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Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

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

OMB No 1545-0047

2009

Open to Public Inspection

A Fo	r the	2009 ca	lendar yea	r, or tax year beginning 01-0	1-2009 and ending 12-31-200	9			
B Ch	eck ıf a	pplicable	Please	C Name of organization Friends of the National Zoo			D Employer ider	ntification number	
┌ Add	tress ch	nange	use IRS label or				52-0853312		
┌ Na	me cha	nge	print or	Doing Business As			E Telephone nu	mber	
┌ Init	al retu	rn	type. See Specific	Number and street (or D.O. hov	ıf maıl ıs not delivered to street addre	cs) Doom/suito	(202) 633-4	275	
_	mınate		Instruc- tions.	PO Box 37102 MRC 5504	ii maii is not delivered to street addre	ss) Room/suite	G Gross receipts \$	19,867,175	
_	ended		tions.	City or town, state or country, a	and ZID + 4				
_				Washington, DC 200137012	illu ZIP + 4				
J Api	olication	n pending							
			F Nan Robert	ne and address of principal o	fficer		is a group return	for	
				37102 MRC 5504		affilia 	ates?	⊤Yes ▼ No	
			Washın	gton, DC 200137012		H(b) Are a	II affiliates include	d?	
						If"N	o," attach a list	(see instructions)	
I Ta	x-exen	npt status	✓ 501(c)) (3) ◀ (insert no)	(1) or 527	H(c) Gro	up exemption nur	nber 🟲	
J W	ebsite	e: 🕨 www	v fonz org						
K For	n of or	nanization	✓ Corporat	ion Trust Association Oth	er b -	L Year of fo	ormation 1965 M	State of legal domicile DC	
	rt I	Sumr		non'i Hasel Haselation'i Still		_ rear or re	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	State of legal doffficie De	
	1		•	e organization's mission or m	nost significant activities				
		The Frie	nds of the	National Zoo (FONZ) is a no	nprofit corporation of individual	,	•		
					ion's National Zoological Park		-	•	
2					d charitable purposes in support				
Ě		tnese go	oais from it	s membership, from its cont	ract to operate the concessions	at the Nation	nai 200, and from	tund-raising efforts	
Ě									
Governance									
	2	Check t	hıs box 🛏	ıf the organization disconti	nued its operations or disposed	of more than	25% of its net a	ssets	
න් ග	3	Number	of voting r	nembers of the governing bo	dy (Part VI, line 1a)		3	21	
Activities &	4		_		governing body (Part VI, line 11			21	
₹	5			nployees (Part V, line 2a)		,,	5	504	
æ	6			lunteers (estimate if necess			6	1,306	
					art VIII, column (C), line 12			650,679	
		-		ness taxable income from Fo	, , ,,	•	7a 7b	92,302	
	-	Wet unite	siated basi	ness taxable income nomino	7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Deid	or Year	Current Year	
	8	Control		d avanta (Dart VIII line 1h)					
<u>a</u>							6,618,174	4,744,116	
Ravenue	9	_		, , , , , , , , , , , , , , , , , , , ,	nes 3, 4, and 7d)		3,536,491 231,196	3,916,603	
盏	10			art VIII, column (A), lines 5					
	11		•	, , , , , , , , , , , , , , , , , , , ,	, 6d, 8c, 9c, 10c, and 11e) equal Part VIII, column (A), lin	_	0,117,920	6,707,228	
	12				equal Falt VIII, Column (A), mi	-	16,503,787	15,030,604	
	13				umn (A), lines 1-3)		1,746,070	1,001,175	
	14	Benefit	s paid to o	or for members (Part IX, colu	mn (A), line 4)			0	
	15	Salarıe	s, other co	ompensation, employee bene	fits (Part IX, column (A), lines 5	5 –			
Expenses		10)	,				7,981,463	8,545,940	
ā	16a	Profess	sional fund	raising fees (Part IX, columr	ı (A), lıne 11e)			0	
਼ੜ੍ਹੇ	ь	Total fur	ndraising exp	enses (Part IX, column (D), line 25) ► 1,275,991				
	17				la-11d, 11f-24f)		7,562,706	5,116,550	
	18	Total e	xpenses A	Add lines 13–17 (must equa	l Part IX, column (A), line 25)		17,290,239	14,663,665	
	19	Revenu	ue less exp	penses Subtract line 18 from	n line 12		-786,452	366,939	
88						Beginnin	g of Current	End of Year	
Net Assets or Fund Balances						<u> </u>	/ear	LING OF 1 COL	
3.8	20			t X, line 16)			11,933,961	12,645,713	
3,5	21	Total lı	iabilities (F	Part X, line 26)			903,330	739,871	
	22				from line 20		11,030,631	11,905,842	
Pai	rt II	Signa	ature Blo	ock					
					ed this return, including accompanying of preparer (other than officer) is base				
			er, it is tide, t	correct, and complete Deciaration	or preparer (other than officer) is base	u on an imonna	non or which prepare	Thas any knowledge	
Sigr	1	k.				2011	-07-13		
Here		Signa	iture of office	er		Date			
		Robe	rt J Lamb Ex	ecutive Director					
			or print nam						
		Preparer's	s k		Date	Check If	Preparer's identify	ring number	
Paid		signature				self-	(see instructions)	-	
	arer's	emp					polyed • 「		
Use		ıf self-em	nployed),	<u> </u>			EIN Þ		
J36 (Jilly		and ZIP + 4	700 spring forest road suite 1:	15		DI	0) 740 6422	
				raleigh, NC 27609			Phone no 🕨 (91	<u> </u>	
May	the IR	.S discus	s this retu	rn with the preparer shown al	oove? (see instructions)			▼ Yes	

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

Friends of the National Zoo (FONZ) is the dedicated partner of the National Zoological Park FONZ provides exciting and enriching experiences to connect people with wildlife Together with the Zoo, FONZ is building a society committed to restoring an endangered natural world

4a 4b	conservation, research		ome FONZ grants	s were used to allow scientist		search necessary to request longer
4a	Zoo Grants In 2009, conservation, research term funding from oth	and educational programs S	ome FONZ grants	s were used to allow scientist	s to carry out the preliminary re-	search necessary to request longer
4a	(Code	, , ,				
) (Expenses \$	1,001,175	including grants of \$	1,001,175) (Revenue \$)
4	Section 501(c)(3)	· · ·	ons and section	on 4947(a)(1) trusts ar	argest program services b e required to report the an ervice reported	
	If "Yes," describe t	hese changes on Schedu	ıle O			
3	<u>₹</u>	n cease conducting, or m	-	_	, , , ,	┌ Yes ┌ No
	II fes, describe ti	hese new services on Sc	hedule O			
	If "Vac " dagariba ti					

