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Form 990

Return of Organization Exempt From Income Tax

2008

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

► The organization may have to use a copy of this return to satisfy state reporting requirements

A For the 2008 calendar year, or tax year beginning 10-01-2008 and ending 09-30-2009

<input type="checkbox"/> Check if applicable <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Termination <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization FORT WORTH ZOOLOGICAL ASSOCIATION INC		D Employer identification number 75-0991727 E Telephone number (817) 759-7575 G Gross receipts \$ 26,405,284	
	Doing Business As			
	Number and street (or P O box if mail is not delivered to street address) 1989 COLONIAL PARKWAY			Room/suite
	City or town, state or country, and ZIP + 4 FORT WORTH, TX 76110-6640			
	F Name and address of Principal Officer MICHAEL FOURAKER 1989 COLONIAL PARKWAY FORT WORTH, TX 76110			
I Tax-exempt status <input checked="" type="checkbox"/> 501(c) (3) (insert no) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527	H(a) Is this a group return for affiliates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No H(b) Are all affiliates included? <input type="checkbox"/> Yes <input type="checkbox"/> No (If "No," attach a list See instructions)			
J Web site: ► www.fortworthzoo.org	H(c) Group Exemption Number ►			
K Type of organization <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> trust <input type="checkbox"/> association <input type="checkbox"/> other ►	L Year of Formation 1950	M State of legal domicile TX		

Part I Summary

1	Briefly describe the organization's mission or most significant activities THE FORT WORTH ZOO IS DEDICATED TO THE CONSERVATION OF WILDLIFE THROUGH ENTERTAINMENT AND EDUCATION PROGRAMS, THE FORT WORTH ZOO ATTRACTS, MOTIVATES, INSPIRES AND ENGAGES THE PUBLIC IN ORDER TO PROMOTE WILDLIFE CONSERVATION LOCALLY, REGIONALLY, NATIONALLY AND GLOBALLY		
2	Check this box <input type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its assets		
3	Number of voting members of the governing body (Part VI, line 1a) 3 58		
4	Number of independent voting members of the governing body (Part VI, line 1b) 4 58		
5	Total number of employees (Part V, line 2a) 5 792		
6	Total number of volunteers (estimate if necessary) 6 171		
7a	Total gross unrelated business revenue from Part VIII, line 12, column (C) 7a -118,879		
b	Net unrelated business taxable income from Form 990-T, line 34 7b -322,966		

8	Contributions and grants (Part VIII, line 1h) 14,729,140 10,021,737		
9	Program service revenue (Part VIII, line 2g) 9,862,375 10,024,382		
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d) 464,017 108,836		
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 129,795 -177,208		
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 25,185,327 19,977,747		

13	Grants and similar amounts paid (Part IX, column (A), lines 1-3) 45,125 40,000		
14	Benefits paid to or for members (Part IX, column (A), line 4) 0 0		
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) 8,435,665 9,180,047		
16a	Professional fundraising fees (Part IX, column (A), line 11e) 0 20,000		
b	(Total fundraising expenses, Part IX, column (D), line 25 606,919) 0		
17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 8,251,430 6,386,298		
18	Total expenses—add lines 13-17 (must equal Part IX, line 25, column (A)) 16,732,220 15,626,345		
19	Revenue less expenses Subtract line 18 from line 12 8,453,107 4,351,402		

20	Total assets (Part X, line 16) 36,188,829 40,905,384		
21	Total liabilities (Part X, line 26) 3,284,885 3,613,264		
22	Net assets or fund balances Subtract line 21 from line 20 32,903,944 37,292,120		

Part II Signature Block

Please Sign Here	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		
	***** Signature of officer MICHAEL FOURAKER EXECUTIVE DIRECTOR Type or print name and title	2010-08-13 Date	

Paid Preparer's Use Only	Preparer's signature	Date	Check if self-employed <input type="checkbox"/>	Preparer's PTIN (See Gen Inst)
	Firm's name (or yours if self-employed), address, and ZIP + 4 Whitley Penn LLP 5420 LBJ Freeway Suite 1440 Dallas, TX 75240			EIN <input type="checkbox"/> Phone no <input type="checkbox"/> (214) 393-9300

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

Part III Statement of Program Service Accomplishments (See the instructions.)**1** Briefly describe the organization's mission

With more than 1 million visitors annually, the Fort Worth Zoo strengthens the bond between humans and the environment by promoting responsible stewardship of wildlife and ensuring diverse, high-quality educational and entertaining family experiences through effective and efficient management of its resources

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 exempt purpose achievements for each of the organization's three largest program services by expenses
Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts 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 \$ 8,341,835 including grants of \$ 40,000) (Revenue \$ 39,682)

Animal and Conservation The living animal collection includes 556 species and nearly 7,000 individual specimens of mammals, birds, reptiles, fish, amphibians and invertebrates. Animal programs include a state-of-the-art animal hospital and nutrition lab, animal commissary and conservation research center. The animal staff also supports numerous projects in Texas and 34 countries worldwide

4b (Code) (Expenses \$ 2,645,886 including grants of \$) (Revenue \$ 8,011,211)

Admissions and Attractions Over 1 million guests visit the Zoo each year during regular operating hours. Our guests typically consist of almost 500,000 adults, 400,000 children, 30,000 seniors, and 75,000 to 90,000 visits by members, with approximately 75% of our visitors coming from the Dallas-Fort Worth metroplex. Zoo visitors are treated to natural habitat animal exhibits, interactive learning experiences, and entertaining attractions

