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DLN: 93493135055052

Department of the Treasury

## 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)

OMB No 1545-0047

Internal	Revenue	Service	► The organization may have to use a copy o	of this return to sa	itisfy stat	e reporting i	requirem	ents	Inspection
A Fo	r the 2	2011 ca	lendar year, or tax year beginning 01-01-2011	and ending 12-3	31-2011		D Employ	vor ic	dentification number
		pplicable	C Name of organization DETROIT ZOOLOGICAL SOCIETY					-	
_	dress ch	_	Doing Business As			⊢⊦	38-60 E Telepho		
	me char	_	-				(248)	541	-5717
_	tial retur		Number and street (or P O box if mail is not delivered 8450 W 10 Mile Road	to street address) R	Room/suite	ŀ			s \$ 32,565,506
_	mınated					<b> </b>			,,,
	ended r		City or town, state or country, and ZIP + 4 Royal Oak, MI 48067						
App	olication	pending	, ,						
			F Name and address of principal officer Ron Kagan CEO			H(a) Is this		retu	
			8450 W 10 Mile Road			affılıat	es?		⊤Yes 🔽 No
			Royal Oak, MI 48067		1	H(b) Are all	affiliates	inclu	ded?
——— т Та	v-evem	pt status	▼ 501(c)(3)	047(2)(1) or	7	_			t (see instructions)
		<u> </u>		947(d)(1) 01   327	<u> </u>	<b>H(c)</b> Group	exempti	ion n	umber <b>F</b>
			) //www detroitzoo org/		<u> </u>				
			✓ Corporation  Trust  Association  Other ►			<b>L</b> Year of for	nation 194	42	<b>M</b> State of legal domicile MI
Pa	rt I	Sum	mary						
			escribe the organization's mission or most sign ing and Saving Wildlife	ıfıcant actıvıtıes					
3		- elebiati	ing and Saving Wildine						
Ē	-								
Activities & Governance	, -	hack th	ıs box ▶┌─ ıf the organizatıon discontinued its	onerations or disn	osed of m	ore than 25	0/2 of its	net	accate
ŝ			of voting members of the governing body (Part )			iore than 25		3	57
2 <b>6</b>			of independent voting members of the governing					4	56
Ĕ			mber of individuals employed in calendar year 2		•		-	5	411
్			mber of volunteers (estimate if necessary) .		,			6	1,133
ă			related business revenue from Part VIII, colum					7a	0
	ь	Net unrel	ated business taxable income from Form 990-	T, line 34				7b	0
_						Prior	Year		Current Year
	8	Contrib	outions and grants (Part VIII, line 1h)		[		15,462,9	29	16,492,606
Revenue	9	Progra	m service revenue (Part VIII, line 2g)		[	8,701,6		552	12,307,019
e Ac	10	Invest	ment income (Part VIII, column (A), lines 3, 4	, and 7d )	[	135,		32	288,244
立	11		revenue (Part VIII, column (A ), lines 5, 6d, 8c		· -	2,157,221		221	2,949,320
	12		evenue—add lines 8 through 11 (must equal Pa	, ,		26,457,434		134	32,037,189
	13		and similar amounts paid (Part IX, column (A)				56,5	$\rightarrow$	110,489
	14		s paid to or for members (Part IX, column (A),		-			0	0
	15		es, other compensation, employee benefits (Pai		-				
Expenses		5-10)			-		10,788,6	_	13,964,262
क्	16a	Profes	sional fundraising fees (Part IX, column (A), lin	e 11e)	.			0	0
五	Ь		ndraising expenses (Part IX, column (D), line 25) $\blacktriangleright 1,036$		— ļ				
	17		expenses (Part IX, column (A), lines 11a-11d		-	9,834,995 17,354,5			
	18		expenses Add lines 13–17 (must equal Part I)		·		20,680,2	$\rightarrow$	31,429,305
<u></u>	19	Keveni	ue less expenses Subtract line 18 from line 12	<u> </u>	•	Beginning	5,777,1	$\rightarrow$	607,884
<b>8</b> 6							or Currer ar	"	End of Year
SSe Sefe	20	Totala	ssets (Part X, line 16)		.		35,579,1	74	34,740,353
Net Assets or Fund Balances	21		abilities (Part X, line 26)		. [		11,528,4	136	10,570,282
ž2	22	Net assets or fund balances Subtract line 21 from line 20							24,170,071
Pai	rt II	Sign	ature Block						
know			erjury, I declare that I have examined this return, in i, it is true, correct, and complete. Declaration of p						
		ı.				364	2.05.07		
Sign	,	Signa	ture of officer			Dat	<u>2-05-07</u> e		
Her		John	Krueger Chief Financial Officer						
			or print name and title						
		Preparer'	s <b>L</b>	Date	Chec				payer identification number
Paid		signature <b>P</b>				loyed 🕨 🦳	(see instr	uctior	ns)
Prepa	arer's		ime (or yours	<u> </u>	<u> </u>	•			
Use (	Only	ıf self-en address,	nployed), and ZIP + 4				EIN 🕨		

May the IRS discuss this return with the preparer shown above? (see instructions)  $\,$  .  $\,$  .

Phone no

┌Yes ┌No

Form	990 (2011) Page
Par	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission
The	Detroit Zoological Society's Statement of Purpose is Celebrating and Saving Wildlife
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported
4a	(Code ) (Expenses \$ 5,485,383 including grants of \$ 4,557 ) (Revenue \$ 0 )
	The Detroit Zoological Society continues its mission of celebrating and saving wildlife by demonstrating leadership in animal care, wildlife conservation and animal welfare. The Detroit Zoo had 7,782 individual animals representing 295 species in its care as of December 31, 2011. The Detroit Zoo is an active participant in animal conservation through breeding programs for threatened and endangered species as well as local field programs the Zoo leads and international field programs the Zoo supports. These programs are the work of dedicated Detroit Zoo staff working with partners from state and federal governments, universities, conservation organizations and other zoos. The Detroit Zoological Society's Center for Zoo Animal Welfare is a resource center for captive animal welfare knowledging research and best practices, a convener and forum for exotic animal welfare science, practice and policy discussions, and a center conducting research and training and recognizing advances in exotic animal welfare.
	(Code ) (Expenses \$ 3,953,845 including grants of \$ 105,932 ) (Revenue \$ 345,737 )
4b	(Code ) (Expenses \$ 3,953,845 including grants of \$ 105,932) (Revenue \$ 345,737)  The Detroit Zoological Society continues to provide a broad audience with outstanding and unique educational opportunities that lead to the appreciation and stewardship of nature through its Humane Education Academy and school programs. The Humane Education Academy offers a broad range of programs designed to meet the needs of our diverse audiences. Unique and engaging programs utilize a variety of instructional strategies - including traditional instruction, storytelling, role-playing, theater and virtual technology - to match the various learning styles of the community. Through participation in formal and informal experiences, audiences understand the need to treat other living creatures with respect, responsibility and compassion. The Berman Academy for Humane Education was create to help people help animals. Other education programs at the Detroit Zoo include school programs that complement Michigan Grade Level and High School Content Expectations, Summer Safari Camp, scout programs and family/community programs.
4c	(Code ) (Expenses \$ 2,509,249 including grants of \$ 0 ) (Revenue \$ 11,961,282 )
	The Detroit Zoological Society continues to inspire the community with engaging, meaningful and memorable experiences. In 2011 the Detroit Zoo welcomed more than 1.2 million visitors. In addition to animal experiences, other attractions at the Zoo include the 3-D/4-D. Theater, the Wild Adventure Ride, Giraffe Encounter, Tauber Family Railroad and, new in 2011, Science On a Sphere and the Carousel. Visitors can also participate in Zoo-sponsored events including Earth Day, Sunset at the Zoo, Meet Your Best Friend, Run Wild and Zoo Boo, as well as private events including weddings, birthdays and picnics.
	(C. I
	(Code ) (Expenses \$ 15,278,173 including grants of \$ 0 ) (Revenue \$ 0 )  The Detroit Zoological Society continues to demonstrate organizational excellence consistent with a commitment to outstanding service, progressive resource management and environment leadership. The Society maintains grounds of 125 acres and 78 different buildings where staff members and volunteers are committed to lessening their environmental impact on the Earth. The Detroit Zoological Society has developed a unique, green roadmap called the Greenprint. This comprehensive strategic plan guides our operations and is the plan by which we refine and improve our facilities and daily practices, develop new policies and programs and improve green literacy in our community.
4d	Other program services (Describe in Schedule O) (Expenses \$ 15,278,173 including grants of \$ 0)(Revenue \$ 0)
40	
<u>4e</u>	Total program service expenses►\$ 27,226,650

art IV	Checkl	ist of	Required	Schedules

	•		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part $I$	3		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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		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	Yes	
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 temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
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	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.	11b		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
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.	11d	Yes	
e	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	Yes	
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		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Part I	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, Part 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, Part III and IV	16		No
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	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? If "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? <b>Note.</b> All Form 990 filers that operated one or more hospitals must attach audited financial statements	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		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part $I$	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
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		No
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 IV	28a	Yes	
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," 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 owner? If "Yes," complete Schedule L, Part IV	28c	Yes	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule Ma	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If</i> "Yes," complete Schedule M	30		N o
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 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? <i>If</i> "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		No
35a	Is any related organization a controlled entity of the filing organization within the meaning of section 512(b)(13)?	35a		No
b	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	35b		No
36	<b>Section 501(c)(3) organizations.</b> 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		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O	38	Yes	
		F	orm <b>990</b>	(2011)

