36-2167016 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. General Information on Grants and Assistance the selection criteria used to award the grants or assistance? . Chicago Zoological Society Name of the organization Part Part II

| ~ | (a) Name and address of organization or government | (p) EiN | (c) IRC section (if applicable). | (d) Amount of cash grant | (e) Amount of non- cash assistance | (f) Method of valuation (book, FMV, appraisal, other) | (g) Description of noncash assistance | (h) Purpose of grant or assistance |
|----------|---|-----------------|----------------------------------|--|---------------------------------------|---|---------------------------------------|--|
| (E) 4 | (1) Vote Yes for Clean Air Clean Water 411 S Wells St Suite 300 Chicago, IL (8) | 87-2472803 | 501c4 | 175,000 | | | | Contrib to spt work on referendum campaign |
| (S) | | 94-2842655 | 50103 | | | | | Marine Mammal Conference sponsor |
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| (10) | | | | | | > | | et-model programmer. |
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| (12) | | | | | | | | |
| 2 | Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . | 01(c)(3) and g | lovernment organiza | ions listed in the line 1 | table | | | |
| ო | Enter total number of other organizations listed in the line 1 table | anizations list | ed in the line 1 table | | | | | |

3 Enter total number of other organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2022

Part

| Chicago Zoological Society | 1 (Table 2000) 2000 |
|----------------------------|---------------------|
| | |

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 | space is needed | | (A) Amount of | Acod) action to bother (a) | ff Description of noncash assistance |
|--|--------------------------|---|-------------------------------------|--|--|
| (a) Type of grant or assistance | (b) Number of recipients | (c) Amount of cash grant | (d) Amount of noncash assistance | (e) Internou of valuation (Dook, FMV, appraisal, other) | (I) Description of notices it assessance |
| Educ. Scholarship for Conservation Education | 5 | 25,000 | | - | |
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| 7 |) | * | | | |
| Supplemental Information. Provide the information required in Part I, line | e the information | equired in Part I, line | 2; Part III, column | 2; Part III, column (b); and any other additional information | tional information. |
| 3 | iqh a variety of prog | programs. For awards under the CBT ESF and Avian and Pangolin | r the CBT ESF and Av | ian and Pangolin | |
| Conconstion Programs as well as general contributions to major con | ns to major conserv | servation organizations, see details in Schedule F, part V. CZS | details in Schedule I | part V. CZS | |
| Conservation frograms, as were a general connectional scholarship propriate (7.5 maintains reported Substantiate amounts). | tional scholarshin or | © CZS maintains | records to substantia | ite amounts. | |
| also provides grants and assistance unough its educati | | | | , and the second | |
| elegibility and selection criteria. Procedures are in place to monitor gr | se to monitor grants | ants to ensure they are used for proper purposes including. | for proper purposes | including, | |
| where applicable, periodic reporting by the grantee. | | |) | | |
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| | | | | | Schedule I (Form 990) 2022 |

SCHEDULEK (Form 990) Chicago Zoological Society

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Go to www.irs.gov/Form990 for instructions and the latest information. Attach to Form 990.

Open to Public 7 7 7

Employer identification number

36-2167016

Inspection

OMB No. 1545-0047

Yes No Schedule K (Form 990) 2022 (i) Poolod financing Š Yes No (h) On behalf of issuor Yes (g) Dofeased No × Yes ŝ ပ Construction and renovation of (f) Description of purpose Yes certain buildings and exhibits o മ Yes 39,850,000 296,598 (e) Issue price 10,930,000 39,850,000 595,445 30,539,559 ŝ × × 2010 ⋖ Yes (d) Date issued × × 6/18/2008 112732AAQ (c) CUSIP# Were the bonds issued as part of a refunding issue of tax-exempt bonds Does the organization maintain adequate books and records to support Were the bonds issued as part of a refunding issue of taxable bonds (b) Issuer EIN 36-6005807 (or, if issued prior to 2018, an advance refunding issue)? (or, if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? Working capital expenditures from proceeds Credit enhancement from proceeds Capital expenditures from proceeds A Village of Brookfield, Cook County, IL Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds. the final allocation of proceeds? . Proceeds in refunding escrows Issuance costs from proceeds. Year of substantial completion. (a) Issuer name Other unspent proceeds Amount of bonds retired Total proceeds of issue. **Bond Issues** Other spent proceeds. Proceeds PartII Hari 5 Ŋ 16 മ ပ 4 ယ œ ග = 4 4 5 7

