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DLN: 93493214007191

Form 990

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

2010

Open to Public Inspection

A Fo	r the 20	010 ca		ning 01-01-2010 and ending 12-31-201	0	D Emplo	ver ident	tification number		
	eck if app Iress cha	•	C Name of organization Denver Zoological Foundation		_	502539	incation number			
_	ne chang	-	Doing Business As				one num	sher		
	ıal return		Number and street (or P O box i	Room/suite						
Ten	mınated		2300 Steele Street	Than is not delivered to street address,	Room, saice	(303)	376-48			
_ Am	ended re	eturn	City or town, state or country, an Denver, CO 80205	d ZIP + 4		G Gross i	receipts \$	26,272,308		
— App	olication	pending	Deliver, CO 80203							
			F Name and address of p Craig D Piper	rıncıpal officer	H(a) Isthisa	group return fo	or affiliates?	res room No		
			2300 Steele Street		H(b) Are all a	iffiliates inc	luded?	┌ Yes ┌ No		
			Denver, CO 80205		1			ee instructions)		
Ta:	x-exemp	ot status	▼ 501(c)(3)	(insert no) 4947(a)(1) or 527	H(c) Group	exempti	on numb	er ►		
J W	ebsite:	► www	denverzoo org							
K Forn	n of orga	anızatıon	Corporation Trust Associa	tion	L Year of form	nation 195	60 M Sta	ate of legal domicile CC		
Pa	rt I	Sumi	mary		'		<u> </u>			
Governance	aı st sı th th	nimals o trives to urvival l nrough p ne natur	an thrive together Denver Zo achieve its mission by adhei Honor We treat our public, an irogressive thinking, practice:	ed in 1896, is dedicated to protecting will be's mission is to secure a better world for ing to six core values Protect. We commit imals, volunteers and staff with respect 1 is and partnerships Engage. We connect pur communities with the knowledge to tall	or animals throu nit to saving an nnovate We si people with anir	ugh huma ımals and trıve to dı nals and	n unders I ensurin scover o inspire e	tanding The zoo g their long-term creative solutions veryone to respect		
Activities &	2 C	heck th	ıs box ┡┬ ıf the organization	discontinued its operations or disposed (of more than 25	% of its	net asse	ts		
ĐĘ.	3 N	umber	of voting members of the gove	rning body (Part VI, line 1a)		L	3	38		
ទ្ធី	4 N	umber	of independent voting member	s of the governing body (Part VI, line 1b)		4	38		
•				n calendar year 2010 (Part V, line 2a)		_	5	362		
			nber of volunteers (estimate i elated business revenue from		-	6 7a	714			
				e from Form 990-T, line 34		-	7b	0		
					Prior	Year		Current Year		
a.	8	Contrib	outions and grants (Part VIII,	43,946,2	97	14,130,733				
Revenue	9	-	•	line 2g)	:	10,773,5	_	11,329,809		
Α̈́	10 11			nn (A), lines 3, 4, and 7d)), lines 5, 6d, 8c, 9c, 10c, and 11e)		112,7 78,8		62,274 102,462		
	12			1 (must equal Part VIII, column (A), lin				·		
	13			rt IX, column (A), lines 1-3)		250,0		25,625,278		
	14			t IX, column (A), line 4)		250,0	0	290,358		
	15		•	yee benefits (Part IX, column (A), lines !				_		
Expenses	16-	10)	sional fundraioina food (Dowt I	V column (A) line 11 a)	,	15,073,9	0	14,914,817		
Φ ⊕	16a b		idraising expenses (Part IX, column	X, column (A), line 11e)			-	0		
Ð	17), lines 11a-11d, 11f-24f)		11,736,5	79	30,263,137		
	18			nust equal Part IX, column (A), line 25)		27,060,5	_	45,468,312		
	19	Revenu	ie less expenses. Subtract lin	e 18 from line 12		27,850,9		-19,843,034		
200 200 200					Beginning Ye	of Curren ar	nt	End of Year		
Net Assets or Fund Balances	20	Total a	ssets (Part X, line 16)			50,865,1	86	34,252,430		
⋖₩	۱	Total lı	abilities (Part X, line 26) .	otal assets (Part X, line 16)						
చ≝	21						I	28,170,957		
	22			t line 21 from line 20		48,013,9	91	20,170,557		
Par	22 t II	Signa	ature Block	et line 21 from line 20		, ,		•		
Par Under knowl	t III penalti edge ar	Signalies of pend belief	ature Block rjury, I declare that I have exam , it is true, correct, and complet		chedules and starr) is based on a	atements, Il informat 1-07-14	and to th	ne best of my		
Par Under knowl	t III penalti edge ar	Signation of period belief	ature Block rjury, I declare that I have exam , it is true, correct, and complet ** ture of officer D Piper President/CEO	it line 21 from line 20	chedules and star) is based on a	atements, Il informat 1-07-14	and to th	ne best of my		
Par Under knowl	t III penaltiedge ar	Signa ies of pend belief ***** Signa Craig Type	ature Block rjury, I declare that I have exam , it is true, correct, and complet * ture of officer D Piper President/CEO or print name and title	ined this return, including accompanying se. Declaration of preparer (other than office	chedules and start) is based on al	atements, Il informat 1-07-14 e	and to th	ne best of my nich preparer has any		
Par Under knowl knowl Sign Here	t III penalti edge ar edge.	Signations of pend belief ***** Signations Craig Type Print/Type preparer's	ature Block rjury, I declare that I have exam, it is true, correct, and complet * ture of officer D Piper President/CEO or print name and title name Steve Corder	ined this return, including accompanying se. Declaration of preparer (other than office	chedules and start) is based on all 201 Dat	atements, Il informat 1-07-14	and to th	ne best of my nich preparer has any		
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Par Under knowl knowl Sign Here	penaltiedge ariedge.	Signa ies of pend belief ***** Signa Craig Type Print/Type Oreparer's	ature Block rjury, I declare that I have exam, it is true, correct, and complet * ture of officer D Piper President/CEO or print name and title name Steve Corder	ined this return, including accompanying se. Declaration of preparer (other than office	chedules and start) is based on all 201 Dat	atements, Il informat 1-07-14 e	and to thion of when the property of the prope	ne best of my hich preparer has any N n's EIN		

1 01111	990 (2010)					Page 4
Par	Statement of Prog Check if Schedule O co				I	
1	Briefly describe the organizati	<u> </u>				
_	Schedule O					
	Did the organization undertake	any clanifica	ant program co	ruicas during the ver	ar which were not listed on	
2	the prior Form 990 or 990-EZ	·			· · · · · · · ·	┌ Yes ┌ No
_	If "Yes," describe these new se					
3	Did the organization cease corservices?				onducts, any program	┌ Yes ┌ No
	If "Yes," describe these chang	es on Schedu	ıle O			
4	Describe the exempt purpose Section 501(c)(3) and 501(c) allocations to others, the total	(4) organizati	ions and sectio	on 4947(a)(1) trusts	are required to report the a	
	(Code) (Ex	penses \$	12,047,610	ıncludıng grants of \$	290,358) (Revenue \$	8,639,775)
	nutritionist, each animal receives a meats. In 2010, the animal care teathree technicians and provides the frespond to nearly any emergency wand research projects led by Denve animal conservation projects around continents. Conservation projects for Projects in Mongolia, Kenya, Peru, Academy of Sciences were honored Development Programme (UNDP) of	e in their own he training session custom diet design welcomed the inghest quality a with the resource of Zoo staff or real the globe. Since cus on key specification, Indone by the United Neesignated the cast to be replicated are Award was pression of the control of the contr	ealth care by pressis are a key compigned for its individe births of various nimal health care is on-property. Desearch associates the Departmenticles and landscape isla and the wester lations fourteen yonservation work did and adapted to	enting different body part onent of the bond that zo dual needs. These diets of sendangered species Der This team possesses the enver Zoo's commitment to during 2010. The Zoo's Co t was created in 1996, the econservation planning, a em United States were a fears after establishing a re the zoo and academy havother parks and reserves	is for examination or treatments be bokeepers build with the animals in onsist of the highest grades of fru wer Zoo's hospital has a staff of the knowledge to care for 700 differe to global conservation is represent onservation/Biology Department is e zoo has participated in over 568 in widely-accepted method of considerations in 2010. In December of 2010 esearch camp in Mongolia's Ikh Nove performed at the reserve as a in Mongolia. Also of note, in Augurnals of the source of the source is a source of the source of	by keepers and veterinarians with in their care. Working with an animal its, vegetables, grains, fish and incee full-time veterinarians and ent species of animals and can led through the 92 field conservations dedicated to field research and projects in 57 countries on all erving large ecological systems. O, Denver Zoo and the Mongolian art Nature Reserve. The U N 's "model program." The program in st 2010, The American Association o
	(Code) (Ex	penses \$	22,201,234	ıncludıng grants of \$) (Revenue \$)
	Zoo ImprovementsZoo improvement facilities and to provide equipment in the Zoo's Millennium plan. In 2	needed to care f	for the Zoo and al	low staff to work safely		
	(Code) (Ex	penses \$	2,284,504	ıncludıng grants of \$) (Revenue \$	1,215,499)
		out the Denver r by scientific an 0, over 53,000 (a day camp) a ducation outread ge of 144 hours grams in school	netro area The zond cultural facilities students participal and other program ch programming, per person Voluis, community cen	oo reaches out to diverse We have strategically so ted in on-site classes, ass is This number does not primarily Pre-K through 1: Inteers dedicated their tim ters and Senior Centers, I	audiences, especially underserver ought collaborations with partners emblies, science workshops, care- include students who visited the 2th grade students. In 2010, 714 e to enhancing the visitor experies helping to foster empathy for anin	d populations that historically have that have earned the trust of er programs, our popular Bunk with oo on field trips Nearly 85,000
4d	Other program services (Des	scribe in Sch	edule O) See a	also Additional Data	for Description	
	(Expenses \$ 4,21	2,763 incl	ludıng grants o	f\$) (Revenue \$	1,474,535)
4e	Total program service expens	es► \$	40,746,11	1		

