CHANGE IN ACCOUNTING PERIOD Return of Organization Exempt From Income Tax

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

2020

OMB No 1545-0047

Department of the Treasury

Do not enter social security numbers on this form as it may be made publication

Open to Public

Form 990 (2020)

		Service	Go to www irs gov/Form990 for instructions and the latest in				uspection
			endar year, or tax year beginning 1/1/2021 , and en	_		1/2021	number
	eck if ap		C Name of organization Chicago Zoological Society		n cmployer	identification	namper
_) Ad	dress ch	ange	Doing business as Brookfield Zoo Number and street (or PO box if mail is not delivered to street address) Room/suite		36-2167016	2	
Na	me chan	ge	3300 Golf Road	-	E Telephone		
Ξ.,		İ	City or town State ZIP code		•		
	tial return	1	Brookfield IL 60513	[708-688-84	00	
Fin	al relurn/le	rminated	Foreign country name Foreign province/state/county Foreign postal of	code-	Ŷ	3	
مم [nended r	enico	Totalgar addition to a significant and a signifi		G - Gross red	eipts \$	22,179,335
\exists			- No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10		- Kr	منت	[], [V]
Ap	plication	pending	F Name and address of pnncipal officer			for subgrdinales?	Yes X No
			Stuart D Strahl Ph D, 3300 Golf Road, Brookfield, IL 605,13	H(b) Are	all subordinat	es included? st. See instructi	Yes No
1 Ta	ax-exem	ot status	X 501(c)(3) 501(c) (,) ◀ (insert no) 4947(a)(1) or 627	المسترم	No Lattach a ار	st. See instructi	ions
J W	/ebsite	► ww	v czs org ,	H(c) Gro	oup exemption	number 🕨	
		ganizatio		င်စီ torma			legal domicile
				100 101118		IN State of	regar dorniene
S.E.	itt I.		mmary				
a,				spire co	onservation	leadership	<u>ру</u>
Š		connec	ing people with wildlife and nature	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
Governance			Salaria Janes	Ø.JJ			
Š	2	Check	his box 🕨 🔲 if the organization discontinued its operations of disposed	'of more	e than 25%	of its net as	ssets
	3	Numbe	of voting members of the governing body (Part VI, line 1a)	1		3	4:
Activities &	4	Numbe	of independent voting members of the governing body (Rart VIมูโก๊ฮ์ 1b)	1		4	4.
ties	5	Total nu	mber of individuals employed in calendar year 2020 (Part Viline 2a)			5	
E S	6		mber of volunteers (estimate if necessary)	1		6	86
Ac	7a		related business revenue from Part VIII, column (C), line 12		\	7a	26,20
	ь		elated business taxable income from Form 990-T, Part, I, line 11		1	7b	9,19
			المرابع	1	Prior Year		Current Year
Δ.	8	Contrib	utions and grants (Part VIII, line 1h)		38,19	3,684	5,759,43
Revenue	9		n service revenue (Part VIII. line 2g)		19,50	03,699	1,403,74
Ş.	10				1,90	06,500	689,86
æ	11	Other	nentanconettPat/KIII) column (A), lines 3, ⁶ 4, and 7d) execute (Pat VIII), column (A), lines 5, 6d; 8c, 9c, 10c, and 11e)		24	40,836	14,12
	12	Totakre	venue—add lines 8 through 192(must equal Part VIII, column (A), line 12)		59,84	44,719	7,867,17
	13	Grane	and Anliar antouciscoaid (Part IX, column (A), lines 1-3)	1		23,303	3,62
	14		s paid to or for members (Far IX; column (A), line 4)			0	· · · · · · · · · · · · · · · · · · ·
"	15	Salane	s, other compensation, employed benefits (Part IX, column (A), lines 5–10)		32.1	87,419	7,027,52
Se	16a	Profes	sional tendraising fees (Part Decolumn (A), line 11e)			41,243	1100110
Expens	b	Total fi	indraising expenses (Part X column (D), line 25) ► 612,854	1	بعدي اد -		* 4 mgr 7, mg 1 , 4
Ä	17	Other	expenses (Part IX, column (A), in es 11a-11d, 11f-24e)	+		60,287	5,761,68
	18	Total	xpenses Add lines 13-17 (must equal Part IX, column (A), line 25)			12,252	12,792,83
	19		ue less expenses Subtractiline 18 from line 12			32,467	-4,925,66
- 9	13	Nevel	G & &	Begin	ning of Curre		End of Year
ats o	20	Total	ssets (Part X, line 16)	Segin		53,000	213,737,00
Assets or	21	Totalia	abilities (Part X, line,26)			49,000	52,945,00
Net / Fund	21		sets or fund balances. Subtract line 21 from line 20			04,000	160,792,00
	22 [[]]				100,0	U-1,UUU]	100,732,00
E.C.	or peac"	5	gnature មីlock uy, I declare that ត្រីទីve examined this return including accompanying schedules and statement	ts and to	the hest of my	knowledge	
and	belief. if	is true, co	rect and complete. Declaration of preparer (other than officer) is based on all information of while	ich prepar	er has any kno	owledge	
Sıç			Signature of officer	_	Date	· . /	
He	ге			sident	and CEO	08/0	04/2021
				JIGETTE 6	u. 10 OLO		-/
			Type or print name and title nnt/Type preparer's name Preparer's signature		ate		PTIN
υ-	:ત		illu Type preparet s frame	_ "		Check	11
Рa		_ _	ıAnn Trapp		//30/2021	self-employed	P01506476
D :	epare	r			Firm's EIN	▶ 38-1357:	951
	e Onl	у —	rm's name ► Plante Moran PLLC rm's address ► 10 South Riverside Plaza 9th Floor, Chicago, IL 60606		Phone no	312-207	

For Paperwork Reduction Act Notice, see the separate instructions

Form 9	990 (2020) Chicago Zoological Society	36-216701	S Page 2
	Statement of Program Service Accomplishments Check if Schedule O contains a response or note to any line in this Par		X
1	Briefly describe the organization's mission To inspire conservation leadership by connecting people with wildlife and nature		
		·····	
2	Did the organization undertake any significant program services during the year which were the prior Form 990 or 990-EZ? If "Yes," describe these new services on Schedule O	I I	Yes X No
3	Did the organization cease conducting, or make significant changes in how it conducts, any services?		Yes 🗌 No
4	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest p expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of the total expenses, and revenue, if any, for each program service reported.		
4a	(Code) (Expenses \$ 4,920,000 including grants of \$ 3, Center for Science and Animal Well-Being (CSAW) More than 2500 ambassadors of the an provide our visitors with a rare opportunity to see species from around the globe and experie up close, personal encounters with some Expert care of these ambassadors is a time-honor tradition at CZS, where innovations in husbandry techniques and pioneering breeding, program of the cuttling edge culture of excellence CSAW staff integrate disciplines such as population biology, behavioral science, nutrition and veterinary science to determine the besways to provide and continuously care for the animals. They also incorporate medels and program around the world, and from an array of animal care professionals, to develop the best possible zoo-based animal care and management practices. Throughout the COVID related the Zoo to the public, staff continued to provide expert care to the over 2500 animals in their care. Staff also participated in daily "Bringing the Zoo to You" virtual keeper chats available	mal kingdom ence red ams are it actices closure of	31,069)
45	for free to the pubic on social media platforms) (Revenue \$	980,649)
4b	Park Operations The CZS maintains 75 buildings on 214 acres of land to exhibit over 2,500 animals. In a typical year, two million visitors annually enjoy the experience of seeing and learning about the animals of the world. Each individual who enters through Brookfield Zoo's represents an opportunity to introduce representatives of the wild world, to convey our intertwined connections to the animal kingdom, and tolencourage positive change in the wo zoo was closed to the public Jan-Feb 2021 and open under limited capacity restrictions in M due to the COVID Pandemic. Indoor areas and special attractions remained closed in Mar attendance for Mar 2021 was 112,641. While open in March, CZS maintained a safe outdoenvironment for guests to connect with animals, ensuring abidence with state mandated CC protocols including capacity restrictions. Social distancing and mask wearing. The members team continued to service our 112,000 member households, providing them with the opport participate in conservation and educational efforts of CZS.	s gates rld The larch, Total or VID safety	
4 c	Center for Conservation Leadership (CCL) Through its many conservation and education p CZS communicates with others to engender in them a sense of ownership about living harm with nature and helping save endangered species. Education specialists, volunteers, curate graphic and exhibit designers, photographers and many others contribute to sharing this information both in person and virtually. As well as reaching the daily visitors to the Zoo, CZ engages would be conservationists outside of the Zoo including classrooms of school childreachers and community leaders. Additionally through field programs, CZS supports efforts protect and restore populations of threatened species in other parts of the world. The CCL strengthens the bridge between education and conservation, between field research and the in our care. During the COVID related closure of the Zoo to the public, CCL staff successfully many of their classes via virtual learning platforms.	rograms, noniously rs, S en, to	
4d	Other program services (Describe on Schedule O) (Expenses \$ 0 including grants of \$ 0) (Revenue	\$ 0)	

10,456,790

Total program service expenses

Checklist of Required Schedules Part IV

•			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	х	
2	Is the organization required to complete Schedule B, Schedule of Contributors See instructions?	2	X	
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		Х
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	×	
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 Part III	5	-+	Χ_
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	x	
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 Darant II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a			
	custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	-		
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	x	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Х	
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		Χ
С	Did the organization report an amount for investments—program related in Part X, line 13, that is 5% or more		İ	
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
	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		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
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 funder FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
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 and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	\dashv	<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		<u>X</u>
þ	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	146		v
4 5	foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or	14b		<u> X</u>
15	for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		Х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		х
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 See instructions	17		Χ
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		Χ
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		X
20a		20a		Χ
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Χ

