

**Return of Organization Exempt From Income Tax**

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

**2020**

Department of the Treasury  
Internal Revenue Service

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

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

**Open to Public Inspection**

**A** For the 2020 calendar year, or tax year beginning 01/01, 2020, and ending 12/31, 20 20

**B** Check if applicable:  
 Address change  
 Name change  
 Initial return  
 Final return/terminated  
 Amended return  
 Application pending

**C** Name of organization DETROIT ZOOLOGICAL SOCIETY  
 Doing business as \_\_\_\_\_  
 Number and street (or P.O. box if mail is not delivered to street address) Room/suite  
8450 W 10 Mile Road  
 City or town, state or province, country, and ZIP or foreign postal code  
Royal Oak, MI, 48067

**D** Employer identification number  
38-6027356

**E** Telephone number  
248-541-5717

**F** Name and address of principal officer: Ron L Kagan  
8450 W 10 Mile Rd, Royal Oak, MI 48067

**G** Gross receipts \$ 40,180,264

**H(a)** Is this a group return for subordinates?  Yes  No  
**H(b)** Are all subordinates included?  Yes  No  
 If "No," attach a list. See instructions  
**H(c)** Group exemption number ▶ \_\_\_\_\_

**I** Tax-exempt status:  501(c)(3)  501(c) ( ) ◀ (insert no.)  4947(a)(1) or  527

**J** Website: ▶ <http://www.detroitzoo.org/>

**K** Form of organization:  Corporation  Trust  Association  Other ▶ \_\_\_\_\_

**L** Year of formation: 1924 **M** State of legal domicile: MI

**Part I Summary**

Activities & Governance	<b>1</b>	Briefly describe the organization's mission or most significant activities: <u>Celebrating and Saving Wildlife &amp; Wild Places - 1. Demonstrate extraordinary leadership in conservation, animal welfare and environmental sustainability. 2. Inspire with (Continued on Schedule O, Statement 1)</u>		
	<b>2</b>	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	<b>3</b>	Number of voting members of the governing body (Part VI, line 1a)	<b>3</b>	<u>62</u>
	<b>4</b>	Number of independent voting members of the governing body (Part VI, line 1b)	<b>4</b>	<u>62</u>
	<b>5</b>	Total number of individuals employed in calendar year 2020 (Part V, line 2a)	<b>5</b>	<u>400</u>
	<b>6</b>	Total number of volunteers (estimate if necessary)	<b>6</b>	<u>700</u>
	<b>7a</b>	Total unrelated business revenue from Part VIII, column (C), line 12	<b>7a</b>	<u>0</u>
<b>b</b>	Net unrelated business taxable income from Form 990-T, Part I, line 11	<b>7b</b>	<u>0</u>	
Revenue	<b>8</b>	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	<b>9</b>	Program service revenue (Part VIII, line 2g)	<u>24,331,764</u>	<u>19,959,439</u>
	<b>10</b>	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	<u>20,859,399</u>	<u>9,134,297</u>
	<b>11</b>	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	<u>1,034,954</u>	<u>1,415,600</u>
	<b>12</b>	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	<u>707,890</u>	<u>627,401</u>
Expenses	<b>13</b>	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	<u>46,934,007</u>	<u>31,136,737</u>
	<b>14</b>	Benefits paid to or for members (Part IX, column (A), line 4)	<u>744,651</u>	<u>560,107</u>
	<b>15</b>	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	<u>0</u>	<u>0</u>
	<b>16a</b>	Professional fundraising fees (Part IX, column (A), line 11e)	<u>21,372,889</u>	<u>15,754,873</u>
	<b>b</b>	Total fundraising expenses (Part IX, column (D), line 25) ▶ <u>1,220,499</u>	<u>0</u>	<u>0</u>
	<b>17</b>	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	<u>22,931,632</u>	<u>13,149,737</u>
	<b>18</b>	Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	<u>45,049,172</u>	<u>29,464,717</u>
<b>19</b>	Revenue less expenses. Subtract line 18 from line 12	<u>1,884,835</u>	<u>1,672,020</u>	
Net Assets or Fund Balances	<b>20</b>	Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	<b>21</b>	Total liabilities (Part X, line 26)	<u>43,978,975</u>	<u>51,269,821</u>
	<b>22</b>	Net assets or fund balances. Subtract line 21 from line 20	<u>7,251,321</u>	<u>8,965,663</u>
			<u>36,727,654</u>	<u>42,304,158</u>

**Part II Signature Block**

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

**Sign Here**

Signature of officer \_\_\_\_\_ Date \_\_\_\_\_  
Robert Schumaker, Director of Finance  
 Type or print name and title

**Paid Preparer Use Only**

Print/Type preparer's name \_\_\_\_\_ Preparer's signature \_\_\_\_\_ Date \_\_\_\_\_ Check  if self-employed PTIN \_\_\_\_\_  
 Firm's name ▶ \_\_\_\_\_ Firm's EIN ▶ \_\_\_\_\_  
 Firm's address ▶ \_\_\_\_\_ Phone no. \_\_\_\_\_

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

**Part III** 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 Detroit Zoological Society's mission is to: 1. Demonstrate extraordinary leadership in conservation, animal welfare and environmental sustainability. 2. Inspire with engaging, meaningful, memorable experiences, and equitable educational opportunities that lead to the appreciation and stewardship of nature. 3. Celebrate and value biodiversity and human diversity.  
(Continued on Schedule O, Statement 2)

**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes  No

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

**3** Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes  No

If "Yes," describe these changes on Schedule O.

**4** Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

**4a** (Code: ) (Expenses \$ 9,487,380 including grants of \$ 436,946 ) (Revenue \$ 2,936 )

ANIMAL CARE, WELFARE AND CONSERVATION: The Detroit Zoological Society continues its purpose of celebrating and saving wildlife by demonstrating leadership in animal care, wildlife conservation and animal welfare. The Detroit Zoo and Belle Isle Nature Center had 2,892 individual animals representing 239 species in its care as of December 31, 2020. 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 through grants and technical and/or on-the-ground assistance, 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.

**4b** (Code: ) (Expenses \$ 2,430,164 including grants of \$ 123,161 ) (Revenue \$ 38,062 )

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 the community. Regional school district partnerships enhance humane education and life science experiences in the classroom through onsite programs, teacher training and curriculum support. Due to the pandemic, much of the educational programming was moved to the internet. The DZS education team created unique and engaging daily content for the entire community, with its "Virtual Ventures" and "Virtual Vitamin Z" programs.

**4c** (Code: ) (Expenses \$ 10,453,300 including grants of \$ ) (Revenue \$ 9,231,837 )

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 polar bear/seal habitat, 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. Normally the Detroit Zoo welcomes more than 1.3 million visitors each year. In addition to animal experiences, other attractions at the Zoo include the 4-D Theater, the Wild Adventure Simulator, 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, Meet Your Best Friend at the Zoo, Run Wild, Zoo Boo and Wild Lights. Although attendance was down significantly in 2020 due to the pandemic, the DZS focused on providing a safe and secure experience for the limited number of guests allowed into the park each day.

**4d** Other program services (Describe on Schedule O.) See Schedule O, Statement 3  
(Expenses \$ 2,033,463 including grants of \$ 0 ) (Revenue \$ 359,784 )

**4e** Total program service expenses **▶** 24,404,307

**Part IV Checklist of Required Schedules**

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

**Part IV Checklist of Required Schedules** *(continued)*

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

**Part V Statements Regarding Other IRS Filings and Tax Compliance**

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

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

**Part V** **Statements Regarding Other IRS Filings and Tax Compliance** (continued)

		Yes	No		
<b>2a</b>	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	<b>2a</b>	400		
<b>b</b>	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? <b>Note:</b> If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	<b>2b</b>		✓	
<b>3a</b>	Did the organization have unrelated business gross income of \$1,000 or more during the year?	<b>3a</b>			✓
<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	<b>3b</b>			
<b>4a</b>	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)?	<b>4a</b>			✓
<b>b</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).				
<b>5a</b>	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>5a</b>			✓
<b>b</b>	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	<b>5b</b>			✓
<b>c</b>	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<b>5c</b>			
<b>6a</b>	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?	<b>6a</b>			✓
<b>b</b>	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	<b>6b</b>			
<b>7</b>	<b>Organizations that may receive deductible contributions under section 170(c).</b>				
<b>a</b>	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?	<b>7a</b>		✓	
<b>b</b>	If "Yes," did the organization notify the donor of the value of the goods or services provided?	<b>7b</b>		✓	
<b>c</b>	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	<b>7c</b>			✓
<b>d</b>	If "Yes," indicate the number of Forms 8282 filed during the year	<b>7d</b>			
<b>e</b>	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<b>7e</b>			✓
<b>f</b>	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	<b>7f</b>			✓
<b>g</b>	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	<b>7g</b>			
<b>h</b>	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	<b>7h</b>			
<b>8</b>	<b>Sponsoring organizations maintaining donor advised funds.</b> Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	<b>8</b>			
<b>9</b>	<b>Sponsoring organizations maintaining donor advised funds.</b>				
<b>a</b>	Did the sponsoring organization make any taxable distributions under section 4966?	<b>9a</b>			
<b>b</b>	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	<b>9b</b>			
<b>10</b>	<b>Section 501(c)(7) organizations.</b> Enter:				
<b>a</b>	Initiation fees and capital contributions included on Part VIII, line 12	<b>10a</b>			
<b>b</b>	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	<b>10b</b>			
<b>11</b>	<b>Section 501(c)(12) organizations.</b> Enter:				
<b>a</b>	Gross income from members or shareholders	<b>11a</b>			
<b>b</b>	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	<b>11b</b>			
<b>12a</b>	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form 1041?	<b>12a</b>			
<b>b</b>	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	<b>12b</b>			
<b>13</b>	<b>Section 501(c)(29) qualified nonprofit health insurance issuers.</b>				
<b>a</b>	Is the organization licensed to issue qualified health plans in more than one state? <b>Note:</b> See the instructions for additional information the organization must report on Schedule O.	<b>13a</b>			
<b>b</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	<b>13b</b>			
<b>c</b>	Enter the amount of reserves on hand	<b>13c</b>			
<b>14a</b>	Did the organization receive any payments for indoor tanning services during the tax year?	<b>14a</b>			✓
<b>b</b>	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	<b>14b</b>			
<b>15</b>	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N.	<b>15</b>			✓
<b>16</b>	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	<b>16</b>			✓