Volunteer and Educational Services In 2009, FONZ recruited, trained, and managed more than 1,306 volunteers who support the education, research, and conservation missions of the National 200. To the majority of visitors, these volunteers represent the Zoo (most NZP staff members work behind the scenes making the exhibits possible and caring for the animals) FONZ volunteers perform a number of valuable functions and provide flexibility in meeting changing visitor needs. The FONZ Department of Education and Volunteer Services recruits, trains, and manages volunteers involved in the activities described below. In 2009, 109,893 hours of effort were contributed. Zoo officials estimate that 53 full-time employees would be required to accomplish jobs now performed by FONZ volunteers. The value of this work was \$2,395,033 using the Smithsonian Institution method of estimating volunteer value. Key continuing volunteer programs are - Zoo Guide Program. This program provides a wide vanety of information and assistance to the Zoogover Volunteers are given basic training in animal and zoo information. On a rotating basis, they staff public areas and conduct scheduled tours for groups. - How Do You Zoo? This exhibit opened in 1999. It was developed for children ages 5 to 10 to learn about animal care by role-playing jobs in a make-believe zoo. Volunteers assist scheduled groups and the general public in their exploration of the work done by Zoo employees in the animal houses, hospital and commissary. - Golden Lion Tamann Monitor Program. The Golden Lion Tamann volunteers monitor the free-ranging monkeys, Keep Zoo visitors at a distance from the animals, and talk to the visitors about the endangered status of the tamanns and the importance and urgency of rainforest conservation. Behavior Watch Program. The study of animal behavior is one of the most vital areas of research at the Zoo FONZ volunteers assist researchers by collecting thousands of hours of data on a variety of species from giant pandas to kor bustards. Behavior

4c (Code) (Expenses \$ 1,564,021 including grants of \$) (Revenue \$ 688,251)

Membership and Education Programs In 2009, FONZ provided fee-based formal education programs that reached more than 21,000 people. Membership activities provided and red eveloped to acquire and retain members for the purposes of increasing public awareness of and support for the National Zoo. Membership activities provided quality wildlife and conservation education through classes, summer camps, special events, publications, and eco-tourism programs. Key programs are - Classes FONZ classes are interactive, in-depth programs that focus on animal care, conservation biology, and zoological research. Classes are Steeduled annually for 5,000 students. The Wildlife Studies Certificate Program offers adults interested in conservation and zoological research the opportunity to gain expertise about the issues and scence important to wildlife and their habitats. Courses are taught by scientists and researchs from the Zoo and other area science organizations in areas of conservation, animal behavior, and ecology - Summer Safan. Summer Safan is the wildest day camp in town. The program runs for eight weeks, from June to August, for children entering grades. Fo. 5. There are seven different sessions each week for atola 10.56 different week-long sessions. All classes are taught by certified teachers or naturalists. Accredited by the American Camp Association, the camp won "Best DayCamp" designation by Washington Families Magazine. During the eight weeks, 1,000 children participate. - FONZ Nature Camp, offered to students entering grades. 5 through 10, is a seven-different week-long the seven programs. Through discovery learning, campers learn about habitat diversity, the food chain and the fragile balance of nature. FONZ Nature Camp is attended by more than 250 children. - Birthday Parties are scheduled annually with 8,000 participants. - Snore and Roar. This tented overnight adventure includes a two-lour exploration of an animal house or exhibit area, led by a Zoo keeper, a late-night his through the Zoo, and a morning act

Other program services (Describe in Schedule O) See also Additional Data for Description
(Expenses \$ 7,838,820 including grants of \$) (Revenue \$ 3,216,635)

Part TV	Checklis	st of De	auired 9	Schedules
	CHECKII	SL UI KE	uuneu s	cneuules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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	3		Νο
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		Νο
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	5		
6	Did the organization maintain any donor advised funds or any similar funds or 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	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		No
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	9		No
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ 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? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Yes	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional	Į		
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No
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 U S? <i>If "Yes," complete Schedule F, Part II</i>	15		No
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 U S ? If "Yes," complete Schedule F, Part III	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	17		Νο
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If</i> "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
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 line 25	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
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	25a		No
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? If "Yes," complete Schedule L, Part I	25b		N o
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	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		Νο
28	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part			
		28a		Νο
	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		N o
С	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		N o
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If</i> " <i>Yes," complete Schedule N, Part II</i>	32		Νο
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		Νο
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	34		No
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	35		N o
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If</i> "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm 99 0	(2009)

orm	990 (2009)			Page
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal			
	of U.S. Information Returns. Enter -0- if not applicable			
	1a 61			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1b 0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements filed for the calendar year ending with or within the year covered by this return			
ь	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this		.,	
L	return?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3Ь	Yes	
4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Νο
Ь	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		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		Νo
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal	7e		No
f	benefit contract?	7f		No
' a		71 7g		110
_	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as	- 9		
•=	required?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
۵		8		
9 a	Sponsoring organizations maintaining donor advised funds. Did the organization make any taxable distributions under section 4966?	9a		
a b		9a 9b		
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
ь	Gross income from other sources (Do not net amounts due or paid to other sources	1		
	against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		

 $\boldsymbol{b} \quad \text{If "Yes," enter the amount of tax-exempt interest received or accrued during the} \\$

12b

po box 37012 mrc 5504 washington, DC 200137012

(202) 633-4275

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

Se	ection A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body 1a 21			
ь	Enter the number of voting members that are independent 1b 21			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	1		
	other officer, director, trustee, or key employee?	2		Νo
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		Νo
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		Νo
6	Does the organization have members or stockholders?	6		Νo
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		Νo
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Νο
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	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 in Schedule O	9		Νο
Se	ection B. Policies (This Section B requests information about policies not required by the Internal			
	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		Νo
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?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
ь	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	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
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?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
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		Νο
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		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed ►VA, MD			
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	ıe orga	nızatıor	n 🕨
	Linda Michelsen			

Part VIII 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 Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. 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, 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 i	not compen	r, dırector, trustee									
(A) Name and Title	(B) Average hours	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other	
	per week		Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data											

198	2 moreland parkway apolis, MD 21401	printing
2	Total number of independent contractors (including but not limited to those listed above) \$100,000 in compensation from the organization ►3) who received more than