Part V	Statements Regarding Other IRS Filings and Tax Compliance

	Check if Schedule O contains a response to any question in this Part V	•		
			Yes	No
а	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
	<b>1a</b> 86			
D	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable  1b  0			
_	Did the example tion comply with hacking withholding rules for reportable navments to vendors and reportable			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		
a.	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			
.a	Statements filed for the calendar year ending with or within the year covered by this			
	return			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?			
		2b	Yes	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)			
a	Did the organization have unrelated business gross income of \$1,000 or more during the			
	year?	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
а	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 or securities			
	account)?	4a		Νo
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			
	, , , , , , , , , , , , , , , , , , , ,			
a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			No
		5b		140
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	_		
		5c		
a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		Νo
	organization solicit any contributions that were not tax deductible?			
Ь	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts	6b		
	were not tax deductible?	OD		
	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a	Yes	
_	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	Yes	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			NI -
	file Form 8282?	7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
_				
	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	70		
	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		
		<del></del>		
,	<b>Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations.</b> 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		
		-		
'	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
0	Section 501(c)(7) organizations. Enter			
а	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			
1	Section 501(c)(12) organizations. Enter			
	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 )			
	Sources against amounts due of received nomithem j			
2a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
_	year 12b			
3	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?			
u	<b>Note.</b> All 501(c)(29) organizations must list in Schedule O each state in which they are licensed to issue			
	qualified health plans, the amount of reserves required by each state, and the amount of reserves the organization	12-		
	allocated to each state	13a		
b	Enter the aggregate 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 aggregate amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		No
L	If "Vac " has it filed a Form 720 to report these payments? If "No " provide an evaluation in Schodule O	4.46		i

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

Se	ection A. Governing Body and Management						
			Yes	No			
1a	Enter the number of voting members of the governing body at the end of the tax						
Lu	year						
b	Enter the number of voting members included in line 1a, above, who are independent						
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any	2		No			
_	other officer, director, trustee, or key employee?						
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? .	3		No			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		No			
6	Did the organization have members or stockholders?	6	Yes				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	Yes				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders,	7b	Yes				
8	or persons other than the governing body?						
	year by the following	_					
a	The governing body?	8a	Yes				
ь	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		Νo			
	ection B. Policies (This Section B requests information about policies not required by the Internal evenue Code.)						
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Νo			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?						
b	Describe in Schedule O the process, if any, used by the organization to review the Form 990						
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes				
b	Were officers, directors or trustees, and key employees required to disclose annually interests that could give						
•	rise to conflicts?	12b	Yes				
	in Schedule O how this was done	12c	Yes				
13	Did the organization have a written whistleblower policy?	13	Yes				
14	Did 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		No			
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	164					
Se	ection C. Disclosure	16b					
17	List the States with which a copy of this Form 990 is required to be filed MI						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)						
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply						
19	Own website Another's website Upon request  Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of						
-3	beschibe in senedate 5 whether take it 50, now), the organization made its governing documents, commet of						

- interest policy, and financial statements available to the public See Additional Data Table
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization 🕨

John Krueger CFO Detroit Zoological Society 8450 W 10 Mile Road Royal Oak, MI 48067 (248) 541-5717

## 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- ◆ List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if neither the or	ganization nor any re	lated o	rgan	ızatı	ons	compe	ensat	ted any current or fo	rmer officer, direc	tor, or trustee
<b>(A)</b> Name and Title	(B) A verage hours per week (describe	unles an	on (d e tha	n one son er ar	e bo: is bo nd a	x, oth		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
	hours for related organizations in Schedule O)	Individual trustae or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former		MISC)	related organizations
See Additional Data Table										
				$\vdash$			_			

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

(A) Name and Title		(B) A verage hours per week (describe hours	unles ar	on (d e tha	n on son er a	e bo ıs b nd a	x, oth )		(D) Reportable compensation from the organization (W- 2/1099-MISC)		(E) Reportable compensation from related organizations (W- 2/1099- MISC)		(F) Estimated amount of other compensation from the organization and related		
		for related organizations in Schedule O)	Individual trustee or director	Institutional Trustee	Officei	Kej emplojee	Highest compensated employee	Former			MISC)		organiza	I	
See A	ddıtıonal Data Table														
												+			
												$\dagger$			
												+			
												+			
												+			
				1			1					+			
												+			
												+			
				<u> </u>			-					+			
												-			
												+			
												_			
								<u>L</u>				$\perp$			
1b					•	•		<u>▶</u>							
d	Total (add lines 1b and 1c)				•	•				961,962		0		95,098	
	Total (add lines 1b and 1c) .  Total number of individuals (incl								receive	•		<u>~</u>		33,030	
	\$100,000 of reportable compen							•							
3	Did the organization list any <b>fori</b> on line 1a? <i>If</i> "Yes," complete Sch	•							_	t compens	ated employee	3	Yes	No No	
4	For any individual listed on line : organization and related organization individual											4	Yes		
5	Did any person listed on line 1a										or individual for		1		
	services rendered to the organiz	ation? <i>If</i> " <i>Yes,"</i> (	complet	e Sch	edul	e J f	or suci	h per	son .			5		No	
Se	ection B. Independent Con	tractors													
1	Complete this table for your five \$100,000 of compensation from or within the organization's tax y	highest comper n the organizatio													
	Nar	(A) me and business add	dress							Desci	(B)		(C Comper		
535 G Suite	r Construction Company inswold									Construction			•	,937,957	
JC Be 277 G Suite	al Construction Inc Gratiot 500									Construction				854,363	
Detroit, MI 48226  Donor and Company POB 67 28701  Detroit, MI 48267  Marketing							$\top$	535,589							
Phoer 1775	nix Innovate Bellingham MI 48083									Marketing		1		434,687	
DBD ( 28841	Construction L Bradner Drive In, MI 48088									Construction				296,901	

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ►13

Part VIII		Statement o	f Revenue					
					<b>(A)</b> Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513,or 514
\$ \$	1a	Federated camp	paigns 1a	0				
듄	b	Membership du	es <b>1b</b>	737,790				
ာဋ	c	Fundraising eve	ents <b>1c</b>	207,500				
£	d	Related organiz	ations 1d	0				
% <u>≡</u>	e	Government grants		12,214,957				
뺤	f	All other contribution	ons, gifts, grants, and <b>1f</b>	3,332,359				ł
章章	'	sımılar amounts no	t included above					
물병	g	0-	butions included in 70,418					
Contributions, gifts, grants and other similar amounts	h	IIIIes Ta-TI \$ _	s 1a-1f	<b>.</b>	16,492,606			
<u> </u>	"	Totali Add Illies			, ,			
e				Business Code				
wen	2a	Admissions		712130	6,100,955	6,100,955	0	0
22	Ь	Rides & Attractions	<u> </u>	712130	1,874,360	1,874,360	0	0
- P	С	Education		712130	345,737	345,737	0	0
ķer.	d	Events		712130	647,963	647,963	0	0
Ξ	e	Membership Dues		712130	3,338,004	3,338,004	0	0
Program Serwce Revenue	f	All other progra	m service revenue		0	0	0	0
Ě	g	Total Add lines	s 2a – 2f	<b>b</b> -	12,307,019			
	3		ome (including dividen		12,507,019			
	[		ar amounts)		202,575	0	0	202,575
	4		tment of tax-exempt bond	F	0	0	0	0
	5	Royalties			0	0	0	0
			(ı) Real	(II) Personal				
	6a	Gross rents	542,506	0				
	b	Less rental	0	0				
	c	expenses Rental income	542,506	0				
		or (loss)	me or (loss)		542,506	0	0	542,506
	d	Net rental incol	(i) Securities	(II) Other	342,300	٥		342,300
	7a	Gross amount	356,798	(11) O ther				
		from sales of assets other	·					
		than inventory						
	b	Less cost or other basis and	271,129	0				
		sales expenses Gain or (loss)	85,669	0				
	c d				85,669	o	0	85,669
	8a	Net gain or (los Gross income fi			05,005	o o	-	03,003
Other Revenue		events (not incl \$	luding ,500 reported on line 1c)	414,489				
her	ь	Less direct exi	penses <b>b</b>	257,188				
₹	c		(loss) from fundraising		157,301		0	157,301
	9a		rom gamıng actıvıtıes					
	ь	less direct evi	penses b	0				
	c		loss) from gaming activ	vities	o	o	0	o
	10a	Gross sales of returns and allo	inventory, less owances .					
	ь	Less costofa	a oods sold b	0				
	c	_	(loss) from sales of inve		О	o	0	o
		Miscellaneous		Business Code				
	11a	Concessions		722310	1,677,241	o	0	1,677,241
	ь	O ther Revenue		712130	572,272	0	0	572,272
	c	o and Revenue						
	d	All other reven	ue		0	0	0	0
	e	Total. Add lines				9		
		. Juan /s du lilles		· · · · • [	2,249,513			
	12	Total revenue.	See Instructions .	▶	32,037,189	12,307,019	0	3,237,564 Form <b>990</b> (2011)

## Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D) Check if Schedule O contains a response to any question in this Part IX

Do no	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D</b> ) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	0	0		· ·
2	Grants and other assistance to individuals in the United States See Part IV, line 22	0	0		
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16	110,489	110,489		
4	Benefits paid to or for members	0	0		
5	Compensation of current officers, directors, trustees, and key employees	634,751	0	427,168	207,583
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$ ) and persons described in section $4958(c)(3)(B)$	0	0	0	0
7	Other salaries and wages	10,462,057	8,801,448	1,178,736	481,873
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	499,706	395,156	80,374	24,176
9	Other employee benefits	1,574,456	1,329,993	174,169	70,294
10	Payroll taxes	793,292	647,144	102,741	43,407
11	Fees for services (non-employees)	, , , , , , ,	3.7,2.1	102,7.11	,
a	Management	0	0	0	0
b	Legal	175,427	0	175,427	0
c	Accounting	137,920	4,400	133,520	0
d	Lobbying	114,000	0	114,000	0
e	Professional fundraising See Part IV, line 17	0		111,000	0
f	Investment management fees	0	0	0	0
g g	Other	7,780,178	7,454,507	277,866	47,805
12	Advertising and promotion	1,170,861	1,090,280	52	80,529
13	Office expenses	1,927,053	1,711,345	164,201	51,507
14	Information technology	374,876	310,058	49,815	15,003
15	Royalties	0	0	0	0
16	Occupancy	2,401,442	2,373,630	27,812	0
17	Travel	140,753	39,382	92,809	8,562
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0	0	0	0
19	Conferences, conventions, and meetings	67,949	37,302	27,465	3,182
20	Interest	15,385	15,208	177	0
21	Payments to affiliates	0	0	0	0
22	Depreciation, depletion, and amortization	296,937	296,937	0	0
23	Insurance	724,137	612,952	109,188	1,997
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 )				
a	Exhibits	655,482	645,121	10,361	0
b	Repairs & Maintenance	432,550	424,510	8,040	0
c	All Other Expenses	939,604	926,788	12,616	200
d					
е					
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	31,429,305	27,226,650	3,166,537	1,036,118
26	Joint costs. Check here ► ☐ If following SOP 98-2 (ASC 958-720) Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				rm <b>990</b> (2011)

