### **Return of Organization Exempt From Income Tax**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

A	For the	2022 calend	dar year, or tax year beginning	01/01/2022 an	d ending	12/31/2	2022			
В	Check if	applicable:	C Name of organization DETROI	T ZOOLOGICAL SOCIETY			D Emplo	oyer identification number		
П	Address	change	Doing business as					38-6027356		
$\overline{\Box}$	Name ch	ĭ i	Number and street (or P.O. box i	f mail is not delivered to street address	s) Ro	oom/suite	E Telephone number			
$\overline{\Box}$	Initial ret	ĭ	8450 W 10 Mile Road				248-541-5717			
$\overline{\Box}$		urn/terminated	City or town, state or province, or							
П	Amende		Royal Oak, MI 48067	,,, , , , , , , , , , , , , , , , ,			<b>G</b> Gross	receipts \$ 74,668,094		
$\exists$		ion pending	F Name and address of principal of	ficer: Dr Hayley W Murphy		H(a) Is this a gro				
ш	πρρίισαι	ion pending	8450 W 10 Mile Rd, Royal Oa			H(b) Are all su				
$\overline{}$	Tax-exe	mpt status:	✓ 501(c)(3) 501(c) (	) (insert no.) 4947(a)(1)	or 527	<del></del> ``		ee instructions.		
J		·	w.detroitzoo.org/	) (insert no.) [ 10 in (a)(1)	01 027	H(c) Group ex				
<u>к</u>	_	organization: ✓		ation Other L	Year of format			of legal domicile: MI		
_	art I	Summa		auon Dunei	Teal of forma	1924	W State	or legal dornione.  VII		
	1		-	cion or most significant activiti	oc: The mid	noion of the Do	troit 70	placial Capiety (D7C)		
ø.	'			sion or most significant activiti						
ü				veen people, animals and the na						
rna				rld where animals and nature ar						
ove	2		<u> </u>	liscontinued its operations or o		more man 25	1 . 1			
Ğ	3		•	erning body (Part VI, line 1a).			3	47		
S	4			rs of the governing body (Part			4	47		
/ŧį	5			n calendar year 2022 (Part V, I	line 2a) .		5	495		
Activities & Governance	6		per of volunteers (estimate if				6	1,493		
⋖	7a			Part VIII, column (C), line 12			7a	0		
	b	Net unrelat	ted business taxable income	from Form 990-T, Part I, line	<u> 11</u>		7b	0		
					Prior Year		Current Year			
e	8		ons and grants (Part VIII, line		25,181	26,017,345				
Revenue	9	-	ervice revenue (Part VIII, line			69,671	24,768,279			
Rev	10		t income (Part VIII, column (A			92,043	1,823,167			
_	11		nue (Part VIII, column (A), lin	4,2	65,521	2,532,976				
	12			must equal Part VIII, column (A)	, line 12)	55,1	52,416	55,141,767		
	13		l similar amounts paid (Part			5	86,405	736,959		
	14		aid to or for members (Part I	and the second of the second o	-		0	0		
es	15			benefits (Part IX, column (A), lin	nes 5–10)	18,2	37,931	22,720,784		
Expenses	16a		al fundraising fees (Part IX, c				0	0		
ď	b		aising expenses (Part IX, co		,585,296					
ш	17		enses (Part IX, column (A), Iir	· · · · · · · · · · · · · · · · · · ·		18,1	21,513	25,909,403		
	18	Total expe	nses. Add <mark>lines 13–</mark> 17 (must	equal Part IX, column (A), line	25) .	36,9	45,849	49,367,146		
	19	Revenue le	ess expenses. Subtract line	18 from line 12		18,2	06,567	5,774,621		
or					Į.	Beginning of Curre	ent Year	End of Year		
Net Assets or Fund Balances	20	Total asset	ts (Part X, line 16)			71,0	19,757	67,128,670		
t As	21	Total liabili	ties (Part X, line 26)			8,7	11,643	9,031,374		
울	22	Net assets	or fund balances. Subtract	line 21 from line 20		62,3	08,114	58,097,296		
P	art II	Signatu	re Block							
				return, including accompanying sched				my knowledge and belief, it is		
	ie, correc	t, and complete	e. Declaration of preparer (other than	n officer) is based on all information of	wriich prepare	r nas any knowied	ge.			
e:		01 1 1								
Sig	_	Signature of				Date				
He	ere		numaker, Chief Financial Offic	er						
		1 71	name and title							
Pa	nid	Print/Type	preparer's name	Preparer's signature	Da	ate	Check [	if PTIN		
	epare	r					self-emp	ployed		
	se Onl	Lives's see	ne			Firm's	EIN			
		Firm's add				Phone	no.			
Ma	v the IF	RS discuss t	this return with the preparer	shown above? See instruction	ns			. Yes No		

Form 990 (2022)

Part	Statement of Program Service Accomplishments  Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission:
	The mission of the Detroit Zoological Society (DZS) is to create meaningful connections between people, animals and the natural
	world so all can thrive. The vision of the DZS is to be a force for positive change in a world where animals and nature are valued,
	understood and protected by all people. The DZS operates the Detroit Zoo and Belle Isle Nature Center.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program
	services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by
-	expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,
	the total expenses, and revenue, if any, for each program service reported.
4a	(Code: ) (Expenses \$ 11,235,190 including grants of \$ 736,959 ) (Revenue \$ 21,818 )
	ANIMAL CARE, WELFARE AND CONSERVATION: The Detroit Zoological Society demonstrates leadership in animal care,
	wildlife conservation and animal welfare. The Detroit Zoo and Belle Isle Nature Center had 2,118 individual animals representing
	222 species in its care as of December 31, 2022. The Detroit Zoological Society is a leader in species conservation through its
	local, national and international field conservation programs, its support of partners' field conservation work and captive breeding
	of threatened and endangered species at the Detroit Zoo and Belle Isle Nature Center. The Detroit Zoological Society's Center for
	Zoo and Aquarium Animal Welfare and Ethics is a resource center for captive animal welfare knowledge, research and best
	practices; a convener and forum for exotic animal welfare science, practice and policy discussions; and a center conducting
	research and training, and recognizing advances in exotic animal welfare.
4h	(Code: ) (Expenses \$ 3,372,385 including grants of \$ ) (Revenue \$ 345,121 )
4b	(Code: ) (Expenses \$ 3,372,385 including grants of \$ ) (Revenue \$ 345,121)  EDUCATION: The Detroit Zoological Society continues to provide a broad audience with outstanding and unique educational
	opportunities that lead to the appreciation and stewardship of nature. Humane education, environmental literacy, responsible
	resource management, conservation, science literacy and stewardship are fundamental components of education programming.
	Programs utilize a variety of instructional strategies - including inquiry-based learning, storytelling, interactive technology and
	citizen science - to meet the various learning styles of individuals within the community. Regional school district partnerships
	enhance humane education and life science experiences in the classroom through onsite programs, teacher training and
	curriculum support. The DZS education team also creates unique and engaging educational content for a variety of audiences
	online.
4 -	(Oadar ) (European A construction whether the ) (December A construction)
4c	(Code:) (Expenses \$ 23,874,373 including grants of \$) (Revenue \$ 24,475,975)
	GUEST ENGAGEMENT: The Detroit Zoological Society continues to inspire the community with engaging, meaningful and
	memorable experiences. Significant animal habitats/facilities include the Arctic Ring of Life habitat for polar bears and sea otters,
	the Devereaux Tiger Forest, the Great Apes of Harambee, the Polk Penguin Conservation Center, the Cotton Family Wolf
	Wilderness, the Australian Outback Adventure, and the National Amphibian Conservation Center. The Detroit Zoo welcomed 1.25
	million visitors in 2022. In addition to animal experiences, other attractions at the Zoo include the 4-D Theater, Giraffe Encounter,
	Tauber Family Railroad, Science On a Sphere, and the Carousel. Visitors can also participate in Zoo-sponsored events including
	Greenfest, Sunset at the Zoo, Run Wild, Zoo Boo and Wild Lights. Attendance returned to 95% of our pre-pandemic average in
	2022, and the DZS continued to provide a safe and secure experience to all guests.
4d	Other program services (Describe on Schedule O.) See Schedule O, Statement 1
	(Expenses \$ 2,512,563 including grants of \$ 0 ) (Revenue \$ 2,089,554 )
4e	Total program service expenses 40,994,511

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Part	10 (2022)  Checklist of Required Schedules			Page
rait	Checklist of hequired Schedules		Yes	No
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	<b>✓</b>	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	<b>V</b>	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," complete Schedule C, Part I	3	·	<b>✓</b>
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II</i>	4	1	
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		<b>✓</b>
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		<b>✓</b>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If</i> "Yes," <i>complete Schedule D, Part II</i>	7		1
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," complete Schedule D, Part III	8	1	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	1	
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	1	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X, as applicable.			
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	/	
b	Did the organization report an amount for investments—other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		<b>✓</b>
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		<b>✓</b>
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		<b>✓</b>
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		✓
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	11f	1	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	1	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<b>✓</b>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		✓
14a b	Did the organization maintain an office, employees, or agents outside of the United States? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking,	14a		✓
D	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	1	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>	15	1	
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		<b>✓</b>
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		· ✓
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	18	1	•

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? 

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . . . . . .

If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

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 . . . . .

19

20a

20b

Part I	V Checklist of Required Schedules (continued)		-	
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		1
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23	✓	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	04-		
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24a 24b		<b>√</b>
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	<b>Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.</b> Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		1
	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		<b>√</b>
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II</i>	26		<b>√</b>
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		<b>√</b>
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions):			Ť
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		1
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		<b>√</b>
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If "Yes," complete Schedule L, Part IV	28c		✓
29 30	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i> Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	29	✓	· ·
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		<b>√</b>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III,			
	or IV, and Part V, line 1	34		<b>√</b>
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		✓
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		1
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		1
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? <b>Note:</b> All Form 990 filers are required to complete Schedule O	38	<b>✓</b>	
Part '	Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V			
	· · · · · · · · · · · · · · · · · · ·		Yes	No
b	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
C	reportable gaming (gambling) with backup withholding rules for reportable payments to vendors and	10	/	

Part	V Statements Regarding Other IRS Filings and Tax Compliance (continued)		Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return 495			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b	✓	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		<b>✓</b>
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		
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		✓
b	If "Yes," enter the name of the foreign country			
_	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		<b>√</b>
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		✓
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 organization solicit any contributions that were not tax deductible as charitable contributions?	0-		,
h	If "Yes," did the organization include with every solicitation an express statement that such contributions or	6a		<b>✓</b>
b	gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			
	and services provided to the payor?	7a	<b>√</b>	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	✓	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	_		,
اء		7c		<b>-</b>
d	If "Yes," indicate the number of Forms 8282 filed during the year	7.0		/
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7e 7f		<b>✓</b>
f	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
g h	If the organization received a contribution of qualified intellectual property, did the organization file a Form 1098-C?	79 7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	/11		
Ū	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
11	Section 501(c)(12) organizations. Enter:			
а	Gross income from members or shareholders			
b	Gross income from other sources. (Do not net amounts due or paid to other sources			
	against amounts due or received from them.)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	<b>Note:</b> See the instructions for additional information the organization must report on Schedule O.			
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
_				
с 14а	Enter the amount of reserves on hand	14a		<b>√</b>
14a b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14a		<b>V</b>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	טדו		
	excess parachute payment(s) during the year?	15		1
	If "Yes," see the instructions and file Form 4720, Schedule N.	13		•
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		<b>√</b>
	If "Yes," complete Form 4720, Schedule O.	.5		•
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any activities			
	that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17		
	If "Yes," complete Form 6069.			

Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a

Part VI

response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Section A. Governing Body and Management No Yes 1a Enter the number of voting members of the governing body at the end of the tax year . . . 1a 47 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O. Enter the number of voting members included on line 1a, above, who are independent . 47 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with 2 Did the organization delegate control over management duties customarily performed by or under the direct 3 supervision of officers, directors, trustees, or key employees to a management company or other person? . 3 4 4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? 5 Did the organization become aware during the year of a significant diversion of the organization's assets? . 5 6 6 1 Did the organization have members, stockholders, or other persons who had the power to elect or appoint . . . . 7a Are any governance decisions of the organization reserved to (or subject to approval by) members, 7b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: The governing body? . . . . . . . . . . . . . . . 8a Each committee with authority to act on behalf of the governing body? 8b Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O . . . . . Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.) Yes No 10a Did the organization have local chapters, branches, or affiliates? 10a 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 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form? 11a **b** Describe on Schedule O the process, if any, used by the organization to review this Form 990. **12a** Did the organization have a written conflict of interest policy? If "No," go to line 13 12a Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? 12b Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," 12c 13 Did the organization have a written whistleblower policy? . . . . . . . . . . . . 13 Did the organization have a written document retention and destruction policy? 14 14 15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? The organization's CEO, Executive Director, or top management official . . . 15a 15b If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions. 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement 16a b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed MI 17 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c) 18 (3)s only) available for public inspection. Indicate how you made these available. Check all that apply. Other (explain on Schedule O) ✓ Own website Another's website ✓ Upon request Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, 19 and financial statements available to the public during the tax year. 20 State the name, address, and telephone number of the person who possesses the organization's books and records. Robert Schumaker Chief Financial Officer, Detroit Zoological Society, (248)541-5717

### Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

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

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

**1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization no				atic	n c	ompe	ensa	ted any current	officer, director,	or trustee.
(A) Name and title	(B)  Average hours per week (list any hours for related organizations below dotted line)	box, office Individua	(do not chec box, unless reofficer and a linstitutional trustee or clirector			is both	n an	Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/ 1099-MISC/ 1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
	,	Φ.	tee			sated				
Hayley Murphy	50.00	4								
Executive Director/CEO	0.00			1				438,725	0	40,139
Scott F Carter	50.00		J							
Chief Life Science Officer	0.00	5			✓			442,737	0	19,804
Jane Alessandrini	50.00									
VP of Development	0.00				✓			298,012	0	39,373
Diane Miller	50.00									
VP of Education	0.00				✓			261,542	0	20,360
Gerry VanAcker	50.00									
COO - Term Sept 2022	0.00				✓			236,588	0	26,984
Robert Schumaker	50.00									
Chief Financial Officer	0.00			<b>✓</b>				215,733	0	36,103
Ron L Kagan	50.00						,			
Executive Director/CEO - Term Dec 2021	0.00						<b>✓</b>	250,586	0	0
Sabarras George	50.00				١,				_	
VP of Operations/COO	0.00				✓			172,132	0	33,701
Randi Hamilton	40.00					,				
VP of Guest Services, Communications, and Mark						<b>✓</b>		144,326	0	33,338
Richard K Martin  Director of Individual Philanthropy	40.00 0.00					1		144.014	0	27.005
	40.00					<b>V</b>		144,814	0	27,895
Ann Duncan Associate VP of Life Sciences	0.00					1		137,476	0	33,067
Toria Bradley	40.00					•		137,470	0	33,007
VP of Human Resources	0.00					✓		142,590	0	16,456
DeAndrea Matthews	40.00					<b>-</b>		142,370		10,430
VP of Diversity and Community Engagement	0.00					1		126,914	0	29,901
Anthony F Earley Jr	4.00					<u> </u>		120,714		27,701
Chairman	0.00	1		1				0	0	0

				(	C)					
(A)	(B)			Pos	sition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable	Reportable compensation	Estimated amount
	hours					or/trust		compensation		of other
	per week (list any	Ind or o	Ins	Officer	Ke.	Hig	For	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	Individual to	titut	icer	y em	ploy	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	Individual trustee or director	Institutional trustee		Key employee	ee e		1099-NEC)	1099-NEC)	related organizations
	below	ruste	tru		/ee	nper			4	
	dotted line)	9	stee			Highest compensated employee				
Stephen R Polk	2.00					ğ		<u> </u>		
Vice Chair	0.00	1		1					0	0
Robert G Riney	2.00	<b>V</b>		•				0	0	0
Vice Chair	0.00	1		1				0	0	0
John G Sznewajs	2.00	,				1				
Treasurer	0.00	✓		1	_^	S		0	0	0
Lloyd A Semple	1.00									
Chair Emeritus	0.00	✓ <						0	0	0
William Conway	1.00									
Executive Director	0.00							0	0	0
Cynthia Ford	1.00	5								
Executive Director	0.00	<b>√</b>						0	0	0
Alan Kalter	1.00									
Executive Director	0.00	✓						0	0	0
Bonnie Larson	1.00									
Executive Director	0.00	<b>✓</b>						0	0	0
Tom Lewand	1.00									
Executive Director	0.00	<b>✓</b>						0	0	0
Denise J Lewis	1.00									
Executive Director	0.00	<b>✓</b>						0	0	0
Shawn Patterson	1.00	,								
Executive Director	0.00	<b>√</b>						0	0	0
Richard B Platt	1.00	,								
Executive Director	0.00	<b>✓</b>						0	0	0
Sean Werdlow	1.00	1								
Executive Director - Term June 2022	0.00	<b>V</b>		-		-		0	0	0
Larry Wolfe	1.00 0.00	1						0	0	0
Executive Director	0.00	٧						0		1 0

				•	C)					
(A)	(B)	(40.00			sition			(D)	(E)	(F)
Name and title	Average			neck more than as person is bot				Reportable	Reportable	Estimated amount
	hours	office				or/trust	tee)	compensation from the	compensation from related	of other
	per week (list any	Individual trustee or director	Ins	Officer	₹ e	Hig em	Former		organizations (W-2/	compensation from the
	hours for	ivid	l titut	icer	y en	ploy	me.	1099-MISC/	1099-MISC/	organization and
	related organizations	ual t	iona		Key employee	t co	~	1099-NEC)	1099-NEC)	related organizations
	below	trus	tr		yee	mpe			4	
	dotted line)	ee	Institutional trustee			Highest compensated employee			)	
			Φ			ted		-07		
Ismael Ahmed	1.00									
Director	0.00	✓						0	0	0
N Charles Anderson	1.00						0			
Director	0.00	✓					C	0	0	0
Alisha Bell	1.00						•			
Director	0.00	✓				J		0	0	0
Tonya Berry	1.00					)				
Director - Add June 2022	0.00	✓ <						0	0	0
Denise Brooks-Williams	1.00									
Director - Add June 2022	0.00		J					0	0	0
Thomas C Buhl	1.00	7								
Director	0.00	<b>√</b>						0	0	0
Clark Bunting	1.00									
Director	0.00	✓						0	0	0
Beth Chappell	1.00									
Director	0.00	✓						0	0	0
Matthew P Cullen	1.00									
Director	0.00	✓						0	0	0
Marvin Daitch	1.00									
Director	0.00	✓						0	0	0
Beth Daly	1.00									
Director	0.00	✓						0	0	0
Mark Douglas	1.00									
Director - Add June 2022	0.00	✓						0	0	0
David E Duprey	1.00									
Director	0.00	✓						0	0	0
Charles Ellis	1.00									
Director	0.00	✓						0	0	0

									1	
				•	C)					
(A)	(B)	(-1	-4 -1		ition	. 41		(D)	(E)	(F)
Name and title	Average				eck more than on the sperson is both			Reportable	Reportable	Estimated amount
	hours	office				or/trus		compensation from the	compensation from related	of other
	per week (list any	Individual trustee or director	Ins	Officer	₹ e	em em	For		organizations (W-2/	compensation from the
	hours for	ivid	l tit	icer	y en	ploy	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	ual t	ions		Key employee	t co	~	1099-NEC)	1099-NEC)	related organizations
	below	trus	T T		yee	mpe			4	
	dotted line)	lee	Institutional trustee			Highest compensated employee			)	
			W			ted		-07		
John Erb	1.00									
Director	0.00	✓						0	0	0
Kristy Fercho	1.00						0			
Director - Term January 2022	0.00	✓					C	0	0	0
Jennifer Grieco	1.00									
Director	0.00	✓				J		0	0	0
Allan D Gilmour	1.00					)				
Director - Term June 2022	0.00	✓ <						0	0	0
Terry S Harvill	1.00									
Director	0.00		J					0	0	0
Rejji Hayes	1.00	7								
Director - Term March 2022	0.00	√						0	0	0
Paul Huxley	1.00									
Director - Term April 2022	0.00	✓						0	0	0
Hassan Jaber	1.00									
Director	0.00	✓						0	0	0
Alan Kaufman	1.00									
Director	0.00	✓						0	0	0
Brandon Kolo	1.00									
Director	0.00	✓						0	0	0
Dawn Lee-Cotton	1.00									
Director - Term June 2022	0.00	✓						0	0	0
Lisa Lis	1.00									
Director	0.00	✓						0	0	0
Isaiah McKinnon	1.00									
Director	0.00	✓						0	0	0
Candice Miller	1.00									
Director - Term March 2022	0.00	✓						0	0	0

				(	C)					
(A)	(B)				ition			(D)	(E)	(F)
Name and title	Average					e than o is both		Reportable compensation	Reportable	Estimated amount
	hours					or/trust			compensation	of other
	per week (list any	or or	Ins	Q.	€	Hig	Fo	from the organization (W-2/	from related organizations (W-2/	compensation from the
	hours for	Individual trustee or director	Institutional trustee	Officer	Key employee	ghes	Former	1099-MISC/	1099-MISC/	organization and
	related organizations	ual t	iona		oldt	t cor	,	1099-NEC)	1099-NEC)	related organizations
	below	rust	tru		yee	npe			4	
	dotted line)	ee	stee			Highest compensated employee			•	
Marila Marraya Co	1.00					ed.		~ O >		
Mario Morrow Sr	1.00	1								
Director - Add June 2022	0.00	<b>V</b>						0	0	0
Virinder Moudgil	1.00 0.00	1						0	0	0
Director - Term April 2022 Stuart Robbins	1.00	V				1		0	0	0
Director	0.00	1						0	0	0
Gino Roncelli	1.00	<u> </u>						0		
Director - Add June 2022	0.00	<b>✓</b> •						0	0	0
James Rosenthal	1.00									
Director	0.00		U					0	0	0
Rick Ruffner	1.00	5								
Director	0.00	<b>√</b>						0	0	0
Anmar Sarafa	1.00									
Director - Term June 2022	0.00	✓						0	0	0
James Sawyer	1.00									
Director	0.00	✓						0	0	0
Shirley R Stancato	1.00									
Director	0.00	<b>✓</b>						0	0	0
Andre Spivey	1.00							_	_	_
Director - Term February 2022	0.00	<b>√</b>						0	0	0
James Tate	1.00	,								
Director	0.00	<b>✓</b>						0	0	0
Joel D Tauber	1.00	1						0	0	0
Director  Marianne Vidershain	1.00	<b>V</b>						0	0	0
Director - Add June 2022	0.00	1						0	0	0
Rachel Vitti	1.00	•						0	0	0
Director	0.00	1						0	0	0
Director .	0.00	_ •	_	_	_		_			<u> </u>

Part	VII Section A. Officers, Directors, 7	Γrustees, I	Key I	Emp	olo	yee	s, an	d F	lighest Compe	nsated Empl	oyees (continu	ed)
					(0	C)						
	(A)	(B)				ition			(D)	(E)	(F)	
	Name and title	Average	١,				than c is both		Reportable	Reportable	Estimated amou	nt
		hours					or/trust		compensation	compensation	of other	
		per week (list any	or Inc	Ins	으	8	en Hi	Fo	from the organization (W-2/	from related organizations (W-2	compensation from the	
		hours for	Individual to	Institutional	Officer	y er	ghes	Former	1099-MISC/	1099-MISC/	organization an	d
		related	lual	tion	`	nplc	st cc yee	~	1099-NEC)	1099-NEC)	related organizati	ons
		organizations below	Individual trustee or director	al tr		Key employee	Highest compensated employee					
		dotted line)	tee	trustee			ensa					
				ď			ated					
Gail L	Warden	1.00										
	or - Term June 2022	0.00	1						0	(	,	0
2000		0.00	-									<u> </u>
			1									
			1									
									1			
			-									
									0			—
			-									
												—
			-									
												—
			-									
							-					—
			-									
			1									
1b	Subtotal								3,012,175	(	357,	121
С	Total from continuation sheets to Part		n A									
d	Total (add lines 1b and 1c)								3,012,175	(		
2	Total number of individuals (including		limite	d t	o t	hos	e list	ed	above) who re	eceived more	than \$100,000	of
	reportable compensation from the organi	zation							22			
												No_
3	Did the organization list any former of	officer, dire	ector,	tru	ste	e, k	ey er				d	
	employee on line 1a? If "Yes," complete										3 ✓	
4	For any individual listed on line 1a, is the											
	organization and related organizations	greater that	an \$1	150,	000	)? <i>I</i> :	f "Yes	s, "	complete Sched	dule J for suc	h	
	individual										4 🗸	
5	Did any person listed on line 1a receive of	r accrue co	ompe	nsat	ion	fror	m any	un	related organizat	tion or individua		
	for services rendered to the organization	? If "Yes," c	ompl	ete	Sch	nedu	ıle J f	or s	such person .		5	<b>√</b>
Section	on B. Independent Contractors										1 1	
1	Complete this table for your five high	nest compe	ensate	ed i	inde	eper	ndent	СО	ontractors that r	eceived more	than \$100,000	of
	compensation from the organization. Rep											
	(A)	· ·							(R)		(C)	

To the calculation of the calcul	your origining with or within the	garnzation o tax your
(A) Name and business address	(B) Description of services	(C) Compensation
The Albert M Higley Co LLC, 719 Griswold Suite 280, Detroit, MI 48226	Construction Management	1,905,609
Midwest Commercial Construction LLC, 115 E Capac Road, Imlay City, MI 48444	Construction Management	1,292,422
Conti Corporation, 6417 Center Drive, Sterling Heights, MI 48312	Facilities Maintenance	1,054,457
Anton's Painting & Maintenance Co Inc, 10049 Applegate, Brighton, MI 48114	Facilities Maintenance	284,869
Grays Outdoor Services, 30850 Brown St, Garden City, MI 48135	Facilities Maintenance	269,278
2 Total number of independent contractors (including but not limited to	those listed above) who	
received more than \$100,000 of compensation from the organization	10	

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### Part VIII Statement of Revenue