**Part VI Governance, Management, and Disclosure** For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI

**Section A. Governing Body and Management**

		Yes	No
<b>1a</b>	Enter the number of voting members of the governing body at the end of the tax year . . . . .		
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.		
<b>1b</b>	Enter the number of voting members included on line 1a, above, who are independent . . . . .		
<b>2</b>	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? . . . . .		<input checked="" type="checkbox"/>
<b>3</b>	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person? . . . . .		<input checked="" type="checkbox"/>
<b>4</b>	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? . . . . .		<input checked="" type="checkbox"/>
<b>5</b>	Did the organization become aware during the year of a significant diversion of the organization's assets? . . . . .		<input checked="" type="checkbox"/>
<b>6</b>	Did the organization have members or stockholders? . . . . .	<input checked="" type="checkbox"/>	
<b>7a</b>	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>7b</b>	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8</b>	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
<b>8a</b>	The governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>8b</b>	Each committee with authority to act on behalf of the governing body? . . . . .	<input checked="" type="checkbox"/>	
<b>9</b>	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 . . . . .		<input checked="" type="checkbox"/>

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

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

**Section C. Disclosure**

- 17** List the states with which a copy of this Form 990 is required to be filed ► MI
- 18** Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
  - Own website     Another's website     Upon request     Other (explain on Schedule O)
- 19** Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
- 20** State the name, address, and telephone number of the person who possesses the organization's books and records ►

**Robert Schumaker Director of Finance, Detroit Zoological Society, (248)541-5717**  
 8450 W 10 Mile Road, Royal Oak, MI 48067

**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 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 and/or Box 7 of Form 1099-MISC) 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 instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Ron L Kagan	50.00									
Executive Director/CEO	0.00			✓			377,213	0	18,449	
Scott F Carter	50.00									
Chief Life Science Officer	0.00				✓		206,237	0	18,699	
Jane Alessandrini	50.00									
Chief Development Officer	0.00				✓		165,230	0	27,990	
Gerry VanAcker	50.00									
Chief Operating Officer	0.00				✓		163,181	0	23,599	
Diane Miller	50.00									
Chief Program Officer	0.00				✓		148,790	0	12,448	
Sabarras George	40.00									
Deputy Chief Operating Officer	0.00					✓	131,667	0	24,973	
Robert Schumaker	40.00									
Director of Finance	0.00					✓	124,937	0	25,353	
Jeffrey Evans	50.00									
Chief Financial Officer - Term July 2020	0.00			✓			133,020	0	13,714	
Ann Duncan	40.00									
Director of Animal Health	0.00					✓	118,247	0	25,087	
Ruth Marcec-Greaves	40.00									
NACC Director	0.00					✓	97,940	0	19,954	
Ed Falkowski	40.00									
Director of IT	0.00					✓	106,090	0	6,666	
Anthony F Earley Jr	4.00									
Chairman	0.00	✓		✓			0	0	0	
Stephen R Polk	2.00									
Vice Chair	0.00	✓		✓			0	0	0	
Robert G Riney	2.00									
Vice Chair	0.00	✓		✓			0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
John G Sznewajs ----- Treasurer	2.00 0.00	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>				0	0	0
Lloyd A Semple ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Larry Alexander ----- Executive Director - Term Dec 2020	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
William Conway ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Karen Dumas ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Cynthia Ford ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Alan Kalter ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Tom Lewand ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Denise J Lewis ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Shawn Patterson ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Richard B Platt ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Sean Werdlow ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Larry Wolfe ----- Executive Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Ismael Ahmed ----- Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0



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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
N Charles Anderson ----- Director	1.00 0.00	✓						0	0	0
Alisha Bell ----- Director	1.00 0.00	✓						0	0	0
Thomas C Buhl ----- Director	1.00 0.00	✓						0	0	0
Clark Bunting ----- Director	1.00 0.00	✓						0	0	0
Beth Chappell ----- Director	1.00 0.00	✓						0	0	0
Shery L Cotton ----- Director	1.00 0.00	✓						0	0	0
Mary Kay Crain ----- Director	1.00 0.00	✓						0	0	0
Matthew P Cullen ----- Director	1.00 0.00	✓						0	0	0
Marvin Daitch ----- Director	1.00 0.00	✓						0	0	0
Beth Daly ----- Director	1.00 0.00	✓						0	0	0
David E Duprey ----- Director	1.00 0.00	✓						0	0	0
Matthew B Elliott ----- Director	1.00 0.00	✓						0	0	0
Charles Ellis ----- Director	1.00 0.00	✓						0	0	0
John Erb ----- Director	1.00 0.00	✓						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Burton D Farbman	1.00									
Director	0.00	✓					0	0	0	
Kristy Fercho	1.00									
Director	0.00	✓					0	0	0	
Linda Gillum	1.00									
Director - Term June 2020	0.00	✓					0	0	0	
Jennifer Grieco	1.00									
Director - Add Aug 2020	0.00	✓					0	0	0	
Allan D Gilmour	1.00									
Director	0.00	✓					0	0	0	
Terry S Harvill	1.00									
Director	0.00	✓					0	0	0	
Jeff Hauswirth	1.00									
Director - Term Aug 2020	0.00	✓					0	0	0	
Rejji Hayes	1.00									
Director	0.00	✓					0	0	0	
Marina A Houghton	1.00									
Director	0.00	✓					0	0	0	
Paul Huxley	1.00									
Director	0.00	✓					0	0	0	
Hassan Jaber	1.00									
Director	0.00	✓					0	0	0	
Hiram Jackson	1.00									
Director - Term Nov 2020	0.00	✓					0	0	0	
George G Johnson	1.00									
Director - Term Sept 2020	0.00	✓					0	0	0	
Alan Kaufman	1.00									
Director	0.00	✓					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
Brandon Kolo Director - Add Aug 2020	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Bonnie Larson Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Dawn Lee-Cotton Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Lisa Lis Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Victor Martin Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Isaiah McKinnon Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Candice Miller Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Virinder Moudgil Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Julie Nicholson Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Stuart Robbins Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
James Rosenthal Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Melissa Roy Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Rick Ruffner Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0
Anmar Sarafa Director	1.00 0.00	<input checked="" type="checkbox"/>						0	0	0

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
James Sawyer	1.00									
Director	0.00	✓					0	0	0	
Lawrence Scott	1.00									
Director	0.00	✓					0	0	0	
Grace Shore	1.00									
Director - Term June 2020	0.00	✓					0	0	0	
Andre Spivey	1.00									
Director	0.00	✓					0	0	0	
Shirley R Stancato	1.00									
Director	0.00	✓					0	0	0	
James Tate	1.00									
Director	0.00	✓					0	0	0	
Joel D Tauber	1.00									
Director	0.00	✓					0	0	0	
Rachel Vitti	1.00									
Director	0.00	✓					0	0	0	
Gail L Warden	1.00									
Director	0.00	✓					0	0	0	
<b>1b Subtotal</b>							<b>1,772,552</b>	<b>0</b>	<b>216,932</b>	
<b>c Total from continuation sheets to Part VII, Section A</b>										
<b>d Total (add lines 1b and 1c)</b>							<b>1,772,552</b>	<b>0</b>	<b>216,932</b>	

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

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

**Section B. Independent Contractors**

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

(A) Name and business address	(B) Description of services	(C) Compensation
Conti Corporation, 6417 Center Drive, Sterling Heights, MI 48312	Facilities Maintenance	751,580
Studiozone LLC, 350 Madison, Detroit, MI 48226	Construction Management	658,782
The Albert M Higley Co, 719 Griswold Suite 280, Detroit, MI 48226	Construction Management	318,129
Midwest Commercial Contracting, 115 E Capac Rd, Imlay City, MI 48444	Construction Services	162,670
Jaffe Raitt Heuer and Weiss, PO Box 5034, Southfield, MI 48086	Legal Services	156,978