4c (Code) (Expenses \$ 1,355,722 including grants of \$) (Revenue \$ 1,007,015)

Educational Programs Over 29,000 students and teachers attended Zoo education programs including Weekday Zoo School, Summer Zoo Camp, Zoo Careers Camp, Home School Days, Overnights, birthday parties, teacher workshops and more. An additional 102,000 students and chaperones came to the Zoo on organized field trips. The Animal Outreach Program reached over 74,000 individuals in schools and organizations with its live animal presentations

(Code) (Expenses \$ 304,624 including grants of \$) (Revenue \$ 966,472)

4d Other program services (Describe in Schedule O)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses \$ 12,648,067 Must equal Part IX, Line 25, column (B).

Part IV Checklist of Required Schedules

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A

2 Is the organization required to complete Schedule B, Schedule of Contributors?

3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I

4 Section 501(c)(3) organizations Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II

5 Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III

6 Did the organization maintain any donor advised funds or any accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I

7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II

8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III

9 Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV

10 Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V

11 Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable

12 Did the organization receive an audited financial statement for the year for which it is completing this return that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII

13 Is the organization a school as described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the U.S.?

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the U.S.? If "Yes," complete Schedule F, Part I

15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Part II

16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Part III

17 Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I

18 Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II

19 Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III

20 Did the organization operate one or more hospitals? If "Yes," complete Schedule H

21 Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II

22 Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III

23 Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete Schedule J

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to question 25

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?

25a Section 501(c)(3) and 501(c)(4) organizations Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I

b Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified person from a prior year? If "Yes," complete Schedule L, Part I

26 Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II

27 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III

	Yes	No
1	Yes	
2	Yes	
3		No
4		No
5		
6		No
7		No
8	Yes	
9		No
10	Yes	
11	Yes	
12	Yes	
13		No
14a		No
14b		No
15		No
16		No
17	Yes	
18	Yes	
19	Yes	
20		No
21		No
22	Yes	
23	Yes	
24a		No
24b		
24c		
24d		
25a		No
25b		No
26		No
27		No

Part IV Checklist of Required Schedules (Continued)

28 During the tax year, did any person who is a current or former officer, director, trustee, or key employee

- a** Have a direct business relationship with the organization (other than as an officer, director, trustee, or employee), or an indirect business relationship through ownership of more than 35% in another entity (individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L, Part IV
- b** Have a family member who had a direct or indirect business relationship with the organization? If "Yes," complete Schedule L, Part IV
- c** Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV

29 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M

30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M

31 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I

32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations section 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I

34 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1

35 Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2

36 501(c)(3) organizations Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2

37 Did the organization conduct more than 5 percent of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

	Yes	No
28a		No
28b		No
28c		No
29		No
30		No
31		No
32		No
33		No
34		No
35		No
36		No
37		No

Part V Statements Regarding Other IRS Filings and Tax Compliance

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a 115	
1b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
1c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	Yes	
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a 792	
2b	If at least one is reported in 2a, did the organization file all required federal employment tax returns? <i>Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return.</i>	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?		
3b	If "Yes," has it filed a Form 990-T for this year? <i>If "No," provide an explanation in Schedule O</i>	Yes	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	Yes	
4b	If "Yes," enter the name of the foreign country _____ See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts .		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a No	
5b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b No	
5c	If "Yes," to 5a or 5b, did the organization file Form 8886-T, <i>Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction</i> ?		
6a	Did the organization solicit any contributions that were not tax deductible?	6a No	
6b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	<i>Organizations that may receive deductible contributions under section 170(c).</i>	7a Yes	
7b	Did the organization provide goods or services in exchange for any quid pro quo contribution of \$75 or more?	7b Yes	
7c	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7c No	
7d	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		
7e	If "Yes," indicate the number of Forms 8282 filed during the year	7d 8	
7f	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		
7g	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		
7h	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?		
8	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</i> Did the supporting organization, or a fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		
9	<i>Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.</i>		
9a	Did the organization make any taxable distributions under section 4966?	9a No	
9b	Did the organization make a distribution to a donor, donor advisor, or related person?		
10	<i>Section 501(c)(7) organizations.</i> Enter		
10a	Initiation fees and capital contributions included on Part VIII, line 12	10a 10b	
10b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities		
11	<i>Section 501(c)(12) organizations</i> Enter		
11a	Gross income from members or shareholders	11a 11b	
11b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)		
12a	<i>Section 4947(a)(1) non-exempt charitable trusts.</i> Is the organization filing Form 990 in lieu of Form 1041?	12a 12b	
12b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		

Part VI Governance, Management, and Disclosure (Sections A, B, and C request information about policies not required by the Internal Revenue Code.)
Section A. Governing Body and Management

For each "Yes" response to lines 2-7 below, and for a "No" response to lines 8 or 9b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Yes	No
1a Enter the number of voting members of the governing body . . .	1a	58
b Enter the number of voting members that are independent . . .	1b	58
2 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?	2	Yes
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3	No
4 Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4	Yes
5 Did the organization become aware during the year of a material diversion of the organization's assets?	5	No
6 Does the organization have members or stockholders?	6	No
7a Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	No
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following		
a the governing body?	8a	Yes
b each committee with authority to act on behalf of the governing body?	8b	Yes
9a Does the organization have local chapters, branches, or affiliates?	9a	No
b If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	9b	
10 Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organizations must describe in Schedule O the process, if any, the organization uses to review the Form 990	10	No
11 Is there any officer, director or 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 in Schedule O	11	No