124,830

Form 99								Page 9
Part \	<u>/</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
\$ £	1a	Federated camp	paigns 1a	41,708				
필드	ь	Membership du	es 1b	1,821,291				
s, g	c	Fundraising eve	ents 1 c	710,000				
± a	d	Related organiz	ations 1d					
<u>∞</u> E	e	Government grants	s (contributions) 1e					
Contributions, gifts, grants and other similar amounts	f g	sımılar amounts no	butions included in	2,171,117				
a E	h	Total. Add lines	s 1a-1f	▶	4,744,116			
				Business Code				
ĬĮ.	2a	Parking/Guest Serv	rices	900,099	2,819,009			2,819,009
Program Serwce Revenue	ь	Member Classes ar	nd Act	611,600	699,968	699,968		
ф. П	c	Map Sales		453,220	270,443			270,443
ž b	d	Group tour Revenu	les	561,520	78,733			78,733
ŏ ⊆	e	Zoogoer Magazine	Subsc	511,120	42,762	42,762		
튵	f	All other progra	ım service revenue	,	5,688	5,688		
Š						-,		
	g		3 2a-2f		3,916,603			
	3		ome (including dividend ar amounts)	. F	61,444			61,444
	4		tment of tax-exempt bond p	⊢				
	5			· · · · · · · · · · · · · · · · · · ·	31,061			31,061
		,	(ı) Real	(11) Personal				
	6a	Gross Rents						
	b	Less rental expenses						
	c	Rental income						
	d	or (loss) Net rental incor	l me or (loss)					
			(ı) Securities	(II) O ther				
	7a	Gross amount from sales of assets other than inventory	853,403					
	b	Less cost or other basis and	1,252,190					
		sales expenses	-398,787					
	c d	Gain or (loss)		▶	-398,787			-398,787
	8a	Gross income f	s)		330,707			330,707
Other Revenue		events (not inc \$	luding ,000 reported on line 1c)					
ŢĢ.	Ь	Less direct evi	penses b	924,089 632,731				
₹	c		loss) from fundraising		291,358	291,358		
	9a	Gross income fi See Part IV, lin	rom gaming activities e 19					
	b c		penses b loss) from gaming activ	vities				
	10a	Gross sales of returns and allo	• •	9,336,459				
	ь	Less cost of go	oods sold b	2,951,650				
	С		loss) from sales of inve		6,384,809		650,679	5,734,130
		Miscellaneous	s Revenue	Business Code				
	11a							
	b							
	C							
	d		ue					
	e	Total. Add lines	s 11a-11d					
	12	Total revenue.	See Instructions	▶	15,030,604	1,039,776	650,679	8,596,033

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).									
			(B), (C), and (B)	(D). (C)	(D)				
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses				
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	1,001,175	1,001,175						
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22								
3	Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16								
4	Benefits paid to or for members]					
5	Compensation of current officers, directors, trustees, and key employees	446,722	306,219	79,378	61,125				
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	6,804,240	4,686,828	1,197,418	919,994				
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	182,151	109,425	40,548	32,178				
9	Other employee benefits	514,989	343,869	77,491	93,629				
10	Payroll taxes	597,838	439,330	94,990	63,518				
11	Fees for services (non-employees)								
а	Management								
b	Legal	42,391		42,391					
С	Accounting	80,608		80,608					
d	Lobbying								
e	Professional fundraising See Part IV, line 17								
f	Investment management fees								
g g	Other	191,496	70,551	41,995	78,950				
12	Advertising and promotion	240,039	239,160	' 	879				
13	Office expenses	798,512	671,163	 	4,860				
14	Information technology	750,512	071,103	122,103	1,000				
15	Royalties								
16	Occupancy	122,804	104,447	18,357					
17	Travel	42,935	24,497	9,987	8,451				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	42,933	24,497	9,967	0,431				
19	Conferences, conventions, and meetings	6,664		4,947	1,717				
20	Interest	2,231		,,,,,,					
21	Payments to affiliates								
22	Depreciation, depletion, and amortization	462,149	406,324	52,437	3,388				
23	Insurance	318,920	137,902	' 	499				
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)	310/320	137,502	130/312					
а	Restricted fund expense	1,522,605	1,522,605						
b	Membership activities	562,343	562,343						
С	Payments to smithsonian	352,693	352,693						
d	guest services	221,010	221,010	 					
е	Miscellaneous	151,381	136,590	7,988	6,803				
f	All other expenses		, , , , , , , , , , , , , , , , , , ,	<u> </u>	·				
25	Total functional expenses. Add lines 1 through 24f	14,663,665	11,336,131	2,051,543	1,275,991				
26	Joint costs. Check here ► ☐ 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	11,005,005	11,550,131	2,031,013	1,2,3,771				

Part X Balance Sheet (A) (B) Beginning of year End of year 368.070 1.528.459 1 1 Cash—non-interest-bearing 4,607,568 2 6.768.727 2 1,275,603 125,082 3 3 4 166.588 60.276 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 6 Notes and loans receivable, net 841.643 680.739 Inventories for sale or use 86,618 9 13,374 Land, buildings, and equipment cost or other basis Complete 6.141.663 10a 10a Part VI of Schedule D 10b 4.577.709 1.563.954 b Less accumulated depreciation 1,978,198 **10c** 2.609.673 11 1,905,102 11 12 12 Investments—other securities See Part IV, line 11 13 13 Investments—program-related See Part IV, line 11 . . 14 14 15 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 11,933,961 16 12,645,713 858.295 17 704.068 17 Accounts payable and accrued expenses . 18 18 45,035 19 35,803 19 20 20 Liabilities 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . . . 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties 25 25 Other liabilities Complete Part X of Schedule D 26 **Total liabilities.** Add lines 17 through 25 903,330 26 739,871 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 2,693,347 3,567,846 27 Unrestricted net assets 27 28 8.092.284 28 8.067.996 Temporarily restricted net assets Fund 245.000 29 270.000 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. ö 30 30 Capital stock or trust principal, or current funds . . . Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ Total net assets or fund balances 11,030,631 11,905,842 33 33 34 Total liabilities and net assets/fund balances 11.933.961 12,645,713 34

Part XI Financial Statements and Reporting

			Yes	No
1	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		Νo
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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 in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	Separate basis Consolidated basis Both consolidated and separated basis			
3а	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? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

OMB No 1545-004

Employer identification number

SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

h

Name of the organization

Public Charity Status and Public Support

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

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

2009

Open to Public Inspection

Friends of the National Zoo 52-0853312 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 11, check only one box) A church, convention of churches, or association of churches section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 7 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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 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) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II) An organization that normally receives (1) more than 331/3% 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 331/3% 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 Seesection 509(a)(4). 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 Type III - Other ∏ Туре I **b** Type II c Type III - Functionally integrated 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) 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 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) Yes No 11g(i) and (III) below, the governing body of the the supported organization? (ii) a family member of a person described in (i) above? 11g(ii) (iii) a 35% controlled entity of a person described in (i) or (ii) above? 11g(iii)

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizat col (i) listyour gove docume	e ion in ted in irning	(v) Did you no organizat col (i) of suppor	tify the ion in your	(vi Is th organiza col (i) or in the l	ne tion in ganized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No	
				<u> </u>					
				1		<u> </u>			
						+			
Total									

Provide the following information about the supported organization(s)