Part	Checklist of Required Schedules (continued)			
•			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22_		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated			
	employees? If "Yes," complete Schedule J	23		x
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K If "No," go to line 25a	24a	Х	<u> </u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year			
	to defease any tax-exempt bonds?	24c		X
	Did the organization act as an "on behalf of' issuer for bonds outstanding at any time during the year? Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excessibenefit	24d		┝
25a	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Partit	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	100		
-	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or	İ		
	990-EZ? If "Yes," complete Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L. Part II	26		X
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key			
	employee, creator or founder, substantial contributor or employee thereof, a grant selection committee			1
	member, or to a 35% controlled entity (including an employee thereof) or family member of any of these	27		×
20	persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L,	21		÷
28	Part IV instructions, for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If	3		1
u	If"Yes," complete Schedule L, Part IV	28a		X
b	A family member of any individual described in line 28a? #Yes," complete Schedule L, Part IV	28b	Х	
С	A 35% controlled entity of one or more individuals add/or organizations described in lines 28a or 28b? If			
	If"Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-seasify contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30	 	X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		┼
32	Did the organization sell, exchange, dispose of ordinansfer more than 25% of its net assets? If "Yes," complete Schedule N, Part ill.	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	<u> </u>		 ^
55	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to anyttax-exempt or taxable entity? If "Yes," complete Schedule R, Part II,			
	III, or IV, and Part V, line 1	34		X
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled			
	entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	-	+
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related	26		
27	organization? If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		X
37	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and	<u> </u>	-	 ^
J 0	19? Note: All Form 990 filers are required to complete Schedule O	38	x	"
Pai			•	_
	Check if Schedule O contains a response or note to any line in this Part V			X
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	0		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable			
	gaming (gambling) winnings to prize winners?	1c	L	

Part	Statements Regarding Other IRS Filings and Tax Compliance (continued)			
•			Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		SET.	
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0		30,27	
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		*****	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Х	<u> </u>
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b	Х	ļ
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,			
	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	\	X
b	If "Yes," enter the name of the foreign country	72) E Selector	
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year	_5a	<u> </u>	X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	_5b	<u> </u>	X
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000 and did the		ĺ	١.,
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	<u> </u>	X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b	~ 30 c 45	\
7	Organizations that may receive deductible contributions under section 170(c)			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods		-32.	نَنْ خُنْدُ أَدُ
	and services provided to the payor?	7a	X	+
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	 ^-	+
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	7.		
_	required to file Form 8282?	7c	32	X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7e	سننكت	X
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e 7f	\vdash	\^
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	-		┼^
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7g 7h		+
h		711 *145.0°2		200
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8		
^	Sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations maintaining donor advised funds.	-3%-	-E.C.	0.0575 15.887
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a	-	-
a	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		+
b 10	Section 501(c)(7) organizations. Enter	1,200	1000 ×	137
10	Initiation fees and capital contributions included on Part VIII, line 12	No. of the second		
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	1,500		100
11	Section 501(c)(12) organizations. Enter			
''	Gross income from members or shareholders		37.	
b	Gross income from other sources Do not net amounts due or paid to other sources		***	1000
b	against amounts due or received from them)		GHA S	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	-Carried Service	1
b	if "Yes," enter the amount of tax exempt interest received or accrued during the year [12b]		77	
13	Section 501(c)(29) gualified nonprofit health insurance issuers.	1.3	7.25	1
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note: See the instructions for additional information the organization must report on Schedule O	400	132	
b	Enter the amount of reserves the organization is required to maintain by the states in which			- 25
-	the organization is licensed to issue qualified health plans	2		
С	Enter the amount of reserves on hand			1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		L^{-}
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year	15		l x
		3 2 2	1	
40	If "Yes," see instructions and file Form 4720, Schedule N	16	COMP	X
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		
	If "Yes," complete Form 4720, Schedule O	THE ME		7 2

∯Part VI

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

					==-
<u>Sect</u>	ion A. Governing Body and Management			-	
		4	2000	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	<u>1a 45</u>	2		
	If there are material differences in voting rights among members of the governing body, or				a ,
	if the governing body delegated broad authority to an executive committee or similar				
	committee, explain on Schedule O	41- 4.			
þ	Enter the number of voting members included on line 1a, above, who are independent	1b 44			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relations	nib mitu			NO.
	any other officer, director, trustee, or key employee?		2	_X	
3	Did the organization delegate control over management duties customarily performed by or under				
	supervision of officers, directors, trustees, or key employees to a management company or other-p		3	X	
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was		4		<u> X</u>
5	Did the organization become aware during the year of a significant diversion of the organization seems of the organization	ssets?	5		Χ
6	Did the organization have members or stockholders?	•	6	Х	
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	_X_	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members	ı			
	stockholders, or persons other than the governing body?		7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken	n during		2.4	
	the year by the following	•	1.0		A
а	The governing body?		8a	X	
b	Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in PartVII. Section A, who cannot be re-		8b	_X_	
9	Is there any officer, director, trustee, or key employee listed in PartVII, Section A, who cannot be re	eached		1	
	at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		_X_
Sect	ion B. Policies (This Section B requests information about policies not required by the	<u>Internal Revenue</u>	Code	<u>) </u>	
				Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		10a		_X
b	If "Yes," did the organization have written policies and procedures governing the activities of such of	chapters,			
	affiliates, and branches to ensure their operations are consistent with the organization's exempt pu	rposes	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before	re filing the form?	11a	X	and the last
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990				
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13		12a	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could officers.		12b	Х	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If '	Yes,"		.,	
	describe in Schedule O how this was done		12c	X	
13	Did the organization have a written whistleblower policy?		13	_X	
14	Did the organization have a written document retention and destruction policy?		14	X	-
15	Did the process for determining compensation of the following persons include a review and appro				
	independent persons, comparability data, and contemporaneous substantiation of the deliberation	and decision?			
a	The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization	•	15a	- X	
b	Other officers or key employees of the organization		15b	X	\$ 600 pt
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			2.5	
16a	Did the organization invest in contribute assets to, or participate in a joint venture or similar arrang	ement			
_	with a taxable entity during the year?		16a	data: tel	X Emire-4
þ	If "Yes," did the organization follow a written policy or procedure requiring the organization to evalu				
	participation in joint venture arrangements under applicable federal tax-law, and take steps to safe	guard	401		<u> </u>
	the organization's exempt status with respect to such arrangements?		16b	}	
	Let the states with which a copy of this Form 900 is required to be filed.				
17	List the states with which a copy of this Form 990 is required to be filed FL, IL, WI	and 000 T (Sastian	501/6		
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990		20 1 (C	'	
	(3)s only) available for public inspection. Indicate how you made these available. Check all that apply on the control of the	-	1		
10		plain on Schedule O			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents,	connect of interest po	льсу,		
20	and financial statements available to the public during the tax year	ooks and rocords	_		
20	State the name, address, and telephone number of the person who possesses the organization's b	708-688-8400			
	David E Burns 3300 Golf Road, Brookfield, IL 60513	700-000-0400	·		
	COCC CONTINUE, DISCUMON, IL COCTO				

Trustee

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

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

X

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

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See instructions for the order in which to list the persons above

Check this box if neither the organization nor any related organization compensated any quirent officer, director, or trustee (C) Position (F) (B) n one (D) (E) (do not check more t (A) box, unless person is both an Reportable Reportable Estimated amount Name and title Average mpensation compensation of other hours officer and a director/trustee) from related from the compensation per week organizations from the /list anv organization (W-2/1099-MISC) (W-2/1099-MISC) organization and hours for related organizations related organizations below dotted line (1) John P Grube 2 00 Chairman of the Board 0.00 2 00 (2) Fred A Krehbiel Х Honorary Chairman of the Board (3) William C Kunkler III Deputy Chairman of the Board Χ (4) Elizabeth Hamill Bramsen 2 00 Χ 0.00 Х Vice-Chairman of the Board (5) Merrick M Elfman 2 00 Vice-Chairman of the Board 0.00 Х 2 00 (6) Bert A Getz, Jr 0.00 Х Х Vice-Chairman of the Board (7) Kelley C Schueler 2 00 Х Х 0.00 Vice-Chairman of the Board (8) Kathryn Babcock Shaffe 2 00 0.00 Х Х Vice-Chairman of the Board (9) Cherryl T Thomas 2 00 0 00 Х Х Vice-Chairman of the Board 2 00 (10) Michael P Emmert Х Х 0.00 Treasurer (11) Randall G Vickery 200 0 00 Х Х Secretary 40 00 (12) Stuart D Strahl, Ph D Х X President and CEO 0.00 2 00 (13) Stuart B Abelson 0.00 Х Trustee 2 00 (14) George Barr

0 00

Pa	rt VII Section A. Officers, Directors, Tr	ustees, Key Em	ploye	es,			ghes	t Co	ompensated Em	ployees (conti	nued)		
`	(A) Name and title	(B) Average hours	box,	unles	Pos neck ss pe	erson	than is both	n an	(D) Reportable compensation	(E) Reportable compensation		(F) nated amore of other	unt
		per week (list any hours for related organizations below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	orga	mpensatior from the anization ar d organizat	nd
	Walter W Becky II	2 00	· I							7			
Truste		0 00		-	<u> </u>	┢	-	├—			+		
(16) Truste	Jay D Bergman	2 00	1							•			
	Edward McCormick Blair, Jr	2 00	$\overline{}$	+		-	1				†		
Truste		0 00	· I										
(18)	Barbara J Bradford	2 00						1					
Truste		0 00			_	ļ	ļ	_			—		
	James A Bryan					ĺ	فر						
Truste	Michael C. Conning	2 00		-							+		
Truste	Michael G Canning	0 00	- 1)				
	Kevin M. Carmody	2.00		•			-	-		-	1		
Truste		0 00	٠.		1			<u> </u>					
(22)	John A Carpenter	2 00				7	3						
Truste		0 00					<u> </u>	 _					
	Dr Bonny Chen	2 00		F	•								
Truste		2 00			-	-	<u> </u>	-	 				
	Rita Sola Cook	2 00 6 00				1							
Truste	J R Davis III	\$ 2,00	<u> </u>	\vdash	 		 	1			1		
Truste		0 00			ĺ	ŀ					ļ		
	Subtotal	1		<u> </u>			•	>	0				C
С	Total from continuation sheets to Part VII, S	Section A						>	0	()		C
d	Total (add lines 1b and 1c)							<u> </u>	0	<u> </u>	<u>) </u>	_ 	
2	Total number of individuals (including but not		sted a	abov	e) v	who	rece	ivec	I more than \$100),000 of			_
	reportable compensation from the organization	n										Yes	No
3	Did the organization list any former officer, di	ector trustee ke	v em	nlov	-00	or h	nahe	st c	omnensated			162	NU
3	employee on line 1a? If "Yes," complete Sche	dule J for such in	dıvıdı	pioy ual	CC,	01 1	ligric	31 0	ompensated		3		Χ
4	For any individual listed on line 1a, is the sum				วก ส	and	other	COL	mnensation from				
7	the organization and related organizations gre												
	individual				•		•				4		Х
5	Did any person listed on line Tatreceive or acc	crue compensatio	n fro	m a	ny L	unre	lated	org	anization or indi	vidual			
	for services rendered to the organization? If "										5		Х
Sect	on B. Independent Contractors												
1	Complete this table for your five highest comp												
	compensation from the organization Report of	ompensation for	tne c	aier	idar	yea	ar en	aing T		e organization s			
	(A) Name and business ad	dress							(B) Description of sei	rvices	(Compe	-	
								1					
-													
								匚					(
								1					(
		1				to t	a - 1	<u>L</u>					(
2	Total number of independent contractors (includes then \$100,000 of componentials from the			o the	se	ııste	ed ab	ove) C					
	more than \$100,000 of compensation from the	o organization							<u>, </u>				=