Section B. Policies

	Yes	No
12a Does the organization have a written conflict of interest policy? If "No", go to line 13	12a	Yes
b Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes
c Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes
13 Does the organization have a written whistleblower policy?	13	No
14 Does the organization have a written document retention and destruction policy?	14	No
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision		
a The organization's CEO, Executive Director, or top management official?	15a	Yes
b Other officers or key employees of the organization?	15b	Yes
Describe the process in Schedule O		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	No
b If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable Federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed _____

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply
 own website another's website upon request

19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table

20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization
SCOTT WILCOX COO/DEPUTY DIRECTOR
1989 COLONIAL PARKWAY
FORT WORTH, TX 761106640
(817) 759-7575

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

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

1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed.

* List all of the organization's **current** officers, directors, trustees (whether individuals or organizations) and key employees regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid

* 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, or 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

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the organization did not compensate any officer, director, trustee or key employee.

Part VII **Continued**

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
1b Total							328,080	0	35,595

2 Total number of individuals (including those in 1a) who received more than \$100,000 in reportable compensation from the organization **2**

	Yes	No
3 Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual	3	No
4 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? If "Yes," complete Schedule J for such individual	4	Yes
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule J for such person	5	No

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

(A) Name and business address	(B) Description of services	(C) Compensation
MUSEUM ARTS 2639 FREEWOOD DRIVE DALLAS, TX 75220	ARCHITECTURE & DESIGN	566,218
PETRAWORKS INC PO BOX 161 ESSEX FELLS, NJ 07021	EXHIBIT DESIGN	538,703
CONCUSSION LLC 707 W VICKERY BLVD SUITE 103 FORT WORTH, TX 76104	MARKETING	525,638
CULINAIRE INTERNATIONAL 2100 ROSS AVENUE SUITE 3100 DALLAS, TX 75201	FOOD SERVICE & CONCESSIONS	517,090
FOWLKES NORMAN & ASSOCIATES 7520 BENBROOK WAY FORT WORTH, TX 76126	GROUNDSKEEPING & LANDSCAPING	350,356
2 Total number of independent contractors (including those in 1) who received more than \$100,000 in compensation from the organization 10		

Part
VIII

Statement of Revenue

		(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a Federated campaigns . . . 1a					
	b Membership dues 1b					
	c Fundraising events 1c	1,091,638				
	d Related organizations . . . 1d					
	e Government grants (contributions) 1e	5,454,924				
	f All other contributions, gifts, grants, and similar amounts not included above	3,475,175				
	g Noncash contributions included in lines 1a-1f \$ _____					
	h Total (Add lines 1a-1f) 1f	10,021,737				
Program Service Revenue	2a ADMISSIONS & ATTRACTIO	Business Code				
		900,099	8,011,211	7,878,289	132,922	
	b EDUCATIONAL PROGRAMS	611,710	1,007,015	1,007,015		
	c MEMBERSHIP ACTIVITIES	900,099	919,708	919,708		
	d OTHER PROGRAM SERVICES	900,099	46,765	46,765		
	e ANIMAL & CONSERVATION	900,099	39,683	39,683		
	f All other program service revenue					
	g Total. Add lines 2a-2f 2f	\$ 10,024,382				
Other Revenue	3 Investment income (including dividends, interest other similar amounts) 3					
			94,916		94,916	
	4 Income from investment of tax-exempt bond proceeds 4					
	5 Royalties					
		(i) Real	(ii) Personal			
	6a Gross Rents					
	b Less rental expenses					
	c Rental income or (loss)					
d Net rental income or (loss) 6d						
	(i) Securities	(ii) Other				
7a Gross amount from sales of assets other than inventory	13,920					
b Less cost or other basis and sales expenses						
c Gain or (loss)	13,920					
d Net gain or (loss) 7d					13,920	
8a Gross income from fundraising events (not including \$ 623,319 of contributions reported on line 1c) See Part IV, line 18 Attach Schedule G if total exceeds \$15,000 a	1,091,638					
b Less direct expenses . . . b	687,067					
c Net income or (loss) from fundraising events c		-63,748			-63,748	
9a Gross income from gaming activities See part IV, line 19 Complete Schedule G if total exceeds \$15,000						
	a 30,400					
b Less direct expenses . . . b						
c Net income or (loss) from gaming activities c		30,400			30,400	
10a Gross sales of inventory, less returns and allowances a	5,596,610					
b Less cost of goods sold . . . b	5,740,470					
c Net income or (loss) from sales of inventory c		-143,860	197,092	-251,801	-89,151	
Miscellaneous Revenue	Business Code					
11a						
b						
c						
d All other revenue _____						
e Total. Add lines 11a-11d 11d	\$					
12 Total Revenue. Add lines 1h, 2g, 3, 4, 5, 6d, 7d, 8c, 9c, 10c, and 11e 12		19,977,747	10,088,552	-118,879	-13,663	

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) but are not required to complete columns (B), (C), and (D).**