ınstructions

P	Support Schedule (Complete only if yo					and 170(b)	(1)(A)(vi)
S	ection A. Public Support	a checked tile	DOX OII IIIC 3,	,, or o or rare.	÷·/		
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2006	(6) 2007	(d) 2008	(e) 2009	(I) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual						
_	grants ") Tax revenues levied for the						
2	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 lines 1 through 3						
5	The portion of total contributions by						
	each person (other than a						
	governmental unit or publicly						
	supported organization) included on						
	line 1 that exceeds 2% of the						
	amount shown on line 11, column						
_	(f) Dublic Support Subtract line F from						
6	Public Support. Subtract line 5 from line 4						
S	ection B. Total Support	1		-			
	endar year (or fiscal year beginning	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	ın)	(a) 2005	(b) 2000	(6) 2007	(d) 2008	(e) 2009	(1) Total
7	A mounts from line 4						
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar						
9	sources Net income from unrelated						
9	business activities, whether or						
	not the business is regularly						
	carried on						
10	Other income (Explain in Part						
	IV) Do not include gain or loss						
	from the sale of capital assets						
11	Total support (Add lines 7						
4.5	through 10)	/5					
12	Gross receipts from related activities	,	•			12	
13	First Five Years If the Form 990 is f	or the organizati	on's first, second	, third, fourth, or	fifth tax year as a	501(c)(3) orga	inization, ▶□
	check this box and stop here						-1
S	ection C. Computation of Pub	lic Support P	ercentage				
14	Public Support Percentage for 2009			11 column (f))		14	
15	Public Support Percentage for 2008	Schedule A . Pa	rt II. line 14			15	
	33 1/3% support test—2009. If the	•	,	v on line 13 and	line 14 is 33 1/30		k this hox
	and stop here. The organization qua	-		·	IIIIC 14 13 33 1/3/	o or more, ence	▶ □
ь	33 1/3% support test—2008. If the				5a, and line 15 is	33 1/3% or moi	
	box and stop here. The organization				,		▶
17a	10%-facts-and-circumstances test-	-2009. If the org	anızatıon dıd not	check a box on lı	ne 13, 16a, or 16	b and line 14	
	ıs 10% or more, and ıf the organizat						
	in Part IV how the organization mee	ts the "facts and	l cırcumstances"	test The organiz	ration qualifies as	a publicly supp	
L	organization	_2009 Ifthe c==	onization did net	chack a bay as li	no 12 165 164	or 17a and line	▶□
D	10%-facts-and-circumstances test- 15 is 10% or more, and if the organ	_					
	Explain in Part IV how the organizat						clv
	supported organization						▶ ┌
10	Deiveta Farmdation Ifthe averages	on did not obselv	a hay an line 12	16- 16- 17-	17	hay and cas	•

▶□

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.)

Se	ction A. Public Support						_
Cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	4,467,563	7,028,522	7,185,489	6,974,139	5,577,013	31,232,726
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	7,689,818	9,841,419	9,138,592	9,190,191	10,807,251	46,667,271
3	purpose Gross receipts from activities that are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its						
5	behalf The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5	12,157,381	16,869,941	16,324,081	16,164,330	16,384,264	77,899,997
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons		100,000	1,005,000		217,768	1,322,768
b	A mounts 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	614,872	617,182	390,855		116,857	1,739,766
С	Add lines 7a and 7b	614,872	717,182	1,395,855		334,625	3,062,534
8	Public Support (Subtract line 7c						74,837,463
<u> </u>	from line 6)						
	ction B. Total Support ndar year (or fiscal year						
cuic	beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6	12,157,381	16,869,941	16,324,081	16,164,330	16,384,264	77,899,997
10a	Gross income from interest, dividends, payments received on securities loans, rents,	83,748	129,744	146,465	129,971	92,505	582,433
b	royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c	Add lines 10a and 10b	83,748	129,744	146,465	129,971	92,505	582,433
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	270,526	328,813	183,843		650,679	1,433,861
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)					310,695	310,695
13	Total support (Add lines 9, 10c, 11 and 12)	12,511,655	17,328,498	16,654,389	16,294,301	17,438,143	80,226,986
14	First Five Years If the Form 990 is to check this box and stop here	or the organization	on's first, second	, third, fourth, or f	fifth tax year as a	501(c)(3) organ	nization, ▶
Se	ction C. Computation of Pub	lic Support Pe	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	93 280 %
-	, ,	, · - · · · · · (,				95 200 70

Public support percentage from 2008 Schedule A, Part III, line 15

15	93 280 %
4.0	01 530 %

Section D. Computation of Investment Income Percentage

Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))

Investment income percentage from 2008 Schedule A, Part III, line 17

17	0 730	%
18	0 770	%

19a 33 1/3% support tests—2009. 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

33 1/3% support tests—2008. 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

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

Explanation

Schedule A, Part II, Line 12, Explanation of Other Income $\,$ Miscellaneous

Schedule A (Form 990 or 990-EZ) 2009

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493194001251

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions.

Open to Public

	e of the organization s of the National Zoo		Emp	loyer identifica	ation numbe	er
Part	Organizations Maintaining Donor Ac	dvised Funds or Other Similar		0853312 or Accounts	s. Comple	te if the
	organization answered "Yes" to Form 99				•	
		(a) Donor advised funds	- (b) Funds and o	other accou	nts
. Т	otal number at end of year					
. Δ	aggregate contributions to (during year)					
Δ	ggregate grants from (during year)					
. Д	ggregate value at end of year					
	Did the organization inform all donors and donor advi unds are the organization's property, subject to the		onor advı	sed	☐ Yes	┌ No
l C	Old the organization inform all grantees, donors, and used only for charitable purposes and not for the ben conferring impermissible private benefit	efit of the donor or donor advisor, or for	any othe	r purpose	☐ Yes	☐ No
art	Conservation Easements. Complete	<u>if the organization answered "Yes"</u>	to Forn	n 990, Part I'	V, line 7.	
ך ך ך ני ני	Purpose(s) of conservation easements held by the oi Preservation of land for public use (e g , recreati Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualicatement on the last day of the tax year	on or pleasure) Preservation of a	a certifie	d historic struc	•	a
	easement on the last day of the tax year			Held at the	End of the	Year
a T	Fotal number of conservation easements		2a	ricia at the	. Liid Oi tiic	icai
	Fotal acreage restricted by conservation easements		2b			
	Number of conservation easements on a certified his		2c			
_	Number of conservation easements included in (c) a	` ,	2d			
t	Number of conservation easements modified, transfe		·	ie organization	during	
	Number of states where property subject to conserva Does the organization have a written policy regarding enforcement of the conservation easements it holds?	the periodic monitoring, inspection, ha		violations, and	☐ Yes	┌ No
9	Staff and volunteer hours devoted to monitoring, insp	ecting and enforcing conservation ease	ements d	uring the year	-	
<i>A</i>	Amount of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easemer	nts during	g the year ► \$		
	Does each conservation easement reported on line 2 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of s	ection		☐ Yes	┌ No
ŀ	in Part XIV, describe how the organization reports co palance sheet, and include, if applicable, the text of t the organization's accounting for conservation easen	he footnote to the organization's financi				
art	Organizations Maintaining Collectio Complete if the organization answered '		, or Otl	her Similar	Assets.	
	f the organization elected, as permitted under SFAS art, historical treasures, or other similar assets held provide, in Part XIV, the text of the footnote to its fin	for public exhibition, education or resea	arch in fu			e,
_	f the organization elected, as permitted under SFAS nistorical treasures, or other similar assets held for porovide the following amounts relating to these items	oublic exhibition, education, or research			•	
((i) Revenues included in Form 990, Part VIII, line 1			► \$		
((ii) Assets included in Form 990, Part X			► \$		
<u>.</u> I	If the organization received or held works of art, historically amounts required to be reported under SFA		for finan			
a p	Revenues included in Form 990, Part VIII, line 1			► \$		