Part X **Balance Sheet** (A) (B) Beginning of year End of year 6,177,294 9.540.434 1 1 2 0 2 Savings and temporary cash investments . . . . . . . 3 1,874,650 3 1,479,884 10.520.154 9.345.457 4 5 Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of 0 0 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of 0 0 6 0 7 0 0 0 8 575.085 9 9 292.361 Prepaid expenses and deferred charges . . . . . . 3.039.034 Land, buildings, and equipment cost or other basis *Complete* 10a Part VI of Schedule D 10a 10b 2,048,631 b Less accumulated depreciation . . . . . 619,717 10c 990,403 7,206,805 11 7,592,458 11 12 12 Investments—other securities See Part IV, line 11 . . . . . . 13 0 13 0 Investments—program-related See Part IV, line 11 . . 14 0 14 8,605,469 15 5,499,356 15 35,579,174 34,740,353 16 Total assets. Add lines 1 through 15 (must equal line 34) . . . 16 3,184,381 17 2,565,602 17 Accounts payable and accrued expenses . 18 18 0 19 7,594,055 19 7,254,680 20 0 20 Ω 0 21 21 0 Escrow or custodial account liability Complete Part IV of Schedule D . . Liabilities 22 Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 0 0 22 0 0 23 Secured mortgages and notes payable to unrelated third parties . . . 23 24 Unsecured notes and loans payable to unrelated third parties . . . . 750,000 24 750,000 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule 25 D . . . . 26 11,528,436 26 10,570,282 **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 15,880,098 Unrestricted net assets . . . . 15,816,209 3,765,155 28 3,478,103 28 Temporarily restricted net assets . . . . . Fund 29 4,405,485 29 4,875,759 Permanently restricted net assets . . . . . Organizations that do not follow SFAS 117, check here ▶ ☐ and complete lines 30 through 34. ö 30 Capital stock or trust principal, or current funds . . . . . . . . . 30 Assets 31 31 Paid-in or capital surplus, or land, building or equipment fund . . . . . 32 32 Retained earnings, endowment, accumulated income, or other funds ¥ 33 Total net assets or fund balances . . . . . 24.050.738 33 24.170.071 34 Total liabilities and net assets/fund balances . . . . . 35,579,174 34,740,353

	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		22 (	37,189
2	Total expenses (must equal Part IX, column (A), line 25)	2		·	129,305
3	Revenue less expenses Subtract line 2 from line 1	3			
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		24,0	50,738
5	Other changes in net assets or fund balances (explain in Schedule O)	5		- 4	188,55
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		24,1	170,07
Pai	The Financial Statements and Reporting  Check if Schedule O contains a response to any question in this Part XII			୮	
1	Accounting method used to prepare the Form 990  Cash  Accrual  Other			Yes	No
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? $\cdot$ .		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 o 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 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 on a separate basis, consolidated basis, or both	ıssued			
	▼ Separate basis				
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	ne	За		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	required	3b		

### OMB No 1545-0047

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

Department of the Treasury Internal Revenue Service

**SCHEDULE A** 

(Form 990 or 990EZ)

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

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

Inspection **Employer identification number** 

		e organiza LOGICAL SC			<u>.</u>	Employer identificati	on number				
							38-6027356				
Pa	rt I	Reaso	n for Pu	blic Charity Sta	<b>tus</b> (All organızatıo	ns must complete this i	part.) See instructions	5			
The	organız	zation is i	not a privat	te foundation becaus	eitis (Forlines 1 thr	ough 11, check only one b	ox)				
1	Г	A churc	h, convent	on of churches, or a	ssociation of churches	section 170(b)(1)(A)(i).					
2	$\sqcap$	A school described in <b>section 170(b)(1)(A)(ii).</b> (Attach Schedule E )									
3	Г	A hospit	al or a coo	perative hospital se	rvice organization des	cribed in <b>section 170(b)(1</b> )	)(A)(iii).				
4	Γ	A medical research organization operated in conjunction with a hospital described in <b>section 170(b)(1)(A)(iii).</b> Enter the hospital's name, city, and state									
5	Γ			erated for the benefication. (Complete P		sity owned or operated by	a governmental unit des	cribed in			
6	Г					scribed in <b>section 170(h)</b> (	1)(A)(v)				
7	i-	An orga describe	A federal, state, or local government or governmental unit described in <b>section 170(b)(1)(A)(v)</b> .  An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in <b>section 170(b)(1)(A)(vi)</b> (Complete Part II)								
8	Г	A comm	unity trust	described in <b>section</b>	170(b)(1)(A)(vi) (C	omplete Part II )					
9	<b>~</b>	An orga	nization th	at normally receives	(1) more than 331/39	% of its support from contri	butions, membership fee	es, and gross			
		receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3%									
		ıts supp	ort from gr	oss investment inco	me and unrelated busi	ness taxable income (less	section 511 tax) from b	usinesses			
		acquired	by the org	ganızatıon after June	30, 1975 See <b>sectio</b>	<b>n 509(a)(2).</b> (Complete Pa	rt III )				
10	Γ	An orga	nızatıon or	ganized and operated	d exclusively to test fo	r public safety See <b>sectio</b> r	ı 509(a)(4).				
11	Γ	one or m	nore public	ly supported organiz	ations described in se porting organization an	enefit of, to perform the fun ction 509(a)(1) or section d complete lines 11e throu III - Functionally integrate	509(a)(2) See <b>section</b> ugh 11h				
e	Γ	other th				ntrolled directly or indirect ublicly supported organiza					
f		If the or	-	received a written d	etermination from the	IRS that it is a Type I, Typ	e II or Type III support	ing organization,			
g		Since A following	ugust 17, 2 persons?	-		ift or contribution from any		,			
						r together with persons de		Yes No			
		` '	•	er of a person descri	e the supported organ	124(1011)		g(i)			
		• •	•	·	n described in (i) or (ii	) ahove?	<u></u> -	j(iii)			
h		• •			the supported organiz	•	15	<u> (   )</u>			
	(i) Name	of	(ii)	(iii) Type of organization (described on	(iv) Is the organization in col (i) listed in	(v) Did you notify the organization in	(vi) Is the organization in	(vii)			

(i) Name of supported organization	<b>(ii)</b> EIN	Type of organization (described on lines 1- 9 above or IRC section (see	(iv) Is the organization in col (i) listed in your governing document?		Is the organization in col (i) listed in your governing		(v) Did you not organizati col (i) of suppor	on in your	(vi) Is the organizati col (I) orga In the U	on in anized	(vii) A mount of support?
		instructions))	Yes	No	Yes	No	Yes	No			
									_		
Tatal											
Total											

instructions

Sch	edule A (Form 990 or 99	90-EZ)2011						Page <b>2</b>
	(Complet	e only if you	checked the	box on line 5,	7, or 8 of Part	<b>(b)(1)(A)(iv)</b> I or if the orgar	nızatıon faıle	d to qualify
			<u>organızatıon f</u>	fails to qualify ι	<u>under the tests</u>	listed below, pl	<u>lease comple</u>	ete Part III.)
	ection A. Public Su					Т	1	
Cal	endar year (or fiscal ye in)	ar beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	(e) 2011	( <b>f</b> ) Total
1	Gifts, grants, contribut	ions, and						
	membership fees recei							
	ınclude any "unusual							
_	grants ") Tax revenues levied fo	rtho						
2	organization's benefit a							
	paid to or expended on							
	behalf							
3	The value of services of							
	furnished by a governme the organization withou							
4	Total. Add lines 1 thro	_						
5	The portion of total cor	-						
-	by each person (other	than a						
	governmental unit or p	•						
	supported organization line 1 that exceeds 2%							
	amount shown on line 1							
	(f)	21,0014						
6	Public Support. Subtractine 4	ct line 5 from						
S	ection B. Total Sup	port						
Cal	<b>endar year</b> (or fiscal yea	r beginning	<b>(a)</b> 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	(d) 2010	<b>(e)</b> 2011	(f) Total
_	ın)	_	(4) 2007	(2) 2000	(4) 2005	(4) 2020	(0) 2022	(1) 1 3 4 4
7 8	A mounts from line 4 Gross income from inte	rost –						
0	dividends, payments re							
	securities loans, rents							
	and income from simila	ır						
_	sources							
9	Net income from unrela business activities, wh							
	not the business is reg							
	carried on							
10	Other income (Explain							
	IV ) Do not include gai from the sale of capital							
11	Total support (Add line							
	through 10)							
12	Gross receipts from re	lated activities	s, etc (See inst	ructions )			12	
13	First Five Years If the		r the organizati	on's first, second	l, thırd, fourth, or	fıfth tax year as a	501(c)(3) or	
	check this box and <b>sto</b>	p here						<b>▶</b> □
S	ection C. Computat	ion of Publ	ic Support F	Percentage				
14	Public Support Percen	tage for 2011	(line 6 column	(f) dıvıded by lıne	11 column (f))		14	
15	Public Support Percen	tage for 2010	Schedule A , Pa	rt II, line 14			15	
16a	33 1/3% support test-					line 14 is 33 1/3%	% or more, che	
h	and <b>stop here.</b> The org  33 1/3% support test					6a and line 15 is	33 1/20% or m	ore check this
D	box and <b>stop here.</b> The					oa, and inte 15 IS	1/3%0 UI M	ore, check this
17a	10%-facts-and-circum	-	•		-	ne 13, 16a, or 16	b and line 14	٠,
	ıs 10% or more, and ıf							
	in Part IV how the orga	anızatıon meet	s the "facts and	d circumstances"	test The organiz	zatıon qualıfıes as	a publicly su	
b	organization 10%-facts-and-circum	stances test—	<b>2010.</b> If the ora	anization did not	check a hov on li	ne 13, 16a 16b	or 17a and lin	<b>▶</b> □
,	15 is 10% or more, an							-
	Explain in Part IV how	the organizati						
10	supported organization  Private Foundation If t		n did not chools	a hov on line 12	16a 16h 17a a	or 17h chack this	hov and coc	<b>►</b> □

**▶**□

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

(Complete only if you checked the box on line 9 of Part I 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.)