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U S See Part IV, line 21				
2 Grants and other assistance to individuals in the U S See Part IV, line 22	36,000	36,000		
3 Grants and other assistance to governments, organizations and individuals outside the U S See Part IV, lines 15 and 16	4,000	4,000		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	366,295	132,452	188,151	45,692
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	7,158,653	6,205,458		201,031
8 Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	109,271	80,650	26,795	1,826
9 Other employee benefits	998,191	827,997	140,907	29,287
10 Payroll taxes	547,637	474,718	57,540	15,379
11 Fees for services (non-employees)				
a Management				
b Legal	41,944		41,944	
c Accounting	39,833		39,833	
d Lobbying				
e Professional fundraising See Part IV, line 17 . . .	20,000			20,000
f Investment management fees				
g Other	259,995	176,430	72,365	11,200
12 Advertising and promotion	695,889	543,442	343	152,104
13 Office expenses	1,830,681	1,386,942	372,942	70,797
14 Information technology	21,201	11,182	10,019	
15 Royalties				
16 Occupancy	1,723,758	1,488,231	235,527	
17 Travel	75,418	51,186	23,412	820
18 Payments of travel or entertainment expenses for any Federal, state or local public officials				
19 Conferences, conventions and meetings	12,929	6,140	3,849	2,940
20 Interest	16,971		16,971	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	273,595	151,177	114,975	7,443
23 Insurance	194,111	80,739	104,450	8,922
24 Other expenses—Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a FACILITY/EQUIPMENT	1,047,649	903,313	122,778	21,558
b MISCELLANEOUS	152,324	88,010	46,394	17,920
c				
d				
e				
d				
e				
e				
f All other expenses				
25 Total functional expenses. Add lines 1 through 24f	15,626,345	12,648,067	2,371,359	606,919
26 Joint Costs. Check <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X Balance Sheet

		(A) Beginning of year	(B) End of year
Assets			
1	Cash—non-interest-bearing	912,894	1 512,993
2	Savings and temporary cash investments	15,111,685	2 10,906,505
3	Pledges and grants receivable, net	4,735,278	3 3,867,096
4	Accounts receivable, net	532,065	4 315,728
5	Receivables from current and former officers, directors, trustees, key employees or other related parties <i>Complete Part II of Schedule L</i>	5	
6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) <i>Complete Part II of Schedule L</i>	6	
7	Notes and loans receivable, net	7	
8	Inventories for sale or use	411,412	8 538,590
9	Prepaid expenses and deferred charges	53,707	9 77,681
10a	Land, buildings, and equipment cost basis	10a 35,287,091	
b	Less accumulated depreciation <i>Complete Part VI of Schedule D</i>	10b 12,947,618	10c 22,339,473
11	Investments—publicly traded securities	1,643,115	11 2,347,318
12	Investments—other securities See Part IV, line 11 <i>Complete Part VII of Schedule D</i>	12	
13	Investments—program-related See Part IV, line 11 <i>Complete Part VIII of Schedule D</i>	13	
14	Intangible assets	14	
15	Other assets See Part IV, line 11 <i>Complete Part IX of Schedule D</i>	15	
16	Total assets. Add lines 1 through 15 (must equal line 34)	36,188,829	16 40,905,384
17	Accounts payable and accrued expenses	2,918,041	17 3,307,895
18	Grants payable	18	
19	Deferred revenue	81,954	19 106,388
20	Tax-exempt bond liabilities	20	
21	Escrow account liability <i>Complete Part IV of Schedule D</i>	21	
22	Payable to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons <i>Complete Part II of Schedule L</i>	22	
23	Secured mortgages and notes payable to unrelated third parties	23	
24	Unsecured notes and loans payable	24	
25	Other liabilities <i>Complete Part X of Schedule D</i>	25	198,981
26	Total liabilities. Add lines 17 through 25	3,284,885	26 3,613,264
Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
27	Unrestricted net assets	21,618,226	27 33,485,275
28	Temporarily restricted net assets	9,493,469	28 2,014,058
29	Permanently restricted net assets	1,792,249	29 1,792,787
Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.			
30	Capital stock or trust principal, or current funds	30	
31	Paid-in or capital surplus, or land, building or equipment fund	31	
32	Retained earnings, endowment, accumulated income, or other funds	32	
33	Total net assets or fund balances	33	32,903,944 37,292,120
34	Total liabilities and net assets/fund balances	34	36,188,829 40,905,384
Net Assets or Fund Balances			
Part XI Financial Statements and Reporting			
		<input type="checkbox"/> Yes	<input type="checkbox"/> No
1	Accounting method used to prepare the Form 990	<input type="checkbox"/> cash	<input checked="" type="checkbox"/> accrual
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a	No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes
c	If "Yes" to lines 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?	2c	Yes
3a	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?	3a	No
b	If "Yes," did the organization undergo the required audit or audits?	3b	Yes

SCHEDULE A
(Form 990 or 990EZ)**Public Charity Status and Public Support****2008**Department of the Treasury
Internal Revenue Service**To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.****Attach to Form 990 or Form 990-EZ. See separate instructions.****Open to Public
Inspection****Name of the organization**

FORT WORTH ZOOLOGICAL ASSOCIATION INC

Employer identification number

75-0991727

Part I Reason for Public Charity Status (to be completed by all organizations) (See Instructions)

The organization is not a private foundation because it is (Please check only one organization)

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)

3 A hospital or a cooperative hospital service organization described in **Section 170(b)(1)(A)(iii)**. (Attach Schedule H)

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)(vi)** (Complete Part II)

9 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **Section 509(a)(2)**. (Complete Part III)

10 An organization organized and operated exclusively to test for public safety See **Section 509(a)(4)**. (See instructions)

11 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 that describes the type of supporting organization and complete lines 11e through 11h

e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii) a family member of a person described in (i) above?