**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 **▶ 12**

**Part VIII Statement of Revenue**

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

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514		
<b>Contributions, Gifts, Grants and Other Similar Amounts</b>	<b>1a</b>	Federated campaigns . . . . .	<b>1a</b> 0						
	<b>b</b>	Membership dues . . . . .	<b>1b</b> 966,975						
	<b>c</b>	Fundraising events . . . . .	<b>1c</b> 420,500						
	<b>d</b>	Related organizations . . . . .	<b>1d</b> 0						
	<b>e</b>	Government grants (contributions)	<b>1e</b> 13,829,906						
	<b>f</b>	All other contributions, gifts, grants, and similar amounts not included above	<b>1f</b> 4,742,058						
	<b>g</b>	Noncash contributions included in lines 1a-1f . . . . .	<b>1g</b> \$ 336,003						
	<b>h</b>	<b>Total.</b> Add lines 1a-1f . . . . . ▶		19,959,439					
	<b>Program Service Revenue</b>				Business Code				
<b>2a</b>		Admissions . . . . .	712130	3,948,553	3,948,553	0	0		
<b>b</b>		Membership Dues . . . . .	712130	2,917,568	2,917,568	0	0		
<b>c</b>		Special Events Admission . . . . .	712130	1,476,365	1,476,365	0	0		
<b>d</b>		Rides & Attractions . . . . .	712130	14,762	14,762	0	0		
<b>e</b>		Concessions . . . . .	712130	774,113	774,113	0	0		
<b>f</b>		All other program service revenue . . . . .		2,936	2,936	0	0		
<b>g</b>		<b>Total.</b> Add lines 2a-2f . . . . . ▶		9,134,297					
<b>Other Revenue</b>	<b>3</b>	Investment income (including dividends, interest, and other similar amounts) . . . . . ▶		1,245,847	0	0	1,245,847		
	<b>4</b>	Income from investment of tax-exempt bond proceeds ▶		0	0	0	0		
	<b>5</b>	Royalties . . . . . ▶		0	0	0	0		
	<b>6a</b>	Gross rents . . . . .	(i) Real	13,481					
			(ii) Personal	0					
			<b>6b</b>	Less: rental expenses	0				
			<b>6c</b>	Rental income or (loss)	13,481				
	<b>d</b>	Net rental income or (loss) . . . . . ▶		13,481	0	0	13,481		
	<b>7a</b>	Gross amount from sales of assets other than inventory	(i) Securities	9,159,053					
			(ii) Other	0					
			<b>7b</b>	Less: cost or other basis and sales expenses . . . . .	8,989,300				
			<b>7c</b>	Gain or (loss) . . . . .	169,753				
	<b>d</b>	Net gain or (loss) . . . . . ▶		169,753	0	0	169,753		
	<b>8a</b>	Gross income from fundraising events (not including \$ 420,500 of contributions reported on line 1c). See Part IV, line 18 . . . . .	<b>8a</b>	169,825					
			<b>8b</b>	Less: direct expenses . . . . .	54,227				
			<b>c</b>	Net income or (loss) from fundraising events . . . . . ▶		115,598	0	115,598	
<b>9a</b>	Gross income from gaming activities. See Part IV, line 19 . . . . .	<b>9a</b>							
		<b>9b</b>	Less: direct expenses . . . . .						
		<b>c</b>	Net income or (loss) from gaming activities . . . . . ▶						
<b>10a</b>	Gross sales of inventory, less returns and allowances . . . . .	<b>10a</b>							
		<b>10b</b>	Less: cost of goods sold . . . . .						
		<b>c</b>	Net income or (loss) from sales of inventory . . . . . ▶						
<b>Miscellaneous Revenue</b>				Business Code					
	<b>11a</b>	Reimbursements . . . . .	712130	296,185	296,185	0	0		
	<b>b</b>	Gift Card Write Off . . . . .	712130	138,537	138,537	0	0		
	<b>c</b>	Rebates . . . . .	712130	40,361	40,361	0	0		
	<b>d</b>	All other revenue . . . . .		23,239	23,239	0	0		
<b>e</b>	<b>Total.</b> Add lines 11a-11d . . . . . ▶		498,322						
<b>12</b>	<b>Total revenue.</b> See instructions . . . . . ▶		31,136,737	9,632,619	0	1,544,679			

**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

<b>Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.</b>		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21 . . . . .	349,446	349,446		
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 . . . . .	210,661	210,661		
4	Benefits paid to or for members . . . . .	0	0		
5	Compensation of current officers, directors, trustees, and key employees . . . . .	1,308,570	526,734	620,598	161,238
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 . . . . .	11,174,337	9,593,600	926,620	654,117
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) . . . . .	382,890	333,208	26,536	23,146
9	Other employee benefits . . . . .	1,707,247	1,476,746	138,843	91,658
10	Payroll taxes . . . . .	1,181,829	1,004,864	112,032	64,933
11	Fees for services (nonemployees):				
a	Management . . . . .	0	0	0	0
b	Legal . . . . .	161,748	17,693	144,055	0
c	Accounting . . . . .	165,054	0	165,054	0
d	Lobbying . . . . .	49,667	49,667	0	0
e	Professional fundraising services. See Part IV, line 17 . . . . .	0			0
f	Investment management fees . . . . .	0	0	0	0
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.) . . . . .	6,459,861	5,560,853	748,882	150,126
12	Advertising and promotion . . . . .	631,749	615,309	0	16,440
13	Office expenses . . . . .	220,234	172,185	30,432	17,617
14	Information technology . . . . .	464,830	103,256	350,044	11,530
15	Royalties . . . . .	0	0	0	0
16	Occupancy . . . . .	2,848,640	2,814,135	28,173	6,332
17	Travel . . . . .	4,560	4,379	155	26
18	Payments of travel or entertainment expenses for any federal, state, or local public officials . . . . .	0	0	0	0
19	Conferences, conventions, and meetings . . . . .	278,426	113,372	155,690	9,364
20	Interest . . . . .	7,683	0	7,683	0
21	Payments to affiliates . . . . .	0	0	0	0
22	Depreciation, depletion, and amortization . . . . .	275,255	275,255	0	0
23	Insurance . . . . .	382,724	0	382,724	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	<u>Animal Care</u> . . . . .	1,016,624	1,016,624	0	0
b	<u>Wildlife Conservation</u> . . . . .	57,274	57,274	0	0
c	<u>Exhibits</u> . . . . .	64,949	64,949	0	0
d	<u>Special Events</u> . . . . .	60,459	44,097	2,390	13,972
e	All other expenses . . . . .	0	0	0	0
25	<b>Total functional expenses.</b> Add lines 1 through 24e . . . . .	29,464,717	24,404,307	3,839,911	1,220,499
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720) . . . . .				

**Part X Balance Sheet**

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

		(A)		(B)
		Beginning of year		End of year
<b>Assets</b>	<b>1</b> Cash—non-interest-bearing . . . . .	78,951	<b>1</b>	81,411
	<b>2</b> Savings and temporary cash investments . . . . .	7,080,111	<b>2</b>	10,118,185
	<b>3</b> Pledges and grants receivable, net . . . . .	2,763,063	<b>3</b>	2,058,722
	<b>4</b> Accounts receivable, net . . . . .	2,762,146	<b>4</b>	3,158,863
	<b>5</b> 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	<b>5</b>	0
	<b>6</b> Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B) . . . . .	0	<b>6</b>	0
	<b>7</b> Notes and loans receivable, net . . . . .	0	<b>7</b>	0
	<b>8</b> Inventories for sale or use . . . . .	0	<b>8</b>	0
	<b>9</b> Prepaid expenses and deferred charges . . . . .	769,943	<b>9</b>	452,712
	<b>10a</b> Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D . . . . .	5,192,687		
	<b>b</b> Less: accumulated depreciation . . . . .	4,524,002		
	<b>11</b> Investments—publicly traded securities . . . . .	29,734,922	<b>10c</b>	668,685
	<b>12</b> Investments—other securities. See Part IV, line 11 . . . . .		<b>11</b>	34,731,243
	<b>13</b> Investments—program-related. See Part IV, line 11 . . . . .		<b>12</b>	
	<b>14</b> Intangible assets . . . . .		<b>13</b>	
	<b>15</b> Other assets. See Part IV, line 11 . . . . .		<b>14</b>	
<b>16</b> <b>Total assets.</b> Add lines 1 through 15 (must equal line 33) . . . . .	43,978,975	<b>15</b>	51,269,821	
<b>Liabilities</b>	<b>17</b> Accounts payable and accrued expenses . . . . .	4,188,904	<b>16</b>	51,269,821
	<b>18</b> Grants payable . . . . .	0	<b>17</b>	2,483,545
	<b>19</b> Deferred revenue . . . . .	2,960,300	<b>18</b>	0
	<b>20</b> Tax-exempt bond liabilities . . . . .	0	<b>19</b>	2,427,401
	<b>21</b> Escrow or custodial account liability. Complete Part IV of Schedule D . . . . .	102,117	<b>20</b>	0
	<b>22</b> 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 . . . . .	0	<b>21</b>	143,220
	<b>23</b> Secured mortgages and notes payable to unrelated third parties . . . . .	0	<b>22</b>	0
	<b>24</b> Unsecured notes and loans payable to unrelated third parties . . . . .	0	<b>23</b>	3,911,497
	<b>25</b> 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 . . . . .	0	<b>24</b>	0
	<b>26</b> <b>Total liabilities.</b> Add lines 17 through 25 . . . . .	7,251,321	<b>25</b>	8,965,663
<b>Net Assets or Fund Balances</b>	<b>Organizations that follow FASB ASC 958, check here <input checked="" type="checkbox"/> and complete lines 27, 28, 32, and 33.</b>			
	<b>27</b> Net assets without donor restrictions . . . . .	22,254,620	<b>26</b>	8,965,663
	<b>28</b> Net assets with donor restrictions . . . . .	14,473,034	<b>27</b>	25,940,249
	<b>Organizations that do not follow FASB ASC 958, check here <input type="checkbox"/> and complete lines 29 through 33.</b>			
	<b>29</b> Capital stock or trust principal, or current funds . . . . .		<b>28</b>	16,363,909
	<b>30</b> Paid-in or capital surplus, or land, building, or equipment fund . . . . .		<b>29</b>	
	<b>31</b> Retained earnings, endowment, accumulated income, or other funds . . . . .		<b>30</b>	
<b>32</b> Total net assets or fund balances . . . . .	36,727,654	<b>31</b>	42,304,158	
<b>33</b> Total liabilities and net assets/fund balances . . . . .	43,978,975	<b>32</b>	51,269,821	