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

| edule K (Form 990) 2022 | Chicago Zoological Society 35-21670 | /U16 Page | |
|-------------------------|-------------------------------------|-----------|--|
| | | | |
| | | | |

| Private Business Use | | | | | | | | |
|--|-------------|-------------|-------------|-------------|------|----------------|---------------|----------------------------|
| | ∢ | | Ω | | O | | | ۵ |
| 1 Was the organization a partner in a partnership, or a member of an LLC, | Yes | No | Yes | No | Yes | N _O | Yes | °Z |
| which owned property financed by tax-exempt bonds? | | × | | | | | | |
| 2 Are there any lease arrangements that may result in private business use | | > | | | | | | |
| of bond-financed property? | | × | | | | | | |
| 3a Are there any management or service contracts that may result in private business use of bond-financed property? | | × | | | | | | |
| b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts relating to the financed property? | | | | | | | | |
| c Are there any research agreements that may result in private business use of | | × | | | , | | | |
| d If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside counsel to review any research agreements relating to the financed property? | | | | | | | | |
| 4 Enter the percentage of financed property used in a private business use by entities other than a section 501(s)(3) organization or a state or local government. | | | | | | | | |
| use as a | | | | | | | | |
| result of unrelated trade or business activity carried on by your-organization, & | | | | | | | | |
| 6 Total of lines 4 and 5. | | 0.00% | | 0.00% | | %00.0 | | 0.00% |
| | | × | | | | | | |
| 8a Has there been a sale or disposition of any of the bond-financed property to a nongovernmental | I V | > •> | HOROCOPPEN. | | | | | |
| person other than a 501(c)(3) organization since the bonds were issued?. | | 4 | | | | | | |
| b If "Yes" to line 8a, enter the percentage of bond-financed property sold of disposed of | | | | | | | | |
| c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations | > | | | | | | | |
| sections 1.141-12 and 1.145-2? | | | | | | | | |
| 9 Has the organization established written procedures to ensure that all nonqualified bonds of the issue are remediated in accordance with the | > | > | | (| | | | |
| Portain Arbitrage | | | | | | | | |
| | A | | B | | J | | | Q |
| 1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and | Yes | No | Yes | No | Sey. | No | Yes | No No |
| Penalty in Lieu of Arbitrage Rebate? | | × | | > | 70 | | | |
| 2 If "No" to line 1, did the following apply? | | | | > | | | | |
| a Rebate not due yet? | | | | | | | | |
| b Exception to rebate? | | | | |) | | | |
| c No rebate due? | × | | | | | | | |
| If "Yes" to line 2c, provide in Part VI the date the rebate computation was | | | | | | | | |
| | , | | | | | | | |
| 3 Is the bond issue a variable rate issue? | × | | | | | | | |
| | | | | | | | Schedule K (F | Schedule K (Form 990) 2022 |

Page 3 36-2167016 Schedule K (Form 990) 2022 Chicago Zoological Society
Parel Arbitrage (continued)

| | 4 | | 00 | | | إن | | |
|--|--------------------|------------|---------------------------------------|------------------|----------|-------------|----------------------------|---|
| 4a Has the organization or the governmental issuer entered into a qualified | Yes | No | Yes | Š | Yes | % N | Yes | Š |
| hedge with respect to the bond issue? | × | | | | | | | |
| b Name of provider. | The Northern Trust | Trust | | ì | | | | |
| Term of hedge. | | 10.00 | | | | | | |
| 1 | | × | | i | | | | |
| | | × | | | | | | |
| Were gross proceeds invested to | | × | ******* | | | | | |
| Name of provider | | | | | | | | |
| Term of GIC. | | | | | | | | |
| Was the regulatory safe harbor for est | | | | | | | | |
| 1 | | × | | | | | | |
| | > | | | | | | | |
| requirements of section 1467 | < | | | | | | | |
| | A | - | ω | | | U | | ۵ |
| Has the organization established written procedures to ensure that violations | Yes | No No | Yes | Š | Yes | oN | Yes | No |
| | | | | | | | | |
| voluntary closing agreement program if self-remediation isn't available under | > | | | | | | | |
| applicable regulations? | | Schedule K | | See instructions | ns. | | | |
| Supplemental migration. Flovide additional migration to the bonde of society of the bonde of the bo | H Line 1A | | .[| | 2 | | | *************************************** |
| Part II Line 11A: Some proceeds of the bonds were used to retire a polition of the bolius ashebowed in Fath II. Cine 1.5 | Z | | | | | | | |
| Part IV Line 2c: Column A; The rebate calculation was performed by an independent rebate consultant in March 2013 indicating no rebate was due and advising that as long | larch 2013 in | dicating | no reba | e was du | e and ad | vising that | as long | |
| as all assumptions remained true it was no longer necessary to compute excess with respect to these bonds | į | | | | | an water | | |
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| Schedule K (Form 990) 2022 Chicago Zoological Society Schedule K (Form 990) 2022 Chicago Zoological Society Schedule K. See instructions. (continued) Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. (continued) | t popular |
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| | Schedule K (Form 990) 2022 |