		Check if Schedule	Осо	ntains a re	spon	se or note to ar	ny line in this Pa	rt VIII		
							(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
က် လ	1a	Federated campaig	ns .		1a	0				
Contributions, Gifts, Grants, and Other Similar Amounts	b	Membership dues			1b	1,712,238				
Gr 5	С	Fundraising events			1c	508,168				
rts,	d	Related organization			1d	0				
	е	Government grants			1e	14,990,306				
ns, Sim	f		other contributions, gifts, grants,							
tio er (		and similar amounts no	ot inclu	uded above	1f	8,806,633				
g $\xi$	g	Noncash contributions included in			.,,					
d C	_	lines 1a-1f			1g	\$ 445,740				
Contributions, Gifts, Grants, and Other Similar Amounts	h	Total. Add lines 1a-	-1f .				26,017,345			
						Business Code				
e Ce	2a	Admissions				712130	10,383,479	10,383,479	0	0
Program Service Revenue	b	Membership Dues				712130	4,967,340	4,967,340	0	0
gram Ser Revenue	С	Special Events Adm				712130	4,966,846	4,966,846	0	0
E S	d	Rides & Attractions				712130	1,846,284	1,846,284	0	0
Re	е	0				710100	2,582,512	2,582,512	0	0
ر ا	f	All other program se				7.2.00	21,818	21,818	0	0
_	g	Total. Add lines 2a-					24,768,279			
	3	Investment income	(incl	uding divi	dends	s, interest, and				
		other similar amoun	nts) .				1,744,172	0	0	1,744,172
	4	Income from investr	ment o	of tax-exem	npt bo	and proceeds	0	0	0	0
	5	Davidia			•	•	0	0	0	0
		,		(i) Rea		(ii) Personal	5			
	6a	Gross rents	6a	46	6,020	0	)			
	b	Less: rental expenses	6b		0	0				
	С	Rental income or (loss)	6с	46	6,020	0				
	d	Net rental income o				1,60	466,020	0	0	466,020
	7a	Gross amount from		(i) Securit	ties	(ii) Other		-		
		sales of assets								
		other than inventory	7a	19,11	5,869	0				
Φ	b	Less: cost or other basis			U					
n		and sales expenses .	7b	19,03	6.874	0				
Revenue	С	Gain or (loss)	7c		8,995	0				
		Net gain or (loss)					78,995	0	0	78,995
Other		Gross income from	m fu							
ō		events (not including		508,168						
		of contributions rep		d on line	-					
		1c). See Part IV, line	e 18		8a	392,220				
	b	Less: direct expens	es .		8b	489,453				
	С	Net income or (loss)	) from	fundraisin	g eve	nts	-97,233		0	-97,233
	9a	Gross income f								
		activities. See Part I	IV, lin	e 19 .	9a	0				
	b	Less: direct expens	es .		9b	0				
	С	Net income or (loss)	) from	gaming a	ctivitie	es	0	0	0	0
	10a	Gross sales of ir	nvent	ory, less						
		returns and allowan	ices		10a	0				
	b	Less: cost of goods	sold		10b	0				
	С	Net income or (loss)			vento	ory	0	0	0	0
<u>s</u>						Business Code				
e e	11a	PPP Loan Forgivene	ess			712130	2,000,000	2,000,000	0	0
scellaneo Revenue	b	Gift Card Write Off				712130	74,635	74,635	0	0
	С	Refunds/Rebates				712130	16,785	16,785	0	0
Miscellaneous Revenue	d	All other revenue					72,769	72,769	0	0
Σ	е	Total. Add lines 11a	a-11d	<u>I.</u>		<u> </u>	2,164,189			
	12	Total revenue. See					55,141,767	26,932,468	0	2,191,954

### 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

	Check if Schedule O contains a response	e or note to any line	in this Part IX .		
Do no	t include amounts reported on lines 6b, 7b,	(A)	(B)	(C)	(D)
8b, 9b	, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations			-	
	and domestic governments. See Part IV, line 21 .	528,006	528,006		
2	Grants and other assistance to domestic individuals. See Part IV, line 22	0	0		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
	·	208,953	208,953		
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	2,532,521	1,213,850	981,286	337,385
6	Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0	0	0	0
7	Other salaries and wages	15,690,616	13,430,863	1,451,077	808,676
8	Pension plan accruals and contributions (include	10/010/010	•		333/213
	section 401(k) and 403(b) employer contributions)	495.429	424,323	41,762	29,344
9	Other employee benefits	2,524,130	2,272,349	150,693	101,088
10	Payroll taxes	1,478,088	1,265,226	141,765	71,097
11	Fees for services (nonemployees):	1,470,000	1,203,220	141,700	71,097
			401		0
a	Management	0	0	0	0
b	Legal	213,061	22,908	190,153	0
C	Accounting	175,429	0	175,429	0
d	Lobbying	84,000	84,000	0	0
е	Professional fundraising services. See Part IV, line 17	0			0
f	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column	0	0	0	0
g	(A), amount, list line 11g expenses on Schedule O.)	. 6			
		16,186,967	14,257,205	1,829,183	100,579
12	Advertising and promotion	785,247	775,174	650	9,423
13	Office expenses	375,461	202,510	160,134	12,817
14	Information technology	789,506	114,050	636,396	39,060
15	Royalties	0	0	0	0
16	Occupancy	4,088,790	3,977,266	100,707	10,817
17 18	Travel	72,370	67,984	3,868	518
10	for any federal, state, or local public officials				
40		0	0	0	0
19	Conferences, conventions, and meetings .	592,980	282,233	293,078	17,669
20	Interest	2,867	0	2,867	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization .	330,463	330,463	0	0
23	Insurance	613,686	0	613,686	0
24	Other expenses. Itemize expenses not covered				
	above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column				
	(A), amount, list line 24e expenses on Schedule O.)				
a	Animal Care	1,144,233	1,144,233	0	0
b	Wildlife Conservation	214,829	214,829	0	0
C	Exhibits	100,428	100,428	0	0
d	Special Events	139,086	77,658	14,605	46,823
e	All other expenses	0	0	0	0
25	Total functional expenses. Add lines 1 through 24e	49,367,146	40,994,511	6,787,339	1,585,296
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				
					Form <b>990</b> (2022)

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this Pa	artX		📙
			(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing	90,880	1	78,999
	2	Savings and temporary cash investments	18,565,106	2	16,196,306
	3	Pledges and grants receivable, net	2,983,104	3	3,482,568
	4	Accounts receivable, net	3,188,038	4	3,486,362
	5	Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons	0	5	0
	6	Loans and other receivables from other disqualified persons (as defined	0	Ŭ	0
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)	0	6	0
S	7	Notes and loans receivable, net	0	7	0
Assets	8	Inventories for sale or use	0	8	0
As	9	Prepaid expenses and deferred charges	799,258	9	2,229,156
•	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D 10a 6,471,829			2,227,130
	b	Less: accumulated depreciation <b>10b</b> 5,141,110	1,049,628	10c	1,330,719
	11	Investments—publicly traded securities	44,343,743	11	40,324,560
	12	Investments—other securities. See Part IV, line 11	0	12	0
	13	Investments—program-related. See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 33)	71,019,757	16	67,128,670
	17	Accounts payable and accrued expenses	3,698,134	17	5,177,957
	18	Grants payable	0	18	0
	19	Deferred revenue	2,362,895	19	3,146,367
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	150,614	21	207,050
Liabilities	22	Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons			
iak			0	22	0
_	23	Secured mortgages and notes payable to unrelated third parties		23	
	24 25	Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17–24). Complete Part X of Schedule D	2,500,000	24	500,000
			0	25	0
	26	Total liabilities. Add lines 17 through 25	8,711,643	26	9,031,374
nces		Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33.			
ala	27	Net assets without donor restrictions	43,308,249	27	41,542,379
ñ	28	Net assets with donor restrictions	18,999,865	28	16,554,917
Net Assets or Fund Balances		Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33.			
ō	29	Capital stock or trust principal, or current funds		29	
ets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
SS	31	Retained earnings, endowment, accumulated income, or other funds.		31	
∍t ⊅	32	Total net assets or fund balances	62,308,114	32	58,097,296
ž	33	Total liabilities and net assets/fund balances	71,019,757	33	67,128,670

Part	Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI						
1	( ), /	1		55,14	1,767		
2		2		49,36	7,146		
3		3		5,77	4,621		
4		4		62,30	8,114		
5	5 Net unrealized gains (losses) on investments						
6		6			0		
7		7			0		
8		8			0		
9		9			0		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line						
		10		58,09	7,296		
Part	XII Financial Statements and Reporting						
	Check if Schedule O contains a response or note to any line in this Part XII						
				Yes	No		
1	Accounting method used to prepare the Form 990: Cash Accrual Other	1-!					
	If the organization changed its method of accounting from a prior year or checked "Other," exp Schedule O.	nain (	on				
_			_				
2a				<b>√</b>			
	If "Yes," check a box below to indicate whether the financial statements for the year were compreviewed on a separate basis, consolidated basis, or both:	oilea	or				
	✓ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis			,			
b	Were the organization's financial statements audited by an independent accountant?		2b	<b>√</b>			
	If "Yes," check a box below to indicate whether the financial statements for the year were audite separate basis, consolidated basis, or both:	ea on	а				
•	Separate basis Consolidated basis Both consolidated and separate basis	ciabt	of				
C	<b>c</b> If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? .						
	If the organization changed either its oversight process or selection process during the tax year, exp			V			
	Schedule O.	Jiaiii					
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth	h in t	he				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		1		
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not under						
	required audit or audits, explain why on Schedule O and describe any steps taken to undergo such au	dits .	3b				

Form **990** (2022)

## SCHEDULE A (Form 990)

### **Public Charity Status and Public Support**

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Employer identification number

DETI	ROIT ZO	OOLOGICAL SOCIETY						27356
Par	tΙ	Reason for Public Cha	rity Status. (All	l organizations mus	t comple	ete this p	oart.) See instruction	ons.
The o	•	zation is not a private founda		,		-	,	
1		church, convention of churc					0(b)(1)(A)(i).	
2		school described in <b>section</b>		,		•		
3		hospital or a cooperative ho	,	,			,, ,, ,	
4		medical research organization		onjunction with a hosp	oital desc	ribed in <b>s</b>	section 170(b)(1)(A)	(iii). Enter the
_		espital's name, city, and stat						
5	se	n organization operated for ection 170(b)(1)(A)(iv). (Com	plete Part II.)			·		al unit described in
6 7	☐ An	federal, state, or local gover n organization that normally escribed in <b>section 170(b)(1</b> )	receives a subs	tantial part of its sup				n the general public
8	□ A c	community trust described i	n <b>section 170(b</b> )	(1)(A)(vi). (Complete I	Part II.)			
9	or un	n agricultural research organ university or a non-land-gra iiversity:	ant college of agr	iculture (see instructio	ons). Ente	r the nan	ne, city, and state of	the college or
10	red sup ac	n organization that normally ceipts from activities related apport from gross investmen equired by the organization a	I to its exempt fu t income and un after June 30, 197	nctions, subject to ce related business taxal 75. See <b>section 509(</b> a	rtain exce ole incom <b>)(2)</b> . (Cor	eptions; a ne (less se nplete Pa	and (2) no more than ection 511 tax) from art III.)	33 <sup>1</sup> /3% of its
11		n organization organized and	•	<u> </u>			` '` '	
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 <b>section 509(a)(1)</b> or <b>section 509(a)(2)</b> . See <b>section 509(a)(3)</b> . Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.							
а	<b>Type I.</b> 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. <b>You must complete Part IV, Sections A and B.</b>							
b		<b>Type II.</b> A supporting orga control or management of organization(s). <b>You must</b>	the supporting o	rganization vested in	the same			
С		Type III functionally integits supported organization						ally integrated with,
d	<b>Type III non-functionally integrated.</b> A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). <b>You must complete Part IV, Sections A and D, and Part V.</b>							
е		Check this box if the organ functionally integrated, or	Type III non-func	tionally integrated sup				e II, Type III
f		er the number of supported	•					
g		vide the following informatio	n about the supp	orted organization(s).				
	(i) Nam	ne of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	listed in you	rganization ur governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
					Yes	No		
(A)								
(B)								
(C)								
(D)								
(E)								
							ļ	

Schedule A (Form 990) 2022 Page 2 Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

Part II

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (or fiscal year beginning in) **(b)** 2019 (c) 2020 (d) 2021 (a) 2018 **(e)** 2022 (f) Total Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . The value of services or facilities furnished by a governmental unit to the organization without charge . . . . **Total.** Add lines 1 through 3 4 5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f) . . . . **Public support.** Subtract line 5 from line 4 Section B. Total Support Calendar year (or fiscal year beginning in) (a) 2018 **(b)** 2019 (c) 2020 (d) 2021 (e) 2022 (f) Total 7 Amounts from line 4 . . . . . . 8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . . . . Net income from unrelated business 9 activities, whether or not the business is regularly carried on . . . . . . 10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . . . Total support. Add lines 7 through 10 11 Gross receipts from related activities, etc. (see instructions) . . . . . . . . . . . . . . . . . . 12 13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) Section C. Computation of Public Support Percentage 14 Public support percentage for 2022 (line 6, column (f), divided by line 11, column (f)) . . . . . % Public support percentage from 2021 Schedule A, Part II, line 14 . . . . . . . . . . . . . . . 15 331/3% support test - 2022. If the organization did not check the box on line 13, and line 14 is 331/3% or more, check this 331/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 331/3% or more, check 17a 10%-facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see 18 