**Part XI Reconciliation of Net Assets**

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

<b>1</b>	Total revenue (must equal Part VIII, column (A), line 12)	<b>1</b>	31,136,737
<b>2</b>	Total expenses (must equal Part IX, column (A), line 25)	<b>2</b>	29,464,717
<b>3</b>	Revenue less expenses. Subtract line 2 from line 1	<b>3</b>	1,672,020
<b>4</b>	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	<b>4</b>	36,727,654
<b>5</b>	Net unrealized gains (losses) on investments	<b>5</b>	3,904,486
<b>6</b>	Donated services and use of facilities	<b>6</b>	0
<b>7</b>	Investment expenses	<b>7</b>	0
<b>8</b>	Prior period adjustments	<b>8</b>	0
<b>9</b>	Other changes in net assets or fund balances (explain on Schedule O)	<b>9</b>	-2
<b>10</b>	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	<b>10</b>	42,304,158

**Part XII Financial Statements and Reporting**

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

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



**SCHEDULE A**  
**(Form 990 or 990-EZ)**

**Public Charity Status and Public Support**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

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](http://www.irs.gov/Form990) for instructions and the latest information.

<b>Name of the organization</b> DETROIT ZOOLOGICAL SOCIETY	<b>Employer identification number</b> 38-6027356
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**Part I Reason for Public Charity Status.** (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1  A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2  A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3  A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4  A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: \_\_\_\_\_
- 5  An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6  A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8  A community trust described in **section 170(b)(1)(A)(vii)**. (Complete Part II.)
- 9  An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: \_\_\_\_\_
- 10  An organization that normally receives (1) more than 33<sup>1</sup>/<sub>3</sub>% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33<sup>1</sup>/<sub>3</sub>% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11  An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12  An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
  - a  **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
  - b  **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
  - c  **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
  - d  **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
  - e  Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
  - f Enter the number of supported organizations
  - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
<b>Total</b>						

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

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

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.") . . . . .						
<b>2</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . . .						
<b>3</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . . .						
<b>4 Total.</b> Add lines 1 through 3 . . . . .						
<b>5</b> 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) . . . . .						
<b>6 Public support.</b> Subtract line 5 from line 4						

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>7</b> Amounts from line 4 . . . . .						
<b>8</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . . .						
<b>9</b> Net income from unrelated business activities, whether or not the business is regularly carried on . . . . .						
<b>10</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . . .						
<b>11 Total support.</b> Add lines 7 through 10						
<b>12</b> Gross receipts from related activities, etc. (see instructions) . . . . .					<b>12</b>	
<b>13 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>14</b> Public support percentage for 2020 (line 6, column (f), divided by line 11, column (f)) . . . . .	<b>14</b>	%
<b>15</b> Public support percentage from 2019 Schedule A, Part II, line 14 . . . . .	<b>15</b>	%
<b>16a 33 1/3% support test—2020.</b> If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 33 1/3% support test—2019.</b> If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and <b>stop here.</b> The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>17a 10%-facts-and-circumstances test—2020.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>b 10%-facts-and-circumstances test—2019.</b> 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 <b>stop here.</b> Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization . . . . .		<input type="checkbox"/>
<b>18 Private foundation.</b> If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions . . . . .		<input type="checkbox"/>

**Part III Support Schedule for Organizations Described in Section 509(a)(2)**

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

**Section A. Public Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>1</b> Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	16,873,020	15,513,056	14,372,257	15,591,225	9,095,325	71,444,883
<b>2</b> 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 . . . .	17,450,673	16,993,162	18,601,760	16,733,449	6,588,433	76,367,477
<b>3</b> Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
<b>4</b> Tax revenues levied for the organization's benefit and either paid to or expended on its behalf . . . .	11,768,675	12,079,949	12,697,424	13,339,302	13,259,906	63,145,256
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge . . . .	0	0	0	0	0	0
<b>6 Total.</b> Add lines 1 through 5 . . . .	46,092,368	44,586,167	45,671,441	45,663,976	28,943,664	210,957,616
<b>7a</b> Amounts included on lines 1, 2, and 3 received from disqualified persons . . . .	529,320	254,674	302,500	2,927,388	357,916	4,371,798
<b>b</b> Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	0	0	0	0
<b>c</b> Add lines 7a and 7b . . . .	529,320	254,674	302,500	2,927,388	357,916	4,371,798
<b>8 Public support.</b> (Subtract line 7c from line 6.) . . . .						206,585,818

**Section B. Total Support**

Calendar year (or fiscal year beginning in) ►	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
<b>9</b> Amounts from line 6 . . . .	46,092,368	44,586,167	45,671,441	45,663,976	28,943,664	210,957,616
<b>10a</b> Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources . . . .	387,324	789,368	875,164	990,211	1,245,847	4,287,914
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 . . . .	0	0	0	0	0	0
<b>c</b> Add lines 10a and 10b . . . .	387,324	789,368	875,164	990,211	1,245,847	4,287,914
<b>11</b> Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
<b>12</b> Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) . . . .	570,000	570,000	570,000	570,000	570,000	2,850,000
<b>13 Total support.</b> (Add lines 9, 10c, 11, and 12.) . . . .	47,049,692	45,945,535	47,116,605	47,224,187	30,759,511	218,095,530
<b>14 First 5 years.</b> If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and <b>stop here</b> . . . .						<input type="checkbox"/>

**Section C. Computation of Public Support Percentage**

<b>15</b> Public support percentage for 2020 (line 8, column (f), divided by line 13, column (f)) . . . .	<b>15</b>	94.72 %
<b>16</b> Public support percentage from 2019 Schedule A, Part III, line 15 . . . .	<b>16</b>	95.47 %

**Section D. Computation of Investment Income Percentage**

<b>17</b> Investment income percentage for <b>2020</b> (line 10c, column (f), divided by line 13, column (f)) . . . .	<b>17</b>	1.97 %
<b>18</b> Investment income percentage from <b>2019</b> Schedule A, Part III, line 17 . . . .	<b>18</b>	1.44 %
<b>19a 33 1/3% support tests—2020.</b> If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . .	<input checked="" type="checkbox"/>	
<b>b 33 1/3% support tests—2019.</b> If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and <b>stop here</b> . The organization qualifies as a publicly supported organization . . . .	<input type="checkbox"/>	
<b>20 Private foundation.</b> If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions . . . .	<input type="checkbox"/>	

**Part IV Supporting Organizations**

(Complete only if you checked a box in line 12 on Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

**Section A. All Supporting Organizations**

		Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer lines 3b and 3c below.</i>		
3b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
3c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.</i>		
4b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
4c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
5b	<b>Type I or Type II only.</b> Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
5c	<b>Substitutions only.</b> Was the substitution the result of an event beyond the organization's control?		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
9b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
9c	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer line 10b below.</i>		
10b	Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

**Part IV Supporting Organizations** (continued)

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

**Section B. Type I Supporting Organizations**

	Yes	No
<b>1</b> 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 <b>Part VI</b> 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.	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.	<b>2</b>	

**Section C. Type II Supporting Organizations**

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

**Section D. All Type III Supporting Organizations**

	Yes	No
<b>1</b> Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	<b>1</b>	
<b>2</b> 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).	<b>2</b>	
<b>3</b> By reason of the relationship described in 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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	<b>3</b>	