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization 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. Ins

Chicago Zoological Society

36-2167016

| Par | 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 | Method noncash co | (d) of deterr | | |
| 1 | Art—Works of art | | | * | | | | |
| 2 | Art—Historical treasures | | , | Ø ₁ Ø | - A | | | |
| 3 | Art—Fractional interests | | | | À | | | |
| 4 | Books and publications | | | Pas | 3 | | | |
| 5 | Clothing and household | | | | | | | |
| | goods | | | | | | | |
| 6 | Cars and other vehicles | | | | | | | |
| 7 | Boats and planes | | | S. 1 | | | | |
| 8 | Intellectual property | | | | | | | |
| 9 | Securities—Publicly traded | X | 25 | 755,785 | price of sto | ck on gif | t date | |
| 10 | Securities—Closely held stock | | | | | | | -, |
| 11 | Securities—Partnership, LLC, | | | arian. Similar | | | | |
| | or trust interests | | , | | | | | |
| 12 | Securities—Miscellaneous | | *** | . | | | | |
| 13 | Qualified conservation | | | | | | | |
| | contribution—Historic | | | > | | | | |
| | structures | | | 15y | | | | |
| 14 | Qualified conservation | | | | | | | |
| | contribution—Other | | | | | | | |
| 15 | Real estate—Residential | Х | , ett. | 151,123 | selling price | 9 | | |
| 16 | Real estate—Commercial | | | | | | | |
| 17 | Real estate-Other | | | | | | | |
| 18 | Collectibles | | | | | | | |
| 19 | Food inventory | Х | 3 | 17,325 | vendor esti | mated v | alue | |
| 20 | Drugs and medical supplies | X | 2 | 10,072 | vendor esti | mated v | alue | |
| 21 | Taxidermy | A. | | | | | | |
| 22 | Historical artifacts | A |) | | | | | |
| 23 | Scientific specimens | - X | 39 | 0 | | | | |
| 24 | Archaeological artifacts | 35 | | | | | | |
| 25 | Other (Operating Supplies) | | 21 | | cost or selli | | | |
| 26 | Other (Charity Auction Items) | | 134 | | cost or selli | | | |
| 27 | Other (Charity Fundraiser Su) | > X | 13 | 11,500 | cost or sell | ing price | ; | |
| 28 | Other (| 1 | | | ļ | | | |
| 29 | Number of Forms 8283 received | | | | | | | |
| | which the organization completed | Form 8283 | s, Part V, Donee Acknowledg | jement | 29 | - 1 | | 0 |
| | | | | | | 1.0000000000000000000000000000000000000 | Yes | No |
| 30a | During the year, did the organizat | | | | | 100/00/01 | 700 DC | |
| | 28, that it must hold for at least 3 | | | | | | 1-21-200 | 39.59.000 F/A |
| | to be used for exempt purposes for | | e holding period? | | | 30a | wasay kan | X |
| b | If "Yes," describe the arrangement | | | | | | | Boyces |
| 31 | Does the organization have a gift | acceptance | e policy that requires the rev | iew of any nonstandard | | Control (| | 50 55 W |
| | contributions? | | | | 1 1 1 1 | 31 | Х | <u> </u> |
| 32a | Does the organization hire or use | third partie | s or related organizations to | solicit, process, or sell | | | | 1 |
| | noncash contributions? | | | | | 32a | Χ | 1877 House 2010 |
| b | If "Yes," describe in Part II. | | | | | 2529/250 21/20/250 21/20/250 | | \$00.000.00 \$10.000.00 |
| 33 | If the organization didn't report ar | amount in | column (c) for a type of prop | perty for which column (a) is | | 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1 | | |
| | checked, describe in Part II. | | | | | 2000 2000 V | | Marie San |

SCHEDULE O (Form 990)

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.