	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	<b>(c)</b> 2009	<b>(d)</b> 2010	<b>(e)</b> 2011	<b>(f)</b> Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	5,363,776	8,914,636	5,776,174	5,290,528	8,049,342	33,394,456
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	11,245,339	12,045,565	11,656,083	9,119,175	11,218,526	55,284,688
3	Gross receipts from activities that are not an unrelated trade or business under section 513	0	0	0	0	0	0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0	6,450,000	14,589,370	10,172,401	11,622,007	42,833,778
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0	0	0	0	0	0
6	Total. Add lines 1 through 5	16,609,115	27,410,201	32,021,627	24,582,104	30,889,875	131,512,922
7a	A mounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year	0	0	678,195	0	0	678,195
c	Add lines 7a and 7b	0	0	678,195	0	0	678,195
8	Public Support (Subtract line 7 c						130,834,727
	from line 6 )						130,034,727
	ction B. Total Support		T		1		
Cale	ndar year (or fiscal year	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
9	beginning in) A mounts from line 6	16,609,115	27,410,201	32,021,627	24,582,104	30,889,875	131,512,922
9 10a	Gross income from interest,	10,005,115	27,410,201	32,021,027	24,302,104	30,003,073	131,312,722
104	dividends, payments received on securities loans, rents, royalties and income from similar sources	797,188	329,032	452,709	712,895	745,081	3,036,905
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	0	0	0	0	0	0
C	Add lines 10a and 10b	797,188	329,032	452,709	712,895	745,081	3,036,905
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	0	0	0	0	0	0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	1,819,339	1,919,264	1,736,722	1,432,563	573,750	7,481,638
13	Total support (Add lines 9, 10c, 11 and 12)	19,225,642	29,658,497	34,211,058	26,727,562	32,208,706	142,031,465
14	First Five Years If the Form 990 is check this box and stop here	for the organizati	on's first, second	, third, fourth, or f	fifth tax year as a	501(c)(3) orgar	ization, ►
	check this box and <b>scop here</b>						
Se	ction C. Computation of Pul	olic Support P	ercentage				
Se 15				13 column (f))		15	92 117 %
	ction C. Computation of Pul	1 (line 8 column	(f) dıvıded by lıne	13 column (f))		15 16	92 117 % 91 49 %
15 16	Public Support Percentage for 201 Public support percentage from 20	1 (line 8 column i 10 Schedule A, P	(f) divided by line art III, line 15			<b>—</b>	
15 16	ction C. Computation of Pub Public Support Percentage for 201	1 (line 8 column of 10 Schedule A, Postment Inco	(f) divided by line art III, line 15	ge	n (f))	<b>—</b>	91 49 %
15 16 Se	ction C. Computation of Pub Public Support Percentage for 201 Public support percentage from 20 ction D. Computation of Inv	1 (line 8 column 10 Schedule A, P restment Inco 2011 (line 10 c co	ome Percenta	<b>ge</b> oy line 13 column	ı (f))	16	

19a 33 1/3% support tests—2011. 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.

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **b** 33 1/3% support tests—2010. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line

18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization **Private Foundation** If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions

Part IV	<b>Supplemental Information.</b> Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Also complete this part for any additional information. (See instructions).								
	Facts And Circumstances Test								
	Explanation								
PART III, Line	12 Income form the City of Detroit								

Schedule A (Form 990 or 990-EZ) 2011

DLN: 93493135055052

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. F See separate instructions.

f the organization ans	swered "Yes," to Forn	n 990, Part IV, Line	3, or Form 990-EZ,	Part V, line 46 (Political	Campaign Activities),
hen					

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35c (Proxy Tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

Name c	of the	organ	ızatıon
DETROIT	ZOOL	OGICAL	SOCIETY

Employer identification number

38-6027356

<u>Par</u>	L-A	Comple	ete if t	ne or	ganıza	tion is	s exemp	t under	section	501(C	) or	ıs a	section	52/	organı	zation.
1	Provid	de a descr	iption o	f the or	ganızatıo	n's dire	ct and ind	irect polit	ical campa	aign acti	vities	on b	ehalf of or			

- in opposition to candidates for public office in Part IV Political expenditures
- 3 Volunteer hours

art I-B	<u>Complete if</u>	f the organiza	tion is exemp	<u>t under sectio</u>	n 501(c)(3).

- 1 Enter the amount of any excise tax incurred by the organization under section 4955
- Enter the amount of any excise tax incurred by organization managers under section 4955
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?
- Was a correction made?
- b If "Yes," describe in Part IV

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

- Enter the amount directly expended by the filing organization for section 527 exempt function activities
- Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt funtion activities
- 3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b
- Did the filing organization file Form 1120-POL for this year? Yes Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	<b>(b)</b> Address	<b>(c)</b> 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

chedule C (	(101111990 01990-12) 2011	Page
Part II-A	Complete if the organization is exempt under section 501(c)(3) and filed Form 5	5768 (election
	under section 501(h)).	
Check	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's	name address FI

4	Cneck	1	If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN,	
			_ expenses, and share of excess lobbying expenditures)	

3 Check I if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying E (The term "expenditures" means ar		(a) Filing Organization's Totals	<b>(b)</b> Affiliated Group Totals
1a	Total lobbying expenditures to influence public o	pinion (grass roots lobbying)	114,000	
b	Total lobbying expenditures to influence a legisla	ative body (direct lobbying)	0	
c	Total lobbying expenditures (add lines 1a and 1b	p)	114,000	
d	Other exempt purpose expenditures		28,252,817	
e	Total exempt purpose expenditures (add lines 1	c and 1d)	28,366,817	
f	Lobbying nontaxable amount Enter the amount f	rom 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		
		<u> </u>		
g	Grassroots nontaxable amount (enter 25% of lin	e 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, ento	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	r-0-	0	
j	If there is an amount other than zero on either lir	ne 1h or line 1i, did the organization file Form 4720	O reporting	□ Vos. □ No.

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

**Lobbying Expenditures During 4-Year Averaging Period** Calendar year (or fiscal year (a) 2008 **(b)** 2009 (c) 2010 (d) 2011 (e) Total beginning in) 1,000,000 1,000,000 1,000,000 1,000,000 Lobbying non-taxable amount 4,000,000 Lobbying ceiling amount 6,000,000 (150% of line 2a, column(e)) 65,201 75,306 Total lobbying expenditures 76,121 114,000 330,628 250,000 Grassroots non-taxable amount 250,000 250,000 250,000 1,000,000 Grassroots ceiling amount 1,500,000 (150% of line 2d, column (e)) 65,201 75,306 114,000 330,628 Grassroots lobbying expenditures

_	edule C (Form 990 or 990-EZ) 2011				Page <b>3</b>
Pa	rt II-B Complete if the organization is exempt under section 501(c)(3) and has (election under section 501(h)).	NOT f	iled Fo	orm 57	768 
		(	a)	(	b)
		Yes	No	Am	ount
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	O ther 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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(6).	501(c	)(5), d	or sect	tion
			_	Y	es No
1	Were substantially all (90% or more) dues received nondeductible by members?			1	
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		L	2	
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3	
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part I answered "Yes".				tion
1	Dues, assessments and similar amounts from members	1			
2	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).				
а	Current year	2a			
b	Carryover from last year	2b			
C	Total	2c			
3	Aggregate amount reported in section $6033(e)(1)(A)$ notices of nondeductible section $162(e)$ dues	3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4			
5	Taxable amount of lobbying and political expenditures (see instructions)	5			

#### Part IV Supplemental Information

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 1i Also, complete this part for any additional information