**Section E. Type III Functionally Integrated Supporting Organizations**

<b>1</b> Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
<b>a</b> <input type="checkbox"/> The organization satisfied the Activities Test. Complete <b>line 2</b> below.			
<b>b</b> <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete <b>line 3</b> below.			
<b>c</b> <input type="checkbox"/> The organization supported a governmental entity. Describe in <b>Part VI</b> how you supported a governmental entity (see instructions).			
<b>2</b> Activities Test. <b>Answer lines 2a and 2b below.</b>			
<b>a</b> 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 <b>Part VI identify those supported organizations and explain</b> 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.	<b>2a</b>		
<b>b</b> Did the activities described in 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 <b>Part VI</b> the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.	<b>2b</b>		
<b>3</b> Parent of Supported Organizations. <b>Answer lines 3a and 3b below.</b>			
<b>a</b> 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 <b>Part VI</b> .	<b>3a</b>		
<b>b</b> 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 <b>Part VI</b> the role played by the organization in this regard.	<b>3b</b>		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations**

- 1**  Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in **Part VI**). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

<b>Section A—Adjusted Net Income</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Net short-term capital gain	<b>1</b>	
<b>2</b>	Recoveries of prior-year distributions	<b>2</b>	
<b>3</b>	Other gross income (see instructions)	<b>3</b>	
<b>4</b>	Add lines 1 through 3.	<b>4</b>	
<b>5</b>	Depreciation and depletion	<b>5</b>	
<b>6</b>	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)	<b>6</b>	
<b>7</b>	Other expenses (see instructions)	<b>7</b>	
<b>8</b>	<b>Adjusted Net Income</b> (subtract lines 5, 6, and 7 from line 4)	<b>8</b>	
<b>Section B—Minimum Asset Amount</b>		(A) Prior Year	(B) Current Year (optional)
<b>1</b>	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
<b>a</b>	Average monthly value of securities	<b>1a</b>	
<b>b</b>	Average monthly cash balances	<b>1b</b>	
<b>c</b>	Fair market value of other non-exempt-use assets	<b>1c</b>	
<b>d</b>	<b>Total</b> (add lines 1a, 1b, and 1c)	<b>1d</b>	
<b>e</b>	<b>Discount</b> claimed for blockage or other factors (explain in detail in <b>Part VI</b> ):	<b>1e</b>	
<b>2</b>	Acquisition indebtedness applicable to non-exempt-use assets	<b>2</b>	
<b>3</b>	Subtract line 2 from line 1d.	<b>3</b>	
<b>4</b>	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	<b>4</b>	
<b>5</b>	Net value of non-exempt-use assets (subtract line 4 from line 3)	<b>5</b>	
<b>6</b>	Multiply line 5 by 0.035.	<b>6</b>	
<b>7</b>	Recoveries of prior-year distributions	<b>7</b>	
<b>8</b>	<b>Minimum Asset Amount</b> (add line 7 to line 6)	<b>8</b>	
<b>Section C—Distributable Amount</b>			Current Year
<b>1</b>	Adjusted net income for prior year (from Section A, line 8, column A)	<b>1</b>	
<b>2</b>	Enter 0.85 of line 1.	<b>2</b>	
<b>3</b>	Minimum asset amount for prior year (from Section B, line 8, column A)	<b>3</b>	
<b>4</b>	Enter greater of line 2 or line 3.	<b>4</b>	
<b>5</b>	Income tax imposed in prior year	<b>5</b>	
<b>6</b>	<b>Distributable Amount.</b> Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	<b>6</b>	
<b>7</b>	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

**Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations** (continued)

<b>Section D—Distributions</b>		<b>Current Year</b>
<b>1</b>	Amounts paid to supported organizations to accomplish exempt purposes	<b>1</b>
<b>2</b>	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	<b>2</b>
<b>3</b>	Administrative expenses paid to accomplish exempt purposes of supported organizations	<b>3</b>
<b>4</b>	Amounts paid to acquire exempt-use assets	<b>4</b>
<b>5</b>	Qualified set-aside amounts (prior IRS approval required—provide details in <b>Part VI</b> )	<b>5</b>
<b>6</b>	Other distributions (describe in <b>Part VI</b> ). See instructions.	<b>6</b>
<b>7</b>	<b>Total annual distributions.</b> Add lines 1 through 6.	<b>7</b>
<b>8</b>	Distributions to attentive supported organizations to which the organization is responsive (provide details in <b>Part VI</b> ). See instructions.	<b>8</b>
<b>9</b>	Distributable amount for 2020 from Section C, line 6	<b>9</b>
<b>10</b>	Line 8 amount divided by line 9 amount	<b>10</b>

<b>Section E—Distribution Allocations</b> (see instructions)	<b>(i) Excess Distributions</b>	<b>(ii) Underdistributions Pre-2020</b>	<b>(iii) Distributable Amount for 2020</b>
<b>1</b> Distributable amount for 2020 from Section C, line 6			
<b>2</b> Underdistributions, if any, for years prior to 2020 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
<b>3</b> Excess distributions carryover, if any, to 2020			
<b>a</b> <b>From 2015</b> . . . . .			
<b>b</b> <b>From 2016</b> . . . . .			
<b>c</b> From 2017 . . . . .			
<b>d</b> From 2018 . . . . .			
<b>e</b> From 2019 . . . . .			
<b>f</b> <b>Total</b> of lines 3a through 3e			
<b>g</b> Applied to underdistributions of prior years			
<b>h</b> Applied to 2020 distributable amount			
<b>i</b> Carryover from 2015 not applied (see instructions)			
<b>j</b> Remainder. Subtract lines 3g, 3h, and 3i from line 3f.			
<b>4</b> Distributions for 2020 from Section D, line 7: \$			
<b>a</b> Applied to underdistributions of prior years			
<b>b</b> Applied to 2020 distributable amount			
<b>c</b> Remainder. Subtract lines 4a and 4b from line 4.			
<b>5</b> Remaining underdistributions for years prior to 2020, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>6</b> Remaining underdistributions for 2020. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI</b> . See instructions.			
<b>7</b> <b>Excess distributions carryover to 2021.</b> Add lines 3j and 4c.			
<b>8</b> Breakdown of line 7:			
<b>a</b> <b>Excess from 2016</b> . . .			
<b>b</b> Excess from 2017 . . .			
<b>c</b> Excess from 2018 . . .			
<b>d</b> Excess from 2019 . . .			
<b>e</b> Excess from 2020 . . .			

**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 - Income from the City of Detroit.

[This section contains multiple horizontal dashed lines for providing supplemental information.]



**SCHEDULE C**  
**(Form 990 or 990-EZ)**

**Political Campaign and Lobbying Activities**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Department of the Treasury  
Internal Revenue Service

**For Organizations Exempt From Income Tax Under section 501(c) and section 527**

▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**  
▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization <b>DETROIT ZOOLOGICAL SOCIETY</b>	Employer identification number <b>38-6027356</b>
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**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")
- 2 Political campaign activity expenditures (See instructions) . . . . . ▶ \$
- 3 Volunteer hours for political campaign activities (See instructions) . . . . .

**Part I-B Complete if the organization is exempt under section 501(c)(3).**

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 . . . . . ▶ \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 . . . . . ▶ \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? . . . . .  Yes  No
- 4a Was a correction made? . . . . .  Yes  No
- b If "Yes," describe in Part IV.

**Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).**

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities . . . . . ▶ \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities . . . . . ▶ \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b . . . . . ▶ \$
- 4 Did the filing organization file **Form 1120-POL** for this year? . . . . .  Yes  No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-.	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-.
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

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

<b>Limits on Lobbying Expenditures</b> <b>(The term "expenditures" means amounts paid or incurred.)</b>		(a) Filing organization's totals	(b) Affiliated group totals												
<b>1a</b>	Total lobbying expenditures to influence public opinion (grassroots lobbying) . . . . .	0													
<b>b</b>	Total lobbying expenditures to influence a legislative body (direct lobbying) . . . . .	49,667													
<b>c</b>	Total lobbying expenditures (add lines 1a and 1b) . . . . .	49,667													
<b>d</b>	Other exempt purpose expenditures . . . . .	29,415,049													
<b>e</b>	Total exempt purpose expenditures (add lines 1c and 1d) . . . . .	29,464,716													
<b>f</b>	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	1,000,000													
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">If the amount on line 1e, column (a) or (b) is:</th> <th style="text-align: left;">The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
<b>g</b>	Grassroots nontaxable amount (enter 25% of line 1f) . . . . .	250,000													
<b>h</b>	Subtract line 1g from line 1a. If zero or less, enter -0- . . . . .	0													
<b>i</b>	Subtract line 1f from line 1c. If zero or less, enter -0- . . . . .	0													
<b>j</b>	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? . . . . .		<input type="checkbox"/> Yes <input type="checkbox"/> No												

**4-Year Averaging Period Under Section 501(h)**  
**(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.)**

<b>Lobbying Expenditures During 4-Year Averaging Period</b>					
Calendar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
<b>2a</b> Lobbying nontaxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					6,000,000
<b>c</b> Total lobbying expenditures	68,000	68,000	68,000	49,667	253,667
<b>d</b> Grassroots nontaxable amount	250,000	250,000	250,000	250,000	1,000,000
<b>e</b> Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000
<b>f</b> Grassroots lobbying expenditures	0	0	0	0	0