Continuation Sheet for Form 990

Page 1 of

Name of the Organization

Trustee as of 3/21

Employer identification number

Chicago Zoological Society	<u> </u>	36-2167016									
Part VII Section A	Continuation of Off		rs,	Trus	ste	es,	Key	En	nployees, and	l Highest	
	Compensated Emp	loyees	_								
(A)		(B) `	Pos	ition /		C)	that ap	nlu\	(D)	(E)	(F)
Name ar	nd title	Average hours per week (list any hours for related organizations below dotted line)	individual trustee	П	Officer	$\overline{}$	Highest compensated employee	Former	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estmated amount of other compensation from the organization and related organizations
(26) Michael F DeSantiag	0	2 00									
Trustee		0 00	1	₋	┞	ــــ	 				
(27) Gregory J DiDomeni	CO	2 00						4			
Trustee		0 00	X	<u> </u>				Į		_	
(28) Arthur J Fogel		2 00		1				`			
Trustee		0 00	X			<u> </u>			_		
(29) Sasha L Gerritson		2 00				1		-			
Trustee		0 00	X				1				
(30) Veronica Gomez		2 00							J		
Trustee		0 00			. 4	L		•			
(31) Barbara Grayson		2 00				7	5				
Trustee	·	0 00								,	
(32) Joseph A Gregoire		2 00	<u> </u>	1		1					
Trustee		0.00		d i		•					
(33) Steve Groetsema		2 00		*	†	†	†				
Trustee		0 00									
(34) Heidi Huizenga		2-00	+	- -	†	 	†				
Trustee		• 000									
(35) Kevin M Keeley	····	2.00			 	†	†				
Trustee		0.00	x								
(3C) Mally Kallan		2 00	<u> </u>	1	t			l			
Trustee		0 00	1								
(37) Kevin M Killips		2 00	†	+	\vdash	+-		\vdash			
Trustee	······	0 00	1		1						
······································		2 00	+	+	 	┼	 				
(38) Barbara Levy Kipper	·····	0 00				1					
(39) William O Lipinski	A PARTY AND ADDRESS OF THE PARTY AND ADDRESS O	2 00		\vdash	 	┼		-			
	······	0 00	1								
Trustee thru 1/21			_		+	 	 	 			
(40) Jerry Manne	·····	2 00									
Trustee		0 00		+-	+	+	1				
(41) Toni Preckwinkle	4	2 00					1				
Trustee		0 00		-	 	 -	 	ļ		-	
(42) Mark G Sander	K /	2 00					1		1		
Trustee	**	0 00		+	┼	+	+	 	-	 -	
(43) Ted Staszak		2 00									
Trustee		0 00		+	-	1	 	_		 	
(44) Patrick E Whiteside		2 00				1	1				
Trustee		0 00		+	₩	+	ļ	<u> </u>		ļ	
(45) Ryan P Williamson		2 00									
Trustee		0 00		ļ	ļ	_	ļ	<u> </u>		ļ	
(46) Benita S Romano		2 00									
Trustee as of 3/21		1 0.00	l x	1	1	1	1	l	I	I	

Form 990 (2020)

Par	VIII	Check if Schedule O cor		a response	or r	note to any line in	this Part VIII			
							(A) Total revenue	(B) - Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
9 (2)	1a	Federated campaigns		1	la	0				
Contributions, Gifts, Grants and Other Similar Amounts	b´			1	b	2,650				
שַׁ בַּ	С	Fundraising events		_1	lc	0				
TA T	d	Related organizations		1	ld	0				
ନ୍ଦ୍ର ≅	е	Government grants (contrib	utions	s) <u>1</u>	le	3,954,678				
Sin	f	All other contributions, gifts	, gran	ts, and						
ig ig	•	similar amounts not include	d abo	ve <u> </u>	1f	1,802,105		F 2 / A	X 250	
불리	g	Noncash contributions inclu	ıded ıı					ic objection	Michigania, A.	
Con		lines 1a–1f		' [1	ly	\$ 24,967		ming a subdistant of the state		
	<u>h</u>	Total. Add lines 1a-1f				Business Code	5,759,433	Profession of the		
	2-	Coneral Admissions			}		412,708	412,708		7693445 Q. D. St. (2
Š	2a	General Admissions				900099 900099	558,083			
ine in	b	Memberships Visitor Services			- 1	900099	263,712			230,267
gram Sen Revenue	d	d Admissions-Internal Attractions e Visitor Parking				900099	203,712 2736			200,207
Re	e					900099	125,452	100		125,452
Program Service Revenue	f	All other program service re	evenu	 e			43,057	3,653	26,206	13,198
<u>-</u>	a	Total. Add lines 2a–2f		-	_	D	1,403,748			
	3	Investment income (includir	ng div	idends, inter	rest	, and &	AL CO			,
.		other similar amounts)	Ū			. 🗞	27,051			-27,051
	4	Income from investment of	tax-ex	empt bond	prod	ceeds 🔷 🔊	0			
	5	Royalties					0			
				(ı) Real		(II) Personal				
	6a,	Gross rents	6a	14,1	25					
	b	Less rental expenses	6b							
	C	Rental income or (loss)	6c	14,1	25	0	State of the state	12-180/1-1200	20 (7.7.38 (V. 1.4.1.)	Year
ļ	d 7-	Net rental income or (loss)		(i) Securities	, \$	(n) other	14,125	1. On the second of the second		14,125
	7a	Gross amount from sales of assets		(i) Securite:	-	Alisaniei .				
		other than inventory		15,029,0	80	0				
<u>a</u>	· b	Less cost or other basis	<u>ا</u> ــــــــــــــــــــــــــــــــــــ	10,020,0						
Ju.		and sales expenses	7b	14,312,1	65	» . ₀				
Revenue	С	Gain or (loss)	7c	♦ ₹16,9		0				
	٦	Not gain or (loss)		- CO		>	716,915			716,915
Other	8a	Gross income from fundrais	sing 🖁							
0		events (not including \$	- 19	^						
		of contributions reported or	i line	1c)}						
		See Part IV, line 18		 	3a	0				
	b	Less direct expenses		<u></u>	3b	<u>0</u>		Charter forces	32567823454.94	- 1
	C	Net income or (loss) from to	angrai	sing events		<u> </u>	0	- 1000 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - 100 - - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000 - 1000	Gridatzka (1952)	124,174. ₁₀ 1, 22,029.
	9a	Gross income from gaming See Part IV, line 19	activ	ties	9a	0				
	h	Less direct expenses			9b	0				
	b	Net income or (loss) from g	amını	<u> </u>	<u> </u>		0	C TOTAL STORY STORY	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	C C C C C C C C C C C C C C C C C C C
•	10a	Gross sales of inventory, le				-	** 5 4 4 CONTROL OF 1			
	100	returns and allowances	00	1	0a	0				
	b	Less cost of goods sold		•	d0	0				
	С	Net income or (loss) from s	ales o	<u> </u>		>	0			
·v	<u> </u>					Business Code			E. Charles	
o e	11a				.[0			
ane	b				Ì		0			
scellaneo Revenue	С		-		.		0	 		
Miscellaneous Revenue	d	All other revenue					0	Partie Co. 23 Sec. "ALTER CORE. P. T.	The resemble of the state of	THE STREET STREET
	e	Total. Add lines 11a-11d				<u> </u>	<u> </u>		TARTHENSONAL COMMINANCEMENT	250 S.C. 7 (500 S.E.
	12	Total revenue. See instruc	tions				7 867 170	1.008.625	26.206	1 072 906

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)

Check if Schedule O contains a response or note to any line in this Part IX								
Do 1	not include amounts reported on lines 6b, 7b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
1	Grants and other assistance to domestic organizations							
•	domestic governments See Part IV, line 21	0						
2	Grants and other assistance to domestic							
	individuals See Part IV, line 22	0						
3	Grants and other assistance to foreign							
	organizations, foreign governments, and foreign							
	individuals See Part IV, lines 15 and 16	3,625	3,625	のためのよう				
4	Benefits paid to or for members	0						
5	Compensation of current officers, directors, . '		Ø					
	trustees, and key employees	583,062	247,873	158,648	176,541			
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.						
7	Other salaries and wages	4,961,648	3,949,826	713,975	297,847			
8	Pension plan accruals and contributions (include	100 55 1		04.000	40.470			
_	section 401(k) and 403(b) employer contributions)	169,554	134,977	24,399	10,178			
9	Other employee benefits	899,115	696,621	155,405	47,089			
10	Payroll taxes	414,143	329,687	59,595	24,861			
11	Fees for services (nonemployees)				- •			
a	Management	♦ 165,680		165,680				
b	Legal	8,400		8,400				
۲ C	Accounting Lobbying	17,314		17,314				
e	Professional fundraising services See Part IV, line 17		欧山洋科会 斑鹟	AND ALLEGATED				
f	Investment management fees	32,626		32,626				
g	Other (If line 11g amount exceeds 10% of line 25, column		,					
9	(A) amount, list line 11g expenses on Schedule O)	955,451	878,298	68,022	9,131			
12	Advertising and promotion	82,243		82,243				
13	Office expenses	982,519		29,601	29,732			
14	Information technology	55,226		55,226				
15	Royalties	1,846	1,846					
16	Occupancy	466,489	463,609	2,235	- 645			
17	Travel	61	61					
18	Payments of travel or entertainment expenses	· _						
	for any federal, state, or local public officials	0		1 700	4.057			
19	Conferences, conventions, and meetings	5,524			1,057			
20	Interest	52,415	52,415					
21	Payments to affiliates	2,167,444	2,048,941	107,842	10,661			
22	Depreciation, depletion, and amortization Insurance	2, 167,444	256,522	19,438				
23 24	Other expenses Itemize expenses not covered	201,072	230,322	19,400 4.888.75.888.75.	20,112			
47	above (List miscellaneous expenses on line 24e If							
	line 24e amount exceeds 10% of line 25, column							
	(A) amount, list line 24e expenses on Schedule O)							
а	Animal Food and Transport	255,609	255,609	72.5000000				
b	Revenue Bond Maintenance Fees	143,278		· -				
С	UBI Taxes	2,896	2,896					
d		0						
е	All other expenses Miscellaneous	85,595						
25	Total functional expenses. Add lines 1 through 24e	12,792,835	10,456,790	1,723,191	612,854			
26	Joint costs. Complete this line only if the							
	organization reported in column (B) joint costs				,			
	from a combined educational campaign and		,					
	fundraising solicitation Check here ► if							
	following SOP 98-2 (ASC 958-720)	<u> </u>	L		<u></u>			