(iii) a 35% controlled entity of a person described in (i) or (ii) above?

h Provide the following information about the organizations the organization supports

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

(i) Name of Supported Organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (See Instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II Support Schedule for Organizations Described in IRC 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.)
Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add line 1-3						
5 The portion of total contribution by each person (other than a government unit or publicly supported organization) included on line 1 that exceed 2% of the amount shown on line 11, column (f)						
6 Public Support subtract line 5 from line 4						

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
11 Total Support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	

13 First Five Years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and **stop here**

**Computation of Public Support Percentage**

14 Public Support Percentage for 2008 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2007 Schedule A, Part IV-A, line 26f	15	
16a 33 1/3% Test - 2008. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		
b 33 1/3% Test - 2007. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here . The organization qualifies as a publicly supported organization		
17a 10% Facts and Circumstances Test - 2008. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		
b 10% Facts and Circumstances Test - 2007. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here . Explain in Part IV how the organization meets the "facts and circumstances" test. The organization qualifies as a publicly supported organization		
18 Private Foundation. If the organization did not check the box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part III Support Schedule for Organizations Described in IRC 509(a)(2)
 (Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,827,782	13,138,142	17,939,410	14,729,140	10,021,737	69,656,211
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	11,392,485	13,422,634	13,455,102	10,419,797	9,858,662	58,548,680
3 Gross receipts from activities that are not an unrelated trade or business under section 513	653,461	540,887	469,393	3,722,992	4,241,077	9,627,810
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge	163,985	151,052	71,365			386,402
6 Total Add lines 1-5	26,037,713	27,252,715	31,935,270	28,871,929	24,121,476	138,219,103
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	8,782,634	5,303,884	7,494,111	3,020,991	2,305,605	26,907,225
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000						
c Total of lines 7a and 7b	8,782,634	5,303,884	7,494,111	3,020,991	2,305,605	26,907,225
8 Public Support (Subtract line 7c from line 6)						111,311,878

Total Support

Calendar year (or fiscal year beginning in)	(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9 Amounts from line 6	26,037,713	27,252,715	31,935,270	28,871,929	24,121,476	138,219,103
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	203,434	199,003	568,888	458,816	94,916	1,525,057
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after 30 June, 1975	355					355
c Add lines 10a and 10b	203,789	199,003	568,888	458,816	94,916	1,525,412
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	574,682	689,175	675,738	661,022	740,166	3,340,783
13 Total Support (Add lines 9, 10c, 11 and 12)						143,085,298
14 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						►

Computation of Public Support Percentage

15 Public Support Percentage for 2008 (line 8 column (f) divided by line 13 column (f))	15	77 790 %
16 Public Support Percentage for 2007 Schedule A, Part IV-A, line 27g	16	80 030 %

Computation of Investment Income Percentage

17 Investment Income Percentage for 2008 (line 10c column (f) divided by line 13 column (f))	17	1 070 %
18 Investment Income Percentage from 2007 Schedule A, Part IV-A, line 27h	18	1 030 %
19a 33 1/3% Tests - 2008. 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 stop here . The organization qualifies as a publicly supported organization		►✓
b 33 1/3% Tests - 2007. 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 stop here . The organization qualifies as a publicly supported organization		►
20 Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions		►

Part IV **Supplemental Information.** Complete this part to provide the information required by Part II, line 10; Part II, line 17a or 17b, or Part III, line 12. Provide any other additional information. (see instructions)

Facts and Circumstances Test

2008

Open to Public
Inspection**SCHEDULE D**
(Form 990)**Supplemental Financial Statements**

► Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

Department of the Treasury
Internal Revenue Service**Name of the organization**

FORT WORTH ZOOLOGICAL ASSOCIATION INC

Employer identification number

75-0991727

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate Contributions to (during year)		
3 Aggregate Grants from (during year)		
4 Aggregate value at end of year		
5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?		<input type="checkbox"/> Yes <input type="checkbox"/> No
6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit?		<input type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply)

Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area
 Protection of natural habitat Preservation of certified historic structure
 Preservation of open space

2 Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

	Held at the End of the Year
2a	
2b	
2c	
2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ►

4 Number of states where property subject to conservation easement is located ►

5 Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds?

 Yes No

6 Staff or volunteer hours devoted to monitoring, inspecting and enforcing easements during the year ►

7 Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year ► \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?

 Yes No

9 In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenues included in Form 990, Part VIII, line 1 ► \$

(ii) Assets included in Form 990, Part X ► \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items

a Revenues included in Form 990, Part VIII, line 1 ► \$

b Assets included in Form 990, Part X ► \$

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

3 Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a Public exhibition d Loan or exchange programs
 b Scholarly research e Other
 c Preservation for future generations

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

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 Trust, Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to 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 why in Part XIV and complete the following table

Amount
1c
1d
1e
1f

c Beginning balance
 d Additions during the year
 e Distributions during the year
 f Ending balance

2a Did the organization include an amount on Form 990, Part X, line 21? Yes No

b If "Yes," explain the arrangement in Part XIV

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current Year	(b) Prior Year	(c) Two Years Back	(d) Three Years Back	(e) Four Years Back
1a Beginning of year balance	1,792,249				
b Contributions					
c Investment earnings or losses	538				
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	1,792,787				

2 Provide the estimated percentage of the year end balance held as

a Board designated or quasi-endowment ► 97 000 %

b Permanent endowment ► 3 000 %

c Term endowment ►

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i) unrelated organizations
 (ii) related organizations

b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIV the intended uses of the organization's endowment funds

Yes	No
3a(i)	No
3a(ii)	No
3b	

Part VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment	13,893,021	12,947,618		945,403
e Other	21,394,070			21,394,070
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).)			22,339,473	

Part VII Investments—Other Securities. 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
Financial derivatives and other financial products		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12.) ►		

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13.) ►		

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 15.)	►

Part X Other Liabilities. See Form 990, Part X, line 25.