			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 (see instruction)? 🕏	2	Yes	<u> </u>
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? 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		No
11	If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.	11a	Yes	
Ь	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f		No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b	Yes	
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
	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, Parts I and IV	14b	Yes	
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? If "Yes," complete Schedule F, Parts II and IV.	15	Yes	
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, Parts III and IV .	16	Yes	
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</i> "Yes," complete Schedule G, Part I (see instructions)	17		No
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
20a	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach its audited financial statement to this return? Note. Some Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions)	20b		

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	Yes	
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 lines 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		
С	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		Νο
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		No
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			
	<i>IV</i>	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes,"</i> complete Schedule L, Part IV	28b		No
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Νο
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		Νο
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
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? If "Yes," complete Schedule R, Part I	33		No
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	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35	Yes	
а	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	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		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?	38	Yes	

Form 990 (2010)		
Part V	Statements Regarding Ot	her IRS Filings and	l Tax Compliance

	Check if Schedule O contains a response to any question in this Part V		. [
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable 1a 49			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable 1a 49 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		
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			
ь	return			
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		No
	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		No
b	If "Yes," enter the name of the foreign country 🕒			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		Νο
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?			
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	5c 6a		No
	organization solicit any contributions that were not tax deductible?			
	were not tax deductible?	6b		
7 a	Organizations that may receive deductible contributions under section 170(c). 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	Yes	
ь	services provided to the payor?	7b	Yes	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to	_		
d	file Form 8282?	7c		No
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	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?	8		
9	Sponsoring organizations maintaining donor advised funds.			
_	Did the organization make any taxable distributions under section 4966?	9a		
Ь	Did the organization make a distribution to a donor, donor advisor, or related person?	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				
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
а	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
_				
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b		

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.

Check if Schedule O contains a response to any question in this Part VI											
---	--	--	--	--	--	--	--	--	--	--	--

Se	ction A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax vear			
b	Enter the number of voting members included in line 1a, above, who are			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any			
3	other officer, director, trustee, or key employee?	2	Yes	
4	supervision of officers, directors or trustees, or key employees to a management company or other person? Did the organization make any significant changes to its governing documents since the prior Form 990 was	3		No_
5	filed? Did the organization become aware during the year of a significant diversion of the organization's assets? .	4 5		No No
6	Does the organization have members or stockholders?	6		N o
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		 N o
ь	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		N o
	ction B. Policies (This Section B requests information about policies not required by the Internal venue Code.)			
			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		Νο
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		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?			
		11a	Yes	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
С	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 15a or 15b, 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	ction C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website. Upon request			

- 19 Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization > Donna Driscoll

2300 Steele Street Denver, CO 80205 (303) 376-4800

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

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

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, 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, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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 neither the organ		elated o	rgan	ızatı	on c	omper	sate	d any current office	er, director, or trust	ee
(A) Name and Title	(B) A verage hours	(C) Position (check all that apply)						(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See Additional Data Table										
-										
			<u> </u>							

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

		_	,										
	(A) Name and Title	(B) Average hours	1	(ition that a			Ш		(D) Reportable compensation	(E) Reportable compensation from related		ated f other	
		per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)		compens from f organizat relat organiza	:he on and ed
See A	Addıtıonal Data Table												
											+		
											+		
											+		
											+		
											+		
											+		
1b	Sub-Total							<u> </u>					
	Total from continuation sheets				· ·	÷	<u>· · ·</u>				+		
d								►	564,992		0		160,032
2	Total number of individuals (incl \$100,000 in reportable compen	_				ted	above) who	received more tha	n	·		
												Yes	No
3	Did the organization list any for on line 1a? <i>If</i> "Yes," complete Sch					eye •	mploy •	ee, c	r highest compensa	ated employee	3		No
4	For any individual listed on line organization and related organiz										4	Yes	
5	Did any person listed on line 1a services rendered to the organiz										5	res	No
	action D. Indonesidant Con	tractors											
1	Complete this table for your five \$100,000 of compensation from	hıghest compei		ndep	ende	ent o	ontra	tors	that received more	than			

(A)	(B)	(C)
Name and business address	Description of services	Compensation
Kiewit Construction 7200 S Alton Way Ste A-300 Englewood, CO 80112	Construction	15,039,311
CLR Design Inc 833 Chestnut Street Suite 1000 Philadelphia, PA 19107	Architectural Design	806,237
KM Concessions Inc 4699 Marion Street Denver, CO 802162118	Concessions	649,277
ECOS Communications 2028 17th Street Boulder, CO 80302	Graphic Design	536,357
Malenke Barnhart LLC 1614 15th Street Denver, CO 80202	Advertising	349,059
2 Total number of independent contractors (including but not limited to those listed abov \$100,000 in compensation from the organization ►12	e) who received more than	

		(2010)				Pa	ge 9
Part \	/111	Statement 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
nts nts	1a	Federated campaigns 1a	2,742				
Contributions, gifts, grants and other similar amounts	b	Membership dues 1b	4,741,497				
its, am	С	Fundraising events 1c	555,006				
, gil nilai		Related organizations 1d	280,000				
ons sin	е	Government grants (contributions) 1e	6,220,333				
butí ther	f	All other contributions, gifts, grants, and 1f similar amounts not included above	2,331,155				
ntrí dol	g	Noncash contributions included in lines 1a-1f \$	37,288				
Son an	h	Total. Add lines 1a-1f		14,130,733			
ue			Business Code				
Program Service Revenue	2a		900099		8,639,775		
4 134	b c	Marketing & membership Education	900099 900099		1,474,535 1,215,499		
rwc	d		500039	1,213,499	1,213,433		
<u>%</u>	e						
Iran	f	All other program service revenue					
₽₹oږ	g	Total. Add lines 2a−2f		11,329,809			
	3	Investment income (including dividends, interest					
	4 5	and other similar amounts)		62,274			62,274
		(ı) Real	(II) Personal				
		Gross Rents					
		Less rental expenses					
		Rental income or (loss)					
	d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(II) O ther				
		Less cost or other basis and sales expenses Gain or (loss)					
	d	Net gain or (loss)					
Other Revenue	8a	Gross income from fundraising events (not including \$ 555,006 of contributions reported on line 1c)					
۳. R		See Part IV, line 18	C43 000				
the	ь	Less direct expenses b	647,030 647,030				
0		Net income or (loss) from fundraising events	011,000	0			
	9a	Gross income from gaming activities See Part IV, line 19 . a					
		Less direct expenses					
		Net income or (loss) from gaming activities					
	100	returns and allowances .					
		а					
		Less cost of goods sold b					
	С	Net income or (loss) from sales of inventory • Miscellaneous Revenue	Business Code				
	11 a	Miscellaneous program	900099	102,462			102,462
	Ŀ						
	c	<u> </u>					
	c	All other revenue					
		E Total. Add lines 11a-11d		102,462			
	12	Total revenue. See Instructions ▶		25,625,278	11,329,809	o rm 990 (20	