Part X Balance Sheet

Chicago Zoological Society

`		Check if Schedule O contains a response or	note to any li	ne in this Part X			
					(A)		(B)
					Beginning of year		End of year
	1	Cash—non-interest-bearing			506,662	1	881,784
	2	Savings and temporary cash investments			27,671,049	2	30,255,424
	3	Pledges and grants receivable, net			4,732,606	3	3,961,573
	4	Accounts receivable, net		•	828,165	4	488,355
	5	Loans and other receivables from any current o	r former office	er, director,		N. W.	786.785.085.255
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes	se persons		ି ଓ	5	0
	6	Loans and other receivables from other disqualifi	ied persons (a	s defined		透波	
		under section 4958(f)(1)), and persons described	d in section 49	58(c)(3)(B)	0	6,	0
Assets	7	Notes and loans receivable, net				73	0
\SS	8	Inventories for sale or use			e 3 0	8	0
٩	9	Prepaid expenses and deferred charges			557,950	9	1,596,717
	10a	Land, buildings, and equipment cost or					
		other basis Complete Part VI of Schedule D	10a	287,480,314		1994	
	b	Less accumulated depreciation		<u>168,551,858</u>	121,062,347	10c	118,928,456
	11	Investments—publicly traded securities		2	56,576,000	_	57,504,000
	12	Investments—other securities See Part IV, line	Ų.	0		0	
	13	Investments—program-related See Part IV, line		0		0	
	14	Intangible assets			0	⊢ · ·	120,601
	15	Other assets See Part IV, line 11	al line 22)	STATE OF THE	118,221	15 16	120,691
	16	Total assets. Add lines 1 through 15 (must equi	V. VIII	212,053,000 3,985,397	17	213,737,000 4,633,276	
	17 18	Accounts payable and accrued expenses		3,965,597		, 4,033,270	
	19	Grants payable Deferred revenue		9,365,491	19	14,988,739	
	20	Tax-exempt bond liabilities	X	29,975,000	20	29,975,000	
•	21	Escrow or custodial account liability Complete I	Part IV of Sch	edile D	0	21	0
ģ	22	Loans and other payables to any current or form	ner officer dir	ector			
itie		trustee, key employee, creator or founder, subs	tantial contrib	utor. or 35%			
Liabilities		controlled entity or family member of any of the	se persons	•	0	22	0
Ë	23	Secured mortgages and notes payable to unrela	ated third part	ties	0	23	0
	24	Unsecured notes and loans payable to unrelate			0	24	0
	25	Other liabilities (including federal income fax, pa	ayables to rela	ated third			
		parties, and other liabilities not included on line	\$ 17–24) Con	nplete			
		Part X of Schedule D			3,723,112	_	3,347,985
	26	Total liabilities. Add lines 17 through 25			47,049,000	26	52,945,000
es		Organizations that follow FASB'ASC:958, che	eck here 🕨	X			
Š	İ	and complete lines 27, 28, 32 and 33.					
ala	27	Net assets without donor restrictions			140,959,000		136,076,000
<u>п</u>	28	Net assets with donor restrictions	-		24,045,000	28	24,716,000
S		Organizations that do not follow FASB ASC	958, check he	ere 🕨 💹			
<u> </u>		and complete lines 29 through 33.				7.55	
Net Assets or Fund Balances	29	Capital stock of trust principal, or current funds Paid-in or capital surplus, or land, building, or e			0		
set	30	Paid-in or capital surplus, or land, building, or e	quipment fund	d .	0		
As	31	Retained earnings, endowment, accumulated in	ncome, or othe	er funds	0		400 700 000
let	32	Total net assets or fund balances			165,004,000		160,792,000
~	33	Total liabilities and net assets/fund balances			212 053 000	ı 33	l 213.737.000

Pari	XI Reconciliation of Net Assets		2,0,0,0	, 49	
•	Check if Schedule O contains a response or note to any line in this Part XI			[X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		7,867	,170
2	Total expenses (must equal Part IX, column (A), line 25)	2		2,792	
3	Revenue less expenses Subtract line 2 from line 1	3	-	4,925	,665
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	16	5,004	,000
5	Net unrealized gains (losses) on investments	5		459	,355
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain on Schedule O)	9	<u> </u>	254	,310
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	16	0,792	2,000
Part	XII Financial Statements and Reporting	-			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990		-		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year weige compiled or reviewed on a separate basis, consolidated basis, or both Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both		2b	X	
С	Separate basis Consolidated basis X Both consolidated and separate basis If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	f			
	the audit, review, or compilation of its financial statements and selection of an independent accountant?		2c	Х	
	If the organization changed either its oversight process of selection process during the tax year, explain on				
	Schedule O •				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the				
	required audit or audits, explain why on Schedule Q and describe any steps taken to undergo such audits		3b		
			Form	990	(2020)

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

▶ Attach to Form 990 or Form 990-EZ.

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

Open to Public Inspection

Name of the organization	-							
Chicago Zoological Society					36-216	67016		
	Charity Status. (All or							
The organization is not a private for								
1 A church, convention of cl					A)(I).	1		
2 A school described in sec					, ()			
3 A hospital or a cooperative						tor the		
4 A medical research organ hospital's name, city, and	state							
5 An organization operated section 170(b)(1)(A)(iv).	An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II)							
6 A federal, state, or local g	overnment or governmen	ital unit described in se	ection 170	(b)(1)(A)(v).			
7 X An organization that norm described in section 170			m a gover	nmental u	init or from the gene	ral public		
8 A community trust describ	ed in section 170(b)(1)(/	A)(vi). (Complete Part	II)					
9 An agricultural research or university or a non-land university	d-grant college of agricult	ure (see instructions)	Enter the	name, city	, and state of the co	llege or		
An organization that norm receipts from activities rel support from gross invest acquired by the organizat	ated to its exempt function ment income and unrelated	ons—subject to certain ed business taxable in	exception come (les	s, and (2) s section (no more than 33 1/3 511 tax) from busine:	3% of its		
11 An organization organized	d and operated exclusivel	ly to test for public safe	ety See se	ction 509	(a)(4).			
An organization organized of one or more publicly su Check the box in lines 12	ipported organizations de	escribed in section 509	$\Theta(a)(1)$ or s	section 50)9(a)(2). See sectioi	n 509(a)(3).		
the supported organiza	rganization operated, sup ation(s) the power to regu st complete Part IV, Sect	ilarly appoint or elect a	oy its supp majority o	orted orga of the direc	anization(s), typically ctors or trustees of th	by giving ne supporting		
control or managemen organization(s) You m	rganization supervised or it of the supporting organi nust complete Part IV, S	ization vested in the sa ections A and C.	ame perso	ns that co	ntrol or manage the	supported		
c Type III functionally ii	ntegrated. A supporting of tion(s) (see instructions)	organization operated i You must complete F	n connect Part IV. Se	ctions A.	no functionally integ D. and E.	rated with,		
d Type III non-functionally	ally integrated. A suppor integrated The organizat	ting organization opera tion generally must sat	ated in cor isfy a distr	nection with	ith its supported orguirement and an att	anization(s) entiveness		
	uctions) You must comp					- 111		
	rganization received a wr , or Type III non-functiona				турет, туретт, туре	e III		
f Enter the number of suppo		my miogratoa oapporti	.g 0.ga	u1.017		0		
g Provide the following infor	mation about the support		,					
(i) Name of supported organization	(II) EIN	(III) Type of organization (described on lines 1–10 above (see instructions))	listed in you	organization or governing ment?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)		
			Yes	No				
(A)			,,,,					
(B)								
(C)								
(D)								
(E)			-					
Total				منحص				

Schedule A (Form 990 or 990-EZ) 2020
Part II Support Sched

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under
Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	tion A. Public Support							
Cale	ndar year (or fiscal year beginning in)	•	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
1 .	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		24,608,097	21,190,270	23,367,263	23,516,558	1,851,264	94,533,452
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf		15,115,544	15,178,033	14,573,917	14,677,126	3,908,169	63,452,789
3	The value of services or facilities furnished by a governmental unit to the organization without charge							0
4	Total. Add lines 1 through 3		39,723,641	36,368,303	37,941,180	38,193,684	5,759,433	157,986,241
5	The portion of total contributions by each person (other than a governmental unit or publicly							
	supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)							4,863,620
6	Public support Subtract line 5 from line 4							153,122,621
	tion B. Total Support ndar year (or fiscal year beginning in)	•	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
_			39,723,641	36,368,303	37,941,180	38,193,684		157,986,241
7 8	Amounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from		39,723,041	30,308,303			3,733,433	107,300,241
9	similar sources Net income from unrelated business	,	1,014,980	1,509,502	1,906,637	896,735	_0	5,327,854
	activities, whether or not the business is regularly carried on		,		29,847	40,865	9,196	79,908
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	. '				,		. 0
11	Total support. Add lines 7 through 10			例整				163,394,003
12	Gross receipts from related activities, etc.	c (s	ee instructions)				12	120,761,000
13	First 5 years. If the Form 990 is for the organization, check this box and stop he	ere			or fifth tax year as a	a section 501(c)(3)		▶ □
	ction C. Computation of Public				(6)		14	93 71%
	Public support percentage for 2020 (line Public support percentage from 2019 Sc				((י)		15	94 45%
	33 1/3% support test—2020. If the organization qualifier	anız	ation did not check	the box on line 13	, and line 14 is 33	1/3% or more, che	· · · · · · · · · · · · · · · · · · ·	▶ X
b	33 1/3% support test—2019. If the organization qu					is 33 1/3% or more :	e, check this	▶ 🗌
17a	10%-facts-and-circumstances test—2 10% or more, and if the organization me Part VI how the organization meets the forganization	ets	the facts-and-circui	mstances test, che	ck this box and sto	op here Explain in	1	▶ [
b	10%-facts-and-circumstances test—2 15 is 10% or more, and if the organization in Part VI how the organization meets the organization	n n	eets the facts-and-	-circumstances tes	t, check this box ai	nd stop here . Exp	laın 🕠	>
18	Private foundation. If the organization instructions	dıd	not check a box on	line 13, 16a, 16b,	17a, or 17b, check	this box and see		▶