Identifier | Return Reference | Explanation

DLN: 93493135055052

OMB No 1545-0047

**SCHEDULE D** (Form 990)

Department of the Treasury

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

**Supplemental Financial Statements** 

Internal Revenue Service		► Attach to Fo	Inspectio	Inspection					
	me of the organ			Emplo	oyer identification number				
DΕΙ	ROIT ZOOLOGICAL	SUCTELL		027356	56				
Pa			dvised Funds or Other Similar Fu			ıf the			
	organiz	zation answered "Yes" to Form 99		(1	-> Fda and ather accounts				
1	Total number a	t and of year	(a) Donor advised funds	( [	) Funds and other accounts				
2		tributions to (during year)							
3	33 3	nts from (during year)							
4		ue at end of year							
5	Did the organiz	·	sors in writing that the assets held in don organization's exclusive legal control?	or advis		- No			
6	used only for c		donor advisors in writing that grant funds efit of the donor or donor advisor, or for ar		purpose	- No			
Pa	tt III Conse	rvation Easements. Complete	ıf the organızatıon answered "Yes" to	o Form	990, Part IV, line 7.				
2	Preservat Protection Preservat Complete lines	conservation easements held by the or ion of land for public use (e g , recreati n of natural habitat ion of open space s 2a-2d if the organization held a quali he last day of the tax year	<u> </u>	certified					
	easement on t	ne last day of the tax year	]		Held at the End of the Ye	ear			
а	Total number o	of conservation easements		2a					
b	Total acreage	restricted by conservation easements		2b					
С	Number of con	servation easements on a certified his	toric structure included in (a)	2c					
d	Number of con	servation easements included in (c) ac	equired after 8/17/06	2d					
3	Number of con	servation easements modified, transfe	rred, released, extinguished, or terminate	d by the	e organization during				
	the taxable ye	ar <b>►</b>							
4	Number of stat	tes where property subject to conserva	ation easement is located 🛌						
5	_	nization have a written policy regarding f the conservation easements it holds?	g the periodic monitoring, inspection, hand	dling of v		- No			
6	Staff and volun	nteer hours devoted to monitoring, insp	ecting and enforcing conservation easem	ients dui	ring the year ►				
7	A mount of exp	enses incurred in monitoring, inspectir	ng, and enforcing conservation easements	s during	the year				
-	<b>►</b> \$								
8		nservation easement reported on line 2 ) and 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of sec	tion	┌ Yes ┌	- No			
9	balance sheet,		onservation easements in its revenue and the footnote to the organization's financial nents						
Par			ns of Art, Historical Treasures, ( 'Yes" to Form 990, Part IV, line 8.	or Oth	er Similar Assets.				
1a	art, historical t	treasures, or other similar assets held	116, not to report in its revenue stateme for public exhibition, education or researc ancial statements that describes these it	ch in furt					
b	historical treas		116, to report in its revenue statement a public exhibition, education, or research in ;						
(i) Revenues included in Form 990, Part VIII, line 1 ► \$					<b>►</b> \$				
	(ii) Assets Inc	luded in Form 990, Part X			<b>▶</b> \$				
2		If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items							

Revenues included in Form 990, Part VIII, line 1

**b** Assets included in Form 990, Part X

0

Part	Organizations Maintaining Co	llections of Ar	<u>t, His</u>	torical	<u> Treasu</u>	res, or Othe	<u>r Similar Asse</u>	ts (c	ontinued)
3	Using the organization's accession and othe items (check all that apply)	r records, check ar	ny of th	ne followin	g that ar	e a significant u	se of its collection	า	
а	Public exhibition		d	┌ Loa	n or exc	hange programs			
b	Scholarly research		e	┌ Oth	er				
c	Preservation for future generations								
4	Provide a description of the organization's c Part XIV	ollections and expl	aın hov	w they furt	her the c	organization's ex	kempt purpose in		
5	During the year, did the organization solicit assets to be sold to raise funds rather than							Yes	✓ No
Par	<b>Escrow and Custodial Arrang</b> Part IV, line 9, or reported an ar	<b>ements.</b> Compl	ete ıf	the orga	nızatıor		es" to Form 990	),	·
1a	Is the organization an agent, trustee, custod included on Form 990, Part X?	lian or other interm	ediary	for contri	outions (	or other assets		Yes	┌ No
b	If "Yes," explain the arrangement in Part XI	√ and complete the	follov	ving table					
_							Amou	int	
C C	Beginning balance					1c			
d	Additions during the year					1d			
e	Distributions during the year					1e			
f	Ending balance					1f	_		
2a	Did the organization include an amount on F	orm 990, Part X, Iır	ne 21?				Г	Yes	∏ No
	If "Yes," explain the arrangement in Part XIV								
Pa	rt V Endowment Funds. Complete							NEQUE \	Voors Book
1a	Beginning of year balance	(a)Current Year 6,622,311	(D	Prior Year 6,426,4		o Years Back <b>(d</b> 5,830,493	)Three Years Back (€ 6,472,458	rour	Years Back
ь	Contributions	3,346,878		1,4		0	0,1,2,130		
_	Investment earnings or losses	-211,725		619,0		595,941	-494,373		
c d	Grants or scholarships	0		015,0	0	0	131,373		
e	Other expenditures for facilities	-155,808		405,7	25	0	147,592		
_	and programs	·					·		
f	Administrative expenses	42,255		18,9	07	0	0		
g	End of year balance	9,871,017		6,622,3	11	6,426,434	5,830,493		
2	Provide the estimated percentage of the year	r end balance held	as						
а	Board designated or quasi-endowment 🕨	51 %							
b	Permanent endowment ► 49 %								
c	Term endowment ► 0 %								
За	Are there endowment funds not in the posse	ssion of the organiz	zatıon	that are h	eld and a	dministered for	the		
	organization by							Yes	No
	(i) unrelated organizations		•				3a(i)	Yes	<u> </u>
	(ii) related organizations						3a(ii)		No
ь 4	If "Yes" to 3a(II), are the related organization Describe in Part XIV the intended uses of the	•			· · ·		3b		<u> </u>
	t VI Land, Buildings, and Equipme				10				
Par	Land, Buildings, and Equipme	ent. See roilli 9:	90, Pa			T	T	Ι	
	Description of property			(a) Cost basis (inv		(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) B	ook value
1a	Land				0	(			0
b	Buildings		•		0	118,647	89,670		28,977
c	Leasehold improvements		•		0	(	0		0
d	Equipment				0	1,891,817	930,391		961,426
	Other				0	1,028,570	1,028,570		0
Tota	I. Add lines 1a-1e <i>(Column (d) should equal F</i>	orm 990, Part X, colu	mn (B	), line 10(c	).)				990,403
							Schedule D (I	orm 9	90) 2011

Part VIII Investments—Other Securities. See	FOITH 990, Part A, HILE I		
<ul><li>(a) Description of security or category (including name of security)</li></ul>	(b)Book value		d of valuation - year market value
(1)Financial derivatives		Cost of ella-of	-year market value
(2)Closely-held equity interests			
Other			
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)			
Part VIII Investments—Program Related. See	Form 990, Part X, line	13.	
(a) Description of investment type	(b) Book value		d of valuation
,,,	(-,	Cost or end-of	-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13 )			
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip			(b) Book value
(1) Assets Designated for Specific use	7.011		5,499,356
(1) Abbets besignated for opening abe			3,133,330
Total. (Column (b) should equal Form 990, Part X, col. (B) line 1	5.)		5 499 356
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1  Part X Other Liabilities. See Form 990, Part X			5,499,356
Part X Other Liabilities. See Form 990, Part X	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability			5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  (a) Description of Liability	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356
Part X Other Liabilities. See Form 990, Part X  1 (a) Description of Liability  Federal Income Taxes	, line 25.		5,499,356