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

А	Section 501(c)(3) and 501(c)(4) organizations mus Il other organizations must complete column (A) but are not required to c	-		(D).	
Do no	ot include amounts reported on lines 6b, b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations		-		· · · · · · · · · · · · · · · · · · ·
	in the U.S. See Part IV, line 21	55,700	55,700		
2	Grants and other assistance to individuals in the				
	U S See Part IV, line 22	5,000	5,000		
3	Grants and other assistance to governments,	2,777	2,222		
_	organizations, and individuals outside the U.S. See				
	Part IV, lines 15 and 16	229,658	229,658		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	738,245		738,245	
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	14,176,572	12,197,056	700,168	1,279,348
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
а	Fees for services (non-employees) Management				
ь	Legal	33,862		33,862	
c	Accounting	52,000		52,000	
d	Lobbying	`			-
e	Professional fundraising services See Part IV, line 17				_
f	Investment management fees				
g	Other	763,455	752,816	2,017	8,622
12	Advertising and promotion	519,991	,	_,	519,991
13	Office expenses	2,305,611	2,081,726	107,218	116,667
14	Information technology	160,521	793	159,728	
15	Royalties				
16	Occupancy	1,740,629	1,740,629		
17	Travel	175,509	102,192	68,747	4,570
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	200,000		23,7.1.	.,,
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	204,435	204,435		
23	Insurance	151,014	74,776	76,238	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24f If line 24f amount exceeds 10% of line 25, column (A) amount, list line 24f expenses on Schedule O)	202,021	,,,,,,	10,200	
а	Exhibits improvements	21,365,253	21,365,253		
b	Cert of participation	635,676	635,676		
c	Education expenses	339,213	339,213		
d	Wildlights/other events	160,120	57,440		102,680
e	Repairs and maintenance	153,508	153,508		102,000
f	All other expenses	1,502,340	750,240	296,805	455,295
_	Total functional expenses. Add lines 1 through 24f				
25	· · · · · · · · · · · · · · · · · · ·	45,468,312	40,746,111	2,235,028	2,487,173
26	Joint costs. Check here ►				

Part X Balance Sheet (A) (B) Beginning of year End of year 831,916 1 1,468,682 44.564.162 2 28,534,795 2 4,169,235 2,972,704 3 578.017 4 643,355 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 5 Schedule L . . . 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers, and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) **A**ssets 6 8 8 Prepaid expenses and deferred charges 9 10a Land, buildings, and equipment cost or other basis Complete 2.013.871 10a Part VI of Schedule D 1.659.145 ь Less accumulated depreciation 10b 454,488 **10c** 354,726 267.368 11 11 278.168 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 50,865,186 16 34,252,430 **Total assets.** Add lines 1 through 15 (must equal line 34) . . . 2,851,195 17 6,081,473 17 Accounts payable and accrued expenses . 18 18 19 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 2,851,195 26 6,081,473 Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here ▶ 🔽 and complete lines 27 Balances through 29, and lines 33 and 34. 27 8,893,457 27 9.836.077 Unrestricted net assets Temporarily restricted net assets 39,120,534 18,334,880 28 28 Fund 29 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here ▶ □ and complete lines 30 through 34. 5 30 30 Capital stock or trust principal, or current funds Assets 31 Paid-in or capital surplus, or land, building or equipment fund 31 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 48,013,991 33 28,170,957 33 Total net assets or fund balances 50,865,186 34 Total liabilities and net assets/fund balances 34,252,430

Pa	Check if Schedule O contains a response to any question in this Part XI			. [
1	Total revenue (must equal Part VIII, column (A), line 12)	1		25 f	525,27
2	Total expenses (must equal Part IX, column (A), line 25)	2			168,31
3	Revenue less expenses Subtract line 2 from line 1	3		,	343,03
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		48,0	013,99
5	Other changes in net assets or fund balances (explain in Schedule O)	5			ı
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6		28,1	170,95
Pai	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			৮	•
				Yes	No
1	Accounting method used to prepare the Form 990 Cash Accrual Other				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
c	If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of 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 its content of the c	n			
	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 in a separate basis, consolidated basis, or both	ssued			
	Separate basis Consolidated basis Both consolidated and separated basis				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the raudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	equired	3b		

DLN: 93493214007191

OMB No 1545-0047

SCHEDULE A

(Form 990 or 990EZ)

Name of the organization Denver Zoological Foundation

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection

Employer identification number

								84-05025				
Part	II Re	ason for Pu	blic Charity Stat	t us (All org	anizations	must comp	lete this pa	art.) See in:	structio	ns		
he or	ganızatıor	ı ıs not a prıvat	te foundation becaus	eitis (Forl	nes 1 throug	jh 11, check	only one bo	x)				
1	Γ Act	nurch, conventi	on of churches, or as	sociation of	churches de	scribed in se	ction 170(b))(1)(A)(i).				
2	Γ Aso	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)										
3	Γ A hα	spital or a coo	perative hospital ser	vice organiz	atıon descrıl	oed in sectio	170(b)(1)(A)(iii).				
4		edical research pital's name, ci	h organization operat ity, and state	ed in conjun	ction with a l	nospital desc	rıbed ın sect	ion 170(b)(1	L)(A)(iii)).Enter	the	
5	Γ Anα	rganızatıon op	erated for the benefit	of a college	or universit	y owned or op	erated by a	governmenta	al unit de	scribe	_ d in	
	sect	ion 170(b)(1)(A)(iv). (Complete Pa	art II)								
6	Г A fe	deral, state, or	local government or	government	al unıt descr	ıbed ın sectio	on 170(b)(1))(A)(v).				
7	des	ribed in	at normally receives (A)(vi) (Complete Pa		l part of its s	upport from a	a governmer	ntal unit or fro	om the g	eneral _l	oublic	
8	Γ Acc	mmunity trust	described in section	170(b)(1)(A	A)(vi) (Com	plete Part II)					
9	rece its s	upport from gr	at normally receives ities related to its ex oss investment incor ganization after June	empt functions	ons—subject ated busines	to certain ex s taxable inc	ceptions, ar ome (less s	nd (2) no mor ection 511 t	e than 3	31/3%	of	5 S
10			ganized and operated	•			•	•				
11	_	-	ganized and operated ganized and operated	•	•	•			carry o	ut the n	urnos	es of
	one	or more public	ly supported organization of supported by Type II	atıons descri ortıng organı	bed in section and c	on 509(a)(1)	or section 5 11e throug	09(a)(2) Se h 11h	e sectio	•)(3).	Check
e	othe	-	ox, I certify that the ion managers and oth	-								
f g	If th che	e organization ck this box	received a written de 2006, has the organi						II suppo	rtıng or	ganız	ation,
		wing persons?								_		
			rectly or indirectly co				ersons desc	cribed in (ii)	<u></u>		Yes	No
			governing body of the		_	tion?			<u> </u>	1g(i)		
		•	er of a person describ			•			_	1g(ii)		
			lled entity of a persor		., .,				[1]	1g(iii)		
h	Prov	ride the following	ng information about	the supporte	d organizati	on(s)						
			(iii)									
su	(i) ame of pported anization	(ii) EIN	Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organizati col (i) list your gove docume	e on in ed in rning	(v) Did you not organizati col (i) of support	on ın your	(vi) Is the organizati col (i) orga in the U	on in anized		(v i A mou supț	unt of
			instructions))	Yes	No	Yes	No	Yes	No			
			1					1				