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

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

	4) A D I I'm Comment	anny annaon ano		, p	F		
	tion A. Public Support	(-) 2016	(b) 2017	(=) 2019	(4) 2010	(e) 2020	(f) Total
	ndar year (or fiscal year beginning in)	(a) 2016	(b) 2017	(c) 2018	(d) 2019	(e) 2020	(1) 10tai
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")		'			و	/ 0
2	Gross receipts from admissions, merchandise						
	sold or services performed, or facilities						
	furnished in any activity that is related to the						0
,	organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the			_			
7	organization's benefit and either paid to						
	or expended on its behalf		,				- 0
5	The value of services or facilities		-	-			
J	furnished by a governmental unit to the						
	organization without charge						0
6	Total. Add lines 1 through 5	0	0	0	0	0	0
	Amounts included on lines 1, 2, and 3			/	,		. <u></u> -
, a	received from disqualified persons						0
h	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
С	Add lines 7a and 7b	0	0,	0	0	0	0
8	Public support (Subtract line 7c from				in isin	经上海	
	line 6)						0
Sec	tion B. Total Support						=
Cale	ndar year (or fiscal year beginning in)	(a) 2016	(b) /2017	(c) 2018	(d) 2019	(e) 2020	(f) Total
9	Amounts from line 6	0	/ 0	0	0	0	0
10a	Gross income from interest, dividends,				:		
	payments received on securities loans, rents,						
	royalties, and income from similar sources						0
b	Unrelated business taxable income (less		,				-
	section 511 taxes) from businesses						
	acquired after June 30, 1975						0
C	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business	/					
	activities not included in line 10b, whether					:	_
	or not the business is regularly carried on						0
12	Other income Do not include gain or						
	loss from the sale of capital assets					ļ	-
	(Explain in Part VI)						0
13	Total support. (Add lines 9, 10c, 11,						0
	and 12)	0	0	0	0	0	0
14	First 5 years. If the Form 990 is for the organization about the bound of the bound	anization's first, sec	cona, tnira, tourtn, (or littn tax year as	a section 50 r(c)(3)		. [
	organization, check this box and stop here					 .	
	ction C. Computation of Public Su			<u> </u>		45	0.00%
	Public support percentage for 2020 (line 8, o			(†))		15	0 00%
	Public support percentage from 2019 Sched				•	16	0 00%
	ction D. Computation of Investmen			column (f)		17	0 00%
17 40	Investment income percentage for 2020 (lin			Joiumm (1))	;	18	0 00%
18 102	Investment income percentage from 2019 S 33 1/3% support tests—2020. If the organ			14 and line 15 is m	ore than 33 1/3%		0 00 /6
154	not more than 33 1/3%, check this box and					III II II	▶
b	33 1/3% support tests—2019. If the organ					33 1/3%, and	
_	line 18 is not more than 33 1/3%, check this						▶

Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Supporting Organizations

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

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

	_	Yes	No
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Schedul	e A (Form 990 or 990-EZ) 2020 Chicago Zoological Society	36-2167016	F	age 5
Part I	V. Supporting Organizations (continued)			
•		<i>22</i> .	Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described in lines 11b ar		<u> </u>	
Ľ	11c below, the governing body of a supported organization? A family member of a person described in line 11a above?	11		
b	A 35% controlled entity of a person described in line 11a above? If "Yes" to line 11a, 11b, or 11c, pr	# Z 85		1273
С	detail in Part VI.	11		اهمشنت
Section	on B. Type I Supporting Organizations		<u>-</u>	
0000			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of or	ne or		是劉
	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's of			15.5
	directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s)	, in the second second		
	effectively operated, supervised, or controlled the organization's activities if the organization had more than one s		() digit 4	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among an adversarial control of the control o	ong the	سُلُمُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ اللَّهُ	
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year	<u> 1</u>		V . 88 4
2	Did the organization operate for the benefit of any supported organization other than the supported			
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Programme (a) "to be a supervised or controlled the supporting organization?"	art K		
	VI how providing such benefit carried out the purposes of the supported organization(s) that operated,	2		-11-32-1
Conti	supervised, or controlled the supporting organization on C. Type II Supporting Organizations			L
Secu	on C. Type it Supporting Organizations		Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the director	ors 🕵	. F. A.S.O.	ý./\$.\$
•	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or manage			25-11
	the supported organization(s)	1		
Secti	on D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			7 764
	organization's tax year, (i) a written notice describing the type and amount of support provided during the			
	year, (II) a copy of the Form 990 that was most recently filed as of the date of notification, and (III) copies of		عثثثثه أخ	لثثنت
_	organization's governing documents in effect on the date of notification, to the extent not previously provide		4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	47,3843
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the support			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part the organization maintained a close and continuous working relationship with the supported organization(اعتنف
3	By reason of the relationship described in line 2, above, did the organization's supported organizations has		- 4.55 K	12347
3	a significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard	3		
Secti	on E. Type III Functionally Integrated Supporting Organizations			
1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ar (see instruction	ons)	
а	The organization satisfied the Activities Test Complete line 2 below			
b	The organization is the parent of each of its supported organizations. Complete line 3 below			
c	The organization supported a governmental entity. Describe in Part VI how you supported a governmental	ental entity (see insti	uclions)	
2	Activities Test Answer lines 2a and 2b below.		Yes	No
2 a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes	s of		
a	the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify			
	those supported organizations and explain how these activities directly furthered their exempt purpos			1
	how the organization was responsive to those supported organizations, and how the organization determine			
	that these activities constituted substantially all of its activities	2:	a	10107111101
b	Did the activities described in line 2a, above, constitute activities that, but for the organization's involvement	ent,		- (4)
	one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain			
	Part VI the reasons for the organization's position that its supported organization(s) would have engaged			100
	these activities but for the organization's involvement	2	b	
3	Parent of Supported Organizations Answer lines 3a and 3b below.	** · · · · · · · · · · · · · · · · · ·		12 TO
а	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or			
	trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI	3:		S Japan M
b	Did the organization exercise a substantial degree of direction over the policies, programs, and activities			
	of its supported organizations? If "Ves" describe in Part VI the role played by the organization in this regi	ard 3	hΙ	1

Schedule A (Form 990 or 990-EZ) 2020 Chicago Zoological Society		36-2	2167016 Page 6
Part V Type III Non-Functionally Integrated 509(a)(3) Supporting (Orgar	nizations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			ın Part VI) See
instructions. All other Type III non-functionally integrated supporting orga			
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1	<u> </u>	
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3	4	0	0
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or collection of			
gross income or for management, conservation, or maintenance of property		,	
held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	0	0
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
Aggregate fair market value of all non-exempt-use assets (see	73		
instructions for short tax year or assets held for part of year)	200		
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d	0	0
e Discount claimed for blockage or other factors			
(explain in detail in Part VI)		(A) 14 (A) (A) (A) (A) (A) (A) (A) (A) (A) (A)	
2 Acquisition indebtedness applicable to non-exempt-use assets	2		·
3 Subtract line 2 from line 1d	3	0	0
4 Cash deemed held for exempt use Enter 0 015 of line 3 (for greater amount,			
see instructions)	4	0	_0
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5	0	0
6 Multiply line 5 by 0 035	6	0	0
7 Recoveries of prior-year distributions	7	0	0
8 Minimum Asset Amount (add line 7 to line 6)	8	0	0
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		0
2 Enter 0 85 of line 1	2		0
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3	心理學的變形的數學。	0
4 Enter greater of line 2 or line 3	4		0
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions)	6		0
7 Check here if the current year is the organization's first as a non-functional	ally int	egrated Type III supporting	organization (see
instructions)		,	

Part \	Iype III Non-Functionally Integrated 509(a)(3	Supporting Organi	zations (continued)	
Sectio	n D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	empt purposes		
	Amounts paid to perform activity that directly furthers exemp			
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpos	ations		
	Amounts paid to acquire exempt-use assets			
	Qualified set-aside amounts (prior IRS approval required—			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6	0		
8	Distributions to attentive supported organizations to which the	he organization is respor	nsive	
	(provide details in Part VI) See instructions			
9	Distributable amount for 2020 from Section C, line 6			0
10	Line 8 amount divided by line 9 amount	1		0 000
s	Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2020	(iii) Distributable Amount for 2020
1	Distributable amount for 2020 from Section C, line 6			0
2	Underdistributions, if any, for years prior to 2020			
	(reasonable cause required—explain in Part VI) See		•	
	Instructions		2000 Vinto 200 House 200 200 Contract in 200	
3	Excess distributions carryover, if any, to 2020			
a	From 2015			Marie Constitution
b	From 2016			
c	From 2017			
d	From 2018	THE CONTRACTOR STREET		
e	From 2019 '	C. The second of the second of		
<u>f</u>	Total of lines 3a through 3e	U V		
<u>g</u>	Applied to underdistributions of prior years			
<u>h</u>	Applied to 2020 distributable amount		CONTRACTOR OF THE PARTY OF THE	
<u> </u>	Carryover from 2015 not applied (see instructions)	· · · · · · · · · · · · · · · · · · ·		
	Remainder Subtract lines 3g, 3h, and 3i from line 3f Distributions for 2020 from			
~	Section D, line 7 \$ 0			
a	Applied to underdistributions of prior years		Darright (Special Course at Section 2) of U.S.	
<u>a</u> b	Applied to 2020 distributable amount			0
C	Remainder Subtract lines 4a and 4b from line 4	0		
5	Remaining underdistributions for years prior to 2020, if		TANGER OFFICE CONTRACTOR AND THE CONTRACTOR	
•	any Subtract lines 3g and 4a from line 2 For result		·	
	greater than zero, explain in Part VI See instructions		0	
6	Remaining underdistributions for 2020 Subtract lines 3h			
	and 4b from line 1. For result greater than zero, explain			
	in Part VI. See instructions			. 0
7	Excess distributions carryover to 2021. Add lines 3j		XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
	and 4c	0		
8	Breakdown of line 7			
а	Excess from 2016 0	Value Carre		
, b	Excess from 2017 0			
С	Excess from 2018 0	Province Commence		
d	Excess from 2019 0			
e	Excess from 2020 0			154:050 YESPA 2 S