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

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
<b>1</b> 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:			
<b>a</b> Volunteers?			
<b>b</b> Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
<b>c</b> Media advertisements?			
<b>d</b> Mailings to members, legislators, or the public?			
<b>e</b> Publications, or published or broadcast statements?			
<b>f</b> Grants to other organizations for lobbying purposes?			
<b>g</b> Direct contact with legislators, their staffs, government officials, or a legislative body?			
<b>h</b> Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
<b>i</b> Other activities?			
<b>j</b> Total. Add lines 1c through 1i			
<b>2a</b> Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
<b>b</b> If "Yes," enter the amount of any tax incurred under section 4912			
<b>c</b> If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
<b>d</b> If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

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

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

**Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."**

<b>1</b> Dues, assessments and similar amounts from members	<b>1</b>	
<b>2</b> Section 162(e) nondeductible lobbying and political expenditures ( <b>do not include amounts of political expenses for which the section 527(f) tax was paid</b> ).		
<b>a</b> Current year	<b>2a</b>	
<b>b</b> Carryover from last year	<b>2b</b>	
<b>c</b> Total	<b>2c</b>	
<b>3</b> Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	<b>3</b>	
<b>4</b> If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	<b>4</b>	
<b>5</b> Taxable amount of lobbying and political expenditures (See instructions)	<b>5</b>	

**Part IV Supplemental Information**

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (See instructions); and Part II-B, line 1. Also, complete this part for any additional information.

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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. Attach to Form 990.

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

OMB No. 1545-0047

2020

Open to Public Inspection

Name of the organization: DETROIT ZOOLOGICAL SOCIETY; Employer identification number: 38-6027356

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

Table with 3 columns: Line number, (a) Donor advised funds, (b) Funds and other accounts. Includes questions 1-6 regarding donor advised funds.

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

Form for Part II Conservation Easements, including questions 1-9 and a table for lines 2a-2d.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Form for Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets, including questions 1a-2.

**Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

- 3** Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply):
- a**  Public exhibition
  - b**  Scholarly research
  - c**  Preservation for future generations
  - d**  Loan or exchange program
  - e**  Other \_\_\_\_\_
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?  Yes  No

**Part IV Escrow and Custodial Arrangements.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- |   | Amount |
|---|--------|
| <b>1c</b> Beginning balance             |        |
| <b>1d</b> Additions during the year     |        |
| <b>1e</b> Distributions during the year |        |
| <b>1f</b> Ending balance                |        |
- 2a** Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?  Yes  No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

**Part V Endowment Funds.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
<b>1a</b> Beginning of year balance	23,736,628	20,129,888	19,316,031	16,166,026	14,947,212
<b>b</b> Contributions	334,796	46,275	2,124,087	744,564	553,977
<b>c</b> Net investment earnings, gains, and losses	4,251,339	3,934,990	-970,825	2,689,641	989,607
<b>d</b> Grants or scholarships	0	0	0	0	0
<b>e</b> Other expenditures for facilities and programs	327,200	308,100	300,500	284,200	280,400
<b>f</b> Administrative expenses	31,280	66,425	38,905	0	44,370
<b>g</b> End of year balance	27,964,283	23,736,628	20,129,888	19,316,031	16,166,026

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment  \_\_\_\_\_ 65 %
  - b** Permanent endowment  \_\_\_\_\_ 35 %
  - c** Term endowment  \_\_\_\_\_ 0 %
- The percentages on lines 2a, 2b, and 2c should equal 100%.
- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- |                                    | Yes                                 | No                                  |
|------------------------------------|-------------------------------------|-------------------------------------|
| <b>(i)</b> Unrelated organizations | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| <b>(ii)</b> Related organizations  | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
- b** If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  Yes  No
- 4** Describe in Part XIII the intended uses of the organization's endowment funds.

**Part VI Land, Buildings, and Equipment.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
<b>1a</b> Land	0	0	0	0
<b>b</b> Buildings	0	118,647	118,647	0
<b>c</b> Leasehold improvements	0	0	0	0
<b>d</b> Equipment	0	5,074,040	4,405,355	668,685
<b>e</b> Other	0	0	0	0
<b>Total.</b> Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				668,685

**Part VII Investments—Other Securities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives . . . . .		
(2) Closely held equity interests . . . . .		
(3) Other _____		
(A) _____		
(B) _____		
(C) _____		
(D) _____		
(E) _____		
(F) _____		
(G) _____		
(H) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 12.) . . . . .		

**Part VIII Investments—Program Related.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) _____		
(2) _____		
(3) _____		
(4) _____		
(5) _____		
(6) _____		
(7) _____		
(8) _____		
(9) _____		
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 13.) . . . . .		

**Part IX Other Assets.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1) _____	
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 15.) . . . . .	

**Part X Other Liabilities.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	0
(2) _____	
(3) _____	
(4) _____	
(5) _____	
(6) _____	
(7) _____	
(8) _____	
(9) _____	
<b>Total.</b> (Column (b) must equal Form 990, Part X, col. (B) line 25.) . . . . .	0

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII

**Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.**

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

<b>1</b>	Total revenue, gains, and other support per audited financial statements . . . . .		<b>1</b>	34,972,288
<b>2</b>	Amounts included on line 1 but not on Form 990, Part VIII, line 12:			
<b>a</b>	Net unrealized gains (losses) on investments . . . . .	<b>2a</b>	3,904,486	
<b>b</b>	Donated services and use of facilities . . . . .	<b>2b</b>	0	
<b>c</b>	Recoveries of prior year grants . . . . .	<b>2c</b>	0	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	-68,935	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b> 3,835,551
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b> 31,136,737
<b>4</b>	Amounts included on Form 990, Part VIII, line 12, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	0	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	0	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b> 0
<b>5</b>	Total revenue. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 12.) . . . . .			<b>5</b> 31,136,737

**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.

<b>1</b>	Total expenses and losses per audited financial statements . . . . .		<b>1</b>	29,395,783
<b>2</b>	Amounts included on line 1 but not on Form 990, Part IX, line 25:			
<b>a</b>	Donated services and use of facilities . . . . .	<b>2a</b>	0	
<b>b</b>	Prior year adjustments . . . . .	<b>2b</b>	0	
<b>c</b>	Other losses . . . . .	<b>2c</b>	0	
<b>d</b>	Other (Describe in Part XIII.) . . . . .	<b>2d</b>	-68,934	
<b>e</b>	Add lines <b>2a</b> through <b>2d</b> . . . . .			<b>2e</b> -68,934
<b>3</b>	Subtract line <b>2e</b> from line <b>1</b> . . . . .			<b>3</b> 29,464,717
<b>4</b>	Amounts included on Form 990, Part IX, line 25, but not on line 1:			
<b>a</b>	Investment expenses not included on Form 990, Part VIII, line 7b . . . . .	<b>4a</b>	0	
<b>b</b>	Other (Describe in Part XIII.) . . . . .	<b>4b</b>	0	
<b>c</b>	Add lines <b>4a</b> and <b>4b</b> . . . . .			<b>4c</b> 0
<b>5</b>	Total expenses. Add lines <b>3</b> and <b>4c</b> . (This must equal Form 990, Part I, line 18.) . . . . .			<b>5</b> 29,464,717

**Part XIII Supplemental Information.**

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

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 is the only zoo in the world with a permanent fine art collection from many cultures, centuries and 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 antiquities wall case 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. The artists possibly most readily recognized are 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 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

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, 2020 or 2019.

Schedule D, Part XI, Line 2d - Other adjustments to audited financial statements include: donations to CONAPAC of \$123,161, direct fundraising expenses of \$54,227, and \$1 rounding, for total of \$68,935.

Schedule D, Part XII, Line 2d - Other adjustments to audited financial statements include: donations to CONAPAC of \$123,161, and direct fundraising expenses of \$54,227, for total of \$68,934.



**SCHEDULE F  
(Form 990)**

**Statement of Activities Outside the United States**

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.**  
▶ **Attach to Form 990.**

▶ **Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**DETROIT ZOOLOGICAL SOCIETY**

Employer identification number

**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.

**1 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 award the grants or assistance?  **Yes**  **No**

**2 For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

**3 Activities per Region.** (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region
(1) Europe (including Iceland and C	0	0	Grantmaking	Conservation support	30,000
(2) East Asia and the Pacific	0	0	Grantmaking	Conservation support	10,000
(3) South America	0	0	Grantmaking	Educational support	123,161
(4)					
(5)					
(6)					
(7)					
(8)					
(9)					
(10)					
(11)					
(12)					
(13)					
(14)					
(15)					
(16)					
(17)					
<b>3a</b> Subtotal . . . . .					
<b>b</b> Total from continuation sheets to Part I . . . . .					
<b>c Totals</b> (add lines 3a and 3b)	0	0			163,161

**Part II 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.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)			Europe (including Iceland)	Conservation support	20,000	Wire transfer	0		
(2)			Europe (including Iceland)	Conservation support	10,000	Wire transfer	0		
(3)			East Asia and the Pacific	Conservation support	10,000	Wire transfer	0		
(4)			South America	Educational support	123,161	Wire transfer	0		
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . ▶ 4

3 Enter total number of other organizations or entities . . . ▶ 0

**Part III** **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.

(a) Type of grant or assistance	(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)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

**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

**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 to our partners in Peru. A representative from the Detroit Zoological Society and volunteers participate in the delivery of school supplies each April, providing a first-hand account of the purchased supplies and their distribution. The DZS staff also stays in contact with leaders of the organizations to ensure their activities continue to support their mission.