Total

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

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

S	ection A. Public Support	, o. ga <u>.</u>	and to quanty o		.осоц Боло п., р.			<u> </u>
	endar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	3,527,660	5,711,519	5,739,582	31,699,716	,	3,168,903	49,847,380
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	6,124,171	6,551,742	6,739,624	5,870,382	(5,220,333	31,506,252
3	The value of services or facilities furnished by a governmental unit to the organization without charge	1,507,900	1,729,130	2,086,668	2,090,600			7,414,298
4	Total. Add lines 1 through 3	11,159,731	13,992,391	14,565,874	39,660,698		9,389,236	88,767,930
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	22,200,102	20,302,002	21,000,011	03/000/030		70037200	337, 67,7500
6	(f) Public Support. Subtract line 5							
	from line 4							88,767,930
S	ection B. Total Support							
Cale	endar year (or fiscal year	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2	010	(f) Total
7	beginning in) ► A mounts from line 4	11,159,731	13,992,391	14,565,874	39,660,698		9,389,236	88,767,930
8	Gross income from interest,	11,133,731	13,332,331	11,505,071	33,000,030		,,303,230	00,707,330
•	dividends, payments received on securities loans, rents, royalties and income from similar sources	620,426	601,740	329,750	112,792		62,274	1,726,982
9	Net income from unrelated business activities, whether or not the business is regularly carried on Other income Do not include							
	gain or loss from the sale of capital assets (Explain in Part IV)	46,780	235,052	87,119	78,818		124,758	572,527
11	Total support (Add lines 7 through 10)							91,067,439
12	Gross receipts from related activiti		•			12		72,072,781
13	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	, thırd, fourth, or f	Ifth tax year as a	501(c)(:	3) organız	zation, ►
S	ection C. Computation of Pul							
14	Public Support Percentage for 2010	0 (line 6 column (f) divided by line	11 column (f))		14		97 470 %
15	Public Support Percentage for 2009	9 Schedule A, Pa	rt II, line 14			15		97 690 %
	33 1/3% support test—2010. If the and stop here. The organization qua	alıfıes as a publıc	ly supported orga	nızatıon				► ✓
17a	33 1/3% support test—2009. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization Part IV how the organization meeorganization 10%-facts-and-circumstances test	n qualifies as a pu — 2010. If the orga tion meets the "fa ets the "facts and	ublicly supported anization did not o acts and circums circumstances"	organization check a box on lin tances" test, chec test The organiza	e 13, 16a, or 16l ck this box and st ation qualifies as	o and line c op here. a publicl	≘ 14 Explain y suppor	▶ □
18	15 is 10% or more, and if the organ Explain in Part IV how the organiza supported organization Private Foundation If the organizat	nization meets the tion meets the "fa	e "facts and circu acts and circums	mstances" test, o tances" test The	heck this box an organization qua	d stop h e lifies as	e re. a publicly	▶□
	ınstructions							F

Schedule A (Form 990 or 990-EZ) 2010 Page 3 Part III Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) 2010 (f) Total ın) 🟲 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified **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 c Add lines 7a and 7b Public Support (Subtract line 7c from line 6) Section B. Total Support Calendar year (or fiscal year beginning **(e)** 2010 (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (f) Total ın) 9 Amounts from line 6 Gross income from interest, 10a dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b c Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include 12 gain or loss from the sale of capital assets (Explain in Part Total support (Add lines 9, 10c, 11 and 12) First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage

15	Public Support Percentage for 2010 (line 8 column (f) divided by line 13 column (f))	15	
16	Public support percentage from 2009 Schedule A, Part III, line 15	16	
S	ection D. Computation of Investment Income Percentage		
17	Investment income percentage for 2010 (line 10c column (f) divided by line 13 column (f))	17	
18	Investment income percentage from 2009 Schedule A , Part III, line 17	18	

19a 33 1/3% support tests—2010. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

33 1/3% support tests—2009. 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

Schedule A (Fo	orm 990 or 990-EZ) 2010	Pag
Part IV	Supplemental Information. Supplemental Information. Complete this required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12. additional information. (See instructions).	•

Facts And	Circumstances	Test

Schedule A (Form 990 or 990-EZ) 2010

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

4d. Other program services

(Code) (Expenses \$ 4,212,763 including grants of \$) (Revenue \$ 1,474,535)

Other Programs includes Certificates of Participation, Member Services, Guest Services, Horticulture and Interns Certificates of
Participation is an account funded by \$1 00/per paid admission and is used to reimburse the city for providing \$8 5 million of the balance of
parking garage construction expenses in 2001 Member Services includes the expenses associated with obtaining new members and

Participation is an account funded by \$1 00/per paid admission and is used to reimburse the city for providing \$8 5 million of the balance of parking garage construction expenses in 2001 Member Services includes the expenses associated with obtaining new members and retaining our 57,356 household members. Guest Services is the department that provides all aspects of customer service from guest relations staff to security for the approximately 2,000,000 on-grounds visitors. The Horticulture department maintains all landscapes, grounds, and irrigation for the entire Zoo, including animal exhibits. The internship program is for college students who are working towards a degree in a field related to their area of interest at the Zoo.

DLN: 93493214007191

OMB No 1545-0047

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

If the organization answered "Ye	es," to Form 990, Part IV, Lin	ie 3, or Form 990-EZ, Part V,	, line 46 (Political Campaign Activities),
then			

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

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

◆ Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part ILA. Do not complete Part ILA.

Se If the	ection 501(c)(3) organizations tha	t have filed Form 5768 (election that t have NOT filed Form 5768 (election s," to Form 990, Part IV, Line 5 zations Complete Part III	on under section 501	(h)) Complete Part II-B Do r	ot complete Part II-A
Na	me of the organization	·		Employer ider	itification number
Der	nver Zoological Foundation			84-0502539	
Par	t I-A Complete if the or	ganization is exempt und	er section 501(organization.
1	Provide a description of the or	ganization's direct and indirect po	olitical campaign act	civities in Part IV	
2	Political expenditures			.	\$
3	Volunteer hours				
Par	t I-B Complete if the or	ganization is exempt und	er section 501(c)(3).	
1	<u> </u>	e tax incurred by the organization			\$
2	Enter the amount of any excis-	e tax incurred by organization ma	nagers under sectio	n 4955 🕨	\$
3	If the organization incurred a s	section 4955 tax, did it file Form	4720 for this year?		☐ Yes ☐ No
4a	Was a correction made?				┌ Yes ┌ No
b	If "Yes," describe in Part IV				
Par		ganization is exempt und	er section 501(c) except section 50:	1(c)(3).
1	Enter the amount directly expe	ended by the filing organization fo	r section 527 exem	pt function activities 🕨	\$
2	Enter the amount of the filing of exempt funtion activities	organization's funds contributed to	o other organization:	s for section 527	\$
3	Total exempt function expendi	tures Add lines 1 and 2 Enter he	ere and on Form 112	.0-POL, line 17b ►	¢
4	Did the filing organization file I	Form 1120-POL for this year?			√ Yes No
5	Enter the names, addresses a organization made payments amount of political contributio separate segregated fund or a	funds Also enter the inization, such as a			
	(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

P	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3)	and filed Form 5768 ((election
Α.	Check If the filing organization belongs to a			
<u>B</u>	Check If the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means a		(a) Filing Organization's Totals	(b) A ffiliated Group Totals
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)		
b	Total lobbying expenditures to influence a legisl	ative body (direct lobbying)	2,017	
c	Total lobbying expenditures (add lines 1a and 1	b)	2,017	
d	Other exempt purpose expenditures		42,979,122	
е	Total exempt purpose expenditures (add lines 1	c and 1d)	42,981,139	
f	Lobbying nontaxable amount Enter the amount columns	from the following table in both	1,000,000	
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1 f from line 1 c If zero or less ente	er - 0 -	0	

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period						
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total	
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	1,000,000	4,000,000	
ь 	Lobbying ceiling amount (150% of line 2a, column(e))					6,000,000	
_c	Total lobbying expenditures	10,908		10,660	2,017	23,585	
_d	Grassroots non-taxable amount	250,000	250,000	250,000	250,000	1,000,000	
е 	Grassroots ceiling amount (150% of line 2d, column (e))					1,500,000	
f	Grassroots lobbying expenditures						

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

		1.	a)		(b)	
		Yes	No		\ moun	nt
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?			_		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			-		
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
	** THE A. Computate if the every instinction is every mention down as attem FA4/a//4/ as attem t					n
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	501(c)(5), (or se		
	501(c)(6).	501(c)(5), « 		Yes	No
1	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members?	501(c)(5), (1		
1 2	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2		
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year?			1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?	501(c)(5), (1 2 3	Yes	No
1 2 3	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I	501(c)(5), (1 2 3	Yes	No
1 2 3 Par	501(c)(6). Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **III-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year	501(c II-A,)(5), (1 2 3	Yes	No
1 2 3 Par 1 2	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year	501(c II-A, 1 2a 2b)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and	501(c II-A, 1 2a 2b 2c)(5), (1 2 3	Yes	No
1 2 3 Par 1 2 a b c	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less? Did the organization agree to carryover lobbying and political expenditures from the prior year? **TIII-B** Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes". Dues, assessments and similar amounts from members Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). Current year Carryover from last year Total Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess	2a 2b 2c 3)(5), (1 2 3	Yes	No