b Assets included in Form 990, Part X

Using the organization's accession and other											
items (check all that apply)	r records, check any	ofth	ne foll	lowing th	at ar	e a significa	ant u	se of its o	ollectio	n	
Public exhibition		d	Γ	Loan or	rexcl	nange progr	ams				
Scholarly research		e	Γ	Other							
Preservation for future generations											
•	ollections and explai	n hov	w the	v further	the o	rganization	's ex	empt pur	pose in		
Part XIV				,					,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
								ıılar	_		
								oc" to E			No
						i aliswele	u i	es to re	יכל ווו ול	J ,	
						or other ass	ets ı	not	Г	Yes	┌ No
If "Yes," explain the arrangement in Part XI\	/ and complete the 1	follow	ing t	able							
									A mo	ınt	
Beginning balance							1c				
Additions during the year						Ī	1d				
Distributions during the year						Γ	1e				
Ending balance							1f				
Did the organization include an amount on Fo	orm 990, Part X, line	21?				_			Г	Yes	┌ No
If "Yes," explain the arrangement in Part XIV											
		ans	were	ed "Yes'	" to I	Form 990,	Par	t IV, line	10.		
	(a)Current Year	(b			(c) Tv	wo Years Back	(d)	Three Year	s Back (e	e)Four Y	ears Back
Beginning of year balance			9	9,604,358							
Contributions	1,523,317			2,433,785							
Investment earnings or losses											
Grants or scholarships							4				
	1,522,605		3	3,700,859							
							+				
'	8,337,996		8	8,337,284							
· '	r and halance hald a			I							
		3									
	70.70										
remanent endowment F											
						d	J 6	46.			
	ssion of the organiza	ition	tnata	are neid a	and a	aministere	TOF	tne		Yes	No
(i) unrelated organizations									3a(i)	1	No
(ii) related organizations									3a(ii)		Νο
If "Yes" to 3a(II), are the related organization	ns listed as required	l on S	ched	lule R?					3b		
VII Investments—Land, Buildings	s, and Equipme	nt. S	ee F	orm 99	0, Pa	art X, line	<u> 10.</u>	I			
Description of investment										(d) Bo	ok value
and		ı									
uildings		•				1,294	,298		609,303		684,995
easehold improvements						2,573	,110	2	,018,359		554,751
			1			1 227	255	l ₁	050 047		224 200
quipment		•				2,274	,255	1	,950,047		324,208
ther		<u>. </u>				2,274	,,233		,950,047		324,208
	Preservation for future generations Provide a description of the organization's corport XIV During the year, did the organization solicit cassets to be sold to raise funds rather than to the organization solicit cassets to be sold to raise funds rather than to the part IV, line 9, or reported an an ansist the organization an agent, trustee, custod included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form Yes," explain the arrangement in Part XIV IV Endowment Funds. Complete in the part XIV Vendowment Funds. Complete in the programs of the year of the part XIV of t	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain Part XIV During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as IV Escrow and Custodial Arrangements. Complee Part IV, line 9, or reported an amount on Form 99 Is the organization an agent, trustee, custodian or other interme included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the information of the part of the organization include an amount on Form 990, Part X, lines and the organization include an amount on Form 990, Part X, lines and part of the organization in the part XIV If "Yes," explain the arrangement in Part XIV Investment earnings or losses Grants or scholarships Other expenditures for facilities and organization by If year balance Describe the estimated percentage of the year end balance held and a second organization by If year and the possession of the organization by If year it organizations If "Yes" to 3a(ii), are the related organizations listed as required the possession of the organization by Investments—Land, Buildings, and Equipment and Investments—Land, Buildings, and Equipment buildings	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how part XIV During the year, did the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of Part IV, line 9, or reported an amount on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X? Is the organization an agent, trustee, custodian or other intermediary included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the follow Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization and an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization and an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization and an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization and an amount on Form 990, Part X, line 21? In the organization and the provided in the organization and the part XIV the intended uses of the year end balance held as Board designated or quasi-endowment Part AIV when the possession of the organization organization by (ii) unrelated organizations If "Yes" to 3a(ii), are the related organizations listed as required or Signalization and an amount on Form 990, Part XIV the intended uses of the organization's endowment V Investments—Land, Buildings, and Equipment. Signalizations until the possession of investment and In the provided the organization of investment and In the provided the organization of the organization's endowment provided the provided the provided the organization's endowment provided the provided the provided the	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how the Part XIV During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the Part IV, line 9, or reported an amount on Form 990, Part X Is the organization an agent, trustee, custodian or other intermediary for cincluded on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following to Beginning balance Additions during the year Distributions during the year Ending balance If "Yes," explain the arrangement in Part XIV VEND Endowment Funds. Complete if the organization answers (a)Current Year (b)Pror Beginning of year balance Contributions Grants or scholarships Other expenditures for facilities and programs Administrative expenses End of year balance Provide the estimated percentage of the year end balance held as Board designated or quasi-endowment Permanent endowment Permanent endowment Active remendowment funds not in the possession of the organization that organization by (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedusciples in Part XIV the intended uses of the organization's endowment funds and VI Investments—Land, Buildings, and Equipment. See [a based on the passion of the organization or sendowment funds and VI Investments—Land, Buildings, and Equipment. See [a base and VI Investments—Land, Buildings, and Equipment. See [a based or quasi-endowment]	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further Part XIV During the year, did the organization solicit or receive donations of art, historical trassets to be sold to raise funds rather than to be maintained as part of the organization that are held organization and explain how they further Part XIV Escrow and Custodial Arrangements. Complete if the organization an agent, trustee, custodian or other intermediary for contribution included on Form 990, Part X, line 2. Is the organization an agent, trustee, custodian or other intermediary for contribution included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 2.1? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes (a)Current Year (b)Pror Year Beginning of year balance Contributions Contri	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization burning the year, did the organization solicit or receive donations of art, historical treasulasses to be sold to raise funds rather than to be maintained as part of the organization assests to be sold to raise funds rather than to be maintained as part of the organization assests to be sold to raise funds rather than to be maintained as part of the organization assests to be sold to raise funds rather than to be maintained as part of the organization of part XIV Escrow and Custodial Arrangements. Complete if the organization and any part XIV part XIV and complete the following table Beginning balance Beginning balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to language to the organization and the organization and the language to the part XIV language to the language to the organization that are held and a organization by (i) unrelated organizations If yes to 3a(ii), are the related organizations listed as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds VI Investments—Land, Buildings, and Equipment. See Form 990, Part Aid and the language to the bass (investment) and unidings.	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization Preservation for future generations Provide a description of the organization's collections and explain how they further the organization Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or othe assets to be sold to raise funds rather than to be maintained as part of the organization answere Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other ass included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance A dditions during the year Distributions during the year Ending balance If "Yes," explain the arrangement in Part XIV VEND Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV VEND Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV VEND Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV VEND Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X, line 21. If "Yes," explain the arrangement in Part XIV VI unrelated organizations VI Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 21. (ia) Cost or other basis (investment) Elastic organization by (i) unrelated organizations listed as required on Schedule R? Description of investment Description of investment (ia) Cost or other basis (investment) Elastic organization by (i) unrelated organizations If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? Description of investment Description of investment Description of inves	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's expart XIV During the year, did the organization solicit or receive donations of art, historical treasures or other simassets to be sold to raise funds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "Y Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Ic Additions during the year In Beginning balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; line 21? If "Yes," explain the arrangement in Part XIV In Vestment earnings or losses In Salazian Part Vistor the Information of the Organization that are held and administered for organization by the organization by the organization that are held and administered for organization by the organization in the possession of the organization that are held and administered for organization by the organization in the possession of the organization that are hel	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt pur Part XIV 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? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form Part IV, Jine 9, or reported an amount on Form 990, Part X, Jine 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year In Distributions during the year Distributions during the year Distributions during the year Permanent Funds. Complete if the organization answered "Yes" to Form 990, Part IV, Jine 21? If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, Jine 4, 333, 7,244 Segnating of year balance (a) Current Year (b) Pror Year (c) Two Years Back (d) Thee Year Baginning of year balance (a) Current Year (b) Pror Year (c) Two Years Back (d) Thee Year Baginning of year balance (a) Current Year (b) Pror Year (c) Two Years Back (d) Thee Year Baginning of year balance (a) Current Year (b) Pror Year (c) Two Years Back (d) Thee Year Baginning of year balance (a) Contributions (b) Contributions (c) Contributions (d) Contributions (d	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar assests to be sold to raise funds rather than to be maintained as part of the organization's collection? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 991 Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV XV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance Contributions (a) (urent Year) (b) Prior Year (c) (D) Workers Back (d) Three Years Back (d) Beginning of year balance Contributions (b) (a) (urent Year) (b) Prior Year (c) (D) Workers Back (d) Three Years Back (d) Beginning of year balance Contributions (c) (a) (urent Year) (b) Prior Year (c) (D) Workers Back (d) Three Years Back (d) Beginning of year balance Contributions (c) (a) (urent Year) (b) Prior Year (c) (D) Workers Back (d) Three Years Back (d) Beginning of year balance Contributions (a) (urent Year) (b) Prior Year (c) Prior	Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar assests to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes Secrow 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. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not include on Form 990, Part XIV and complete the following table 1c