Schedule A (Form 990) 2022 Page **3** 

#### 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.)

Secti	on A. Public Support										
Calen	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total				
1	Gifts, grants, contributions, and membership fees										
	received. (Do not include any "unusual grants.")	14,372,257	15,591,225	9,095,325	19,413,924	16,247,142	74,719,873				
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	18,601,760	16,733,449	6,588,433	19,201,001	22,415,652	83,540,295				
3	Gross receipts from activities that are not an	.,,	, , , , , , ,	.,,	, - ,	, ,					
	unrelated trade or business under section 513	0	0	0	0	0	0				
4	Tax revenues levied for the				-	-					
-	organization's benefit and either paid to										
	or expended on its behalf	12,697,424	13,339,302	13,259,906	13,786,317	14,420,306	67,503,255				
5	The value of services or facilities	12/07/121	.0/00//002	.0,207,700	10/100/011	, .20,000	0.70007200				
•	furnished by a governmental unit to the										
	organization without charge	0	0	0	• 0	0	0				
6	<b>Total.</b> Add lines 1 through 5	45,671,441	45,663,976	28,943,664	52,401,242	53,083,100	225,763,423				
7a	Amounts included on lines 1, 2, and 3	43,071,441	40,000,770	20,743,004	32,401,242	33,003,100	223,733,123				
	received from disqualified persons .	302,500	2,927,388	357,916	1,281,023	401,582	5,270,409				
b	Amounts included on lines 2 and 3	302,300	2,727,300	337,410	1,201,023	401,302	3,270,409				
D	received from other than disqualified										
	persons that exceed the greater of \$5,000										
	or 1% of the amount on line 13 for the year	0	0		0	0	0				
С	Add lines 7a and 7b	302,500	2,927,388	357,916	1,281,023	_	5,270,409				
8	Public support. (Subtract line 7c from	302,500	2,921,388	357,910	1,281,023	401,582	5,270,409				
U	line 6.)		6				220 402 014				
Section B. Total Support											
	dar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	<b>(e)</b> 2022	(f) Total				
9	Amounts from line 6	45,671,441	45,663,976	28,943,664	52,401,242	53,083,100	225,763,423				
10a	Gross income from interest, dividends,	45,671,441	45,005,970	20,943,004	32,401,242	33,063,100	223,703,423				
iva	payments received on securities loans, rents,										
	royalties, and income from similar sources.	075 174	000 211	1 245 047	2.070.011	1 744 170	( 024 205				
h	Unrelated business taxable income (less	875,164	990,211	1,245,847	2,078,811	1,744,172	6,934,205				
b	section 511 taxes) from businesses										
	acquired after June 30, 1975		0			0	0				
•	Add lines 10a and 10b	0	000.211	1,245,847	0	0	( 024 205				
	Net income from unrelated business	875,164	990,211	1,245,847	2,078,811	1,744,172	6,934,205				
11	activities not included on line 10b, whether										
	or not the business is regularly carried on		0			2	0				
40	· · · · · · · · · · · · · · · · · · ·	0	0	0	0	0	0				
12	Other income. Do not include gain or loss from the sale of capital assets										
	(Explain in Part VI.)	570.000	F70 000	570.000	570.000	F70 000	0.050.000				
13	Total support. (Add lines 9, 10c, 11,	570,000	570,000	570,000	570,000	570,000	2,850,000				
13	and 12.)	47.447.705	47.004.407	00.750.544	55.050.050	FF 007 070					
14	First 5 years. If the Form 990 is for the	47,116,605	47,224,187	30,759,511	55,050,053	55,397,272	235,547,628				
14	organization, check this box and <b>stop he</b>	•		, iriira, iouriri,	•		. , . ,				
Socti	on C. Computation of Public Suppor						🗀				
15	Public support percentage for 2022 (line			12 column (f)		15	02 (1 0/				
			=			16	93.61 %				
16 Secti	Public support percentage from 2021 Sci on D. Computation of Investment In					10	93.83 %				
				v lino 12 poliu	mn (f))	17	2.04.06				
17	Investment income percentage for 2022 (			-		17	2.94 %				
18	Investment income percentage from 202: 331/3% support tests—2022. If the organ						2.64 %				
19a	17 is not more than 33 <sup>1</sup> / <sub>3</sub> %, check this box										
h			-	-		_	_				
b	33 <sup>1</sup> /3% support tests – 2021. If the organize line 18 is not more than 33 <sup>1</sup> /3%, check this										
00			_	=			_				
20	Private foundation. If the organization di	ia not check a	box on line 14,	, 19a, or 19b, c	meck this box	and see instruc	cuons . 🔲				

Schedule A (Form 990) 2022 Page 4

#### 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	A. All	Sup	portina	Orc	anizations
--	-----------	--------	-----	---------	-----	------------

ecti	on A. All Supporting Organizations		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in <b>Part VI</b> how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1	res	NO
2	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 <b>Part VI</b> how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> what controls the organization put in place to ensure such use.	3c		
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.	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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.	4c		
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 <b>Part VI</b> , 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).	5a		
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?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or			
	benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).	7		
8	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).	8		
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 <b>Part VI</b> .	9a		
b	Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	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 <b>Part VI</b> .	9c		
l0a	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.	10a		
b	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.)

10b

Schedule A (Form 990) 2022 Page 5 Part IV **Supporting Organizations** (continued) Yes No Has the organization accepted a gift or contribution from any of the following persons? a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization? 11a **b** A family member of a person described on line 11a above? 11b c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI. 11c Section B. Type I Supporting Organizations Yes No 1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year. 1 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? 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 Section C. Type II Supporting Organizations Yes No Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s). 1 Section D. All Type III Supporting Organizations Yes No Did the organization provide to each of its supported organizations, by the last day of the fifth month of the 1 organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided? 1 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s). 2 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard. 3 Section E. Type III Functionally Integrated Supporting Organizations Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions). The organization satisfied the Activities Test. *Complete line 2 below.* 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 (see instructions). 2 Activities Test. Answer lines 2a and 2b below. Yes No Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities. 2a b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement. 2b Parent of Supported Organizations. Answer lines 3a and 3b below. a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI. 3a

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each 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

Part	V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	jani	izations	
1	$\overline{\ \ }$ Check here if the organization satisfied the Integral Part Test as a qualifying			
	instructions. All other Type III non-functionally integrated supporting organ	nizat	ions must complete Sect	
Sect	ion A—Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B-Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		1	
а	Average monthly value of securities	1a	30)	
b	Average monthly cash balances	1b	. 07	
С	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors (explain in detail in Part VI):	)		
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C-Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
7	☐ Check here if the current year is the organization's first as a non-function	ally i	integrated Type III suppo	rting organization
	(see instructions).	-		

Schedule A (Form 990) 2022 Page 7

Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued) Part V Section D-Distributions **Current Year** Amounts paid to supported organizations to accomplish exempt purposes 1 1 2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity 2 Administrative expenses paid to accomplish exempt purposes of supported organizations 3 4 Amounts paid to acquire exempt-use assets 4 Qualified set-aside amounts (prior IRS approval required - provide details in Part VI) 5 5 Other distributions (describe in Part VI). See instructions. 6 6 7 Total annual distributions. Add lines 1 through 6. 7 Distributions to attentive supported organizations to which the organization is responsive 8 (provide details in Part VI). See instructions. 8 Distributable amount for 2022 from Section C, line 6 9 9 10 10 Line 8 amount divided by line 9 amount (ii) (iii) Section E—Distribution Allocations (see instructions) **Underdistributions Distributable Excess Distributions** Pre-2022 Amount for 2022 Distributable amount for 2022 from Section C, line 6 2 Underdistributions, if any, for years prior to 2022 (reasonable cause required - explain in Part VI). See instructions. Excess distributions carryover, if any, to 2022 a From 2017 . . . . . From 2018 **c** From 2019 **d** From 2020 . . . . . From 2021 . . . . . Total of lines 3a through 3e Applied to underdistributions of prior years Applied to 2022 distributable amount Carryover from 2017 not applied (see instructions) j Remainder. Subtract lines 3g, 3h, and 3i from line 3f. Distributions for 2022 from Section D, line 7: Applied to underdistributions of prior years Applied to 2022 distributable amount Remainder. Subtract lines 4a and 4b from line 4. Remaining underdistributions for years prior to 2022, if any. Subtract lines 3g and 4a from line 2. For result 5 greater than zero, explain in Part VI. See instructions. Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions. Excess distributions carryover to 2023. Add lines 3j and 4c. Breakdown of line 7: Excess from 2018 . . . Excess from 2019 . . . Excess from 2020 . . . Excess from 2021 . . . Excess from 2022 . . .

Schedule A (Form 990) 2022 Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.) Schedule A, Part III, Line 12 - Revenue from the City of Detroit

#### SCHEDULE C (Form 990)

#### **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

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.

Open to Public Inspection

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

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

• Section 501(c)(4), (5), or (6) organizations: Complete Part III. Name of organization **Employer identification number DETROIT ZOOLOGICAL SOCIETY** 38-6027356 Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization. 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. See instructions for definition of "political campaign activities." Political campaign activity expenditures. See instructions . . . Volunteer hours for political campaign activities. See instructions Part I-B Complete if the organization is exempt under section 501(c)(3). Enter the amount of any excise tax incurred by the organization under section 4955 2 Enter the amount of any excise tax incurred by organization managers under section 4955 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No Was a correction made? . . . . . . . . . . . . Yes No If "Yes," describe in Part IV. Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3). Enter the amount directly expended by the filing organization for section 527 exempt function 2 Enter the amount of the filing organization's funds contributed to other organizations for section 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . . . . . . . . . . . . . Did the filing organization file Form 1120-POL for this year? . Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing 5 organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV. (a) Name (b) Address (c) EIN (d) Amount paid from (e) Amount of political filing organization's contributions received and funds. If none, enter -0-. promptly and directly delivered to a separate political organization. If none, enter -0-. (1) (2)(3)(4) (5) (6)

Schedule C (Form 990) 2022 Page 2

					. 490 =
Pa	art II-A Complete if the organization section 501(h)).	is exempt under section 50	1(c)(3) and filed	d Form 5768 (ele	ection under
Α	Check if the filing organization belongs to		rt IV each affiliate	d group member's	name, address,
	EIN, expenses, and share of exces				
В	Check if the filing organization checked b	ox A and "limited control" provis	ions apply.		
	-	ring Expenditures		(a) Filing	(b) Affiliated
		ans amounts paid or incurred.)		organization's totals	group totals
-	1a Total lobbying expenditures to influence p	oublic opinion (grassroots lobbyir	ng)	0	
	<b>b</b> Total lobbying expenditures to influence a	a legislative body (direct lobbying	)	84,000	
	c Total lobbying expenditures (add lines 1a	and 1b)		84,000	
	<b>d</b> Other exempt purpose expenditures			49,283,146	
	e Total exempt purpose expenditures (add	lines 1c and 1d)		49,367,146	
	f Lobbying nontaxable amount. Enter the	ne amount from the following	table in both		
	columns.			1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount	is:		
	Not over \$500,000	20% of the amount on line 1e.			
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess of	ver \$500,000.		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess of	ver \$1,000,000.	<b>\</b>	
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess ov	er \$1,500,000.	4	
	Over \$17,000,000	\$1,000,000.		) )	
	g Grassroots nontaxable amount (enter 25%	· · · · · · · · · · · · · · · · · · ·		250,000	
	h Subtract line 1g from line 1a. If zero or les	ss, enter -0-   .   .   .   .   .   .   .	. ()	0	
	i Subtract line 1f from line 1c. If zero or less	s, enter -0-     .   .   .   .   .   .   .   .   .		0	
	j If there is an amount other than zero of		the organization	file Form 4720	
	reporting section 4911 tax for this year?		<i>O</i>		Yes No
	4-Yea	ar Averaging Period Under Sect	ion 501(h)		
	(Some organizations that made a sect			of the five columi	ns below.
	See the s	separate instructions for lines 2	2a through 2f.)		
	Lobbying I	Expenditures During 4-Year Av	eraging Period		
	Calendar year (or fiscal year	(a) 2019 (b) 2020	(c) 2021	(d) 2022	(e) Total

	Lobbying Expenditures During 4-Year Averaging Period								
	Calendar year (or fiscal year beginning in)	(a) 2019	<b>(b)</b> 2020	(c) 2021	( <b>d)</b> 2022	(e) Total			
2a	Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000			
b	Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000			
С	Total lobbying expenditures	68,000	49,667	71,000	84,000	272,667			
d	Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000			
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000			
f	Grassroots lobbying expenditures	0	0	0	0	0			

Schedule C (Form 990) 2022

Schedule C (Form 990) 2022 Page **3** 

Part	II-B Complete if the organization is exempt under section 501(c)(3) and has NOT for (election under section 501(h)).	iled	Form	i 5768	-	
For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(a	a)		(b)	
	iption of the lobbying activity.	Yes	No	Ar	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
a	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
e	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
į.	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
Part	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<i>(E</i> ) .		otion		
rart	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), (	or se	Cuon		
					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	-				
Part	Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OF answered "Yes."				ine 3	B, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of				
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of excess does the organization agree to carryover to the reasonable estimate of nondeductible lobby					
	and political expenditures next year?		4			
5	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	Supplemental Information					
	le the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated groue instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	t); Paı	t II-A, li	nes 1	and

#### **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.

OMB No. 1545-0047

**Open to Public** Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

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

DETR	OIT ZOOLOGICAL SOCIETY		38-6027356
Par	3 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		ds or Accounts.
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 6.	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year) .		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor a		
	funds are the organization's property, subject to the	= =	
6	Did the organization inform all grantees, donors, ar		
	only for charitable purposes and not for the benefit		
			Yes No
Par			3
	Complete if the organization answered "	Yes" on Form 990, Part IV, line 7.	
1	Purpose(s) of conservation easements held by the c		
	Preservation of land for public use (for example, recreation)		of a historically important land area
	☐ Protection of natural habitat	☐ Preservation of	of a certified historic structure
	☐ Preservation of open space	C <sub>4</sub>	
2	Complete lines 2a through 2d if the organization hel	ld a qualified conservation contributio	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 easements		. 2b
C	Number of conservation easements on a certified hi		
d	Number of conservation easements included in (c) a	acquired after July 25, 2006, and not	on a
	historic structure listed in the National Register .		· 2d
3	Number of conservation easements modified, trans	ferred, released, extinguished, or terr	minated by the organization during the
	tax year		
4	Number of states where property subject to conserv		postion bondling of
5	Does the organization have a written policy reg- violations, and enforcement of the conservation eas		
•			
6	Staff and volunteer hours devoted to monitoring, inspec	ting, nandling of violations, and enforcing	g conservation easements during the year
7	Amount of expenses incurred in monitoring, inspecting	g, handling of violations, and enforcing	conservation easements during the year
		-	
8	Does each conservation easement reported on line 2 and section 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of	
a	In Part XIII, describe how the organization repo		vevenue and expense statement and
•	balance sheet, and include, if applicable, the text of		
	organization's accounting for conservation easemer	_	
Part	III Organizations Maintaining Collections	of Art Historical Treasures or	Other Similar Assets
ı uı	Complete if the organization answered "		Other Ommar Assets.
1a	If the organization elected, as permitted under FAS		ue statement and halance sheet works
	of art, historical treasures, or other similar assets		
	service, provide in Part XIII the text of the footnote t		
b	If the organization elected, as permitted under FAS		
-	art, historical treasures, or other similar assets held	•	
	provide the following amounts relating to these item		•
	(i) Revenue included on Form 990, Part VIII, line 1		\$
	(ii) Assets included in Form 990, Part X		\$
2	If the organization received or held works of art,		
_	following amounts required to be reported under FA		, , , , , , , , , , , , , , , , , , ,
а	Revenue included on Form 990, Part VIII, line 1 .	_	\$
b	Assets included in Form 990, Part X		\$ 0