	lule D (Form 990) 2011	bango in Not Accets from Eo	um 000 to Einancial Statemen		Page <b>4</b>
1	Total revenue (Form 990, Part		rm 990 to Financial Statemer	1	32,037,189
2 3	Total expenses (Form 990, Pa Excess or (deficit) for the year			3	31,429,305
4	Net unrealized gains (losses)	on investments		4	-488,551
5 6	Donated services and use of fa Investment expenses	ıcılıtıes		5 6	0
7 8	Prior period adjustments Other (Describe in Part XIV)			7	0
9	Total adjustments (net) Add I	nes 4 - 8		9	-488,551
10 Part		perfinancial statements Combine lin	nes 3 and 9 al Statements With Revenue p	10 er R	119,333 eturn
1 2		er support per audited financial stater ut not on Form 990, Part VIII, line 12	<b>-</b>	1	34,734,155
a	Net unrealized gains on inves	tments	<b>2a</b> -488,551		
b c	Recoveries of prior year grant	facilities	. <b>2b</b> 2,928,329 . <b>2c</b> 0		
d e	Other (Describe in Part XIV)  Add lines <b>2a</b> through <b>2d</b>		<b>2d</b> 0	2e	2,439,778
3	Subtract line <b>2e</b> from line <b>1</b> .			3	32,294,377
4 a		90, Part VIII, line 12, but not on line luded on Form 990, Part VIII, line 7b	1 1		
b c	Other (Describe in Part XIV)  Add lines <b>4a</b> and <b>4b</b>		. <b>4b</b> -257,188	4c	-257,188
5 Dort		nd <b>4c.</b> (This should equal Form 990, P	art I, line 12)	5	32,037,189
1	Total expenses and losses pe		al Statements with Expenses	1	34,614,822
2	Amounts included on line 1 bu	it not on Form 990, Part IX, line 25	L a . L		
a b	Donated services and use of f	acilities	<b>2a</b> 2,928,329 <b>2b</b> 0		
c d	Other losses Other (Describe in Part XIV)		. <b>2c</b> 0 <b>2d</b> 257,188		
e	Add lines 2a through 2d			2e	3,185,517
3 4	Subtract line <b>2e</b> from line <b>1</b> . Amounts included on Form 99	0, Part IX, line 25, but not on line 1:		3	31,429,305
a b	Investment expenses not incl Other (Describe in Part XIV)	uded on Form 990, Part VIII, line 7b	4a 0		
c	Add lines <b>4a</b> and <b>4b</b>			4c 5	0
	t XIV Supplemental In				31,429,305
Part			8, 5, and 9, Part III, lines 1a and 4, Pa XIII, lines 2d and 4b Also complete t		
SchD	Identifier _P03_S00_L01	Return Reference Schedule D, Part III, Line 1	Explanati		accumulated over the
	<del></del>	_ ,	years Consistent with financial stat followed by other institutions (prima	emen rıly m	t presentations useums), the Society
			excludes the value of its works of ar financial position. The works of art a exhibition purposes		
SchD.	_P03_S00_L04	Schedule D, Part III, Line 4	The Detroit Zoo is the only zoo in the art collection from artists in multiple		
			purpose of interpreting the relations through various cultures and times	hıp of The Z	humans with animals oo's first Wildlife Art
			Committee was created in 1987 by who felt outdoor sculptures of wildlif enjoyment of the Zoo The collection	e coul	d enhance visitors'
			understanding that art is a visual co feelings, beliefs, and ideas which ref	mmur	nication that records
			which it was made, hence artist inte literal depictions In the antiquities	rpreta wall c	tions were chosen over ase in the Wildlife
			Interpretive Gallery, one contempor of cave paintings done by the earlies 40,000 years ago. Michigan artists	st kno	wn artists some
			Gallery collection are Rich Branstro Ford, Peter Hackett, Cathy Peet, an	om, Sı	ısıe Colquitt, Laura
			possibly most readily recognized are Rockman		
SchD <sub>.</sub>	_P05_S00_L04	Schedule D, Part V, Line 4	The Detroit zoological society (sociestablished to provide a stable sour underwrite the programs and facilities	ce of	funding to help
			belle isle nature zoo Monies placed with interest, and only distributed as	ın end	dowments are invested,
			endowment governing policy Funds donors within each endowment A na	med f	und requires a
			minimum investment of \$100,000 a restricted by the donors. The societ fifteen individual funds established f	y's er	dowments consist of
			endowments of the Detroit zoologica following the endowment for amphib	ıl socı	ety include the
			endowment for amphibian conservat The purpose of the endowment is to education, research, conservation a	suppo	ort amphibian
			endangered species The endowmen endowment for education was estable	it for e	ducation the
			endowment is used to provide educa Detroit zoo and belle isle nature zoo	The	William Randolph
			Hearst foundation fund the Hearst f 2001 The purpose of the fund is to scholarships and education program	provid	de monies for
			society The standard federal bank e education the standard federal fund	endow I was e	ment fund for established march 31,
			2004 by the standard federal bank of purpose of the fund is to provide mo at the belle isle nature zoo. The San	nies f	or education programs
			admissions fund the Westerman fur December 1, 2007 by James h Lop	nd was	established
			the fund is to subsidize zoo admission income families. The Madeleine Berreducation endowment, the Madelein	man a	cademy for humane
			human education endowment was es 2001 by Madeleine and Mandell I B	tablis	hed September 13,
			endowment is to support operationa humane education programs at the I	Detroi	t zoo ın future years
			The John S and James I Knight Fundestablished December 13, 1999 by Knight Foundation The purpose of the state	the J	ohn Sand James I
			research and education programs of society. The society determined that	t it wo	ould be most beneficial
			as a component of the humane educ Adelyn b Devereaux fund the Deve December 28, 2001 through Mrs A	reaux	fund was established
			agreement The purpose of the fund zoological society's endowment fund	ıs to b	penefit the Detroit society determined
			that it would be most beneficial as a education endowment. The Richard a endowment for wildlife art and interp	and Ja	ine Manoogian
			Jane Manoogian endowment for wild established may 6, 2002 by Richard	life art	and interpretation was anoogian The purpose
			of the endowment is to purchase and including sculpture, at the Detroit zo	d mair oologi	itain works of art, cal park In addition,
			earnings will support educational pro focusing on the interpretation of art relationship between humans and ar	that e	xplores the
			science and technology the endowr technology was established in 1999	nent f	or science and purpose of the
			endowment is to provide support for technological needs driven by the D mission of celebrating and saving wi	etroit	zoological society's
			wildlife conservation the endowmen was established in 1999 The purpo	t for v	vildlife conservation the endowment is to
			support the Detroit zoological socie preservation. The endowment for the	zoo	the endowment for the
			zoo was established in 1999 The pi to provide support for the ongoing in animal habitats, picturesque ground	nprove	ement of the programs,
			infrastructure The Joyce h Cohn m discretionary fund) the Cohn fund w	emori ⁄as es	al fund (director tablished on March 8,
			1990 by the united Jewish charities Cohn, Rita and John Haddow, Judge memory of Joyce H Cohn The purp	, on b Averr	ehalf of Mrs Irwin I I Cohn and family in
			discretionary income for the zoo's d and/or its staff to take advantage of	ırecto	r to permit the zoo
			budgeted funds are available The G fund the Playscape fund was establ	erry R ıshed	lissman Playscape December 28, 1998
			by the Harry B and Anna Korma Fou fund is to support the ongoing maint Gerry Rissman Playscape The sout	enanc	e and upgrades of the
			veterinary association (SEMVMA) fi established on January 15, 2002 by	und t the s	he SEMVMA Fund was outheastern Michigan
			veterinary association. The purpose long-term financial support for the Dhospital needs		
	_P12_S00_L04b _P13_S00_L02d	Schedule D, Part XII, Line 4b Schedule D, Part XIII, Line 2d	Direct Fundraising Expense \$257,1 Direct Fundraising Expense	88	
JUID.	_, 10_000_L02u	Periedule D, Fait AIII, Line Za	process and aising expense		

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DLN: 93493135055052

OMB No 1545-0047

#### **SCHEDULE F** (Form 990)

► 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.

Department of the Treasury Internal Revenue Service			Open to Public Inspection								
Name of the organization DETROIT ZOOLOGICAL SOCIETY							Employer identification number				
						38-6027356					
Pa			<b>n on Activit</b> i rt IV, lıne 14l		he United States. C	omplete if the organi	zation answered				
1					is to substantiate the	amount of the grants	or				
					stance, and the selecti		<i>a</i> rd				
	the grants or as	sıstance?					✓ Yes				
2	For grantmakers. United States	Describe in Pa	rt V the organi	zatıon's proceduı	res for monitoring the use	e of grant funds outside t	the				
3	Activites per Reg	on (Use Part '	V ıf addıtıonal s	pace is needed	)						
	<b>(a)</b> Region		<b>(b)</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					
	South America					General Support of School	110,489				
	-										
Э.	Sub total										

**b** Total from continuation sheets

c Totals (add lines 3a and 3b)

to Part I

110,489

(a) Name of organization	(b) IRS code section and EIN (if applicable)	(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, othe
		South America	School Support	110,489	Wire Transfer			
2 Enter total n	mher of recipie	ent organizations l	sted above that are	recognized as chari	ties by the foreign o	Ountry recognized	as	
tax-exempt b	by the IRS, or fo	or which the grant	ee or counsel has pro	ovided a section 50:	1(c)(3) equivalency	letter	. •	(
tax-exempt l	by the IRS, or fo	or which the grant	isted above that are in ee or counsel has pronting the counsel has pronting the countries to be a second to be	ovided a section 50:	1(c)(3) equivalency	letter	· <b>*</b>	

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

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. Use Part V if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	( <b>d)</b> A mount of cash grant	(e) Manner of cash disbursement	( <b>f</b> ) A mount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
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			<u> </u>	<u> </u>		<del>                                     </del>	1
						1	dula E (Earry 000) 2011

## 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	<u> </u>	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	굣	No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with respect to Certain Foreign Corporations. (see instructions for Form 5471)	Г	Yes	্	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	~	No

Schedule F (Form 990) 2011

Part V Supplemental Information

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

IIIIOITIIauoii.		
I dentifier	ReturnReference	Explanation
SchF_P01_S00_L02	Schedule F, Part I, Line 2	The Adopt-A-School program receives international support The Detroit Zoological Society accepts donations from supporters worldwide and transfers the funds in their entirety down to our partners in Peru A representative from the Detroit zoological society participates in the delivery of school supplies each April, providing a first-hand account of the purchased supplies and their distribution
	· · · · · · · · · · · · · · · · · · ·	Schedule F (Form 990) 2011

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DLN: 93493135055052

OMB No 1545-0047

2011

Department of the Treasury Internal Revenue Service

(Form 990 or 990-EZ)

**SCHEDULE G** 

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.

**Supplemental Information Regarding** 

**Fundraising or Gaming Activities** 

Open to Public Inspection

	ne of the organization	ETV						Employer ider	ntification number
ושט	ROIT ZOOLOGICAL SOCI	EIY						38-6027356	
Pa	rt I Fundraising Ac	<b>tivities.</b> Complete	e if the o	organizat	tion	answered "Yes"	to Forn	າ 990, Part IV	, line 17.
1	Indicate whether the organ	nization raised funds	through a	any of the	follo	wing activities Ch	eck all t	hat apply	
а	☐ Mail solicitations e ☐ Solicitation of non-government grants								
b	b						vernmen	t grants	
c	c  Phone solicitations						ng event	S	
d	☐ In-person solicitation	s							
2a b	Did the organization have or key employees listed in If "Yes," list the ten highes to be compensated at leas	Form 990, Part VII	) or entity entities	/ in conne (fundraise	ction rs) p	with professional ursuant to agreem	fundrais ents und	ing services? Ier which the fui	
(i) Name and address of Individual or entity (fundraiser)		fundraiser h				iv) Gross receipts from activity	(or r fundra	mount paid to retained by) aiser listed in col (i)	(vi) A mount paid to (or retained by) organization
			103	110					
	al .			┕					
3	List all states in which the licensing	organization is regis	tered or	licensed t	o sol	ıcıt funds or has b	een notif	ied it is exempt	from registration or

Pa	rt II	Fundraising Events. Com more than \$15,000 on Form				
			(a) Event #1  Sunset at the Zoo (event type)	(b) Event #2  Run Wild (event type)	(c) O ther Events  0 (total number)	(d) Total Events (Add col (a) through col (c))
ΕŒ	1	Gross receipts	540,647	81,342		621,989
Revenue	2	Less Charitable contributions	207,500	0		207,500
ш.	3	Gross income (line 1 minus line 2)	333,147	81,342		414,489
	4	Cash prizes	C	0		0
ဟ	5	Non-cash prizes	C	0		0
Expenses	6	Rent/facility costs	52,815	0		52,815
ă	7	Food and beverages	70,490	0		70,490
Direct	8	Entertainment	6,400	0		6,400
ā	9	Other direct expenses .	94,953	32,530		127,483
	10	Direct expense summary Add lin	es 4 through 9 ın column	(d)	•	(257,188)
	11	Net income summary Combine III	nes 3 and 10 in column (	d)		157,301
Par	t III	<b>Gaming.</b> Complete if the or \$15,000 on Form 990-EZ, lir		"Yes" to Form 990, Pa	rt IV, line 19, or rep	orted more than
Revenue			(a) Bingo	<b>(b)</b> Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (Add col (a) through col (c))
		Gross revenue				
ses	2	Cash prizes				
xpenses	3	Non-cash prizes				
ш	4	Rent/facility costs				
_ DEGG	5	Other direct expenses				
	6	Volunteer labor	┌ Yes	Г Yes Г No	┌ Yes	
	7	Direct expense summary Add lines	s 2 through 5 in column (	d)		( )
	8	Net gaming income summary Com	bine lines 1 and 7 in colu	ımn (d)	<u> <del>.</del> .</u>	
9 a b	Ist	er the state(s) in which the organiza the organization licensed to operate No," Explain	gaming activities in eac	h of these states?		
		re any of the organization's gaming l Yes," Explain	ıcenses revoked, susper	nded or terminated during	the tax year?	