Schedule A (F	orm 990 or 990-EZ) 2020 Chicago Zoological Society	36-2167016 P	age 8
Part VI	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a of III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV,	17b, Part	
	B, lines 1 and 2, Part IV, Section C, line 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V,	1c, 2a, 2b,	
	lines 2, 5, and 6 Also complete this part for any additional information (See instructions)		
	•		
		••••	
		••••	
		·	
		-	
		- 	

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

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

OMB No 1545-0047 2020

Department of the Treasury Internal Revenue Service

► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public Inspection

Employer identification number

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

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

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

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

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

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

Nam	e of organization				Employe	r identification number		
Chic	ago Zoological Society				36-2167016			
Pai	rt I-A Complete if t	he organization is exempt und	ler section 501	c) or is a section	on 527 o	rganization.		
1	Provide a description of the	ne organization's direct and indirect p	olitical campaign	activities in Part IV	(See ins	tructions for		
	definition of "political cam	paign activities")						
2		expenditures (See instructions)			▶ \$.			
3		al campaign activities (See instruction						
Pa		he organization is exempt und						
1	-	excise tax incurred by the organization			▶ \$ _			
2	Enter the amount of any e	excise tax incurred by organization m	anagers under se	ction 4955	▶ \$.			
3	If the organization incurre	d a section 4955 tax, did it file Form	4720 for this year?	•		Yes No		
4a	Was a correction made?					Yes No		
b	If "Yes," describe in Part I							
Pa	rt I-C Complete if t	he organization is exempt und	ter section 501	c), except sect	ion 501(c)(3).		
1	Enter the amount directly	expended by the filing organization f	for section 527 exe	empt function				
	activities				▶ \$			
2	Enter the amount of the fi	ling organization's funds contributed	to other organizati	ons for section		•		
	527 exempt function activ	rities			▶ \$.			
3	Total exempt function exp	enditures Add lines 1 and 2 Enter h	ere and on Form	1120-POL,				
	line 17b				▶ \$.	0		
4	Did the filing organization	file Form 1120-POL for this year?				Yes No		
5		ses and employer identification numb						
		ents. For each organization listed, en						
	the amount of political co	ntributions received that were promp	tly and directly deli	vered to a separa	te political	organization, such		
	as a separate segregated	fund or a political action committee	(PAC) II additiona	r space is needed,	provide	miormation in Part IV		
	(a) Name	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political		
				filing organizati funds If none, en		contributions received and promptly and directly		
						delivered to a separate political organization If		
						none, enter -0-		
(1)								
(2)			-		1			
								
(3)			1					
(4)								
/E\								
(5)								
(6)			1					
(5)		1	I	I				

							rage £
B		omplete if the organiz nder section 501(h)).	ation is exempt (under section 5	01(c)(3) and filed	l Form 5768 (ele	ction
A	Check ▶	if the filing organization	_				up member's
В	Check ▶	name, address, EIN, if the filing organization					
		Limits on (The term "expenditure	Lobbying Expendit s" means amounts		-	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbyin	g expenditures to influence	e public opinion (gras	ssroots lobbying)			0
b		g expenditures to influence					0
С	Total lobbyin	g expenditures (add lines	1a and 1b)			0	0
d		ot purpose expenditures					0
е		t purpose expenditures (ac				0	0
f		ntaxable amount Enter the	e amount from the fo	llowing table in bot	h		0
ſ	columns		T		4:	U WERE TO A LINE	U The state of the
		on line 1e, column (a) or (g nontaxable amou mount on line 1e	int is:		
}	Not over \$500,) but not over \$1,000,000		is 15% of the excess	over \$500,000		
		00 but not over \$1,500,000		s 10% of the excess			
ı		00 but not over \$17,000,000		s 5% of the excess of			
ı	Over \$17,000,		\$1,000,000				
g	Grassroots r	nontaxable amount (enter 2	25% of line 1f)	-		0	0
h	Subtract line	1g from line 1a If zero or	less, enter -0-			Ö	0
i		1f from line 1c If zero or I				0	0
j		amount other than zero or tax for this year?	n either line 1h or line	e 1ı, dıd the organı	zation file Form 472	0 reporting	Yes No
	(Some	e organizations that made		Period Under Sec lection do not have		of the five columns	below.
	•		ee the separate ins				
		Lo	bbying Expenditure	es During 4-Year A	veraging Period		
		year (or fiscal year eginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) Total
2a	Lobbying non	taxable amount				0	0
b	, ,	ing amount 2a, column(e))					0
С	Total lobbying	g expenditures				0	0
d	Grassroots no	ontaxable amount				0	0
е		eiling amount 2d, column (e))					0
f	Grassroots lo	bbying expenditures				0	0
						Schedule C (Fo	rm 990 or 990-EZ) 2020

-:Par	t II-B. Complete if the organization is exempt under section 501(c)(3) and has NO (election under section 501(h)).	ı illed		11 3/ 68	•	
For	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed	(2	1)		(b)	,
	ription of the lobbying activity	Yes	No	A	moun	t
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?		X			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
С	Media advertisements?		Х			
d	Mailings to members, legislators, or the public?		Х			
е	Publications, or published or broadcast statements?		X			
f	Grants to other organizations for lobbying purposes?	X	X			1,646
g h	Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	\vdash	×			1,040
i	Other activities?		X			
j	Total Add lines 1c through 1i				2	1,646
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			•
b	If "Yes," enter the amount of any tax incurred under section 4912					
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	<u> </u>			-		
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501	(c)(5),	or s	ection		
	501(c)(6).				Г.,	T
	Manage that are all (000/ or mars) dues recoved pendeductible by members?			4	Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members? Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		
2 3	Did the organization make only in-house lobbying experiorities of \$2,000 or less? Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year.	ear?		3		
	Complete if the organization is exempt under section 501(c)(4), section 501 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" answered "Yes.") Parl			3, is
1 2	Dues, assessments and similar amounts from members Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of		1			
2	political expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
С	Total		2c			C
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? Taxable amount of lobbying and political expenditures (See instructions)		5			
5 Par			_ 5 _]			
	ide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group	o list) F	Part II-	A lines	1 and	d
	ee instructions), and Part II-B, line 1. Also, complete this part for any additional information		•	,	. =	
	II-B Line 1A-J The Chicago Zoological Society is a private non profit organization that					
oper	ates Brookfield Zoo on land owned by the Forest Preserve District of Cook County Brookfield Zoo					
was	created through an act of the Illinois Legislature and the Society annually receives partial					
fund	ng from Cook County to maintain and operate the Zoo Occasionally, the laws and regulations					
unde	r which the Society was organized and is funded and operated require updating. The Society may					
advis	se and assist appropriate legislative bodies in this activity. It may also advocate the adoption					

or rejection of legislation. By virtue of a management agreement with the District, the Society is

Part IV Supplemental Information (continued)
periodically called upon to advise on matters of public policy. The Society also employs certain
staff and consultants to communicate with the State of Illinois, federal officials, county
commissioners and other government officials, to inform those parties of the activities of the
Society Additionally, as required during the year, the Society's President and designated staff
attend national and international professional group meetings and otherwise communicate with those
groups on various matters, including the expression of opinions to appropriate congressional
representatives, congressional committees or other deliberative bodies that influence public policy
concerning species in danger of extinction, environmental management, the biological sciences (and
kındred subject), and federal regulatory agency activities affecting wildlife and its management
Also, as needed from time to time, the Society may contact its members, staff and volunteers to
encourage them to express their views on pending legislation that may have a direct impact on the
Society and its conservation programs

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

Open to I

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

OMB No 1545-0047

Name	of the organization		Employer identification number
Chica	ago Zoological Society		36-2167016
Pari		Advised Funds or Other Similar F	unds or Accounts.
	Complete if the organization answer		
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		2
2	Aggregate value of contributions to (during year)		85,917
3	Aggregate value of grants from (during year)		1,788
4	Aggregate value at end of year		2,861,148
5	Did the organization inform all donors and don	or advisors in writing that the assets held	d in donor advised
	funds are the organization's property, subject to		
6	Did the organization inform all grantees, donor	rs, and donor advisors in writing that grar	nt funds can be used
	only for charitable purposes and not for the be	nefit of the donor or donor advisor, or for	
	conferring impermissible private benefit?		Yes X No
Part	Conservation Easements.		
	Complete if the organization answer	ed "Yes" on Form 990, Part IV, line 7	7
1	Purpose(s) of conservation easements held by	the organization (check all that apply)	
	Preservation of land for public use (for exam	ole, recreation or education) Preservat	tion of a historically important land area
	Protection of natural habitat	Preservat	tion of a certified historic structure
	=		
2	Preservation of open space Complete lines 2a through 2d if the organization	on hold a qualified conservation contribut	tion in the form of a conservation
2	easement on the last day of the tax year	on held a qualified conservation contribut	Held at the End of the Tax Year
•	Total number of conservation easements		2a
a	Total acreage restricted by conservation ease	ments	2b
b	Number of conservation easements on a certi		2c
c d	Number of conservation easements included i		
	historic structure listed in the National Registe		2d
3	Number of conservation easements modified,		erminated by the organization during
	the tax year ▶		, 0
4	Number of states where property subject to co	onservation easement is located	•
5	Does the organization have a written policy re		on, handling of
	violations, and enforcement of the conservation		Yes No
6	Staff and volunteer hours devoted to monitoring, in	specting, handling of violations, and enforcin	ng conservation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspec	cting, handling of violations, and enforcing co	nservation easements during the year
	▶ \$		
8	Does each conservation easement reported o	n line 2(d) above satisfy the requirements	s of section 170(h)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization rep		
	balance sheet, and include, if applicable, the t		inancial statements that describes the
	organization's accounting for conservation east		
Par	Organizations Maintaining Collect		
_	Complete if the organization answer		
1a	If the organization elected, as permitted under		
	works of art, historical treasures, or other simi		
	public service, provide in Part XIII the text of the		
þ	If the organization elected, as permitted under		
	works of art, historical treasures, or other simi		cation, or research in furtherance of
	public service, provide the following amounts	_	
	(i) Revenue included on Form 990, Part VIII,	line 1	► \$ ► \$
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of a		
	following amounts required to be reported und		S
а	Revenue included on Form 990, Part VIII, line	:1	▶ \$
b	Assets included in Form 990, Part X		<u>▶\$</u>