Complete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and Part II-B, line 1 Also, complete this part for any additional information

Ident if ier Return Reference | Explanation efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493214007191

OMB No 1545-0047

Department of the Treasury

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Open to Public

nal Revenue	Service Attach to F	orm 990. ► See separate instructions.		Inspection
	the organization		Employer ide	entification number
enver Zoo	ological Foundation		84-050253	9
art I	Organizations Maintaining Donor A	dvised Funds or Other Similar Fu		
	organization answered "Yes" to Form 99	1		
		(a) Donor advised funds	(b) Fund	s and other accounts
	number at end of year			
	egate contributions to (during year)			
	egate grants from (during year)			
Aggre	egate value at end of year			
	he organization inform all donors and donor adv are the organization's property, subject to the		oradvised	☐ Yes ☐ No
used	he organization inform all grantees, donors, and only for charitable purposes and not for the ber erring impermissible private benefit		•	e TYes TNo
art II	Conservation Easements. Complete	ıf the organization answered "Yes" to	o Form 990,	Part IV, line 7.
Com	ose(s) of conservation easements held by the o Preservation of land for public use (e g , recreat Protection of natural habitat Preservation of open space plete lines 2a-2d if the organization held a qual ment on the last day of the tax year	on or pleasure) Preservation of an Preservation of a c	ertified histori	c structure
			Held	at the End of the Year
Tota	I number of conservation easements		2a	
Tota	l acreage restricted by conservation easements	;	2b	
Num	ber of conservation easements on a certified his	storic structure included in (a)	2c	
Num	ber of conservation easements included in (c) a	cquired after 8/17/06	2d	
the to Num Does	ber of conservation easements modified, transfe axable year	ation easement is located F		ns, and
	rement of the conservation easements it holds and volunteer hours devoted to monitoring, ins		ents during the	Yes No eyear ⊳ -
A mo	unt of expenses incurred in monitoring, inspecti	ng, and enforcing conservation easements	during the yea	ar ► \$
	s each conservation easement reported on line 2 (h)(4)(B)(i) and 170(h)(4)(B)(ii)?	2(d) above satisfy the requirements of sec	tion	┌ Yes ┌ No
balar	art XIV, describe how the organization reports c nce sheet, and include, if applicable, the text of irganization's accounting for conservation easer	the footnote to the organization's financial	•	•
rt III	Organizations Maintaining Collection Complete if the organization answered		or Other Sir	milar Assets.
art, h	e organization elected, as permitted under SFAS historical treasures, or other similar assets held ide, in Part XIV, the text of the footnote to its fir	for public exhibition, education or researc	h ın furtheranc	
hısto	e organization elected, as permitted under SFAS rical treasures, or other similar assets held for ide the following amounts relating to these item	public exhibition, education, or research in		
(i) _R	evenues included in Form 990, Part VIII, line 1		▶ 9	\$
(ii) ∆	ssets included in Form 990, Part X			·
Ifthe	e organization received or held works of art, hist wing amounts required to be reported under SFA			
	nues included in Form 990, Part VIII, line 1	-	b.	s
ive ve	nues included in Form 330, Falt VIII, line 1		F - 3	,

b Assets included in Form 990, Part X

Part	•••• Organizations Maintaining Co	llections of Art	t, His	tori	<u>cal Tr</u>	easu	res, or O	the	<u>r Similar</u>	Asse	ts (cc	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check an	y of th	ne foll	owing t	that are	e a significa	ant us	se of its co	llection		
а	Public exhibition		d	Γ	Loan	orexch	nange progr	ams				
b	Scholarly research		e	Γ	Other							
С	Preservation for future generations											
4	Provide a description of the organization's co Part XIV	ollections and expla	ain hov	w the	/ furthe	rthe o	rganızatıon	ı's ex	empt purpo	se in		
5	During the year, did the organization solicit of assets to be sold to raise funds rather than t								ıılar	Г.	Yes	Г No
Par	Escrow and Custodial Arrang Part IV, line 9, or reported an an						n answere	d "Y	es" to For	m 990	,	
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	ian or other interm	edıary	for c	ontrıbu	itions o	or other ass	ets r	not	Γ.	Yes	┌ No
b	If "Yes," explain the arrangement in Part XIV	/ and complete the	follow	/ing ta	able		Г	Ι		A mou	nt	
с	Beginning balance						-	1c				
d	Additions during the year						F	1d				
e	Distributions during the year							1e				
f	Ending balance							1f				
2a	Did the organization include an amount on Fo	orm 990. Part X. lin	e 21?				L				Yes	┌ No
	If "Yes," explain the arrangement in Part XIV									,		,
	rt V Endowment Funds. Complete		n ans	were	ed "Ye	s" to F	Form 990.	Par	t IV, line	10.		
	Enaswirene i anasi complete	(a)Current Year		Prior `			o Years Back		Three Years B		Four Ye	ears Back
1a	Beginning of year balance											
b	Contributions											
c	Investment earnings or losses											
d	Grants or scholarships											
e	Other expenditures for facilities and programs											
f	Administrative expenses											
g	End of year balance											
2	Provide the estimated percentage of the yea	r end balance held	as									
а	Board designated or quasi-endowment 🕨											
Ь	Permanent endowment											
С	Term endowment ▶											
3a	Are there endowment funds not in the posses	ssion of the organiz	ation	thata	re held	d and a	dministere	d for	the			
	organization by								г		Yes	No
	(i) unrelated organizations							•		3a(i)		
L	(ii) related organizations								[3a(ii)		<u> </u>
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the second secon	•						•	[3b		<u> </u>
	t VI Investments—Land, Buildings					90 Da	art X line	10				
r a i	t vi investments Land, bandings	s, and Equipme			Cost or		(b)Cost or		(c) Accum	ulatod		
	Description of investment				is (inves		basis (oth		deprecia		(d) Bo	ook value
-	Land											
1a							1					
	Buildings		•									
Ь	Buildings		•									
b c	· ·		•				1,58	0,764	1,2	247,246		333,518
b c d e	Leasehold improvements		· ·				·	0,764 3,107		247,246 111,899		333,518 21,208

Investments—Other Securities. See	roi ili 990, Pait X, ilile 12		
(a) Description of security or category	(b)Book value	(c) Method of valuation	
(including name of security)	(2)2001111111	Cost or end-of-year market v	alue
(1)Financial derivatives			
(2)Closely-held equity interests			
Other			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
		12	
Part VIII Investments—Program Related. See	: гогиг ээо, rait x, ime . T		
(a) Description of investment type	(b) Book value	(c) Method of valuation	ماليم
		Cost or end-of-year market v	aiue
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)			
Part IX Other Assets. See Form 990, Part X, In	e 15.		
(a) Descrip	tion	(b) Book v	alue
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1	5.)		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
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Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability	, line 25.		
Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability Federal Income Taxes	, line 25.		
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.		

Part XI R	econciliation of Change in Net Assets from Form 990 to Financial Statemei	nts	
1 Total rev	enue (Form 990, Part VIII, column (A), line 12)	1	25,625,278
2 Total ex	penses (Form 990, Part IX, column (A), line 25)	2	45,468,312
3 Excess	or (deficit) for the year Subtract line 2 from line 1	3	-19,843,034
4 Net unre	alized gains (losses) on investments	4	
5 Donated	services and use of facilities	5	
6 Investm	ent expenses	6	
7 Prior per	iod adjustments	7	
_	escribe in Part XIV)	8	
-	ustments (net) Add lines 4 - 8	9	0
•	or (deficit) for the year per financial statements Combine lines 3 and 9	10	-19,843,034
	econciliation of Revenue per Audited Financial Statements With Revenue	er R	eturn
	venue, gains, and other support per audited financial statements	1	25,816,204
2 A mount	s included on line 1 but not on Form 990, Part VIII, line 12		
a Net unr	ealized gains on investments 2a		
b Donate	d services and use of facilities 2b 190,926		
c Recove	ries of prior year grants		
d Other (Describe in Part XIV)		
e Add line	es 2a through 2d	2e	190,926
3 Subtrac	t line 2e from line 1	3	25,625,278
A mount	s included on Form 990, Part VIII, line 12, but not on line 1		
a Investr	nent expenses not included on Form 990, Part VIII, line 7b . 4a		
b Other (Describe in Part XIV)		
c Add line	es 4a and 4b	4c	0
	evenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	25,625,278
	econciliation of Expenses per Audited Financial Statements With Expenses	per	
L Total ex stateme	penses and losses per audited financial	1	45,659,238
	s included on line 1 but not on Form 990, Part IX, line 25	<u> </u>	
	I services and use of facilities		
	ar adjustments		
·	sses		
d Other (Describe in Part XIV) 2d	1	
e Add line	s 2a through 2d	2e	190,926
3 Subtrac	t line 2e from line 1	3	45,468,312
1 A mount	s included on Form 990, Part IX, line 25, but not on line 1:		
a Investr	nent expenses not included on Form 990, Part VIII, line 7b 4a		
b Other (Describe in Part XIV)	1	
D Ciliei (1	1
	s 4a and 4b	4c	0

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

Identifier Return Reference Explanation

efile GRAPHIC print - DO NOT PROCESS

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OMB No 1545-0047

Open to Public **Inspection**

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

to Part I

c Totals (add lines 3a and 3b)

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

Statement of Activities Outside the United States

▶ Attach to Form 990. ▶ See separate instructions.