(a) Description of Liability	(b) Amount
Federal Income Taxes	
CAPITAL LEASE OBLIGATIONS	198,981
Total. (Column (b) should equal Form 990, Part X, col (B) line 25.) ►	198,981

In Part XIV, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	19,977,747
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	15,626,345
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	4,351,402
4	Net unrealized gains (losses) on investments	4	36,774
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	36,774
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	4,388,176

Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	26,608,659
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	36,774
b	Donated services and use of facilities	2b	166,601
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	6,427,537
e	Add lines 2a through 2d	2e	6,630,912
3	Subtract line 2e from line 1	3	19,977,747
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	0
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	19,977,747

Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	22,220,483
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	166,601
b	Prior year adjustments	2b	
c	Losses reported on Form 990, Part IX, line 25	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	166,601
3	Subtract line 2e from line 1	3	22,053,882
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	-6,427,537
c	Add lines 4a and 4b	4c	-6,427,537
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	15,626,345

Part XIV Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part XIV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b

Identifier	Return Reference	Explanation
Part III, Line 1a		THE ASSOCIATION HAS RECEIVED DONATIONS OF ARTWORK WHICH ARE HELD FOR EXHIBIT TO THE PUBLIC IN THE PORTRAITS OF THE WILD GALLERY PURCHASES AND SALES OF ANIMAL COLLECTIONS ARE RECORDED AS PROGRAM SERVICES EXPENSE AND MISCELLANEOUS REVENUE, RESPECTIVELY THE ASSOCIATION HAS ELECTED NOT TO CAPITALIZE THESE COLLECTIONS
Part III, Line 4		The organization's collection of animals is the basis for its exempt purpose of attracting, motivating, inspiring and engaging the public in order to promote wildlife conservation locally, regionally, nationally and globally
		Schedule D, Part XII, Line 2d and Part XIII, Line 4b The detail of the entire amount of \$6,427,537 is as follows \$687,067 relates to the reclassification of special events direct expense and \$5,740,470 is the reclassification of cost of goods sold netted against total merchandise revenue on Form 990, Part VIII instead of shown as a separate expense on Form 990, Part IX

Supplemental Information Regarding Fundraising or Gaming Activities

2008

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► Attach to Form 990 or Form 990-EZ. Must be completed by organizations that answer "Yes" to Form 990, Part IV, lines 17, 18, or 19, and by organizations that enter more than \$15,000 on Form 990-EZ, line 6a.

Employer identification number

75-0991727

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b 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 activities?

Yes No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. Form 990-EZ filers are not required to complete this table.

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

TX

Part II Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. 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))
		<u>ZOO BALL</u> (event type)	<u>BOO AT THE ZOO</u> (event type)	<u>2</u> (total number)	
Revenue	1 Gross receipts . . .	1,171,767	274,383	268,808	1,714,958
	2 Less Charitable contributions . . .	1,008,107	31,650	51,881	1,091,638
	3 Gross revenue (line 1 minus line 2) . . .	163,660	242,733	216,927	623,320
Direct Expenses	4 Cash Prizes . . .				
	5 Non-cash Prizes . . .				
	6 Rent/Facility costs . . .	1,750	6,227	8,534	16,511
	7 Other direct expenses . . .	526,673	39,579	104,305	670,557
	8 Direct expense summary Add lines 4 through 7 in column (d)				687,068
	9 Net income summary Combine lines 3 and 8 in column (d)				-63,748

Part III Gaming. Complete if the organization answered "Yes" to 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))
Revenue	1 Gross revenue . . .			30,400	30,400
Direct Expenses	2 Cash prizes . . .				
	3 Non-cash prizes . . .				
	4 Rent/facility costs . . .				
	5 Other direct expenses . . .				
	6 Volunteer labor . . .	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input type="checkbox"/> No	<input type="checkbox"/> Yes _____ % <input checked="" type="checkbox"/> No	
	7 Direct expense summary Add lines 2 through 5 in column (d)				
	8 Net gaming income summary Combine lines 1 and 7 in column (d)				30,400

9 Enter the state(s) in which the organization operates gaming activities	TX	Yes	No
a Is the organization licensed to operate gaming activities in each of these states?	.....	9a	No
b If "No," Explain	TEXAS STATE LAW ALLOWS 501(C)(3) ORGANIZATIONS TO HOLD UP TO TWO RAFFLES DURING A CALENDAR YEAR		
10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?	.....	10a	No
b If "Yes," Explain	.....	
11 Does the organization operate gaming activities with nonmembers?	.....	11	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?	.....	12	No

	Yes	No
13 Indicate the percentage of gaming activity operated in		
a The organization's facility	13a	100 000 %
b An outside facility	13b	
14 Provide the name and address of the person who prepares the organization's gaming/special events books and records		
Name ► DAVID DENA		
Address ► 1989 COLONIAL PARKWAY FORT WORTH, TX 761106640		
15a Does the organization have a contract with a third party from whom the organization receives gaming revenue?	15a	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		
Name ►		
Address ►		
16 Gaming manager information		
Name ►		
Gaming manager compensation ► \$ _____		
Description of services provided ►		
<input type="checkbox"/> Director/officer	<input type="checkbox"/> Employee	<input type="checkbox"/> 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?	17a	No
b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ► \$		

**Schedule I
(Form 990)**

Grants and Other Assistance to Organizations, Governments and Individuals in the U.S.