Par	III Organizations Maintaining	Collections of Ar	t, Histor	ical Trea	asures, or	Other	Similar Asset	s (continu	ied)
3.	Using the organization's acquisition, ac								
_	collection items (check all that apply)		•	•		J	•		
а	X Public exhibition		d X	Loan or	exchange pro	ogram			
b	X Scholarly research		e 🗏	Other					
	X Preservation for future generation	e	٠ ـــ						
C 4	Provide a description of the organization		ovolain h	ow they fu	orther the ora	anızatır	on's evemnt nurn	ose in Part	
4	XIII	on's collections and	ехріант п	Jw they tu	irtilei tile orga	ariizati	on a exempt purp	ose iii i ait	
5	During the year, did the organization s								
	assets to be sold to raise funds rather	than to be maintaine	ed as part	of the org	janization's c	ollectic	on?	Yes	X No
∤Part	IV Escrow and Custodial Arrai								
	Complete if the organization a	answered "Yes" or	n Form 9	90, Part	IV, line 9, o	r repo	rted an amoun	t on Form	
	990, Part X, line 21						anta not	<u> </u>	
1a	Is the organization an agent, trustee, or included on Form 990, Part X?	custodian or other int	ermediar	y for contr	ibutions or of	iner as	sets not	Yes	X No
b	If "Yes," explain the arrangement in Pa	art XIII and complete	the follow	vina table				163	<u>[X]</u> 110
b	ii res, explain the arrangement in ra	art Am and complete	the lollov	virig table				Amount	
С	Beginning balance					10		· · · · · · · · · · · · · · · · · · ·	
ď	Additions during the year					10	d		
e	Distributions during the year					10	e		
f	Ending balance					1	f		
2a	Did the organization include an amour	nt on Form 990, Part	X, line 2	I, for escr	ow or custodi	al acco	ount liability?	Yes	X No
b	If "Yes," explain the arrangement in Pa								同
Part									
1 2	Complete if the organization a	answered "Yes" or	n Form 9	90. Part	IV. line 10				
	Complete ii ale organization	(a) Current year	(b) Pno		(c) Two years	back	(d) Three years bac	k (e) Four	years back
1a	Beginning of year balance	24,562,000	22	,362,000	19,13	1,000	20,074,00	00 1	7,699,000
b	Contributions	3,000		172,000	32	1,000	1,573,00	00	342,000
С	Net investment earnings, gains,								
	and losses	831,000	2	998,000	3,80	2,000	-1,642,00	00	2,893,000
d	Grants or scholarships	0		0		0		0	
е	Other expenditures for facilities								
	and programs	0		927,000		19,000	834,00	00	840,000
f	Administrative expenses	13,000		43,000		3,000	40,00		20,000
g	End of year balance	25,383,000		,562,000		2,000	19,131,00	00] 2	0,074,000
2	Provide the estimated percentage of the			line 1g, co	olumn (a)) hel	d as			
а	Board designated or quasi-endowmen		3%						
b	Permanent endowment	41%							
С		6%	.07						
2-	The percentages on lines 2a, 2b, and Are there endowment funds not in the			n that are	hold and ad	ministo	ared for the		
За		possession of the of	iyanızanc	iii iiiai ai c	riela aria adi	IIIIIIISte	red for the	Г	res No
	organization by (i) Unrelated organizations								X
	(ii) Related organizations							3a(ii)	
b	If "Yes" on line 3a(ii), are the related o	rganizations listed a	s required	d on Sche	dule R?			3b	
4	Describe in Part XIII the intended uses	-							
Par			0 0		-		-	· 	
L GII	Complete if the organization		n Form 9	90. Part	IV, line 11a	See	Form 990, Par	t X, line 1	0
	Description of property	(a) Cost or otl			or other basis) Accumulated	(d) Boo	
		(investm			other)		depreciation		<u> </u>
1a	Land		0		0				
b	Buildings		0		0		0		(
С	Leasehold improvements		0		277,771,251	ļ	160,024,415	11	7,746,836
d	Equipment		0		9,648,995		8,527,443		1,121,552
e	Other		0	l	60,068	<u> </u>	0		60,068
Tota	I. Add lines 1a through 1e (Column (d)	must equal Form 99	<u>0, Part X,</u>	column (i	B), line 10c)	···		<u>_1</u> 1	8,928,456

Part VII Investments—Other Securities. Complete if the organization answered "	Vos" on Form 990	Part IV line 11h See Form 0	00 Part Y line 12
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of va Cost or end-of-year n	
(1) Financial derivatives	0		
(2) Closely held equity interests	0		
(3) Other			
(A)			
(B)			
(C)			
<u>(D)</u>			
<u>(E)</u>			
(F)			
(G)			
(H)			
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	0		
Part VIII Investments—Program Related. Complete if the organization answered "	Yes" on Form 990,	Part IV, line 11c See Form 9	90, Part X, line 13
(a) Description of investment	(b) Book value	(c) Method of va Cost or end-of-year n	
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶	0		
Part IX Other Assets.			
Complete if the organization answered '	'Yes" on Form 990,	Part IV, line 11d See Form 9	
(a) Descri	ption		(b) Book value
_(1)			···
_(2)			
(4)			
(5)			
(6)			<u> </u>
(7)			<u> </u>
			
(9)	45.1		
Total. (Column (b) must equal Form 990, Part X, col (B) In	ne 15)		(
Part X— Other Liabilities. Complete if the organization answered '	'Yes" on Form 990,	Part IV, line 11e or 11f See F	Form 990, Part X,
1. (a) Descript	tion of liability		(b) Book value
(1) Federal income taxes			(
(2) Accrued Post Retirement Benefit Obligation			1,541,973
(3) Accrued Sick Pay Benefit Obligation			1,203,805
(4) Charitable Gift Annuity Obligation			174,717
(5) Market Value of Swap Agreements			585,979
(6) Unamortized Bond Issue Costs			-158,648
(7) Other			159
(8)	,		
(9)			
Total. (Column (b) must equal Form 990, Part X, col (B) II	ne 25)	>	3,347,985
2 Liability for uncertain tax positions. In Part XIII, provide the te		organization's financial statements th	

organization's liability for uncertain tax positions under FASB ASC 740 Check here if the text of the footnote has been provided in Part XIII

Pari	Reconciliation of Revenue per Audited Financial Statements Complete if the organization answered "Yes" on Form 990, Part I			turn.	
1	Total revenue, gains, and other support per audited financial statements	v, mile	120	1	73,277,000
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				13,211,000
a	Net unrealized gains (losses) on investments	2a	459,355		
b	Donated services and use of facilities	2b	123,643		
c	Recoveries of prior year grants	2c	· · · · · ·		
d	Other (Describe in Part XIII)	2d	64,859,000		
е	Add lines 2a through 2d			2e	65 <u>,</u> 441,998
3	Subtract line 2e from line 1			3	7,835,002
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	32,626		
b	Other (Describe in Part XIII)	4b	-458		
С	Add lines 4a and 4b			4c	32,168
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)			5	7,867,170
≓Part	Reconciliation of Expenses per Audited Financial Statement Complete if the organization answered "Yes" on Form 990, Part I			Returi	n.
1	Total expenses and losses per audited financial statements			1	70,572,000
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
а	Donated services and use of facilities	2a	123,643		
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII)	2d	57,688,148		
_	Add lines 2a through 2d			2e	57,811,791
3	Subtract line 2e from line 1	1 1		3	12,760,209
4	Amounts included on Form 990, Part IX, line 25, but not on line 1	4a	32 626		
a	Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII)	4a 4b	32,626		
b	Add lines 4a and 4b	_ 10]		4c	32,626
5	Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)			5	12,792,835
	XIII Supplemental Information.				
	de the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, P	art IV, li	nes 1b and 2b, Par	t V, line	e 4, Part X, line
	t XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to pro				
	Line 5 and 6. The Society does not maintain any donor advised funds. "Other Fu				
consi	st of the Chicago Board of Trade Endangered Species Fund and the CZS Wome	n's Boar	d .		
Fund	Contributions to these funds come from donors as well as proceeds from fundra	ising			
event	s and investment income. Grants are decided by committees as described in Sch	nedule I			
At tim	es, donors who have given money to the fund may also sit on the granting comm	ıttee			
but n	o one donor may decide on the grant awards. All grants awarded must follow the				
guide	lines and processes established by CZS_CZS Board of Trustees has final approv	val of			
all Ch	icago Board of Trade Endangered Species Fund Committee recommended gran	t award	s CZS		
	gement has final approval of all CZS Women's Board recommended grant award				
	II Line 1A Animal Collections, which were acquired through breeding loans,				
	ases and contributions, are not recognized as assets on the Statement of Finance				
	on Costs to acquire collection items are recorded as decreases in unrestricted n				
accat	s in the year in which the animals are acquired. Proceeds from deaccessions are	<u>!</u>			

Part X Line 2 The Society is a not-for-profit corporation and is exempt from tax under