Name of the organization

Employer identification number

	or Zoologiaal Farradation					
en۱	er Zoological Foundation				84-0502539	
Pa	rt I General Informatio	n on Activiti	es Outside th	ne United States. C		zation answered
	"Yes" to Form 990, Pa	rt IV, lıne 14b				
L	For grantmakers. Does the	_			-	
	assistance, the grantees' elig	•	_	·		
	the grants or assistance?					✓ Yes
2	For grant makers. Describe in Pa United States	rt V the organiz	atıon's procedur	es for monitoring the use	e of grant funds outside t	he
3	Activites per Region (Use Part	V ıf addıtıonal s	pace is needed)			
	(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region or independent contractors	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region/investments in region
	East Asia and the Pacific	0	0	Grants to recipients located in region	N/A	148,155
	Sub-Saharan Africa	0	1	Grants to recipients located in region	N/A	74,303
	South America	0	0	Grants to recipients located in region	N/A	7,200
	-					
	Sub-total		1			229,658
t	Total from continuation sheets	1	1	1	ĺ	[C

229,658

(a) Name organizatio	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other
	East Asia	Nomadic trunk program, Earthwatch, Mammal conservation, Ikh Nart project		Check/wire		D N/A	FMV
	East Asia	Consulting for Nomadic Nature Trunk, Program evaluation in Mongolia	12,730	C heck/wire		DN/A	FMV
	Sub-Saharan Africa	Support for Grevy's zebra research in Kenya	12,790	Check/wire	(D N/A	FMV
	Sub-Saharan Africa	Living with Lions Predator Prey Project in Kenya	10,400	Check/wire	(N/A	FMV
	Sub-Saharan Africa	Reticulated giraffe research in Kenya	5,000	Check/wire	(N/A	FMV

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990,

5

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) A mount of cash grant	(e) Manner of cash disbursement	(f) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
Wild & domestic ungulates research in Laikipia, Kenya	Sub-Saharan Africa	1	6,363	C heck/wire	0	N/A	N/A
Lion & Cheetah conservation in Central Kalahari and post doc in Botswana	Sub-Saharan Africa	1	17,000	C heck/wire	0	N/A	N/A
Support for conservation projects in Mongolia	East Asia and the Pacific	1	3,000	Check/wire	0	N/A	N/A
African Wild Dogs project in Kenya	Sub-Saharan Africa	1	5,700	Check/wire		N/A	N/A
Funding for Kenyan undergraduate scholarship	Sub-Saharan Africa	1	6,500	Check/wire	0	N/A	N/A
Support to the Endangered Primate Rescue Center in Vietnam	East Asia and the Pacific	1		C heck/wire	0	N/A	N/A
Support for Lake Fiticaca frog project	South America	1	·	Check/wire		N/A	N/A
Humbolt penguin conservation in Peru	South America	1	1,500	Check/wire	0	N/A	N/A
Primate conservation in Ta Kou Nature Reserve, Vietnam	Pacıfic	1		C heck/wire		N/A	N/A
Print 2011 Tonkin snub- nosed monkey calendar		1	1,100	Check/wire		N/A	N/A
Monitoring large mammals & human activities in Korup National Park, Cameroon	East Asia and the Pacific	1	8,870	C heck/wire	0	N/A	N/A

Part IV Foreign Forms

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926 (see instructions for Form 926)	Γ	Yes	₹	Νo
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520 and/or Form 3520-A. (see instructions for Forms 3520 and 3520-A)	Γ	Yes	~	Νo
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	굣	Νo
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see instructions for Form 8621)	Г	Yes	্	Νo
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with respect to Certain Foreign Partnerships. (see instructions for Form 8865)	Г	Yes	্	Νo
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see instructions for Form 5713).	Г	Yes	⊽	Νo

Schedule F (Form 990) 2010

Part V Supplemental Information

Complete this part to provide the information (see instructions) required in Part I, line 2, and any additional information.

IIIIOI IIIauoii.		
Identifier	ReturnReference	Explanation
Procedure for Monitoring Grants		Schedule F, Part I, Line 2 All conservation and research
Outside the U S		activities conducted at the Zoo, or supported by Denver Zoo
		resources, require submission of written progress reports
		Reports for projects that received financial support from the Zoo
		must include a detailed accounting of expenditures. The reports
		must be submitted prior to December 31 of each year or upon
		project completion
-		
		
<u> </u>		Schedule F (Form 990) 2010

In-person solicitations

DLN: 93493214007191

OMB No 1545-0047

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" 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.

Inspection

Name of the organization **Employer identification number** Denver Zoological Foundation 84-0502539 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants Solicitation of government grants Internet and e-mail solicitations Phone solicitations Special fundraising events

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

Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid t (or retained by) organization
	Yes	No			
	+				
		fundrai: cust cont contrib	fundraiser have custody or control of contributions?	fundraiser have from activity custody or control of contributions?	fundraiser have from activity (or retained by) custody or fundraiser listed in control of contributions?

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

Pa	Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported more than \$15,000 on Form 990-EZ, line 6a. List events with gross receipts greater than \$5,000.								
			(a) Event #1	(b) Event #2	(c) O ther Events	(d) Total Events			
			Do at the Zoo	Zoomily and Brew		(Add col (a) through col (c))			
dı			(event type)	(event type)	(total number)				
Ě	1	Gross receipts	799,245	402,791		1,202,036			
Revenue	2	Less Charitable contributions	367,884	279,146		647,030			
	3	Gross income (line 1 minus line 2)	431,361	123,645		555,006			
	4	Cash prizes							
ဟ	5	Non-cash prizes							
Suse	6	Rent/facility costs							
Expenses	7	Food and beverages							
Dreat -	8	Entertainment							
Δ	9	Other direct expenses .	431,361	123,645		555,006			
	10	Direct expense summary Add line	es 4 through 9 ın column	(d)		555,006			
	11	Net income summary Combine lii	nes 3 and 10 ın column (d)		0			
Par	t III	Gaming. Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted more than			
			(a) Bingo	(b) Pull tabs/Instant	(c) O ther gaming	(d) Total gaming			
Revenue				bingo/progressive bingo		(Add col (a) through col (c))			
₽									
	1	Gross revenue							
90 00	2	Cash prizes							
Expenses	3	Non-cash prizes							
ច ក្	4	Rent/facility costs							
Direct	5	Other direct expenses							
	6	Volunteer labor	┌ Yes %	┌ Yes %	┌ Yes %				
			По	Г No	Гио				
	7	Direct expense summary Add lines	s 2 through 5 in column (d)	•				
	8 Net gaming income summary Combine lines 1 and 7 in column (d)								
9	Enter the state(s) in which the organization operates gaming activities Is the organization licensed to operate gaming activities in each of these states?								
a									
b		No," Explain							
						ı			
10a	Wer	re any of the organization's gaming l	ıcenses revoked, susper	ided or terminated during	the tax year?	· · Fyes FNo			
b		Yes," Explain							
						I			