Sche	dule G (Form 990 or 990-EZ) 20	11			Page <b>3</b>						
11	Does the organization operate ga	aming activities with nonmembers? .		Г <sub>Yes</sub> Г	- No						
12	Is the organization a grantor, be	per of a partnership or other entity									
	formed to administer charitable (	gamıng?		· · · · F Yes F	- No						
13	Indicate the percentage of gamii	ag activity operated in		1 1							
a				13a							
b											
14		f the person who prepares the organiza		<u> </u>							
	Name ►										
	Address ►										
	revenue?	ntract with a third party from whom the			- No						
		amount of gaming revenue retained by the third party 🟲 \$									
С	If "Yes," enter name and address	If "Yes," enter name and address									
	Name 🟲										
	Address ►										
16	Gaming manager information										
	Name 🟲										
	Gaming manager compensation I	<b>\$</b> \$									
	Description of services provided	<b>&gt;</b>									
17 a		Employee er state law to make charitable distribu		· · ·	– No						
b	Enter the amount of distributions	required under state law distributed to	o other exempt organizations or sp		<del>-</del>						
_		activities during the tax year > \$		hadala C /							
Par	t IV Complete this part to property instructions.)	provide additional information for	responses to quuestion on Sc	nedule G (see							
	Identifier	ReturnReference	Explana	tion							
		•	•								

DLN: 93493135055052

**Employer identification number** 

OMB No 1545-0047

#### Schedule J (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

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

DET	ETROIT ZOOLOGICAL SOCIETY	• •			
		38-6027356			
Pa	art I Questions Regarding Compensation				
				Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person li 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regardin				
	First-class or charter travel   Housing allowance or residence for p	personal use			
	Travel for companions Payments for business use of person	nal residence			
	Tax idemnification and gross-up payments  Health or social club dues or initiation	on fees			
	Discretionary spending account  Personal services (e.g., maid, chaufi	feur, chef)			
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding pareimbursement orprovision of all the expenses described above? If "No," complete Part III to ex		1b	Yes	
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line		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  Written employment contract				
	Form 990 of other organizations  Approval by the board or compensat	:ion committee			
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the or a related organization ${\sf N}$	ne filing organization			
а	. ,		4a		Νo
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	L	4b		Νo
C	Participate in, or receive payment from, an equity-based compensation arrangement?		<b>4</b> c		Νo
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in	ı 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 ar compensation contingent on the revenues of	ny			
а	The organization?		5a		No
b	Any related organization?	Γ	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 ar compensation contingent on the net earnings of	ıy			
а	The organization?		6a		Νo
b	Any related organization?		6b		Νo
	If "Yes," to line 6a or 6b, describe in Part III	Γ			
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non payments not described in lines 5 and 6? If "Yes," describe in Part III	ı-fıxed	7		No
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," does not not seem that III		8		No
۵	If "Vec" to line 8 did the organization also follow the rebuttable presumption procedure describes	d in Requilations			

section 53 4958-6(c)?

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

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

Note. The sum of columns (B)(1)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, columns (D) and (E) for that individual

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation (ii) Bonus & (iii) Other			(C) Retirement and other deferred	<b>(D)</b> Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	<b>(F)</b> Compensation reported in prior	
		(i) Base compensation	incentive compensation	reportable compensation	compensation			Form 990 or Form 990-EZ	
(1) Ron L Kagan	(I) (II)	257,500 0	19,500 0		3,474 0	4,970 0	292,644 0	o 0	
(2) Margaret A Tallet	(I) (II)	180,250 0	8,210 0	1,200 0	6,329 0	11,594 0	207,583 0	0 0	
(3) Scott F Carter	(I) (II)	125,847 0	6,533 0		4,964 0	14,637 0	153,181 0	0	

Schedule J (Form 990) 2011 Page **3** 

#### 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

Identifier	Return Reference	Explanation
SchJ_P01_S00_L01a	,	Non removable property of the Detroit Zoological Society is owned by the City of Detroit, a residential home is located on the grounds of the zoo The CEO/Executive Director of the Zoo is required to live in this residence

Schedule J (Form 990) 2011

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DLN: 93493135055052

OMB No 1545-0047

#### Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

#### **Transactions with Interested Persons**

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V lines 38a or 40b.

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

Open to Public **Inspection** 

Employer identification number Name of the organization DETROIT ZOOLOGICAL SOCIETY Part I **Excess Benefit Transactions** (section 501(c)(3) and section 501 (c)(4) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b (c) (a) Name of disqualified person 1 (b) Description of transaction Corrected? Yes No 2 Enter the amount of tax imposed on the organization managers or disqualified persons during the year under 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization . . . . . Part II Loans to and/or From Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 26, or Form 990-EZ, Part V, line 38a (f) (b) Loan to (g)Written (e) In Approved or from the (a) Name of interested person and (c)Original default? by board or (d)Balance due agreement? organization? principal amount purpose committee? Τо From Yes No Yes No Yes No Part III Grants or Assistance Benefitting Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 27. (b) Relationship between interested person (a) Name of interested person (c) A mount of grant or type of assistance and the organization

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

Complete if the organization	ni aliswered Tes Oli	TOTTI 550, Fart IV, III	ie 20a, 20b, 01 20c.		
(a) Name of interested person	(b) Relationship between interested person and the	(c) A mount of transaction	(d) Description of transaction	organiz	aring of zation's nues?
	organization			Yes	No
(1) Marına A Houghton Wolınskı and Company	Board Member	184,216	Accounting Services		No

### Part V Supplemental Information

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

Identifier	Return Reference	Explanation
SchL_P04_S00_L00		The Detroit Zoological Society engaged Wolinski & Company, of which Board Member Marina Houghton is President, to perform accounting services in order to make corrections to the retirement plan

Schedule L (Form 990 or 990-EZ) 2011

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DLN: 93493135055052

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 DETROIT ZOOLOGICAL SOCIETY **Employer identification number** 

Рa	rt I Types of Property				38-602/356			
	Types of Freperty	(a) Check If applicable	(b) Number of Contributions or items contributed	(c) Contribution amounts reported on Form 990, Part VIII, line 1g	<b>(d</b> Method of do contribution	etermı	_	
1	Art—Works of art			<u> </u>				
	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	10	190,375	Market Value			
10	Securities—Closely held stock .							
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution—Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate—Residential .							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
	Taxidermy							
22	Historical artifacts							
	Scientific specimens							
24	Archeological artifacts							
	Various Auction							
25	Items for Other ▶ (Fundraiser )	X	123	31.846	Market Value			
	Various			,				
26	Other ► ( <u>Services</u> )	Х	8	540,464	Market			
	O perating							
	Other ► (Supplies)	X	33	207,733	Market			
28	Other ► () Number of Forms 8283 received							
29	for which the organization compl				29		ı	
20-	Dumme the ware did the areaning		- h.,	whice was a whited in Dawk T. Jimaa	1 20 +6-+.+		Yes	No
<b>S</b> Ua	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	a to be usea			NI -
	for exempt purposes for the enti					30a		No
b	If "Yes," describe the arrangeme							
31 22-	Does the organization have a gif					31	Yes	
32a	Does the organization hire or us contributions?	e tnira part	ies or related organizations	to solicit, process, or sell	non-cash			
_						32a		No
	If "Yes," describe in Part II			and the second s	N			
33	If the organization did not report describe in Part II	revenues	ın column (c) for a type of p	roperty for which column (a	) is checked,			

Page 2

#### Part II

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

Identifier Return Reference Explanation

Schedule M (Form 990) 2011

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As Filed Data -

DLN: 93493135055052

SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

## Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

2011
Open to Public Inspection

Name of the organization	Employer identif	ication number
DETROIT ZOOLOGICAL SOCIETY		
	38-6027356	

ldentifier	Return Reference	Explanation
F990_P06_S0A_L06	Form 990, Part VI, Section A, Line 6	Paying Detroit Zoological Society members receive benefits including free admission to the Detroit Zoo, discounted admission to participating zoos and aquariums across the country, 10% discount in the gift shop, and a tax deduction to the extent allowed by law. Classes of memberships include the following individual (\$48/\$65), single parent (\$70) family/grandparent (\$79), supporter (\$150), and renaissance circle (\$1,200+). In addition to the benefits received by the paying members, the members also have certain voting and decision-making rights. This includes the ability to attend the annual meeting and call special meetings. The annual meeting of the members is held on a date fixed by the board of directors or by the executive committee within the second quarter of each fiscal year. Special meetings of the members may also be called by the chairman of the board, the president, a majority of the board of directors or of the executive committee, or by not less than one-tenth of the members. At each meeting of the members of the society, each member shall be entitled to cast one vote on each matter submitted for membership action, this vote may be by proxy executed in writing by the member or by his duly authorized attorney-in-fact. No proxy shall be valid after eleven (11) months from the date of its execution unless otherwise provided in the proxy. No person may act as a proxy unless such person is a member of the society. All privileges of membership (other than voting) are subject to such rules and regulations that may be adopted by a majority vote of the entire board of directors.