Schodu	le D (Form 990) 2022						Dage 9
Part		Collections of	Art Historical	Treasures o	r Other	Similar As	Page 2
3	Using the organization's acquisition, a collection items (check all that apply):						
а	✓ Public exhibition		d □ Loan	or exchange p	orogram		
b	Scholarly research		e Othe		-		
C	✓ Preservation for future generations		e 🗀 Otrici				
4	Provide a description of the organizati	on's collections a	and explain how t	hev further th	e organiza	ation's exen	nnt nurnose in Par
7	XIII.	on a conceners c	ina explain now	incy fartifier the	o organiza	ation 3 excit	iipt pai pose iii i ai
5	During the year, did the organization sassets to be sold to raise funds rather						ar <b>□ Yes                                   </b>
Part			· · · · · · · · · · · · · · · · · · ·				
	Complete if the organization		on Form 990	Part IV line 9	or repo	rted an an	nount on Form
	990, Part X, line 21.	anomoroa roo	0111 01111 000,		, oopc	arran	iodiii oii i oiiii
1a	Is the organization an agent, trustee,	custodian or oth	er intermediary f	or contribution	ns or othe	er assets no	ot
	included on Form 990, Part X?						☐ Yes ✓ No
b	If "Yes," explain the arrangement in Pa		te the following t	ahle:			100 <u></u> 110
b	ii res, explain the arrangement iirra	it Ain and comple	ste the following t	abie.		Δι	mount
_	Beginning balance				1c	Λ.	mount
c d	Additions during the year				1d		
					1e		
e	Distributions during the year				1f		
f	Ending balance				1 - 4		0
2a	Did the organization include an amoun					-	
	If "Yes," explain the arrangement in Pa <b>t V</b> Endowment Funds.	rt XIII. Check nere	e ir the explanation	n nas been pr	ovided or	Part XIII .	🗸
Par	Complete if the organization	anawarad "Vaa"	on Form 00 <b>0</b>	Dort IV line 1	10		
	Complete if the organization			(c) Two years b		nree years back	. (-) [
4.	Devianing of very belones	(a) Current year	(b) Prior year				
1a	Beginning of year balance	32,158,608	27,964,283			20,129,888	
b	Contributions	1,623,492	1,387,683	334	,796	46,275	5 2,124,087
С	Net investment earnings, gains, and						
	losses	-5,635,5 <b>62</b>	3,200,927			3,934,990	970,825
d					0		
	Grants or scholarships	0	0		0	(	0 0
e	Other expenditures for facilities and	~16					
	Other expenditures for facilities and programs	-412,700	-354,200	-327	,200	-308,100	300,500
	Other expenditures for facilities and programs	-412,700 -37,947	-354,200 -40,085	-327 -31	,200	-308,100 -66,425	300,500 38,905
e f g	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185	-354,200 -40,085 32,947,178	-327 -31 28,681	,200 ,280 ,243	-308,100	300,500 38,905
e	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en	-354,200 -40,085 32,947,178	-327 -31 28,681	,200 ,280 ,243	-308,100 -66,425	300,500 38,905
e f g	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10	-327 -31 28,681	,200 ,280 ,243	-308,100 -66,425	300,500 38,905
e f g 2	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10	-327 -31 28,681	,200 ,280 ,243	-308,100 -66,425	300,500 38,905
e f g 2 a	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10%	-327 -31 28,681	,200 ,280 ,243	-308,100 -66,425	300,500 38,905
f g 2 a b	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10%	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678	-300,500 5 -38,905 8 20,808,698
f g 2 a b	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10%	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678	-300,500 5 -38,905 8 20,808,698
e f g 2 a b c	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9	-354,200 -40,085 32,947,178 d balance (line 10%	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678	-300,500 -38,905 3 20,808,698
e f g 2 a b c	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9 % 2c should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 1g) %	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 neld as:	-308,100 -66,425 24,485,678	-300,500 5 -38,905 8 20,808,698
e f g 2 a b c	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67 9 2c should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 10% 00%. e organization the	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 held as: ad adminis	-308,100 -66,425 24,485,678	-300,500 -38,905 3 20,808,698
e f g 2 a b c	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67 9 2c should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 10% 00%. e organization the	-327 -31 28,681 g, column (a)) h	,200 ,280 ,243 held as: ad adminis	-308,100 -66,425 24,485,678	-300,500 -38,905 3 20,808,698 1e Yes No 3a(i) ✓
e f g a b c	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9 % Co should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 10%  00%. e organization the control of the control	-327 -31 28,681 g, column (a)) h at are held an	,200 ,280 ,243 held as: ad adminis	-308,100 -66,425 24,485,678	-300,500 -38,905 30,808,698 -38,905
f g 2 a b c 3a	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9 % Cc should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 10%) 00%. e organization the construction of the construction	at are held an chedule R?	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678 stered for th	-300,500 -38,905 -38,9
e f g a b c 3a	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9 % Cc should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 10%) 00%. e organization the construction of the construction	at are held an chedule R?	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678 stered for th	-300,500 -38,905 -38,9
e f g a b c 3a	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67.9 % Cc should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 16) 00%. e organization the construction of the construction o	at are held an chedule R?	,200 ,280 ,243 held as:	-308,100 -66,425 24,485,678 stered for th	-300,500 -38,905 -38,9
e f g a b c 3a	Other expenditures for facilities and programs	-412,700 -37,947 28,597,185 ne current year en t 67,9 % Co should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 16%  00%. e organization the construction of the construction	at are held an chedule R?	,200 ,280 ,243 neld as: ad adminis	-308,100 -66,425 24,485,678 stered for th	-300,500 -38,905 -38,905 -30,808,698 -30,808,698 -30,808,698 -30,808,698 -40 -40 -40 -40 -40 -40 -40 -40 -40 -40
f g 2 a b c 3a b 4 Part	Other expenditures for facilities and programs	28,597,185 ne current year en t 67.9 % Co should equal 10 possession of th	-354,200 -40,085 32,947,178 d balance (line 16%  00%. e organization the construction of the construction	at are held an chedule R?	,200 ,280 ,243 held as: d adminis	-308,100 -66,425 24,485,678 stered for th	-300,500 -38,905 -38,905 -30,808,698 -30,808,698 -30,808,698 -30,808,698 -40 -40 -40 -40 -40 -40 -40 -40 -40 -40

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a	Land	0	0		0
b	Buildings	0	404,586	134,114	270,472
С	Leasehold improvements	0	0	0	0
d	Equipment	0	6,067,243	5,006,996	1,060,247
e	Other	0	0	0	0
Total.	Total, Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				

Schedule D (Form 990) 2022 Page **3** 

Part VII	Investments—Other Securities.  Complete if the organization answered "Yes" on Form 990, Part I	V line 11h See F	Form 990 Part X line 12
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
/d) Financia			Cost of end-of-year market value
	I derivatives		
(A)			+
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
	mn (b) must equal Form 990, Part X, col. (B) line 12.)		
Part VIII	Investments – Program Related.	<u>I</u>	
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11c. See F	orm 990, Part X, line 13.
-	(a) Description of investment	(b) Book value	(c) Method of valuation:
	(-)	(1)	Cost or end-of-year market value
(1)		-07	
(2)			
(3)			
(4)			
(5)	O <sub>2</sub> .		
(6)			
(7)			
(8)			
(9)	\()		
Total. (Colu	mn (b) must equal Form 990, Part X, col. (B) line 13.)		
Part IX	Other Assets.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11d. See F	orm 990, Part X, line 15.
	(a) Description		(b) Book value
(1)			
(2)			
(3)	<u> </u>		
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Part X	Other Liabilities.		
	Complete if the organization answered "Yes" on Form 990, Part I	V, line 11e or 11f	. See Form 990, Part X,
	line 25.		
1.	(a) Description of liability		(b) Book value
(1) Federal in	ncome taxes		0
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
	mn (b) must equal Form 990, Part X, col. (B) line 25.)		0
<ol><li>Liability fo</li></ol>	r uncertain tax positions. In Part XIII, provide the text of the footnote to the organ	ization's financial sta	itements 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

 $\checkmark$ 

Schedule D (Form 990) 2022 Page 4 Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. Part XI Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total revenue, gains, and other support per audited financial statements . . . 45,490,829 Amounts included on line 1 but not on Form 990. Part VIII. line 12: 2 -9.985.439 Donated services and use of facilities 0 Recoveries of prior year grants . . . . 0 Other (Describe in Part XIII.) . . . . . . . . . . . . . . 2d 334,501 -9.650.938 3 Subtract line **2e** from line **1** . . . . . . . . 3 55,141,767 Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 0 Add lines 4a and 4b 4c 0 Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.) 5 55,141,767 Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements . . . 1 49,701,646 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities 0 Prior year adjustments 2h 0 Other losses . . . . . 0 Other (Describe in Part XIII.) . . . 2d 334,500 Add lines 2a through 2d . . . . 2e 334,500 3 Subtract line 2e from line 1 . . . . 3 49,367,146 Amounts included on Form 990. Part IX. line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b 4a 0 4b 0 Add lines 4a and 4b . . . 4c 0 Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) . 5 5 49,367,146 Supplemental Information. Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information. Schedule D, Part III, Line 1 - The Society owns numerous works of art accumulated over the years. Consistent with financial statement presentations followed by other institutions, primarily museums, the Society excludes the value of its works of art from the statements of financial position. The works of art are held for educational and exhibition purposes. Schedule D, Part III, Line 4 - The Detroit Zoo has a permanent art collection from artists in multiple mediums acquired for the purpose of interpreting the relationship of humans with animals through various cultures and times. The collection was begun with the understanding that art is a visual communication that records feelings, beliefs, and ideas which reflect the cultural context in which it was made, hence artist interpretations were chosen over literal depictions. In the Wildlife Interpretive Gallery, one contemporary piece is a transfer image of cave paintings done by the earliest known artists some 40,000 years ago. Michigan artists in the Wildlife Interpretive Gallery collection are: Rich Branstrom, Susie Colquitt, Laura Ford, Peter Hackett, Cathy Peet, and Ia Moua Yang. Other recognized artists include Larry Rivers and Alexis Rockman. Schedule D, Part IV, Line 2b - The Detroit Zoological Society collects donations for the Amazon Rainforest Adopt-A-School program on behalf of CONAPAC, a Peruvian NGO. The Detroit Zoo holds funds for the Eastern Massasauga Rattlesnake Species Survival Plan organization and the Society staff are active members in this organization. Schedule D, Part V, Line 4 - The Detroit Zoological Society (DZS) endowments were established to provide a stable source of funding to

Schedule D, Part V, Line 4 - The Detroit Zoological Society (DZS) endowments were established to provide a stable source of funding to help underwrite the programs and facilities of the Detroit Zoo and Belle Isle Nature Center. Monies placed in endowments are invested, with interest, and only distributed as dictated by the Society's endowment governing policy. Funds may be established by donors within each endowment. A named fund requires a minimum investment of \$100,000 and the revenue may be restricted by the donors. The endowments (minimum of \$1 million) of the Detroit Zoological Society include the following: The Berman Academy for Humane Education Endowment: the Berman Academy for Humane Education Endowment was established September 13, 2001 by Madeleine and Mandell L. Berman. The purpose of the endowment is to support operational costs associated with humane education programs at the Detroit Zoo. The John S. and James L. Knight Fund: the Knight fund was established December 13, 1999 by the John S. and James L. Knight Foundation. The purpose of the fund is to support research and education programs of the Detroit Zoological Society. The Society determined that it would be most

Schedule D (Form 990) 2022 Page 5

### Part XIII - Supplemental Information (Continued)

beneficial as a component of the Humane Education Endowment. The Adelyn B. Devereaux Fund: The Devereaux fund was established  December 28, 2001 through Mrs. Adelyn B. Devereaux's trust agreement. The purpose of the fund is to benefit the Detroit Zoological  Society's endowment fund. The Society determined that it would be most beneficial as a component of the Humane Education Endowment.  The Richard and Jane Manoogian Endowment for Wildlife Art and Interpretation: the Richard and Jane Manoogian Endowment for Wildlife
Art and Interpretation was established May 6, 2002 by Richard A. Manoogian. The purpose of the endowment is to purchase and maintain works of art, including sculpture, at the Detroit Zoological Park. In addition, earnings will support educational programs and projects focusing on the interpretation of art that explores the relationship between humans and animals.
Schedule D, Part X, Line 2 - Summary of Significant Accounting Policies - Federal Income Taxes - The Society has been recognized by the Internal Revenue Service as an organization exempt from federal taxation under Section 501(c)(3) of the Internal Revenue Code (the Code). The Society is a public charity by reason of being described in the Code Section 509(a)(2). The Society is exempt from federal
income taxes except to the extent of income derived from unrelated business activities. Unrelated business income is not material to the financial statements. The Society completed an analysis of its tax positions, in accordance with ASC 740, Income Taxes, and determined that no amounts were required to be recognized in the financial statements at December 31, 2022 or 2021.
Schedule D, Part XI, Line 2d - Other adjustments to audited financial statements include: donations to CONAPAC of \$154,953, direct fundraising expenses of \$489,453, and rounding of \$1, for total of \$334,501.
Schedule D, Part XII, Line 2d - Other adjustments to audited financial statements include: donations to CONAPAC of \$154,953, and direct fundraising expenses of \$489,453, for total of \$334,500.