Department of the Treasury
Internal Revenue Service

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

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Inspection**

Name of the organization

FORT WORTH ZOOLOGICAL ASSOCIATION INC

Employer identification number

75-0991727

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 Governments and Organizations in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 if additional space is needed.

Part III Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Use Schedule I-1 (Form 990) if additional space is needed.

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

See Additional Data Table

Identifier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 Annual reports and/or projects reports from recipient organizations are obtained Additionally, board members from interested organizations meet with investigators to discuss project outcomes

2008

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(Form 990)**Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
► Attach to Form 990. To be completed by organizations that answered "Yes" to Form 990, Part IV, line 23.

Department of the Treasury
Internal Revenue Service**Name of the organization**

FORT WORTH ZOOLOGICAL ASSOCIATION INC

Employer identification number

75-0991727

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 in 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 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 (e.g., maid, chauffeur, chef)

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

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director. Check all that apply

<input type="checkbox"/> Compensation committee	<input type="checkbox"/> Written employment contract
<input type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study
<input 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 in Form 990, Part VII, Section A, line 1a

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?

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

501(c)(3) and 501(c)(4) organizations only must complete lines 5-8.

5 For persons listed in 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," to line 5a or 5b, describe in Part III

6 For persons listed in 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," to line 6a or 6b, describe in Part III

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs. section 53.4958-4(a)(3)? If "Yes," describe in Part III

	Yes	No
1a		
1b		
2		
3		
4a		No
4b		No
4c		No
5a		No
5b		No
6a		No
6b		No
7		No
8		No

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in 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 are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a.

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

2008

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(Form 990)**Supplemental Information to Form 990**

► **Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information.**

Department of the Treasury
Internal Revenue ServiceName of the organization
FORT WORTH ZOOLOGICAL ASSOCIATION INC

Employer identification number

75-0991727

Identifier	Return Reference	Explanation
Form 990, Part III, line 4d	Other Program Services	MEMBERSHIP ACTIVITIES The Zoo has more than 36,000 members, who receive exclusive membership privileges including admission to the Zoo, free parking, gift shop discounts, an annual subscription to ROAR magazine, priority registration for Zoo education programs, and invitations to exhibit openings and special members-only events Expenses \$ 304624 including grants of \$ 0 Revenue \$ 966472

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		THE BOARD MEMBERS MAY CONDUCT BUSINESS TRANSACTIONS WITH EACH OTHER PERSONALLY OR PROFESSIONALLY IN THE NORMAL COURSE OF BUSINESS THE ORGANIZATION IS NOT AWARE OF ANY SPECIFIC OR SUBSTANTIAL RELATIONSHIPS

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 4		A COPY OF THE CHANGES TO THE ORGANIZATIONAL DOCUMENTS IS ATTACHED TO THE TAX RETURN

Identifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 10		THE FINANCE COMMITTEE AND EXECUTIVE COMMITTEE REVIEWED THE TAX RETURN AND CONSULTED WITH THE ORGANIZATION'S CEO AND LAW FIRM, KELLY, HART, & HALLMAN, PRIOR TO FILING

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		MICHAEL FOURAKER, SCOTT WILCOX, AND DAVID DENA REVIEW VENDOR RELATIONSHIPS FOR KNOWN CONFLICTS AS A COURSE OF BUSINESS HOWEVER, NO ANNUAL STATEMENTS ARE SIGNED BY THE BOARD

Identifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		THE EXECUTIVE DIRECTOR IS PAID UNDER CONTRACT AND THERE IS ONLY ONE OTHER FIXED SALARY IN THIS REGARD THE AMOUNT OF THE FIXED SALARIES IS DETERMINED BY A JOINT DECISION BETWEEN THE BOARD PRESIDENT AND THE EXECUTIVE DIRECTOR THE ANNUAL COMPENSATION SURVEYS ARE REVIEWED ANNUALLY BY THE EXECUTIVE DIRECTOR

Identifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		Governing documents are available through applicable governmental agencies, and the conflict of interest policy is available upon written request

Identifier	Return Reference	Explanation
FORM 990, PART XI, LINE 2C		The Fort Worth Zoological Association has a Finance Committee that has responsibility for oversight of the audit. The Finance Committee is also responsible for selecting the independent auditor. Management sends requests for proposals (RFPs) to various independent accounting firms. The RFPs are reviewed by management and a list of several accounting firms, along with a summary of findings, is presented to the Finance Committee. The Finance Committee reviews the summary of findings and selects a smaller group for in-person interviews. Based on the interviews, the Finance Committee makes its selection.