11	Does the organization operate ga	aming activities with nonmembers?		[— Yes	Γ _{No}
12	Is the organization a grantor, be	neficiary or trustee of a trust or a men	nber of a partnership or other entity			
	formed to administer charitable (gamıng?		[— Yes	Γ _{No}
13	Indicate the percentage of gamin	ng activity operated in				
а	The organization's facility		13a			
b	An outside facility		13b			
14	Provide the name and address or records	f the person who prepares the organiz	ation's gaming/special events books and			
	Name 🟲					
	Address 🟲					
15a		ntract with a third party from whom the		_	_	_
				[Yes	No
ь		ning revenue received by the organizated by the third party 🟲 \$	and the			
c	If "Yes," enter name and address	s				
	Name 🟲					
	Address 🏲					
16	Gaming manager information					
	Name 🟲					
	Gaming manager compensation l	\$				
	Description of services provided	•				
	Director/officer	Employee	Independent contractor			
17	Mandatory distributions					
а	-	er state law to make charitable distrib	,		_	_
L			to other everythere or annut	ļ	Yes	Γ _{No}
D		s required under state law distributed to the state of th	to other exempt organizations or spent			
Par			responses to question on Schedule	G (see)	
	Identifier	ReturnReference	Explanation			

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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

2010

DLN: 93493214007191

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Denver Zoological Foundation

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

Attach to Form 990

Employer identification number

84-0502539

Part I General Inform Does the organization main the selection criteria used Describe in Part IV the organization	ntaın records to subs to award the grants c	tantiate the amount of the					✓ Yes 🗀
Form 990, Part I\	/, line 21 for any r	Governments and ecipient that received ded	d more than \$5,000.	Check this box if n	o one recipient rece	ived more than \$5,0	
1 (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 or assistance
(1) Idea Wild420 Riddle Rd Fort Collins, CO 80521	83-0299770	501(c)(3)	10,000	0	N/A	N/A	2010 funding to support Idea Wild's conservation projects
(2) Dian Fossey Gorilla Fund 800 Cherokee Ave SE Atlanta, GA 30315	52-1118866	501(c)(3)	10,000	0	N/A	N/A	2010 contribution for gorilla conservation
(3) International Elephant FoundationPO Box 366 Axle, TX 760980366	75-2815706	501(c)(3)	10,000	0	N/A	N/A	General support
(4) Association of Zoos & Aquariums8403 Colesville Rd 710 Silver Spring, MD 20910	55-0526930	501(c)(3)	10,000	0	N/A	N/A	Great Ape Tag conservation support
(5) Global Conservation Network12101 Johnny Cake Rd Apple Valley,MN 55124	41-1719362	501(c)(3)	6,000	0	N/A	N/A	Contribution for A mphibian A rk
(6) UCLA Foundation Dept of Ecology & Evolutionary Biology621 Charles E Young Dr South Los Angeles,CA 90095	95-2250801	501(c)(3)	7,000	0	N/A	N/A	Support for lab for Grevy's Zebra & Effects of Prey on Lion Movements
2 Enter total number of secti	on 501(c)(3) and gov	ernment organizations .					> 6

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

(a)Type of grant or assistance	(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
(1) Research on white-tailed prarie dogs in Colorado	1	5,000	0	N/A	N/A

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	,	Schedule I, Part I, Line 2 All conservation and research activities conducted at the Zoo, or supported by Denver Zoo resources, require submission of written progress reports. Reports for projects that received financial support from the Zoo must include a detailed accounting of expenditures. The reports must be submitted prior to December 31 of each year or upon project completion.

DLN: 93493214007191

Employer identification number

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

Name of the organization

Internal Revenue Service

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

Compensation Information

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

► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Den	over Zoological Foundation			
В-	84-0502539			
Рα	rt I Questions Regarding Compensation		L	T
			Yes	No
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	Yes	
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 Independent compensation consultant 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 from the organization or a related organization?	4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b		Νo
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
5	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. 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
b	Any related organization?	5b		Νo
	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
b	Any related organization?	6b		Νo
	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	Yes	
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	8		No
0	If "Vac" to line 9, did the organization also follow the rebuttable procumption procedure described in Pegulations			

section 53 4958-6(c)?

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

For each individual whose compensation must be reported 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 W-2 and/or 1099-MISC compensation			(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ	
(1) Craig Piper	(ı) (ıı)	189,857 0	39,000 0	0	1		.	1	
(2) Kyle Burks	(ı) (ıı)	137,687 0	20,000 0	0	,	4,353 0	.	20,000	
(3) Donna Driscoll	(I)	111,761 0	10,000 0	0	1		.	10,000	
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
(13)									
(14)									
(15)									
(16)									

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
	Part I, Line 7	Craig Piper, Kyle Burks, Donna Driscoll and Jean Ellis received bonuses in 2010

Schedule J (Form 990) 2010

DLN: 93493214007191

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

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

NonCash Contributions

Name of the organization Denver Zoological Foundation

Employer identification number

31170	- Zoological Foundation				84-0502539			
Pai	tI Types of Property							
		(a) Check if applicable	(b) Number of Contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d) Method of determining of amounts		ontribut	:ion
1 .	Art—Works of art			<u>*</u> 9				
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household							
oods								
	Cars and other vehicles .							
	Boats and planes							
	Intellectual property							
	Securities—Publicly traded							
	Securities—Closely held stock							
	Securities—Partnership, LLC, or trust interests .							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Realestate—Residential .							
16	Real estate—Commercial							
L7	Realestate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxıdermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts .							
	Anımal							
25	Other ► (supplies)	X	43	4,415	FMV at date of cont	rıbutıo	n	
	Education	×	2	220	FMV at date of cont	ribiitio	n	
20	Other ► (<u>supplies</u>) Horiculture			220	I I I V at date of cont	iibutio	11	
27	Other (supplies)	x	5	16,339	FMV at date of cont	rıbutıo	n	
	Maintenance			,				
28	Other►(<u>supplies</u>)	Х	44	16,314	FMV at date of cont	rıbutıo	n	
29	Number of Forms 8283 received be for which the organization complete				29			
							Yes	No
30a	During the year, did the organization	n receiv	e by contribution any prope	rty reported in Part I, lines	1-28 that it		I	
	must hold for at least three years f	rom the o	date of the initial contribution	on, and which is not require	d to be used			
	for exempt purposes for the entire	holdıng p	eriod?			30a		No
b	If "Yes," describe the arrangement	: ın Part I	I					
31	Does the organization have a gift a	·		•		31	Yes	
32a	Does the organization hire or use t contributions?	hırd partı • • •	es or related organizations	to solicit, process, or sell	non-cash	32a	Yes	
ь	If "Yes," describe in Part II							
	If the organization did not report re	venuesı	n column (c) for a type of p	roperty for which column (a) is checked,			
	describe in Part II			•				

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.

Ident if ier	Return Reference	Explanation
Third Party Use	,	Denver Zoological Foundation uses Cars Helping Charities to solicit and process donated vehicles. There is a link through DZF's website to Cars Helping Charities for people who wish to donate vehicles to DZF. Cars Helping Charities then collects the car, sells it and remits a portion of the sale to DZF.

Schedule M (Form 990) 2010

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As Filed Data -

DLN: 93493214007191

OMB No 1545-0047

2010

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

▶ Attach to Form 990 or 990-EZ.

Supplemental Information to Form 990 or 990-EZ

Open to Public Inspection

Name of the organization Denver Zoological Foundation

SCHEDULE 0

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Employer identification number

84-0502539

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		Kelly Matthews and Robert H Bach both serve as Denver Zoo trustees Kelly Matthews and Robert H Bach were both partners with Holme, Roberts, and Owen LLP for a portion of 2010

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section B, line 11		The Form 990 is reviewed in detail by the members of the Zoo's Finance Committee After the committee's approval, the Form 990 is then presented to the board for its approval All board members are provided the opportunity to review the Form 990 before it is submitted to the IRS

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, line 12c	Conflict of interest questionnaires are completed annually by all officers, directors or trustees, and key employees. Trustees who have a beneficial interest in a decision are excused from discussion and voting rights. Also, if the item of purchase is a tangible asset with potential conflicts of interest, staff is required to get multiple bids for the item.

ldentifier	Return Reference	Explanation
	Form 990, Part VI, Section B, Ine 15	There are several factors, monetary and nonmonetary, that are considered in determining executive compensation. These business-related factors include Budget Does the budget allow for any flexibility in the offer and what is the relative financial health of our organization? Internal equity. What are other executives in the same type of job or at the same job level being paid? Market price/external demands is this job difficult to fill or is it hard to find qualified candidates in this location or industry? Candidates' level of experience. How many years of relevant experience does this person bring to the table? Candidates' education level. What degrees does the person have that will benefit our organization? Candidates' current compensation package. What is this person's current base pay and benefits package? Salary surveys. What are other executives in the same type of job being paid at other non-profit organizations of the same size? Once the salary is determined, the executive committee (which consists of independent board members) reviews this information. Written employment agreements are also used