Part VII Investments—Other Securities. Sec	e Form 990, Part X, line 17	
(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		
Closely-held equity interests		
Other		
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	*	
Part VIII Investments—Program Related. Se	ee Form 990, Part X, line	13.
(a) Description of investment type	(b) Book value	(c) Method of valuation
——————————————————————————————————————	(b) Book value	Cost or end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)	▶ Inc. 1E	
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X,	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Descri	ine 15.	(b) Book value
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Part IX Other Assets. See Form 990, Part X, (a) Description (b) Should equal Form 990, Part X, col.(B) line	ine 15.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	Ine 15. Iption 15.) X, line 25.	
Total. (Column (b) should equal Form 990, Part X, col.(B) line Part X Other Liabilities. See Form 990, Part (a) Description of Liability	15.) X, line 25. (b) A mount	

Schedule D (Form 990) 2009

Par	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statemen	nts	
1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	15,030,604
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	14,663,66
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	366,93
4	Net unrealized gains (losses) on investments	4	508,27
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	508,27
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9	10	875,21
Part	XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Retu	rn
1	Total revenue, gains, and other support per audited financial statements	1	19,123,257
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIV) 2d		
e	Add lines 2a through 2d	2e	508,27
3	Subtract line 2e from line 1	3	18,614,98
4	A mounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	-3,584,38
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	15,030,604
	Reconciliation of Expenses per Audited Financial Statements With Expenses	per Re	
1	Total expenses and losses per audited financial statements	1	18,248,046
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
а	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIV)		
e	Add lines 2a through 2d	2e	3,584,38
3	Subtract line 2e from line 1	3	14,663,66!
4	A mounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIV)		
c	Add lines 4a and 4b	4c	(
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	14,663,66

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part V, Line 4	Description of Intended Use of Endowment Funds	Temporarily restricted net assets treated as "quasi-endowment" funds relate to contributions received for support of the National Zoo which are released and expensed once the donors restriction of purpose or time has occurred Permanently endowed funds are held in corpus with the revenue generated used to support National Zoo exhibits
Part X	Description of Uncertain Tax Positions Under FIN 48	Management has concluded that the FONZ has properly maintained their exempt status, and there are no uncertain tax positions as of December 31, 2009
Part XII, Line 4b - Other Adjustments		cost of goods sold, netted against revenue -2951650 special event expenses, netted against revenue -632731
Part XIII, Line 2d - Other Adjustments		cost of goods sold 2951650 special event fundraising expenses 632731

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DLN: 93493194001251

OMB No. 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" to Form 990, Part IV, lines 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. ► See separate instructions.

Internal Revenue Service Name of the organization Friends of the National Zoo

Employer identification number

52-0853312

* 1			6.11	c 11	61	1 11 11 1	
Indicate whether the orga	anization raised funds	s through a					
Mail solicitations Internet and e-mail s						n-government grants	
Internet and e-mail s Phone solicitations	olicitations				Solicitation of gov	-	
In-person solicitations	าร		g	'	Special fundraisir	ig events	
Did the organization have or key employees listed i							Г _{Yes} Г
If "Yes," list the ten higher to be compensated at lea							
(i) Name of individual or entity (fundraiser)	f individual (ii) A ctivity		Did er have dy or rol of utions?		Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization
		Yes	No				
		1					
al							

Par	t II	Fundraising Events. Commore than \$15,000 on Form					repor	ted
			(a) Event #1	(b) Event #2 zoolights	(c) O ther Events	(d) Tot (Add col		
			(event type)	(event type)	(total number)			
E E	1	Gross receipts	499,985	405,649	728,455		1,63	4,089
Revenue	2	Less Charitable contributions	205,000	290,000	215,000		71	0,000
	3	Gross income (line 1 minus line 2)	294,985	115,649	513,455		92	4,089
	4	Cash prizes						
မွ	5	Non-cash prizes						
Expenses	6	Rent/facility costs	45,137	,	53,543		9	8,680
	7	Food and beverages	18,364		1,701		2	0,065
Direct	8	Entertainment	4,037	,	14,615		1	8,652
△	9	Other direct expenses .	128,262	238,618	128,454		49	5,334
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)			63	2,731
	11	Net income summary Combine li	nes 3, column d, and line	10			29	1,358
Pari	311	Gaming. Complete if the oi \$15,000 on Form 990-EZ, lii		"Yes" to Form 990, Pa	rt IV, line 19, or repo	rted mor	e thar	า
₽ E			(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(d) Tot (Add col		
Revenue						со	l (c))	
	1	Gross revenue						
Se	2	Cash prizes						
Expenses	3	Non-cash prizes						
	4	Rent/facility costs						
Direct	5	Other direct expenses						
	6	Volunteer labor	Г Yes	Г Yes	Г Yes			
			Гио	Гио	Гио			
	7	Direct expense summary Add line	s 2 through 5 ın column (d)	🕨			
	8	Net gaming income summary Com	ibine lines 1, column d, ai	nd line 7				
							Yes	No
9 a		er the state(s) in which the organiza The organization licensed to operate				. 9a		
b	If"N	No," Explain				<u> </u>		
						_		
10a	Wer	re any of the organization's gaming	licenses revoked, susper	nded or terminated during	the tax year?	10a		
b	If"\	Yes," Explain						
11		es the organization operate gaming				11	 	
12		the organization a grantor, beneficia ned to administer charitable gaming				. 12		
		<u> </u>			Schedule G (Form 9			009