Identifier	Return Reference	Explanation
FORM 990, PART VI, Section B, LINE 13		The organization has adopted a whistleblower policy and a DOCUMENT RETENTION AND DESTRUCTION POLICY EFFECTIVE 9/30/2010

Additional Data

Software ID:
Software Version:
EIN: 75-0991727
Name: FORT WORTH ZOOLOGICAL ASSOCIATION INC

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Abel Sanchez , Board Member	30	X					0	0	0
Anne Marion , Board Member	30	X					0	0	0
Bert Williams , Board Member	30	X					0	0	0
Billy Rosenthal , Board Member	30	X					0	0	0
Bryan King , Board Member	30	X					0	0	0
David Flores , Board Member	30	X					0	0	0
Debbie Head , Board Member	30	X					0	0	0
Doug McKenzie Jr , Board Member	30	X					0	0	0
Douglas Bratton , Board Member	30	X					0	0	0
Edward Bass , Board Member	30	X					0	0	0
Eric Hyden , Board Member	30	X					0	0	0
Evelyn Meeks , Board Member	30	X					0	0	0
Frances Dickenson , Board Member	30	X					0	0	0
Gilbert Gamez Jr , Board Member	30	X					0	0	0
Harry Tennison , Board Member	30	X					0	0	0
JD Granger , Board Member	30	X					0	0	0
James Harrison , Board Member	30	X					0	0	0
Janie Harper , Board Member	30	X					0	0	0
Jay Decker , Board Member	30	X					0	0	0
Jeff King , Board Member	1 00	X					0	0	0
Joe Thompson , Board Member	30	X					0	0	0
John Gavin , Board Member	30	X					0	0	0
John Richardson , Board Member	30	X					0	0	0
John Viola , Board Member	30	X					0	0	0
Karen Fortson-Davis , Board Member	30	X					0	0	0
Kaydee Bailey , Board Member	30	X					0	0	0
Kelly Thompson , Board Member	1 00	X					0	0	0
Larry Townsend , Board Member	30	X					0	0	0
Laurie Roberts , Board Member	30	X					0	0	0
Lesa Oudt , Board Member	30	X					0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Lisa Burton , Board Member	30	X					0	0	0
Mark Brown , Board Member	30	X					0	0	0
Marsland Moncrief , Board Member	30	X					0	0	0
Martha Williams , Board Member	30	X					0	0	0
Mattie Compton , Board Member	30	X					0	0	0
Michael Bessire , Board Member	30	X					0	0	0
Michael Guyton , Board Member	30	X					0	0	0
Mike Brown , Board Member	30	X					0	0	0
Monk White , Board Member	30	X					0	0	0
Norbert Stanislav , Board Member	30	X					0	0	0
Onah Penn , Board Member	30	X					0	0	0
Peter Sirucek , Board Member	30	X					0	0	0
Price Hulsey , Board Member	30	X					0	0	0
Priscilla Martin , Board Member	30	X					0	0	0
Sebert Pate , Board Member	30	X					0	0	0
Shawn Hessing , Board Member	30	X					0	0	0
Stacie McDavid , Board Member	30	X					0	0	0
Stephen Maberry , Board Member	30	X					0	0	0
Susy Duggins , Board Member	30	X					0	0	0
Tim Sear , Board Member	30	X					0	0	0
Toby Darden , Board Member	30	X					0	0	0
Tom Purvis III , Board Member	30	X					0	0	0
Tom Seymour , Board Member	30	X					0	0	0
Whitney More , Board Member	30	X					0	0	0
William Cranz Jr , Board Member	30	X					0	0	0
William Hall , Board Member	1 00	X					0	0	0
Kit Moncrief , Co-chairman	2 00	X	X				0	0	0
Ramona Bass , Co-chairman	8 00	X	X				0	0	0
Cheryl Hodge Marxen , EXECUTIVE COMMITTEE	1 00	X					0	0	0
Dee Kelly Jr , EXECUTIVE COMMITTEE	1 00	X					0	0	0

Form 990, Part VII - Section Aaa

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)					(D) Reportable compensation from the organization (W- 2/1099MISC)	(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			
Lee Tennison , EXECUTIVE COMMITTEE	1 00	X					0	0	0
Marian Eastman , EXECUTIVE COMMITTEE	1 00	X					0	0	0
Robert Fernandez , EXECUTIVE COMMITTEE	1 00	X					0	0	0
Ardon Moore , President	5 00	X		X			0	0	0
Breck Ray , Secretary	1 00	X		X			0	0	0
Michael Hyatt , Treasurer	2 00	X		X			0	0	0
MICHAEL FOURAKER , EXECUTIVE DIRECTOR	40 00			X			208,651	0	19,752
SCOTT WILCOX , COO/DEPUTY DIRECTOR	40 00			X			119,429	0	15,843

Form 990, Part VIII - Statement of Revenue - 2a - 2g Program Service Revenue -

	Business Code	(A) Total Revenue	(B) Related or Exempt Function Revenue	(C) Unrelated Business Revenue	(D) Revenue Excluded from Tax under IRC 512, 513, or 514
a ADMISSIONS & ATTRACTIO	900,099	8,011,211	7,878,289	132,922	
b EDUCATIONAL PROGRAMS	611,710	1,007,015	1,007,015		
c MEMBERSHIP ACTIVITIES	900,099	919,708	919,708		
d OTHER PROGRAM SERVICES	900,099	46,765	46,765		
e ANIMAL & CONSERVATION	900,099	39,683	39,683		