#### **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, Attach to Form 990.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

Name of the organization **Employer identification number DETROIT ZOOLOGICAL SOCIETY** 38-6027356 Part I 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 √ Yes No award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance 2 outside the United States. 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (b) Number (d) Activities conducted in the (a) Region (e) If activity listed in (d) is (f) Total employees, of offices in expenditures for region (by type) (such as, a program service, agents, and the region fundraising, program services, describe specific type of and investments independent investments, grants to recipients service(s) in the region in the region contractors in the region located in the region) (1) South America 0 0 Grantmaking Conservation Support 35,000 (2) Sub-Saharan Africa 0 0 10,000 Grantmaking **Conservation Support** (3) Europe (including Iceland and ( 0 0 Grantmaking Conservation Support 6,500 (4) North America (including Canad 0 0 Grantmaking **Conservation Support** 2,500 (5) South America 0 0 Grantmaking **Educational Support** 154,953 (6)(7)(8)(9)(10) (11)(12)(13)(14)(15)(16)(17)Subtotal . . . . . Total from continuation

sheets to Part I . . . . Totals (add lines 3a and 3b)

208,953

Page 2

Schedule F (Form 990) 2022

Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed. Part II

(1) South America (2) South America (3) Sub-Saharan Africa (4) Europe (including ld (5) South America (6) South America (7) South America (10) (11) (12) (13) (14)	South America Conservation Support South America Conservation Support Europe (including Ic Conservation Support South America Educational Support	15,000 Wire Transfer 20,000 Wire Transfer 10,000 Wire Transfer	C		
	erica Conservation Supportan Africa Conservation Supportation Supporterica Educational Support	20,000 Wire Transfer 10,000 Wire Transfer	D		
	an Africa Conservation Support	10,000 Wire Transfer	0		
	cluding Ic Conservation Supporterica Educational Support		0		
	erica Educational Support	6,500 Wire Transfer			
(6) (7) (8) (9) (10) (11) (12) (13)		154,953 Wire Transfer	0		
(7) (8) (9) (10) (11) (12) (13)					
(8) (9) (10) (11) (12) (13)					
(10) (11) (12) (13)		3			
(10) (11) (12) (13)		2:			
(11) (12) (13)		S			
(12)					
(13)	0,				
(14)	9)				
	<b>&gt;</b>				
(15)					
(16)					
2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter .	zations listed above that are r S, or for which the grantee or c	ecognized as charities by the foreigonnsel has provided a section 501(c)	gn country, recognized (3) equivalency letter	as a tax	5
3 Enter total number of other organizations or entities	s or entities				0

Schedule F (Form 990) 2022

Page 3

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

(a) Type of grant or assistance	<b>(b)</b> Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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		• • • •	(				
	•	9					
	<b>\rightarrow</b>	5					

Schedule F (Form 990) 2022 Page 4

#### Part IV **Foreign Forms**

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	☐ Yes	✓ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	☐ Yes	✓ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	☐ Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	☐ Yes	✓ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	☐ Yes	✓ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	☐ Yes	✓ No
		Schedule F (Fo	orm 990) 202
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	*		

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 Page **5** 

### Part V Supplemental Information

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

Schedule F, Part I, Line 2 - The Adopt-A-School program receives international support. The Detroit Zoological Society accepts donations
from supporters worldwide and transfers the funds in their entirety down to our partners in Peru. A representative from the Detroit Zoological
Society participates in the delivery of school supplies each April, providing a first-hand account of the purchased supplies and their
distribution. This representative also stays in contact with leaders of the organizations to ensure their activities continue to support their
mission.
·····

### **SCHEDULE G** (Form 990)

### **Supplemental Information Regarding Fundraising or Gaming Activities**

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

Attach to Form 990 or Form 990-EZ.

OMB No. 1545-0047

Department of the Treasury Internal Revenue Service

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

Name of the organization Employer identification number **DETROIT ZOOLOGICAL SOCIETY** 38-6027356 Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part. Indicate whether the organization raised funds through any of the following activities. Check all that apply. 1 **e** Solicitation of non-government grants Mail solicitations а Internet and email solicitations f Solicitation of government grants b Phone solicitations Special fundraising events ☐ In-person solicitations Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ Yes ☐ No b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (or retained by) (vi) Amount paid to (or retained by) organization (iii) Did fundraiser have (i) Name and address of individual (iv) Gross receipts (ii) Activity custody or control of contributions? or entity (fundraiser) from activity fundraiser listed in col. (i) Yes No 1 2 3 4 5 6 7 8 9 10 **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.

Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000.

		grood roddipto groator tric				
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			Sunset at the Zoo	Run Wild	0	(add col. (a) through
			(event type)	(event type)	(total number)	col. <b>(c)</b> )
ηne						
Revenue	1	Gross receipts	771,801	128,587		900,388
æ						
	2	Less: Contributions	465,228	42,940		508,168
	3	Gross income (line 1 minus				
-		line 2)	306,573	85,647		392,220
			_	_		_
	4	Cash prizes	0	0		0
	_	Noncoh prizos				0
	5	Noncash prizes	0	0		0
es	6	Rent/facility costs	42,870	5,757		48,627
sue	Ū	Tient/idenity desits	42,070	3,737		40,027
ă.	7	Food and beverages	134,481	9,537		144,018
t E	-	· · · · · · · · · · · · · · · · · · ·	101/101	7,001	- 07	111/010
Direct Expenses	8	Entertainment	175,763	26,134		201,897
						·
	9	Other direct expenses .	81,764	13,147		94,911
				10		
	10	Direct expense summary. Ac				489,453
	11	Net income summary. Subtra				-97,233
Pa	rt III	Gaming. Complete if th		ered "Yes" on Form 9	990, Part IV, line 19,	or reported more than
		\$15,000 on Form 990-E	Z, line 6a.	10		
ne			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c)
Revenue			· C	biligo/progressive biligo		
Re		0				
-	_1_	Gross revenue	<b>\</b>			
w	2	Cash prizes				
Direct Expenses	_	Odsii piizes	**()			
per	3	Noncash prizes				
Ж		rionodon prizos I I I				
ect	4	Rent/facility costs				
ä			9			
	5	Other direct expenses .				
			☐ Yes %	☐ Yes %	☐ Yes %	
	6	Volunteer labor	☐ No	☐ No	☐ No	
	7	Direct expense summary. Ac	dd lines 2 through 5 in c	olumn (d)		
	8	Net gaming income summar	y. Subtract line 7 from I	ine 1, column (d)		
_	_					
9		nter the state(s) in which the or				
		the organization licensed to c				
	<b>b</b> If	"No," explain:				
10	a \/	lere any of the organization's o	aming licenses revoked	suspended or termin	ated during the tay year	7
10		/ere any of the organization's g		•	•	
		// " I I		•	ated during the tax year	

Schedu	ule G (Form 990) 2022		Page 3
11	Does the organization conduct gaming activities with nonmembers?	☐ Yes	☐ No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?	☐ Yes	☐ No
13	Indicate the percentage of gaming activity conducted in:		
a	The organization's facility		%
b	An outside facility		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records:		
	Name		
	Address		
15a	Does the organization have a contract with a third party from whom the organization receives gaming revenue?	☐ Yes	☐ No
b	If "Yes," enter the amount of gaming revenue received by the organization \$ and the amount of gaming revenue retained by the third party \$		
С	If "Yes," enter name and address of the third party:		
	Name		
	Address		
16	Gaming manager information:		
	Name		
	Gaming manager compensation \$		
	Description of services provided		
	□ Director/officer □ Employee □ Independent contractor		
17	Mandatory distributions:		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		☐ No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year		
Part	Supplemental Information. Provide the explanations required by Part I, line 2b, columns Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any addition See instructions.	(iii) and ( nal infor	v); and mation.

# SCHEDULE I (Form 990)

DETROIT ZOOLOGICAL SOCIETY

Department of the Treasury Internal Revenue Service Name of the organization

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

Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.

Attach to Form 990.

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

OMB No. 1545-0047

2022
Open to Public Inspection

**Employer identification number** 

38-6027356

e United States 390, Part IV, line 21 or 22.

Part	General Information on Grants and Assistance	on Grants and	Assistance					
-	Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and	n records to subs	stantiate the amou	nt of the grants or	assistance, the g	grantees' eligibility f	or the grants or assistance	
	the selection criteria used to award the grants or assistance?	ward the grants o	or assistance?					· · · Yes No
7	Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States.	zation's procedur	es for monitoring t	he use of grant fu	nds in the United	States.		
Part	<b>Il</b> Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization Part IV, line 21, for any recipient that received more than \$5,000. Part IV, line 21, for any recipient that received more than \$5,000. Part IV, line 21, for any recipient that received more than \$5,000. Part IV, line 21, for any recipient that received more than \$5,000.	<b>sistance to Do</b> i / recipient that r	mestic Organiza eceived more th	ations and Dom an \$5,000. Part I	i <b>estic Governm</b> Il can be duplic	nents. Complete i ated if additional	f the organization answe space is needed.	Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.
1 (a)	1 (a) Name and address of organization or government	( <b>p</b> ) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(E)	Sch I, Stmt 1							
(2)								
<u>(6)</u>					Š			
<b>4</b>					0			
(2)				<u>ي</u>				
(9)				C				
6			•	> -				
(8)			/5					
6			200					
(10)			<b>&gt;</b>					
(11)								
(12)								
2	Enter total number of section 501(c)(3) and government organizations listed in the line 1 table	501(c)(3) and gov	ernment organizat	ions listed in the li	ine 1 table			. 21
က	Enter total number of other organizations listed in the line 1 table	ganizations listed	in the line 1 table					0
For Pa	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	see the Instructions	s for Form 990.		O	Cat. No. 50055P		Schedule I (Form 990) 2022

Page 2

Schedule I (F	Schedule I (Form 990) 2022
Part III	<b>Grants and Other Assistance to Domestic Individuals.</b> Complete if the organization answered "Yes" on Form 990, Part IV, line 22.
	Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
-					
2					
ಣ					
4				7	
5				2	
9			)		
7					
Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.	the information r	equired in Part I, lin	e 2; Part III, column	(b); and any other additi	ional information.
Schedule I, Part I, Line 2 - The Detroit Zoological Society monitors the use of funds through direct observation, reporting from the organization, and participation by DZS staff in research activities.	/ monitors the use c	Tunds through direct	observation, reporting	from the organization, and p	articipation by UZS staff in research
		15			
	•				
	9				
	7				
	•				

**DETROIT ZOOLOGICAL SOCIETY** 

Form: **Schedule I (2022)** EIN: **38-6027356** 

Desc	ription of Grants and Other Assistance to Governments and Organ			
		Recipient EIN	Amt. of cash grant	Amt. of non cash asst
Name and address	The Board of Trustees of the University of Illinois 506 S Wright Street 209 HAB MC 339 Urbana, IL 61801	37-6000511	145,624	
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Conservation Support			
Name and address	Gorilla Rehabilitation and Conservation Education Center Inc PO Box 334 Cumberland Center, ME 04021	46-2308758	50,000	
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.		-07		
Purpose of grant	Conservation Support			
Name and address	Re wild PO Box 129 Austin, TX 78767 501(c)(3)	26-2887967	23,000	
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Conservation Support			
Name and address	Dian Fossey Gorilla Fund International Inc 800 Cherokee Ave SE Atlanta, GA 30315	52-1118866	20,000	
IRC code section	501(c)(3)			
Method of valuation	C. Y			
Desc. of Non-Cash Asst.	(10			
Purpose of grant	Conservation Support			
Name and address	Wildlife Conservation Network 209 Mississippi St San Fransisco, CA 94107	30-0108469	20,000	
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Conservation Support			
Name and address	Association of Zoos and Aquariums 8403 Colesville Rd Silver Spring, MD 20910	55-0526930	15,000	
IRC code section	501(c)(3)			
Method of valuation				
Desc. of Non-Cash Asst.				
Purpose of grant	Conservation Support			
Name and address	OnePlanet Inc	47-4202052	15,000	

IRC code section

2444 Navarre Way Virginia Beach, VA 23456

501(c)(3)

Schedule I, Part IV, Statem	nent 1	DETRO	IT ZOOLOGICAL SOCIETY
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	ReLeaf Michigan Inc	38-2912028	10,087
	1100 N Main St		
	Ann Arbor, MI 48104		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Americans for Oxford Inc	52-1495060	10,000
	500 5th Ave		
	New York, NY 10110		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	ASU Foundation for A New American University dba ASU Foundation	86-6051042	10,000
	PO Box 2260	<b>A</b> '	
	Tempe, AZ 85280-2260	$O_{i}$	
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	101		
Purpose of grant	Conservation Support		
Name and address	Detroit Audubon Society	38-6004962	10,000
	4605 Cass Ave		
	Detroit Audubon Society 4605 Cass Ave Detroit, MI 48201 501(c)(3)		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	4.5		
Purpose of grant	Conservation Support		
Name and address	Giraffe Conservation Foundation USA	81-2749463	10,000
	PO Box 24246		
	Clevelend, OH 44124-0246		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Global Conservation Network	41-1719362	10,000
	12101 Johnny Cake Ridge Rd		
	Apple Valley, MN 55124		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Michigan Technological University	38-6005955	10,000
	115 Great Lakes Research Center		
	1400 Townsend Drive		
	Houghton, MI 49931		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		

Schedule I, Part IV, Statem	nent 1	DETRO	IT ZOOLOGICAL SOCIETY
Name and address	Minnesota Zoo Foundation 13000 Zoo Blvd Apple Valley, MN 55124	51-0147653	10,000
Method of valuation	501(c)(3)		
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Polar Bears International	77-0322706	10,000
	PO Box 3008 Bozeman, MT 59772		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Regents of the University of Minnesota dba University of Minnesota 2221 University Ave SE Ste 100	41-6007513	10,000
IDC and a cotton	Minneapolis, MN 55414	$\mathbf{O}$	
IRC code section  Method of valuation	501(c)(3)	OZ	
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Turtle Survival Alliance	20-0785702	10,000
	1030 Jenkins Rd STE D		.,
	Charleston, SC 29407		
IRC code section	Turtle Survival Alliance 1030 Jenkins Rd STE D Charleston, SC 29407 501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.	Concernation Support		
Purpose of grant	Conservation Support		
Name and address	US Geological Survey - Alaska Science Center 4210 University Drive	53-0196958	10,000
	Anchorage, AK 99508		
IRC code section	US Gov		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	USGS National Center MS 270	53-0196958	10,000
	12201 Sunrise Valley Dr		
	MS 270 Ste 6A224		
IDC and anation	Reston, VA 20192		
IRC code section  Method of valuation	US Gov		
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		
Name and address	Yale University	06-0646973	10,000
	2 Whitney Avenue 6th Floor		,
	New Haven, CT 06510		
IRC code section	501(c)(3)		
Method of valuation			
Desc. of Non-Cash Asst.			
Purpose of grant	Conservation Support		

### **SCHEDULE J** (Form 990)

Compensation Information

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

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

Attach to Form 990.