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
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			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
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 ▶ \$	1	

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Schedule I (Form 990)

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

OMB No 1545-0047

DLN: 93493194001251

Open to Public

Department of the Treasury Internal Revenue Service

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

Inspection Employer identification number Name of the organization Friends of the National Zoo 52-0853312

Part II Grants and Otl Form 990, Part I	ner Assistance to	res for monitoring the use O Governments and recipient that received (0) if additional space	Organizations in d more than \$5,000.	the United States Check this box if n	o one recipient rece	ived more than \$5,0	000. Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant
Office of the Director National Zoological Park Smithsonian Institution 3001 Connecticut Avenue NW Washington, DC 20008	530206027	501(c)(3)	1,001,175				to provide funds for conservation, research and educational programs at the National Zoological Park in Washington, D C

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

(a)Type of grant or assist	(b)Number of recipients	(c)A mount of cash grant	(d) A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
	·	·	·	·	-

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

Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S	Part I, Line 2	Schedule I, Part I, Line 2 FONZ requires approved Form B's and back-up before disbursing grant funds FONZ also requires a report at year end detailing how the money was spent

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DLN: 93493194001251

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

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

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

Compensation Information

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

	F Attach to Form 330. F See Separate histractions.		
Name of the organization		Employer identif	ication number
Friends of the National Zoo			
		52-0853312	

Pa	rt I Questions Regarding Compensation			
			Yes	Νo
1a	Check the appropiate 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			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax idemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No," complete Part III to explain	1b		
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?	2		
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 Compensation committee Written employment contract			
	☐ Independent compensation consultant ☐ Compensation survey or study			
	Form 990 of other organizations Approval by the board or compensation committee			
	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
а	Receive a severance payment or change-of-control payment?	4a		Νo
ь	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?			
c				
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.			
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			
а	The organization?	5a		Νo
ь	Any related organization?	5b		Νο
	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			
а	The organization?	6a		Νo
ь	Any related organization?	6b		Νο
	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	7		Νo
8	Were any amounts reported in Form 990, Part VII, paid or accured 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			
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	9		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)(1)-(111) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of (i) Base compensation	W-2 and/or 1099-MI (ii) Bonus & incentive compensation	SC compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
	(ı) (ıı)	185,400 0	30,000 0		9,000	331 0	228,800	
	(1) (11)	154,888 0	3,098 0		7,732 0	331 0	169,692 0	

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

]	Ident if ier	Ret urn Ref erence	Explanation
]	Ident if ier	Reference	Explanation

Schedule J (Form 990) 2009

NonCash Contributions

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Friends of the National Zoo

SCHEDULE M

Department of the Treasury

Internal Revenue Service

(Form 990)

Employer identification number

52-0853312

During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	Pa	rt I Types of Property							
1 Art—Works of art			Check If		Revenues reported on Form 990, Part VIII, line	Method of do	- etermı	nıng	
A Art—Fractional interests	1	Art—Works of art			3				
Books and publications Clothing and household goods Cars and other vehicles Boats and planes Securities—Publicly traded X 7 250,423 market value Securities—Publicly traded X 7 250,423 market value Securities—Publicly traded X 7 250,423 market value Securities—Publicly traded X 7 250,423 market value United Conservation Contribution—Interests Contribution—Interests Contribution—Other Cont									
5. Clothing and household goods Cars and other vehicles Cars and other vehicle	3	Art—Fractional interests							
5. Clothing and household goods Cars and other vehicles Cars and other vehicle	4	Books and publications							
6 Cars and other vehicles 7 Boats and planes	5	Clothing and household							
7 Boats and planes	6	-							
8 Intellectual property .									
9 Securities—Publicly traded. X 7 250,423 market value 10 Securities—Closely held stock	_								
10 Securities—Closely held stock			×	7	250 423	market value			
11 Securities—Partnership, LLC, or trust interests		· · · · · · · · · · · · · · · · · · ·		,	230,123	market value			
12 Securities—Miscellaneous		Securities—Partnership, LLC,							
13 Qualified conservation contribution—Historic structures	12								
contribution—Other		Qualified conservation contribution—Historic							
16 Real estate—Other	14	-							
17 Real estate—Other	15	Real estate—Residential .							
18 Collectibles	16	Real estate—Commercial							
19 Food inventory	17	Real estate—Other							
20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts 23 Scientific specimens 24 Archeological artifacts 25 Other ► (18	Collectibles							
Taxidermy	19	Food inventory							
22 Historical artifacts	20	Drugs and medical supplies .							
23 Scientific specimens	21	Taxıdermy							
24 Archeological artifacts	22	Historical artifacts							
25 Other ► () 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 IV, Donee Acknowledgement	23	Scientific specimens							
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 IV, Donee Acknowledgement	24	Archeological artifacts							
27 Other ► (25	O ther ▶ ()							
Other ► (26	O ther ▶()							
Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	27	O ther ▶()							
for which the organization completed Form 8283, Part IV, Donee Acknowledgement	28	O ther ► ()							
During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	29					29			
for exempt purposes for the entire holding period?	30a	During the year, did the organiza	ition receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it		Yes	No
b If "Yes," describe the arrangement in Part II 31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 32 Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 32 No. 33 If "Yes," describe in Part II 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,		must hold for at least three year	s from the o	date of the initial contribution	on, and which is not require	d to be used			
Does the organization have a gift acceptance policy that requires the review of any non-standard contributions? 31 No. 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions? 31 No. 32a No. 32a No. 33a No. 33a If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,		for exempt purposes for the enti	re holdıng p	eriod?			30a		No
Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	b	If "Yes," describe the arrangeme	ent in Part 1	I					
contributions?	31	Does the organization have a gif	tacceptano	ce policy that requires the r	eview of any non-standard	contributions?	31		Νο
b If "Yes," describe in Part II 33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,	32a		e thırd part	es or related organizations	to solicit, process, or sell i	non-cash	32a		No
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked,	b	If "Yes," describe in Part II							
<u></u> _		If the organization did not report	revenuesı	n column (c) for a type of p	roperty for which column (a) is checked,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

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As Filed Data -

DLN: 93493194001251

SCHEDULE 0

Department of the Treasury
Internal Revenue Service

(Form 990)

Supplemental Information to Form 990

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

Attach to Form 990.