Attach to Form 990 or Form 990-E2.

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

OMB No. 1545-0047

2022

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization Employer Identification number
Chicago Zoological Society 36-2167016

| Form 990, Part V, Section A, Line 1A:: The fiscal, general oversight, and policies of the |
|--|
| Society are vested in a Board of not more than 58 Trustees. As of March 31, 2023, there were |
| 43 voting Trustess. The elected Officers of the Board, the chairs of the standing committees |
| and such other Trustees as may be appointed by the Chairman constitute the Executive |
| Committee. The Executive Committee has the power to transact all regular business of the |
| Society during the period between the regular Board meetings. |
| Form 990, Part VI, Section A, Line 3:: All restaurant, retail and catering operations are |
| outsourced to a third party service provider. |
| Form 990, Part VI, Section A, Line 6:: The membership of the Society is composed of up to 250 |
| Governing Members. Up to 55 of the 58 Board of Trustees are elected by the Governing Members |
| at their annual meeting. Governing Members are also eligible for appointment by the Society's |
| Chairman to serve on Board committees other than the Exectuive Committee. Governing Members |
| are chosen by the Nominating Committee of the Board of Trustees and voted on by the full Board |
| of Trustees. |
| Form 990, Part VI, Section A, Line 7A:: The membership of the Society is composed of up to 250 |
| Governing Members. Up to 55 of the 58 Board of Trustees are elected by the Governing Members |
| at their annual meeting. Governing Members are also eligible for appointment by the Society's |
| Chairman to serve on the Board committees other than the Executive Committee. Governing |
| Members are chosen by the Nominating and Govenance Committee of the Board of Trustees and |
| voted on by the full Board of Trustees. |
| Form 990, Part VI, Section B, Line 11B:: The IRS Form 990 is prepared by Society's management |
| and reviewed and signed by the Society's tax advisor. The Form 990 is also reviewed by the |
| Audit Committee of the Board of Trustees and a copy of the entire final version of the form is |
| also made available to the Board of Trustees prior to filing with the IRS. |
| Form 990, Part VI, Section B, Line 12C:: Annually, a conflict of interest form is sent out to |
| all members of the Board of Trustess, Key Employees and any employee with purchasing |

| Schedule O (Form 990) 2022 | Page 2 |
|---|--------------------------------------|
| Name of the organization | Employer identification number |
| Chicago Zoological Society | 36-2167016 |
| authority. The form covers potential conflicts through financial interests, use of Society | |
| services, priviledged information and representation of Society interests. It also covers | |
| specific disclosures required by the IRS Form 990 and the Illinois AG990IL. Board of Trustees | |
| responses are reviewed by the Secretary of the Board and the Chief Financial and Admin. | à |
| Officer who together determine if a conflict exists. Employee responses are reviewed by the | |
| Sr. VP Human Resources and the Chief Financial and Admin. Officer. Any conflicts are addressed | |
| to ensure that all internal procedures are followed for any transactions with that individual | \\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\-\ |
| and that all items requiring disclosure are properly noted. Any Board members with a conflict |) |
| must abstain from voting on decisions involving the transaction in question. Any transactions | |
| entered into with interested parties follow the Society's established procurement policies and | |
| are provided at rates competitive with market rates. | |
| Form 990, Part VI, Section B, Line 15A and 15B:: The Society's policy for approval of | |
| compensation arrangements with officers and certain senior employees requires review and | |
| approval of the compensation arrangement by the Executive Committee of the Board, excluding | |
| anyone who is related to or under the control of the person involved in the arrangement. The | |
| Committee relies on appropriate comparability data which indicates the types and levels of | |
| similar compensation and benefit packages for similar positions provided by similar | |
| organizations. The Committee documents the basis for its determination of the reasonableness | |
| of compensation. This process is done annually for the President, Chief Financial and Admin | |
| Officer and the Sr. VP Development in any year where there is an increase in compensation. | |
| Form 990, Part VI, Section C, Line 19. Governing documents are available through applicable | |
| governmental agencies; the conflict of interest policy and financial statements are available | |
| upon written request to the Society. | |
| Form 990, Part XI, Line 9:: Other Changes in net assets or fund balances: Changes in Post | |
| Retirement Benefits not yet recognized in operations \$-177,336; change in market value of swap | |
| agreements \$202,002; rounding and other \$-76. | ***** |