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

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

**DETROIT ZOOLOGICAL SOCIETY** 

Employer identification number

38-6027356

Part	Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	☐ First-class or charter travel ☐ Housing allowance or residence for personal use			
	☐ Travel for companions ☐ Payments for business use of personal residence			
	☐ Tax indemnification and gross-up payments ☐ Health or social club dues or initiation fees			
	☐ Discretionary spending account ☐ Personal services (such as maid, chauffeur, chef)			
la.				
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment			
	or reimbursement or provision of all of the expenses described above? If "No," complete Part III to		,	
	explain	1b	<b>✓</b>	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all			
	directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line			
	1a?	2	✓	
3	Indicate which, if any, of the following the organization used to establish the compensation of the			
	organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a			
	related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	✓ Compensation committee			
	✓ Independent compensation consultant ✓ Compensation survey or study			
	✓ Form 990 of other organizations ✓ Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
-	organization or a related organization:			
а	Receive a severance payment or change-of-control payment?	4a		1
b	Participate in or receive payment from a supplemental nonqualified retirement plan?	4b		<b>✓</b>
C	Participate in or receive payment from an equity-based compensation arrangement?	4c		./
C	If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.	70		V
	The second of lines 4a-c, list the persons and provide the applicable amounts for each item in a art in.			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
5	compensation contingent on the revenues of:			
		<b>-</b>		
a	The organization?	5a		<b>√</b>
b	Any related organization?	5b		<b>✓</b>
	If "Yes" on line 5a or 5b, describe in Part III.			
	5			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any			
	compensation contingent on the net earnings of:			
а	The organization?	6a		✓
b	Any related organization?	6b		✓
	If "Yes" on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed			
	payments not described on lines 5 and 6? If "Yes," describe in Part III	7		✓
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject			
	to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe			
	in Part III	8		✓
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53 4958-6(c)?			

Page 2

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed. Part II

Schedule J (Form 990) 2022

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII. Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

NOTE: THE SUIT OF COMMITTES (D)(I)-(III) TO EACH IISCEN II MUNICURAL HUGGE EGUAL (III) TO EACH II MUNICURAL EGUAL (III) TO EACH EGUAL (IIII) EACH EGUAL (III) TO EACH EGUAL (III) EAC	ממכ	(B) Breakdown of W-2 ar	(R) Breakdown of W-2 and/or 1009-MISC and/or 1009-NEC compensation	Odd-NEC compensation	ille total attitoditto i otti 300, i attivit, oediloi A, ille Ta, appiloade coldiiii (b) atti (b) attiti ottito Misc and/or 1000-NEC compensation	a, applicable coluin	1 ( <i>D)</i> and ( <i>E)</i> annound	o loi tilat illaividuai.
					(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(l)–(D)	in column (B) reported as deferred on prior Form 990
Hayley Murphy, Executive	(j)	433,325	0	5,400	12,873	27,266	478,864	0
1 Director/CEO	(ii)	0	0	0	0	0	0	0
Scott F Carter, Chief Life	<u>(i)</u>	256,407	182,730	3,600	151'9	13,653	462,541	0
2 science Unicer	(ii)	0		0	0	0	0	0
Jane Alessandrini, VP of	Ξ	202'032	87,580	5,400	72,107	27,266	337,385	0
3 Development	<b>(E)</b>	0	0	0	0	0	0	0
Diane Miller, VP of Education	Ξ	169,708	86,434	5,400	10,508	6,853	281,903	0
4	<b>(E)</b>	0	0	0	0	0	0	0
Gerry VanAcker, Chief Operating	()	144,204	84'882	4,500	069'6	17,294	263,573	0
5 Officer	<b>(E)</b>	0	0	0	0	0	0	0
Robert Schumaker, VP of	Ξ	194,033	16,300	5,400	8,837	27,266	251,836	0
6 Finance/CFO	(E)	0	0	S	0	0	0	0
Ron L Kagan, Executive	<b>=</b>	250,586	0	0	0	0	250,586	0
7 Director/CEO - Term Dec 2021	<b>(E)</b>	0	0		0	0	0	0
Sabarras George, VP of	Ξ	162,658	6,074	3,400	6,435	27,266	205,833	0
8 Operations/COO	<b>(E)</b>	0	0	0	0	0	0	0
Randi Hamilton, VP of Guest	(i)	126,009	14,917	3,400	6,072	27,266	177,664	0
9 Marketing	<b>(E)</b>	0		0	0	0	0	0
Richard K Martin, Director of	Ξ	139,368	4,297	1,150	090'9	21,845	172,710	0
10 Individual Philanthropy	(ii)	0	• C 1 0	0	0	0	0	0
Ann Duncan, Associate VP of	(i)	130,983	5,493	1,000	5,801	27,266	170,543	0
11 File Sciences	(ii)	0	0	0	0	0	0	0
Toria Bradley, VP of Human	<b>=</b>	127,330	098'6	5,400	5,485	10,971	159,046	0
12 Resources	<u>(ii</u>	0	0	0	0	0	0	0
DeAndrea Matthews, VP of	Ξ	112,450	9,064	5,400	2,635	27,266	156,815	0
13 Engagement	<b>(E)</b>	0	0	0	0	0	0	0
	(i)							
14	<b>(E)</b>							
	Ξ							
15	<b>(E)</b>							
	≘ €							
16								

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022
Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this par for any additional information.
Schedule J, Part I, Line 1a - The land, buildings, and animals of the Detroit Zoo are owned by the City of Detroit. A residential home is located on the grounds of the Detroit Zoo and the Executive Director was traditionally required to live in this residence. The residence is not considered taxable to the Executive Director in late 2021 as the previous Executive Director refred in December 2021. The requirement to live in this residence has been removed for the new
Executive Director.
3,

### SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Open to Public Inspection

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

DETR	OIT ZOOLOGICAL SOCIETY					38-60273!	56		
Part	Types of Property			'					
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contramounts reported Form 990, Part V	rted on	Method o			
1 2	Art—Works of art Art—Historical treasures								
3 4	Art—Fractional interests Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities—Publicly traded	✓	11		209,580	Market Value	<del>)</del>		
10 11	Securities—Closely held stock . Securities—Partnership, LLC, or trust interests			6					
12	Securities-Miscellaneous								
13	Qualified conservation contribution—Historic structures			(0)					
14	Qualified conservation contribution—Other		103						
15	Real estate—Residential								
16	Real estate—Commercial								
17	Real estate—Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies	· · · C							
21 22	Taxidermy		<u>'</u>						
23	Scientific specimens								
24	Archeological artifacts								
25	Other ( Supplies and Auction	/	126		236 170	Market Value			
26	Other (	)·	120		230,170	Warket Value			
27	Other (								
28	Other (								
29	Number of Forms 8283 received								
	which the organization completed	Form 8283	3, Part V, Donee Acknowled	dgement		29	0		
								Yes	No
30a	During the year, did the organizate 28, that it must hold for at least 3 used for exempt purposes for the	years from	the date of the initial contr	ibution, and whic	h isn't req	uired to be	30a		<b>✓</b>
b	If "Yes," describe the arrangemen		9 Parriers				Jua		<u> </u>
31	Does the organization have a	gift accep	otance policy that require		of any no	onstandard	31	<b>√</b>	
32a	Does the organization hire or use contributions?		ies or related organization				32a		<b>√</b>
ь 33	If "Yes," describe in Part II.  If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which c	olumn (a) i	is checked,			

Schedule M (Form 990) 2022 Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

### SCHEDULE 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.

2022

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

38-6027356

Department of the Treasury Internal Revenue Service

**DETROIT ZOOLOGICAL SOCIETY** 

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

Name of the organization

Form 990, Part VI, Section A, Line 6 - Paying Detroit Zoological Society members receive benefits including free admission to the Detroit Zoo, discounted admission to participating zoos and aquariums across the country, 10% discount in the gift shop. Classes of membership include the following: Individual, Family, Supporter, and Renaissance Circle. In addition to the benefits received by the paying members, the members also have certain voting and decision-making rights. This includes the ability to attend the annual meeting and call special meetings. The annual meeting of the members is held on a date set by the Board of Directors in the second quarter of each year. Special meetings of the members may also be called by the Chairman of the Board, President, a majority of the Board of Directors or of the Executive Committee, or by not less than one-tenth of the members. At each meeting of the members of the Society, each member shall be entitled to cast one vote on each matter submitted for membership action; this vote may be by proxy executed in writing by the member by their duly authorized attorney-in-fact. No proxy shall be valid after eleven (11) months from the date of its execution unless otherwise provided in the proxy. No person may act as a proxy unless such person is a member of the Society. All privileges of membership (other

than voting) are subject to such rules and regulations that may be adopted by a majority vote of the Board of Directors.

Form 990, Part VI, Section A, Line 7a - The Detroit Zoological Society Board governs, develops policies and strategy and oversees all Society operations and activities. The Governance and Nominating Committee shall be appointed by the Board Chairperson and ratified by the Board of Trustees. The committee shall consist of at least five persons, including the Board Chairperson, the Director/Chief Executive Officer and at least two other board members. The chairperson of the committee shall be a member of the Board of Trustees. The Governance and Nominating Committee will: 1. Be responsible for the recruitment, selection, nominating, orientation and evaluation of board members of the Detroit Zoological Society. 2. Maintain an awareness of the needs of the board and/or its affiliate organizations for executive and board talents. 3. Plan board members' development, including recruitment, orientation, education, and evaluation of their effectiveness. 4. Identify and select candidates for committees of the board using criteria for board service as a guide. 5. Provide an orientation program conducted by management for new board members. 6. Periodically conduct an assessment to determine board educational needs. The Director/Chief Executive Officer will be responsible for researching and updating the committee on educational opportunities. 7. Conduct board self-evaluations. 8. Review the performance of board members prior to re-appointment. 9. Confirm compliance with the DZS conflict of interest policy. 10. Meet quarterly, or as needed.

Form 990, Part VI, Section A, Line 7b - See explanation for Form 990 Part VI, Line 7a.

Form 990, Part VI, Section B, Line 11b - A draft of the IRS Form 990 is prepared by the Detroit Zoological Society's finance department under the direction of the Chief Financial Officer. This draft is sent to an external audit firm where a review is performed by the tax team to ensure accuracy and completeness. After this review a draft is provided to the CEO and Audit Committee for review. A regular meeting of the Audit Committee is held to discuss the form and address any questions that may arise. The Audit Committee chair then informs the CEO and CFO that the Form can be made available to all board members and can be filed with the IRS on behalf of the organization. A board resolution is not required in order for the Form 990 to be filed. This final draft is filed with the IRS and state government agencies.

Form 990, Part VI, Section B, Line 12c - The Conflict of Interest Policy is distributed annually to key employees and board members. Key employees are required to read the policy and complete a questionnaire annually, which is maintained by the Human Resources department. Board members are given a copy at the annual board retreat, where they are asked to read the policy and complete the questionnaire and return it to the CEO's administrative assistant. If a questionnaire is returned with a potential conflict, it is brought to the Board Chair and/or the CEO of the Society, who shall determine whether a conflict exists and is material. If the matters are material, the potential conflict would be brought to the attention of the Board. The Board Chair and/or the CEO, with the Board, will determine whether the contemplated transaction may be authorized as just, fair and reasonable to the Society. The decision of the Board Chair and/or the CEO of the Society on these matters will rest in their sole discretion, and their concern must be the welfare of the Society and the advancement of its purpose.

Form 990, Part VI, Section B, Line 15 - The Detroit Zoological Society uses the AZA salary survey and engages an independent consultant to prepare a competitive salary analysis of non-union, salaried positions and develop salary structures and ranges for these positions. Job grades and salary ranges, including minimum, midpoint, and maximum, were established for each position. Upon determining a wage for a new hire, an individual's salary is set within the range considering the market value of the position (based on the role's primary responsibilities), individual characteristics (experience, performance, etc.) and internal value. Salary is not to be lower than the minimum established wage of the pay grade and range. If a new hire is to be brought in higher than the established midpoint wage of the pay grade and range, it must be approved by the HR Director and a member of the Executive Leadership Team. A salary is not to exceed the established maximum wage of the pay grade and range. Salary guidelines and wages are reviewed with the Compensation Committee of

### Supplemental Information (Continued)

the Board.
Form 990, Part VI, Section C, Line 19 - The financial statements, governing documents, and conflict of interest policy are available to the public upon written request.
Form 990, Part VII, Section B, Line 1(C) - The Detroit Zoological Society was unable to separate the cost of services provided from the cost of materials for certain contractors. Please note the totals for these vendors may include both services and materials.
Form 990, Part IX, Line 11g - Contracted/Construction Services = \$9,110,594. General Labor = \$2,957,311. Skilled Labor = \$1,329,189.  Professional Services = \$1,529,945. Janitorial Services = \$537,530. Service Fees = \$557,268. Event Entertainment = \$165,130.