2009
Open to Public

Inspection

Name	of	t he	orga	nizat	ion
Friends	οf	the N	lations	al 700	

Employer identification number

52-0853312

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		FONZ provides a copy to each board member prior to filing. If the board has any questions, they are referred to the CFO

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 12c		Each year each board member must complete the conflict of interest policy documentation to verify that they are still in compliance. The completed documentation is returned to the FONZ office. In 2009, the process was completed in February.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 15		the organization engaged the services of Watson Wyatt in 2009 to evaluate employee compensation. A plan to adjust salaries, where applicable, was implemented in three steps. The first two steps are complete and the third is on hold until the economic forecast is more stable.

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section C, line 19		FONZ will make its governing documents, conflict of interest policy and financial statements available to the public available upon request

Additional Data

Software ID: Software Version:

EIN: 52-0853312

Name: Friends of the National Zoo

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 7,838,820 including grants of \$) (Revenue \$ 3,216,635)

ZOO SUPPORT ACTIVITIES THESE PROGRAMS ARE DESIGNED TO ENHANCE VISITOR COMFORT AND ENJOYMENT IN THE PARK THEY ARE CRITICAL TO THE OPERATION OF THE ZOO FOR VISITORS AND INCLUDE THE INFORMATION AIDES AND GROUNDS MAINTENANCE TEAM THESE FONZ EMPLOYEES ASSIST VISITORS WITH GENERAL INFORMATION,STROLLER RENTAL, MAP SALES, AND ASSISTING THE NZP PERMENENT PERSONNEL IN KEEPING THE PARK CLEAN FONZ OPERATES CONCESSIONS AT THE ZOO WHICH PROVIDE VISITORS WITH HIGH QUALITY MERCHANDISE AND FOOD IN PLEASANT SURROUNDINGS SO THEY CAN BETTER ENJOY THEIR VISIT TO THE ZOO AND TAKE HOME EDUCATIONAL ANIMAL RELATED MATERIALS IN ADDITION. FONZ OPERATES THE PARKING FACILITIES AT THE ZOO ZOOGOER MAGAZINE AND ZOO WEBSITE ZOOGOER IS FONZ'S, AND BY EXTENSION, THE ZOO'S FLAGSHIP PUBLICATION THE EDITORIAL MISSION IS TO COVER SUBJECTS THAT ZOOGOERS ARE INTERESTED IN. COULD BE INTERESTED IN.OR SHOULD BE INTERESTED IN THE MAGAZINE FOCUSES ON BIOLOGICAL SCIENCE, NATURAL HISTORY, CONSERVATION, AND RELATED SUBJECTS BASED ON WORK DONE AT THE ZOO AND ELSEWHERE AROUND THE WORLD FONZ STAFF IN THE OFFICE OF COMMUNICATIONS MANAGE THE COMBINED NATIONAL ZOO/FONZ WEBSITE, FOCUSING ON DESIGN, CONTENT DEVELOPMENT AND DEPLOYMENT THE PRIMARY GOAL OF THE SITE IS TO EDUCATE AND INFORM THE GENERAL PUBLIC, ADULTS, AND CHILDREN ABOUT THE ZOO'S ANIMALS AND ITS EDUCATION AND CONSERVATION PROGRAMS IT ALSO PROVIDES NEWS ABOUT THE ZOO AND INFORMATION ON VISITING THE ZOO AND FONZ PROGRAMS FOR THE PUBLIC ADDITIONALLY, FONZ RAISES FUNDS TO SUPPORT SPECIFIC ZOO NEEDS IN 2009 THESE FUNDS TOTALLED \$1.522.605 AND WERE USED TO SUPPORT SUCH PROJECTS AS EXPANSION OF THE ASIAN ELEPHANT AND SEAL AND SEA LION EXHIBITS, PANDA HABITAT AND ENRICHMENT, GENERAL ANIMAL ACQUISITION, CHEETAH AND CLOUDED LEOPARD EDUCATION, AND GENERAL SUPPORT OF THE CRC (CONSERVATION AND RESEARCH CENTER) IN FRONT ROYAL, VIRGINIA

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Compensated Employees, and Independent Contractors										
(A) Name and Title	(B) Average hours per	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
james C Weinberg president	1 00	х		х				О	О	0
andrew M Shore Vice President	1 00	х		х				0	0	0
sheila D Stinson treasurer	1 00	×		х				0	0	0
john F Ring board secretary	1 00	Х		Х				0	0	0
marcie Bane Director	1 00	Х						0	0	0
chris capuano Director	1 00	Х						0	0	0
keith J Greene Director	1 00	Х						0	0	0
james f hinchman Director	1 00	Х						0	0	0
deborah Knuckey Dırector	1 00	Х						0	0	0
robyn s kravıt Dırector	1 00	х						0	0	0
timothy lynch Director	1 00	Х						0	0	0
vicky Marchand Director	1 00	Х						0	0	0
alison McNally Director	1 00	Х						0	0	0
gregory melanson director-partial year	1 00	×						0	0	0
Peter Michaels Director	1 00	Х						0	0	0
mioshi moses Director	1 00	Х						0	0	0
ann o'rourke Dırector	1 00	Х						0	0	0
sue ruff Director	1 00	Х						0	0	0
anne salladın Dırector	1 00	Х						0	0	0
grace Y Toh Director	1 00	Х						0	0	0
eric d weiss Director	1 00	Х						0	0	0
thomas B Arundel director	1 00	Х						0	0	0
robert j lamb executive director	40 00			Х				219,469	0	9,331
timothy connolly chief financial officer	40 00			х				48,230	0	0
fran xanten dır of devleopment & membershıp	40 00				х			161,629	0	8,063

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) A verage hours per week	o Individual trustee or director	o at Institutional Trustee	(cheo)	Highest compensated employee	Former	(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
laurie stroman dir of human resources	40 00					Х		137,290	0	11,846
patricia petrella dir of evemts	40 00					х		128,612	0	6,066
daniel j kemp major gifts officer	40 00					Х		110,146	0	10,635
merva crawford dır of merchadıse	40 00					Х		106,286	0	10,490
joseph sacco dir of education	40 00					х		114,595	0	10,038

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
Parking/Guest Services	900,099	2,819,009			2,819,009
Member Classes and Act	611,600	699,968	699,968		
Map Sales	453,220	270,443			270,443
Group tour Revenues	561,520	78,733			78,733
Zoogoer Magazine Subsc	511,120	42,762	42,762		

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
Restricted fund expense	1,522,605	1,522,605		
Membership activities	562,343	562,343		
Payments to smithsonian	352,693	352,693		
guest services	221,010	221,010		
Miscellaneous	151,381	136,590	7,988	6,803