**SCHEDULE G  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**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.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Name of the organization

**DETROIT ZOOLOGICAL SOCIETY**

Employer identification number

**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.

- 1** Indicate whether the organization raised funds through any of the following activities. Check all that apply.
- a**  Mail solicitations
  - b**  Internet and email solicitations
  - c**  Phone solicitations
  - d**  In-person solicitations
  - e**  Solicitation of non-government grants
  - f**  Solicitation of government grants
  - g**  Special fundraising events
- 2a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?  **Yes**  **No**
- b** If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
<b>Total</b>						

- 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.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		Sunset at the Zoo (event type)	Run Wild (event type)	0 (total number)	
Revenue	<b>1</b> Gross receipts . . . . .	504,328	85,997		590,325
	<b>2</b> Less: Contributions . . . . .	381,250	39,250		420,500
	<b>3</b> Gross income (line 1 minus line 2) . . . . .	123,078	46,747		169,825
Direct Expenses	<b>4</b> Cash prizes . . . . .	0	0		0
	<b>5</b> Noncash prizes . . . . .	0	0		0
	<b>6</b> Rent/facility costs . . . . .	224	1,325		1,549
	<b>7</b> Food and beverages . . . . .	8,906	0		8,906
	<b>8</b> Entertainment . . . . .	24,720	0		24,720
	<b>9</b> Other direct expenses . . . . .	4,721	14,331		19,052
	<b>10</b> Direct expense summary. Add lines 4 through 9 in column (d) . . . . . ▶				54,227
<b>11</b> Net income summary. Subtract line 10 from line 3, column (d) . . . . . ▶				115,598	

**Part III Gaming.** Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a.

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
		<b>1</b> Gross revenue . . . . .			
Direct Expenses	<b>2</b> Cash prizes . . . . .				
	<b>3</b> Noncash prizes . . . . .				
	<b>4</b> Rent/facility costs . . . . .				
	<b>5</b> Other direct expenses . . . . .				
<b>6</b> Volunteer labor . . . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No		
<b>7</b> Direct expense summary. Add lines 2 through 5 in column (d) . . . . . ▶					
<b>8</b> Net gaming income summary. Subtract line 7 from line 1, column (d) . . . . . ▶					

**9** Enter the state(s) in which the organization conducts gaming activities: \_\_\_\_\_

**a** Is the organization licensed to conduct gaming activities in each of these states? . . . . .  Yes  No

**b** If "No," explain: \_\_\_\_\_

\_\_\_\_\_

**10a** Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? . . . . .  Yes  No

**b** If "Yes," explain: \_\_\_\_\_

\_\_\_\_\_

- 11** Does the organization conduct gaming activities with nonmembers?  Yes  No
- 12** Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?  Yes  No
- 13** Indicate the percentage of gaming activity conducted in:
 

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

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

Name ▶ \_\_\_\_\_

Address ▶ \_\_\_\_\_

- 16** Gaming manager information:
- Name ▶ \_\_\_\_\_
- Gaming manager compensation ▶ \$ \_\_\_\_\_
- Description of services provided ▶ \_\_\_\_\_
- Director/officer       Employee       Independent contractor

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

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

\_\_\_\_\_  
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 \_\_\_\_\_



**SCHEDULE I  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

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

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

▶ Attach to Form 990.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**DETROIT ZOOLOGICAL SOCIETY**

Employer identification number

**38-6027356**

**Part I General Information on Grants and Assistance**

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

**Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.** Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

<b>1 (a)</b> Name and address of organization or government	<b>(b)</b> EIN	<b>(c)</b> IRC section (if applicable)	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of non-cash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	<b>(g)</b> Description of noncash assistance	<b>(h)</b> Purpose of grant or assistance
<b>(1)</b> <u>Sch I, Stmt 1</u>							
<b>(2)</b>							
<b>(3)</b>							
<b>(4)</b>							
<b>(5)</b>							
<b>(6)</b>							
<b>(7)</b>							
<b>(8)</b>							
<b>(9)</b>							
<b>(10)</b>							
<b>(11)</b>							
<b>(12)</b>							

- 2** Enter total number of section 501(c)(3) and government organizations listed in the line 1 table ▶ 16
- 3** Enter total number of other organizations listed in the line 1 table ▶ 2



## Description of Grants and Other Assistance to Governments and Organizations in the United States

		Recipient EIN	Amt. of cash grant	Amt. of non- cash asst.
<b>Name and address</b>	African Elephant Conservation Trust 10 State Street Newburyport, MA 01950	23-6610636	40,000	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	USGS National Center MS 270 12201 Sunrise Valley Dr MS 270 Reston, VA 20192	53-0196958	25,000	
<b>IRC code section</b>	Governmental Entity			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	Michigan Technological University 115 Great Lakes Research Center Houghton, MI 49931	38-6005955	21,446	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	Global Wildlife Conservation PO Box 129 Austin, TX 78767	26-2887967	20,000	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	Gorilla Rehabilitation and Conservation Education Center Inc PO Box 334 Cumberland Center, ME 04021	46-2308758	20,000	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	Wildlife Conservation Network 209 Mississippi St San Francisco, CA 94107	61-4855869	17,500	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				
<b>Desc. of Non-Cash Asst.</b>				
<b>Purpose of grant</b>	Conservation Support			
<b>Name and address</b>	CONAPAC 8450 W 10 Mile Road Royal Oak, MI 48067	38-6017356	15,000	
<b>IRC code section</b>	501(c)(3)			
<b>Method of valuation</b>				

## Desc. of Non-Cash Asst.

<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Regents of the University of Michigan 1085 South University Avenue Ann Arbor, MI 48109	38-6006309	15,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	University of Washington Foundation 407 Gerberding Hall Box 351210 Seattle, WA 98195	94-3079432	15,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Americans for Oxford Inc 500 5th Avenue 32nd Floor New York, NY 10110	52-1495060	10,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Association of Zoos and Aquariums 8403 Colesville Road Suite 710 Silver Springs, MD 20910	55-0526930	10,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	ASU Foundation for A New American University dba ASU Foundation PO Box 2260 Tempe, AZ 85280	36-3851341	10,000
<b>IRC code section</b>	501(c)(6)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Giraffe Conservation Foundation USA PO Box 24246 Cleveland, OH 44124	81-2749463	10,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Global Conservation Network 12101 Johnny Cake Ridge Road Apple Valley, MN 55124	41-1719362	10,000
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Polar Oceans Research Group Inc	81-0536140	10,000

	PO Box 368		
	Sheridan, MT 59749		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Red Panda Network	26-1103671	10,000
	1859 Powell St		
	San Francisco, CA 94133		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Turtle Survival Alliance	20-0785702	10,000
	1989 Colonial Parkway		
	Fort Worth, TX 76110		
<b>IRC code section</b>	501(c)(3)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		
<b>Name and address</b>	Zoo Conservation Outreach Group	75-2376327	10,000
	8403 Colesville Road Suite 710		
	Silver Springs, MD 20910		
<b>IRC code section</b>	501(c)(6)		
<b>Method of valuation</b>			
<b>Desc. of Non-Cash Asst.</b>			
<b>Purpose of grant</b>	Conservation Support		

**SCHEDULE J  
(Form 990)**

Department of the Treasury  
Internal Revenue Service

Name of the organization

**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](http://www.irs.gov/Form990) for instructions and the latest information.

OMB No. 1545-0047

**2020**

**Open to Public Inspection**

Employer identification number

38-6027356

**Part I Questions Regarding Compensation**

**1a** Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- |  |   |
|--|---|
| <input type="checkbox"/> First-class or charter travel             | <input checked="" type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions                     | <input type="checkbox"/> Payments for business use of personal residence            |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input type="checkbox"/> Health or social club dues or initiation fees              |
| <input type="checkbox"/> Discretionary spending account            | <input type="checkbox"/> Personal services (such as maid, chauffeur, chef)          |

**b** If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain . . . . .

	Yes	No
<b>1b</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? . . . . .

<b>2</b>	✓	
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**3** Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Compensation committee              | <input type="checkbox"/> Written employment contract                                |
| <input checked="" type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study                    |
| <input checked="" type="checkbox"/> Form 990 of other organizations     | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

**4** During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- a** Receive a severance payment or change-of-control payment? . . . . .
- b** Participate in or receive payment from a supplemental nonqualified retirement plan? . . . . .
- c** Participate in or receive payment from an equity-based compensation arrangement? . . . . .

<b>4a</b>		✓
<b>4b</b>		✓
<b>4c</b>		✓

If "Yes" to any of lines 4a–c, list the persons and provide the applicable amounts for each item in Part III.

**Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5–9.**

**5** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" on line 5a or 5b, describe in Part III.

<b>5a</b>		✓
<b>5b</b>		✓

**6** For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- a** The organization? . . . . .
- b** Any related organization? . . . . .
- If "Yes" on line 6a or 6b, describe in Part III.

<b>6a</b>		✓
<b>6b</b>		✓

**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 . . . . .

<b>7</b>		✓
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**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 . . . . .

<b>8</b>		✓
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**9** If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)? . . . . .

<b>9</b>		
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**Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees.** Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

**Note:** The sum of columns (B)(i)–(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)–(D)	(F) Compensation in column (B) reported as deferred on prior Form 990	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation					
1	Ron L Kagan, Executive Director/CEO	(i)	369,213	800	7,200	11,400	7,049	395,662	0
	(ii)	0	0	0	0	0	0	0	0
2	Scott F Carter, Chief Life Science Officer	(i)	197,537	3,300	5,400	8,382	10,317	224,936	0
	(ii)	0	0	0	0	0	0	0	0
3	Jane Alessandrini, Chief Development Officer	(i)	158,430	1,400	5,400	6,947	21,043	193,220	0
	(ii)	0	0	0	0	0	0	0	0
4	Gerry VanAcker, Chief Operating Officer	(i)	156,381	1,400	5,400	6,815	16,784	186,780	0
	(ii)	0	0	0	0	0	0	0	0
5	Diane Miller, Chief Program Officer	(i)	141,990	1,400	5,400	5,399	7,049	161,238	0
	(ii)	0	0	0	0	0	0	0	0
6	Sabarras George, Deputy Chief Operating Officer	(i)	130,067	1,000	600	4,830	20,143	156,640	0
	(ii)	0	0	0	0	0	0	0	0
7	Robert Schumaker, Director of Finance	(i)	123,337	1,000	600	5,210	20,143	150,290	0
	(ii)	0	0	0	0	0	0	0	0
8	Jeffrey Evans, Chief Financial Officer - Term July 2020	(i)	129,870	0	3,150	4,568	9,147	146,735	0
	(ii)	0	0	0	0	0	0	0	0
9		(i)							
	(ii)								
10		(i)							
	(ii)								
11		(i)							
	(ii)								
12		(i)							
	(ii)								
13		(i)							
	(ii)								
14		(i)							
	(ii)								
15		(i)							
	(ii)								
16		(i)							
	(ii)								

**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 part 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 is required to live in this residence. The residence is not considered taxable to the Executive Director, given that it is a requirement of the position.

Schedule J, Part I, Line 3 - The Detroit Zoological Society uses the Association of Zoos & Aquariums salary survey and also engages an independent compensation consultant to prepare a competitive salary analysis of all non-union, salaried positions and recommend salary structures and ranges for these positions to the Board Compensation Committee. Job grades and salary ranges - including minimum, midpoint and maximum - are 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 Human Resources 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 by the Board Compensation Committee and approval by the Committee is documented in the minutes.



**SCHEDULE M  
(Form 990)**

**Noncash Contributions**

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Department of the Treasury  
Internal Revenue Service

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

Name of the organization

Employer identification number

**DETROIT ZOOLOGICAL SOCIETY**

**38-6027356**

**Part I Types of Property**

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art . . . . .				
2 Art—Historical treasures . . . . .				
3 Art—Fractional interests . . . . .				
4 Books and publications . . . . .				
5 Clothing and household goods . . . . .				
6 Cars and other vehicles . . . . .				
7 Boats and planes . . . . .				
8 Intellectual property . . . . .				
9 Securities—Publicly traded . . . . .	✓	10	75,096	Market Value
10 Securities—Closely held stock . . . . .				
11 Securities—Partnership, LLC, or trust interests . . . . .				
12 Securities—Miscellaneous . . . . .				
13 Qualified conservation contribution—Historic structures . . . . .				
14 Qualified conservation contribution—Other . . . . .				
15 Real estate—Residential . . . . .				
16 Real estate—Commercial . . . . .				
17 Real estate—Other . . . . .				
18 Collectibles . . . . .				
19 Food inventory . . . . .				
20 Drugs and medical supplies . . . . .				
21 Taxidermy . . . . .				
22 Historical artifacts . . . . .				
23 Scientific specimens . . . . .				
24 Archeological artifacts . . . . .				
25 Other ▶ (Supplies and Auction) . . . . .	✓	69	260,907	Market Value
26 Other ▶ ( ) . . . . .				
27 Other ▶ ( ) . . . . .				
28 Other ▶ ( ) . . . . .				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part V, Donee Acknowledgement . . . . . **29** 0

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period? . . . . .		✓
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? . . . . .	✓	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions? . . . . .		✓
b If "Yes," describe in Part II.		
33 If the organization didn't report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.		



**SCHEDULE O  
(Form 990 or 990-EZ)**

Department of the Treasury  
Internal Revenue Service

**Supplemental Information to Form 990 or 990-EZ**

Complete to provide information for responses to specific questions on  
Form 990 or 990-EZ or to provide any additional information.

▶ Attach to Form 990 or 990-EZ.

▶ Go to [www.irs.gov/Form990](http://www.irs.gov/Form990) for the latest information.

OMB No. 1545-0047

**2020**

**Open to Public  
Inspection**

Name of the organization

**DETROIT ZOOLOGICAL SOCIETY**

Employer identification number

**38-6027356**

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, and a tax deduction to the extent allowed by law. Classes of memberships include the following: individual (\$68/\$88), single parent (\$105), family/grandparent (\$105), supporter (\$205), and renaissance circle (\$1,500+). 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 fixed by the Board of Directors or by the Executive Committee usually within the second quarter of each fiscal year. Special meetings of the members may also be called by the Chairman of the Board, the 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 or by his 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 entire 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 Executive 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. 1. The Governance and Nominating Committee will 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 Director of Finance. This draft is sent to the audit firm where a review is performed by the tax team to ensure accuracy and completeness. After this review a draft is then provided to the Chief Executive Officer and Audit Committee for review. A regular meeting of the Audit Committee is held to discuss the form and address any questions that may result during the Audit Committee's review of the form. The Audit Committee Chair informs the CEO and Director of Finance that the Form is to be made available to all Board Members and then 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 employees and board members. Employees receive a copy during an all employee meeting, employees are given a week to read the policy and complete the questionnaire. Employees are required to submit the completed information to the Human Resources Department. Board members are given a copy at the annual board retreat which usually takes place in October and they are asked to read the policy and complete the questionnaire and return it to the Chief Executive Officer's administrative assistant. Disclosure within the Society is made to the Board Chair and/or the Chief Executive Officer of the Society, who shall determine whether a conflict exists and is material, and if the matters are material, bring them to the attention of the Board. The Board Chair and/or the Chief Executive Officer shall consider whether a conflict exists and is material, and in the presence of an existing material conflict, whether the contemplated transaction may be authorized as just, fair and reasonable to the Society. The decision of the Board Chair and/or the Chief Executive Officer 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

### Supplemental Information (Continued)

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 Human Resources 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 by the Compensation Committee of the Board and approval by the Committee is documented in meeting minutes.

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 DZS was unable to separate the cost of services provided from the cost of materials for Conti Corporation, Studiozone, LLC, Albert M Higley Co, and Midwest Commercial Contracting. Please note that the totals for these vendors include both services and materials.

Form 990, Part IX, Line 11g - Contracted/Construction Services = 2,215,647 General Labor = 1,439,647 Skilled Labor = 1,205,396 Professional Services = 655,003 Janitorial Services = 713,777 Service Fees = 223,072 Event Entertainment + Other = 7,319

Form 990, Part XI, Line 9 - Rounding of \$2

**Activity Or Mission Description**

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**Description**

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engaging, meaningful, memorable experiences, and equitable educational opportunities that lead to the appreciation and stewardship of nature. 3. Celebrate and value biodiversity and human diversity, while ensuring that our audience, staff and volunteers reflect the multicultural fabric that is the strength of our community. 4. Provide innovative facilities and programs that contribute to the region's economic vitality. 5. Demonstrate organizational excellence consistent with a commitment to outstanding service, as well as progressive and responsible resource management. \*Revised 2021, pending board approval\*

**Mission Description**

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**Description**

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while ensuring that our audience, staff and volunteers reflect the multicultural fabric that is the strength of our community. 4. Provide innovative facilities and programs that contribute to the region's economic vitality. 5. Demonstrate organizational excellence consistent with a commitment to outstanding service, as well as progressive and responsible resource management. \*Revised 2021, pending board approval\*

Other Program Services Accomplishments

Activity Code	Description	Expense	Grants	Revenue
	<p>The Detroit Zoological Society continues to demonstrate organizational excellence consistent with a commitment to outstanding service, progressive resource management and environment leadership. The Detroit Zoological Society maintains grounds of 125 acres and 78 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 over the next two years, in an effort to continue positively impacting our community.</p>	2,033,463	0	359,784
<b>Total:</b>		<b>2,033,463</b>	<b>0</b>	<b>359,784</b>