**DETROIT ZOOLOGICAL SOCIETY** 

Form: Form 990 (2022) EIN: 38-6027356

Page: 2 Part III, Line 4d **Other Program Services Accomplishments** 

Activity Code	Description	Expense	Grants	Revenue
	The Detroit Zoological Society continues to demonstrate organizational excellence consistent with a commitment to outstanding environmental leadership. The Detroit Zoological Society maintains grounds at the Detroit Zoo and Belle Isle Nature Center totaling 130 acres and 80 different buildings where staff members and volunteers are committed to lessening their environmental impact on the Earth. The Detroit Zoological Society has developed a unique, green roadmap called the Greenprint. This comprehensive strategic plan guides our operations and is the plan by which we refine and improve our facilities and daily practices, develop new policies and programs and improve green literacy in our community. The DZS is committed to planting 2,000 trees by the end of 2023, in an effort to continue positively impacting our community.	2,512,563		2,089,554
Total:	effort to continue positively impacting our community.	2,512,563	0	2,089,554
	Pulolle			

### Form **8453-TE**

## Tax Exempt Entity Declaration and Signature for Electronic Filing

OMB No. 1545-0047	
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Department of the Treasury Internal Revenue Service

2022

Go to www.irs.gov/Form8453TE for the latest information. Name of file **Detroit Zoological Society** 38-6027356 Type of Return and Return Information Part I Check the box for the type of return being filed with Form 8453-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line of the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). If you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I. 1a Form 990 check here . . **b Total revenue,** if any (Form 990, Part VIII, column (A), line 12) . . . 55,141,767 2b **b Total revenue,** if any (Form 990-EZ, line 9) . . . . . . . 2a Form 990-EZ check here . 3a Form 1120-POL check here **b Total tax** (Form 1120-POL, line 22) . . . . . . . . . . . . . . . 3b 4b 4a Form 990-PF check here . **b** Tax based on investment income (Form 990-PF, Part V, line 5) . Form 8868 check here . . **b Balance due** (Form 8868, line 3c) . . . . . . . . . 5a **b Total tax** (Form 990-T, Part III, line 4) . . . . 6b 6a Form 990-T check here **b Total tax** (Form 4720, Part III, line 1) . . . . . . . Form 4720 check here . . 7b 7a Form 5227 check here . . **b** FMV of assets at end of tax year (Form 5227, Item D) 8b **b Tax due** (Form 5330, Part II, line 19) . . . . 9b Form 5330 check here . . 9a b Amount of credit payment requested (Form 8038-CP, Part III, line 22) 10a Form 8038-CP check here 10h Part II **Declaration of Officer or Person Subject to Tax** ☑ I authorize the U.S. Treasury and its designated Financial Agent to initiate an Automated Clearing House (ACH) electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. If a copy of this return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I certify that I executed the electronic disclosure consent contained within this return allowing disclosure by the IRS of this Form 990/990-EZ/ 990-PF (as specifically identified in Part I above) to the selected state agency(ies). Under penalties of perjury, I declare that 🗸 I am an officer of the above named entity or 🖂 I am the person subject to tax with respect to (name of entity) Detroit Zoological Society , (EIN) and that I have examined a copy of the 2022 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. Sign 11/13/2023 Chief Financial Officer Here Signature of officer or person subject to tax Date Title, if applicable Part III **Declaration of Electronic Return Originator (ERO) and Paid Preparer** (see instructions) I declare that I have reviewed the above return and that the entries on Form 8453-TE are complete and correct to the best of my knowledge. If I am only a collector. I am not responsible for reviewing the return and only declare that this form accurately reflects the data on the return. The entity officer or person subject to tax will have signed this form before I submit the return. I will give a copy of all forms and information to be filed with the IRS to the officer or person subject to tax, and have followed all other requirements in Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns. If I am also the Paid Preparer, under penalties of periury I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. This Paid Preparer declaration is based on all information of which I have any knowledge. Date ERO's SSN or PTIN Check if also Check if self-ERO's ERO's paid preparer employed signature Use Firm's name (or yours if self-employed), address, and ZIP code Only Phone no. Under penalties of perjury, I declare that I have examined the above return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer is based on all information of which the preparer has any knowledge. Print/Type preparer's name Check if self-**Paid** 11/13/2023 employed Eileen M Webb P01641852 **Preparer** Firm's EIN Firm's name Ernst & Young, LLP 34-6565596

Phone no.

Firm's address 2100 One PPG Place, Pittsburgh, PA, 15222

Use Only

Form 8453-TE (2022) Page  ${f 2}$ 

### **General Instructions**

The Taxpayer First Act, P.L. 116-25, increased the number and types of tax-exempt and government entities required to file information and tax returns electronically. The forms listed in Part I of Form 8453-TE and Form 8879-TE are currently available for electronic filing. Please see the instructions for each specific form for more information about electronic filing of that form.



Instead of filing Form 8453-TE, an entity officer or person subject to tax filing an exempt entity return through an electronic return originator (ERO) can sign the return using a personal identification number (PIN). For details,

see Form 8879-TE, IRS e-file Signature Authorization for a Tax Exempt Entity.

### **Future Developments**

For the latest information about developments related to Form 8453-TE and its instructions, such as legislation enacted after they were published, go to www.irs.gov/Form8453TE.

### **Purpose of Form**

Use Form 8453-TE to:

- Authenticate the electronic Form 990, Return of Organization Exempt From Income Tax; Form 990-EZ, Short Form Return of Organization Exempt From Income Tax; Form 990-PF, Return of Private Foundation; Form 990-T, Exempt Organization Business Income Tax Return; Form 1120-POL, U.S. Income Tax Return for Certain Political Organizations; Form 4720, Return of Certain Excise Taxes Under Chapters 41 and 42 of the Internal Revenue Code; Form 8868, Application for Automatic Extension of Time To File an Exempt Organization Return; Form 5227, Split-Interest Trust Information Return; Form 5330, Return of Excise Taxes Related to Employee Benefit Plans; and Form 8038-CP, Return for Credit Payments to Issuers of Qualified Bonds;
- Authorize the ERO, if any, to transmit via a third-party transmitter;
- Authorize the intermediate service provider (ISP) to transmit via a third-party transmitter if you're filing online (not using an ERO); and
- Authorize an electronic funds withdrawal for payment of federal taxes owed (Form 990-PF, Form 990-T, Form 1120-POL, Form 4720, Form 5330, or Form 8868 with payment).

### **Who Must File**

If you're filing a 2022 Form 990, Form 990-EZ, Form 990-PF, Form 990-T, Form 1120-POL, Form 4720, Form 5227, Form 5330, Form 8038-CP, or Form 8868 with payment through an ISP and/or transmitter and you're not using an ERO, you must file Form 8453-TE with your electronically filed return. An ERO can use either Form 8453-TE or Form 8879-TE to obtain authorization to file a Form 990, Form 990-EZ, Form 990-PF, Form 990-T, Form 4720, Form 1120-POL, Form 5330, Form 5227, Form 8038-CP, or to file a Form 8868 with payment.

#### When To File

**Form 990, Form 990-EZ, Form 990-PF, or Form 990-T.** File Form 990, Form 990-EZ, or Form 990-PF by the 15<sup>th</sup> day of the 5<sup>th</sup> month after the organization's accounting period ends. For information on when to file Form 990-T, see the Instructions for Form 990-T. If the regular due date falls on a Saturday, Sunday, or legal holiday, the organization may file on the next business day. The Form 8453-TE must be filed with the electronically filed Form 990, Form 990-EZ, Form 990-PF, or Form 990-T.

**Form 1120-POL.** File Form 1120-POL by the 15<sup>th</sup> day of the 4<sup>th</sup> month after the organization's accounting period ends. If the regular due date falls on a Saturday, Sunday, or legal holiday, the organization may file on the next business day. The Form 8453-TE must be filed with the electronically filed Form 1120-POL.

**Form 4720.** Generally, file Form 4720 by the due date of the organization's Form 990, 990-EZ, 990-PF, or Form 5227. If none of these forms is required, file Form 4720 by the 15<sup>th</sup> day of the 5<sup>th</sup> month after the end of the tax year. The Form 8453-TE must be filed with the electronically filed Form 4720.

**Form 8868.** Generally, file Form 8868 by the due date of the return for which you're requesting an extension. The Form 8453-TE must be filed with the electronically filed Form 8868.

**Form 5227.** File Form 5227 for a calendar year by April 15 of the following year. In the case of a final short-year period, the return is due by the 15<sup>th</sup> day of the 4<sup>th</sup> month following the date of the trust's termination. The Form 8453-TE must be filed with the electronically filed Form 5227.

**Form 5330.** File Form 5330 to report excise taxes in accordance with the Instructions for Form 5330 for the applicable due dates. The Form 8453-TE must be filed with the electronically filed Form 5330.

**Form 8038-CP.** See the Instructions for Form 8038-CP for information on when to file Form 8038-CP. The Form 8453-TE must be filed with the electronically filed Form 8038-CP.

#### **How To File**

File Form 8453-TE with the electronically filed return. Use a scanner to create a PDF file of the completed form. Your tax preparation software will allow you to transmit this PDF file with the return.

**Note:** If you are using Form 8453-TE to authenticate the electronic Form 8038-CP (after it becomes available), enter the interest payment date from Form 8038-CP, Part III, line 18, in the period ending date at the top of the form.

### Part II. Declaration of Officer or Person Subject to Tax

If a Form 990-PF, Form 990-T, Form 1120-POL, Form 4720, Form 5330, or Form 8868 filer chooses to pay the tax due by electronic funds withdrawal (direct debit), check the box. Otherwise, leave the box blank.

If the officer or person subject to tax checks the box when filing Form 990-PF, Form 990-T, Form 1120-POL, Form 4720, Form 5330, or Form 8868 with payment, that person must ensure that the following information relating to the financial institution account is provided in the tax preparation software.

- · Routing number,
- · Account number,
- Type of account (checking or savings),
- Debit amount, and
- Debit date (date the entity or person subject to tax wants the debit to occur).

In the third paragraph, check the appropriate box to declare whether you are an officer or person subject to tax (and enter the name of the entity and employer identification number (EIN)).

An electronically transmitted return will not be considered complete (and therefore not considered filed) unless either:

- Form 8453-TE is signed by an officer or person subject to tax, scanned into a PDF file, and transmitted with the return; or
- The return is filed through an ERO and Form 8879-TE is used to select a PIN that is used to electronically sign the return.

The signature of the officer or person subject to tax allows the IRS to disclose to the ISP, ERO, and/or transmitter:

- An acknowledgment that the IRS has accepted the electronically filed return, and
- The reason(s) for a delay in processing the return or refund.

The declaration of officer or person subject to tax must be signed and dated by:

- The president, vice president, treasurer, assistant treasurer, chief accounting officer; or
- Any other officer or person subject to tax authorized to sign the return.

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If this return contains instructions to the IRS to provide a copy(ies) of the return to a state agency(ies) regulating charities as part of the IRS Fed/State program, the checkbox in Part II **must** be checked.

### Part III. Declaration of Electronic Return Originator (ERO) and Paid Preparer

**Note:** If the return is filed online through an ISP and/or transmitter (not using an ERO), don't complete the *ERO's Use Only* section in Part III.

If the return is filed through an ERO, the IRS requires the ERO's signature. A paid preparer, if any, must sign Form 8453-TE in the space for *Paid Preparer Use Only*. But if the paid preparer is also the ERO, don't complete the paid preparer's section. Instead, check the box labeled *Check if also paid preparer*.

An ERO may sign the Form 8453-TE by rubber stamp, mechanical device, or computer software program. The alternative method of signing must include either a facsimile of the individual ERO's signature or of the ERO's printed name.

### **Use of PTIN**

**Paid preparers.** Anyone who is paid to prepare the entity return must enter their PTIN in Part III. The PTIN entered must have been issued after September 27, 2010. For information on applying for and receiving a PTIN, see Form W-12, IRS Paid Preparer Tax Identification Number (PTIN) Application and Renewal, or visit www.irs.gov/PTIN.

**EROs who aren't paid preparers.** Only EROs who aren't also the paid preparer of the return have the option to enter their PTIN or their social security number in the *ERO's Use Only* section of Part III. If the PTIN is entered, it must have been issued after September 27, 2010. For information on applying for and receiving a PTIN, see Form W-12, or visit *www.irs.gov/PTIN*.

**Privacy Act and Paperwork Reduction Act Notice.** We ask for the information on this form to carry out the Internal Revenue laws of the United States. You're required to give us the information. We need it to ensure that you're complying with these laws and to allow us to figure and collect the right amount of tax. Section 6109 requires EROs to provide their identifying numbers on the return.

You're not required to provide the information requested on a form that is subject to the Paperwork Reduction Act unless the form displays a valid OMB control number. Books or records relating to a form or its instructions must be retained as long as their contents may become material in the administration of any Internal Revenue law. Generally, tax returns and return information are confidential, as required by Internal Revenue Code section 6103. However, certain returns and return information of tax exempt organizations and trusts are subject to public disclosure and inspection, as provided by section 6104.

The time needed to complete and file this form will vary depending on individual circumstances. The estimated burden for tax exempt organizations filing this form is approved under OMB control number 1545-047 and is included in the estimates shown in the instructions for their information return.