ldentifier	Return Reference	Explanation
F990_P06_S0A_L07a	Form 990, Part VI, Section A, Line 7a	The Zoological Society Board governs, develops policies and strategy and oversees all society operations and activities. The committee shall be appointed by the board chairperson and ratified by the board of trustees. The Committee shall consist of at least five persons, including the board chairperson, the Director/CEO and at least two other board members. The chairperson of the committee shall be a member of the board of trustees. 1. The Governance and Nominating Committee will be responsible for the recruitment, selection, nominating, orientation and evaluation of board members of the Detroit Zoological Society. 2. Maintain an awareness of the needs of the board and/or its affiliate organizations for executive and board talents. 3. Plan board members' development, including recruitment, orientation, education, and evaluation of their effectiveness. 4. Identify and select candidates for committees of the board using criteria for board service as a guide. 5. Provide an orientation program conducted by management for new board members. 6. Periodically conduct an assessment to determine board educational needs. The Director/CEO will be responsible for researching and updating the committee on educational opportunities. 7. Conduct board self-evaluations. 8. Review the performance of board members prior to re-appointment. 9. Confirm compliance with the DZS conflict of interest policy. 10. Meet quarterly, or as needed.

ldentifier	Return Reference	Explanation	
F990_P06_S0A_L07b	Form 990, Part VI, Section A, Line 7b	See explanation for Form 990, Part VI, Line 7a	

ldentifier	Return Reference	Explanation
F990_P06_S0B_L11b	Form 990, Part VI, Section B, Line 11b	A draft of the IRS form 990 is prepared by the Detroit zoological society's finance department under the direction of the controller. This draft is reviewed by the CFO and CEO of the society and sent to the audit firm where a review is performed by the auditing tax staff to ensure accuracy and completeness. After the initial review is performed a draft is then emailed to the audit committee for review. A conference call or meeting is coordinated to discuss the form and address any questions that may result during the audit committee's review of the form. The audit committee chair informs the CFO, that the form can be filed on the organization's behalf and a copy is made available to all board members. A board resolution is not required in order for the form 990 to be filed. This final draft is filed with the IRS and state government agencies.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L12c	Form 990, Part VI, Section B, Line 12c	The Conflict of Interest Policy is distributed annually to employees and board members. Employees receive a copy during an all employee meeting, employees are given a week to read the policy and complete the questionnaire. Employees are required to submit the completed information to the Human Resources. Department. Board members are given a copy at the annual board retreat which takes place. October they are asked to read the policy and complete the questionnaire and return it to the Chief. Executive Officer's administrative assistant. Disclosure in the Society is made to the Board Chair and/or the Chief. Executive Officer of the Society, who shall determine whether a conflict exists and is material, and if the matters are material, bring them to the attention of the Board. The Board Chair and/or the Chief. Executive Officer shall consider whether a conflict exists and is material, and in the presence of an existing material conflict, whether the contemplated transaction may be authorized as just, fair and reasonable to the Society. The decision of the Board Chair and/or the Chief. Executive Officer of the Society on these matters will rest in their sole discretion, and their concern must be the welfare of the Society and the advancement of its purpose.

ldentifier	Return Reference	Explanation
F990_P06_S0B_L15	Form 990, Part VI, Section B, Line 15	The Detroit Zoological Society engaged consultant, Towers Perrin, (April 2008) to assess a competitive salary analysis of non-union, salaried benchmark positions and develop salary structures and ranges for these positions. Job grades and salary ranges, including minimum, midpoint and maximum, were established for each position. Upon determining a wage for a new hire, an individual's salary is set within the range considering the market value of the position (based on the role's primary responsibilities), individual characteristics (experience, performance, etc.) and internal value. Salary is not to be lower than the minimum established wage of the pay grade and range. If a new hire is to be brought in higher than the established midpoint wage of the pay grade and range, it must be approved by Human Resources and a member of the Executive Leadership Team. Salary is not to exceed the established maximum wage of the pay grade and range.

ldentifier	tifier Return Reference Explanation		
F990_P06_S0C_L19		The financial statements, governing documents and conflict of interest policy are available to the public upon written request	

ldentifier	Return Reference	Explanation
F990_P10_S00_L04	Form 990, Part X, Line 4	The 2010 balance sheets have been restated to conform to the 2011 presentation. The reclassifications include recognition of lesser amounts due from County authorities and lower deferred revenue of \$2,761,617 related to the Macomb Zoological Authority fiscal period.

Identifier	Return Reference	Explanation
F990_P10_S00_L19	Form 990, Part X, Line 19	The 2010 balance sheets have been restated to conform to the 2011 presentation. The reclassifications include recognition of lesser amounts due from County authorities and lower deferred revenue of \$2,761,617 related to the Macomb Zoological Authority fiscal period.

Identifier	Return Reference	Explanation			
F990_P11_S00_L05	Form 990, Part XI, Line 5	Unrealized Loss On Investments			

#### **Additional Data**

**Software ID:** 11000129

**Software Version:** v1.00

**EIN:** 38-6027356

Name: DETROIT ZOOLOGICAL SOCIETY

#### Form 990, Special Condition Description:

#### **Special Condition Description**

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

#### 4d. Other program services

(Code ) (Expenses \$ 15,278,173 including grants of \$ 0 ) (Revenue \$ 0 )

The Detroit Zoological Society continues to demonstrate organizational excellence consistent with a commitment to outstanding service, progressive resource management and environment leadership. The Society maintains grounds of 125 acres and 78 different buildings where staff members and volunteers are committed to lessening their environmental impact on the Earth. The Detroit Zoological Society has developed a unique, green roadmap called the Greenprint. This comprehensive strategic plan guides our operations and is the plan by which we refine and improve our facilities and daily practices, develop new policies and programs and improve green literacy in our community.

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		tion ( that a	(che	′)			<b>(D)</b> Reportable compensation from the	<b>(E)</b> Reportable compensation from related	<b>(F)</b> Estimated amount of other compensation
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations
Matthew S A hearn Director	1	×						0	0	0
Lynn Ford Alandt Dırector	1	Х						0	0	0
Larry Alexander Executive Director	1	×						0	0	0
N Charles Anderson Director	1	×						0	0	0
Alisha Bell Director	1	×						0	0	0
Madeleine H Berman Director	1	Х						0	0	0
Thomas C Buhl Director	1	Х						0	0	0
Shery L Cotton Director	1	Х						0	0	0
Kay Cowger Director	1	х						0	0	0
Mary Kay Crain Director	1	х						0	0	0
Matthew P Cullen Executive Director	1	х						0	0	0
Mıchael E Duggan Dırector	1	Х						0	0	0
David E Duprey Director	1	Х						0	0	0
Matthew B Elliott Director	1	Х						0	0	0
Charles Ellis Director	1	Х						0	0	0
John Erb Director	1	Х						0	0	0
Burton D Farbman Director	1	Х						0	0	0
Melissa Fazio Director	1	Х						0	0	0
Jennıfer Fıscher Dırector	1	Х						0	0	0
Marjorie M Fisher Director	1	х						0	0	0
Cynthia Ford Director	1	Х						0	0	0
Lında Gıllum Dırector	1	Х						0	0	0
Allan D Gılmour Dırector	1	Х						0	0	0
Ruth R Glancy Director	1	Х						0	0	0
Jeff Hauswirth Director	1	Х						0	0	0

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest

Compensated Employees, and	(B)		(	C)				(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
Name and Title	A verage hours per		ition that a							
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former			
Marına A Houghton Dırector	1	×						0	0	0
Paul Huxley Director	1	Х						0	0	0
Hassan Jaber Director	1	х						0	0	0
Hıram Jackson Dırector	1	Х						0	0	0
Michael W Jamieson Director	1	Х						0	0	0
George G Johnson Director	1	х						0	0	0
Alan Kalter Executive Director	1	Х						0	0	0
Mark A Kelley Director	1	х						0	0	0
Tom Lewand Director	1	Х						0	0	0
Denise J Lewis Vice Chair	2	Х						0	0	0
Albert L Lorenzo Director	1	X						0	0	0
Victor Martin Director	1	Х						0	0	0
David Page Director	1	Х						0	0	0
Shawn Patterson Director	1	Х						0	0	0
Sandra Pierce Director	1	Х						0	0	0
Richard B Platt Executive Director	1	Х						0	0	0
Stephen R Polk Vice Chair	2	Х						0	0	0
Marian M Roberge Executive Director	1	Х						0	0	0
Sue Rocca Director	1	Х						0	0	0
James Rosenthal Director	1	Х						0	0	0
Rick Ruffner	1	Х						0	0	0
Director  Lloyd A Semple  Evacutive Director/Secretary	1	Х		Х				0	0	0
Executive Director/Secretary  Andre Spivey	1	Х						0	0	0
Director Shirley R Stancato Director	1	Х						0	0	0
John G Sznewajs Executive Director/Treasurer	2	х		Х				0	0	0

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

(A) Name and Title	(B) Average hours		() tion ( that a	che		II		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
'		Highest compensated employee Key employee Cofficer Institutional Trustee Individual trustee or director	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations				
James Tate Director	4	Х						0	0	0
Joel D Tauber Director	1	Х						0	0	0
Gail L Warden Chairman	4	Х		Х				0	0	0
Linda Wasserman Aviv Vice Chair	2	Х						0	0	0
Sean Werdlow Executive Director	1	Х						0	0	0
Jeffrey K Willemain Executive Director	1	Х						0	0	0
William M Wolfson Director	1	Х						0	0	0
Ron L Kagan Executive Director/CEO	50			X				284,200	0	8,444
John F Krueger Chief Financial Officer	50			X				118,985	0	15,539
Margaret A Tallet Chief External Relations Officer	50				х			189,660	0	17,923
Scott F Carter Chief Life Science Officer	50					Х		133,580	0	19,601
Richard Friday Director of Marketing	40					Х		127,247	0	16,366
Thomas Guajardo Director of Human Relations	40					Х		108,290	0	17,225