Identifier	Return Reference	Explanation
	Form 990, Part VI, Section C, line 18	The organization's Form 1023 and Form 990 are available to the public upon request

Identif	er Return Reference	Explanation
	Form 990, Part VI, Section C, line 19	The organization's governing documents, conflict of interest policy, and financial statements are made available to the public upon request. The Zoo's articles of incorporation and annual reports are also on file with the Colorado Secretary of State.

ldentifier	Return Reference	Explanation
	Form 990, Part XII, Line 2c	The Denver Zoological Foundation's Board of Trustees assume the responsibility for oversight of the audit of its financial statements and selection of an independent accountant. This process has not changed from prior years Form 990, Part I, Line 19. The Denver Zoo's net loss for 2010 of (\$19,843,034) resulted primarily from expenditures incurred during the year for zoo improvements. Under the Zoo's current Cooperative Agreement with the City and County of Denver, the Denver Zoo does not retain ownership to any improvements that the Denver Zoo constructs As such, improvements completed by the Denver Zoo in 2010 totaling \$21,365,253 were expensed. The Denver Zoo received bond proceeds from the City and County of Denver and raised matching contributions related to the improvements during 2010 and prior years.

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DLN: 93493214007191

Related Organizations and Unrelated Partnerships

► Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

2010

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

SCHEDULE R

Name of the organization Denver Zoological Foundation				Employer iden	ntification number		
				84-0502539			
Part I Identification of Disregarded Entities (Co	mplete if the organizat	tion answered "Yes	s" on Form 990, Pa	rt IV, line 33.)			
(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (sta or foreign country	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
					+		
Part II Identification of Related Tax-Exempt Org or more related tax-exempt organizations duri	anizations (Completently of the tax year.)	e if the organizatio	n answered "Yes"	on Form 990, Part	t IV, line 34 becau	se it had	l one
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13 controlled organization	
(A) Colored - Zeological Trees						Yes	No
(1) Colorado Zoological Trust 2300 Steele Street Denver, CO 80205 84-1440122	Support of the Denver Zoological Foundation	СО	501(c)(3)	Line 11a	N/A		No
	+	+		+	+	-	+

(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(g) f end-of-year assets	(h Disprop allocat	ortionate	(i) e Code V—UBI amount in box 20 o Schedule K-1 (Form 1065)		(j) General or managing partner?		(k) Percentage ownership
								Yes	No			Yes	No	
				ble as a Corpora zations treated as a						nswered "Y	'es" on	Form	990,	Part IV,
Name, address, an	(a) d EIN of related organız	zation	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct cor enti	ntrolling	(e) Type of e (C corp, S or trust	corp,	Share o	(f) f total income	Shai end-o	j) e of f-year ets		(h) Percentage ownership
				1	1		1		1					

(4)

(5)

(6)

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P	Transactions With Related Organizations (Complete if the organization answered "Y	es" on Form 990, Pa	rt IV, line 34, 35, 3	5A, or 36.)			
	Note. Complete line 1 if any entity is listed in Parts II, III or IV					Yes	No
1 [During the tax year, did the orgranization engage in any of the following transactions with one or more related org	anızatıons lısted ın Part	s II-IV?				
a	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity				1a		No
Ŀ	Gift, grant, or capital contribution to other organization(s)				1b		No
c	: Gift, grant, or capital contribution from other organization(s)				1c	Yes	
c	Loans or loan guarantees to or for other organization(s)				1d		No
e	Loans or loan guarantees by other organization(s)				1e		No
f	Sale of assets to other organization(s)				1f		No
ç	Purchase of assets from other organization(s)				1g		No
ŀ	n Exchange of assets				1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)				1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)				1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)				1k		No
ı	Performance of services or membership or fundraising solicitations by other organization(s)				11		No
r	n Sharing of facilities, equipment, mailing lists, or other assets				1m	Yes	
r	n Sharing of paid employees				1n	Yes	
c	Reimbursement paid to other organization for expenses				10		No
F	Reimbursement paid by other organization for expenses				1p		No
c	Other transfer of cash or property to other organization(s)				1q		No
r	Other transfer of cash or property from other organization(s)				1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line,	including covered relat	ionships and transact	ion thresholds			
	(a) Name of other organization	(b) Transaction type(a-r)	(c) Amount involved	Method of dete	d) emin olved		ount
1)	Colorado Zoological Trust	С	280,000	FMV			
2)							
3)							
			1				

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Are all partners section 501(c)(3) organizations?		(e) Share of end-of-year assets	(f) Disproprtionate allocations?		(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	mana part	(h) General or managing partner?	
			Yes	No		Yes	No		Yes	N	
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Part VII Supplemental Information

Complete this part to provide additional information for responses to questions on Schedule R (see instructions)

Identifier I Return Reference I	er Return Reference Explanation
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Schedule R (Form 990) 2010

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) A verage hours	Posi t	(C tion (hat a	che		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		
Elizabeth B Searle Trustee	4 00	х						0	0	0		
Jo Ann Semple Trustee	4 00	Х						0	0	0		
Sue Stevinson Trustee	4 00	Х						0	0	0		
Sharon K Swiatek Trustee	4 00	Х						0	0	0		
Sid Wilson Trustee	4 00	Х						0	0	0		
Laurie Lind Galbreath Trustee	4 00	Х						0	0	0		
Constance F Graham Trustee	4 00	Х						0	0	0		
Lynn Luce Kitt Trustee	4 00	Х						0	0	0		
Kelly Matthews Trustee	4 00	Х						0	0	0		
Nına Henderson Moore Trustee	4 00	Х						0	0	0		
Kathy Ogsbury Trustee	4 00	Х						0	0	0		
Stephen L Stieneker Trustee	4 00	Х						0	0	0		
Joanna Scott Picher Trustee	4 00	Х						0	0	0		
Craig Piper Pres/CEO	40 00			Х				228,857	0	86,895		
Kyle Burks VP/COO	40 00			Х				157,687	0	34,353		
Donna Driscoll Treasurer/CFO	40 00			Х				121,761	0	28,776		
Pat Moredock Assistant Secretary	40 00			х				56,687	0	10,008		

Software ID: Software Version:

EIN: 84-0502539

Name: Denver Zoological Foundation

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 tion (hat a	che)			(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation		
	we e k	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		
Patrick Green Chairman	4 00	X		×				0	0	0		
Katıe Philpott Schoelzel	4 00	X		X				0	0	0		
Executive Vice Chairman Meyer M Saltzman									<u> </u>			
Chairman of Finance	4 00	Х		Х				0	0	0		
Charles R Frederickson Trustee	4 00	Х						0	0	0		
Sherrı Koelbel Trustee	4 00	Х						0	0	0		
Beı-Lee Gold	4 00	Х		Х				0	0	0		
Secretary Rob Alvarado								_				
Trustee	4 00	Х						0	0	0		
Lou Clinton Trustee	4 00	X						0	0	0		
Robert Kaufmann Trustee	4 00	Х						0	0	0		
Robert Bach Trustee	4 00	Х						0	0	0		
Lyne Andrich Trustee	4 00	Х						0	0	0		
Pat I Cortez Trustee	4 00	Х						0	0	0		
Christopher Gates Trustee	4 00	Х						0	0	0		
Panayes John Dıkeou Trustee	4 00	Х						0	0	0		
Mike Long Trustee	4 00	х						0	0	0		
Nancy McGrath Trustee	4 00	Х						0	0	0		
Julie Mills Trustee	4 00	Х						0	0	0		
Richard L Monfort Trustee	4 00	X						0	0	0		
Mark Murray Trustee	4 00	Х						0	0	0		
Kelly Eisinger Trustee	4 00	X						0	0	0		
Kevin Fitzgerald PhD DVM Trustee	4 00	X						0	0	0		
Dennis J O'Malley Trustee	4 00	Х						0	0	0		
Kevin Patterson Trustee	4 00	Х						0	0	0		
Patricia Barela Rivera Trustee	4 00	Х						0	0	0		
Dr Charles H Scoggin Trustee	4 00	Х						0	0	0		