Part XIII Supplemental Information (continued) reflected as increases in the appropriate net asset class. The Society's animal collection consists of specimens with numerous attributes including taxonomic group, age, sex, relationship and value to other animals, endangered status and breeding potential. The Society retains a record of every animal in a permanent file. An inventory of the collection is prepared annually Professionally trained keeper staff and population managers provide daily care for the collection and determine population needs Part III Line 4 The more than 2500 ambassadors of the animal kingdom which make up the CZS collection provide our visitors a rare opportunity to see species from around the globe The collection, in connection with our education programs, provides CZS the opportunity to teach guests about animals and nature, conservation and other related topics Part V Line 4 The Society's endowment consists of different funds established to support a variety of CZS programs including conservation and research, education and outreach, care of the animal collection and grounds, and general operations. Additionally, the Society is the designated beneficiary of the interest income on a \$1 million endowment established and maintained by the Chicago Community Trust. The CCT maintains variance power over this endowment and, accordingly, the Society has not included it in its financial statements Part VI Line 1A-E The Society operates a zoological park on land owned by the Forest Preserve District of Cook County, IL which is provided to the Society at no charge. The land site of the Zoo, accordingly, is not recorded on the Society's financial statements All park improvements acquired by the Society are legally owned by the District. All park improvements acquired by the Society, including those acquired with District funds, are recorded as park improvements on the Society's financial statements. The amount in Other represents construction in progress on capital assets. Once a capital asset is complete and in use, the total amount for that project is closed out of construction in progress and transferred to park improvements

Schedule D (Form 990) 2020 Chicago Zoological Society	36-2167016	Page 5
Part XIII Supplemental Information (continued)		
the provisions of Internal Revenue Code Section 501(c)(3), except for taxes on unrelated		
business income. The Society has no liability for uncertain tax positions, therefore the		
Society does not include such a footnote as it is no longer required by generally accepted		
accounting principles		
Part XI Line 2d Due to change in accounting year, audited financial statements are for a		
15 month period Portion of the audited financial statements related to calendar year		
12/31/20 (\$64,859,000)		
Part XI Line 4b Other Adjustments - Rounding and Misc adjustments \$-458		
Part XII Line 2d Other Adjustments - portion of the 15 month audited financial statement		
expense total related to calendar year 12/31/20 (\$57,871,000), change in market value of		•••
swap agreements (\$-183,947), Rounding and Misc adjustments (\$1,095)		
		·
•		

SCHEDULE K (Form 990) Department of the Treasury Internal Revenue Service

Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI.

Go to www.irs gov/Form990 for instructions and the latest information. ► Attach to Form 990

2020

OMB No 1545-0047

Open to Public Inspection

Yes No (i) Pooled financing **Employer identification number** å No Yes No (h) On behatf of issuer Ω Yes (g) Defeased 36-2167016 Yes ŝ Construction and renovation of (f) Description of purpose 39,850,000 certain buildings and exhibits Yes ŝ ω Yes (e) Issue price 39,850,000 595,445 296,598 30,539,559 10,930,000 ş × × 2010 ⋖ Yes (d) Date issued × × 6/18/2008 112732AAC (c) CUSIP # Were the bonds issued as part of a refunding issue of tax-exempt bonds Does the organization maintain adequate books and records to support Were the bonds issued as part of a refunding issue of taxable bonds (b) Issuer EIN 36-6005807 (or, if issued prior to 2018, an advance refunding issue)? (or, if issued prior to 2018, a current refunding issue)? Has the final allocation of proceeds been made? Working capital expenditures from proceeds Credit enhancement from proceeds Capital expenditures from proceeds A Village of Brookfield, Cook County. IL Capitalized interest from proceeds Amount of bonds legally defeased Gross proceeds in reserve funds the final allocation of proceeds? Proceeds in refunding escrows Issuance costs from proceeds Year of substantial completion (a) Issuer name Other unspent proceeds Amount of bonds retired Total proceeds of issue **Bond Issues** Other spent proceeds Chicago Zoological Society **Proceeds** Name of the organization Part II Part I S 9 œ 9 13 16 က 4 6 14 5 8 ပ F

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2020

Schedule K (Form 990) 2020 Chicago Zoological Society

Page 2

36-2167016

%000 Schedule K (Form 990) 2020 ŝ ŝ Yes Yes %000 ŝ ŝ Yes Yes %00 0 ŝ ŝ Ω Ω Yes Yes 0000 %00 0 å å × × × × × × Yes Yes × × ▲ ▲ counsel to review any management or service contracts relating to the financed property? If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside Enter the percentage of financed property used in a private business use as a outside counsel to review any research agreements relating to the financed property? Are there any research agreements that may result in private business use of Enter the percentage of financed property used in a private business use by entities result of unrelated trade or business activity carried on by your organization, c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations Are there any lease arrangements that may result in private business use b If "Yes" to line 8a, enter the percentage of bond-financed property sold or Are there any management or service contracts that may result in private If "Yes" to line 2c, provide in Part VI the date the rebate computation was If "Yes" to line 3c, does the organization routinely engage bond counsel or other Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and Was the organization a partner in a partnership, or a member of an LLC, Has there been a sale or disposition of any of the bond-financed property to a nongovernmental nonqualified bonds of the issue are remediated in accordance with the another section 501(c)(3) organization, or a state or local government Has the organization established written procedures to ensure that all other than a section 501(c)(3) organization or a state or local government requirements under Regulations sections 1 141-12 and 1 145-27 Does the bond issue meet the private security or payment test? person other than a 501(c)(3) organization since the bonds were issued? which owned property financed by tax-exempt bonds? business use of bond-financed property? If "No" to line 1, did the following apply? Is the bond issue a variable rate issue? Penalty in Lieu of Arbitrage Rebate? Private Business Use sections 1 141-12 and 1 145-2? of bond-financed property? bond-financed property? Total of lines 4 and 5 Exception to rebate? Rebate not due yet? Arbitrage No rebate due? disposed of performed Part IV Part III ٩ 3a Δ ပ σ 8a 2 7 4 'n | თ က

36-2167016 Schedule K (Form 990) 2020 Chicago Zoological Society

Part IV Arbitrage (continued)

. Page 3

		4	-	מ		اد		<u>ר</u>	
4a	Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	S ₀	Yes	ž	Yes	2
	hedge with respect to the bond issue?	×	\dashv		İ				
Q	Name of provider	The Northern Trust	Trust						
ပ	Term of hedge		10 00			•			
70	Was the hedge superintegrated?	\ 	×						
Ð	Was the hedge terminated?	\	×						
5a	Were gross proceeds invested in a guaranteed investment contract (GIC)?		×						
а	Name of provider								
٥	Term of GIC	:				•			
٥	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
9	Were any gross proceeds invested beyond an available temporary period?		×						
~	Has the organization established written procedures to monitor the								
	requirements of section 148?	×							•
Part V	V Procedures To Undertake Corrective Action								
		4		В		၁		۵	
	Has the organization established written procedures to ensure that violations	Yes N	No	Yes	No	Yes	No	Yes	No
	of federal tax requirements are timely identified and corrected through the								
	voluntary closing agreement program if self-remediation isn't available under				•				
	applicable regulations?	×							
Part VI	VI Supplemental Information. Provide additional information for responses to questions on Schedule K.	ons on Sche	dule K		See instructions	ns			
Part	e 1	II, Line 1A							
art	Part IV Line 2c. Column A: The rebate calculation was performed by an independent rebate consultant in March 2013 indicating no rebate was due and advising that as long	larch 2013 ind	icating r	no rebat	e was du	e and adv	ısıng that	as long	
ıs al	as all assumptions remained true it was no longer necessary to compute excess with respect to these bonds	S							
					•				
						ļ			
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`			ļ				Sched	Schedule K (Form 990) 203	202 (066)

3	, Page 4
Part VI Supplemental Information. Provide additional information for responses to questions on Schedule K. See instructions. (continued)	
Schedule K (Form 990) 2020	90) 2020

SCHEDULE L (Form 990 or 990-EZ)

Transactions With Interested Persons

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

Attach to Form 990 or Form 990-EZ.

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

Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only)

OMB No 1545-0047

Internal Revenue Service
Name of the organization

Department of the Treasury

Chicago Zoological Society

Employer identification number

36-2167016

	Complete if the organization	on answered "Yes" on Form 990, Part IV, line 25a	a or 25b, or Form 990-EZ, Part V, line	40b	
4	(a) Name of disqualified person	(b) Relationship between disqualified person and	(c) Description of transaction	(d) Cor	rrected?
<u>'</u>	(a) Name of disqualities person	organization	(c) Description of transaction	Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958

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-EZ, Part V, line 38a or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	with organization loan		(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			То	From			Yes	No	Yes	No	Yes	No
(1)												
(2)												
(3)												
(4)												
(5)												
(6)												
(7)												
(8)	T											
(9)												
(10)												
Total					▶ \$	C)					

Part III Grants or Assistance Benefiting Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 27

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
10)				

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction		zation nues?
				Yes	No
Cynthia W Zeigler	Family Member of Key Em		employment	_	_
Frank W Zeigler	Family Member of Key Em	53,578	employment		_
				-	_
				_	
				 	├—
			<u> </u>	-	\vdash
					├
					├
V Supplemental Information.					L
er She is a family member of key emociety's established recruiting, hiring		ployment follows			
V Line 2 During Jan-Mar 2021, Fran	nk W Zeigler was employed as S	r VP Anımal			
V Line 2 During Jan-Mar 2021, France arms. He is a family member of key of			/S		
	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		
rams. He is a family member of key of	employee Cynthia W Zeigler His		/S		

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

► Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047 2020

Open to Public Inspection

Department of the Treasury Internal Revenue Service Employer identification number Name of the organization 36-2167016 Chicago Zoological Society

Form 990, Part III, Line 3 On March 11, 2020, the World Health Organization declared the
outbreak of a respiratory disease caused by a new coronavirus a pandemic. First identified in
late 2019 and known now as COVID-19, the oubreak has impacted millions of individuals
worldwide In response, many countries implemented measures to combat the outbreak that have
impacted global business operations. As a result of the pandemic, the Society has experienced
significant reductions in earned revenue through retail services, visitor services and
membership due to facility closures during 2020 and 2021
Form 990, Part VI, Section A, Line 3 Effective February 2020, all restaurant, retail and
catering operations were outsourced to a third party service provider
Form 990, Part V, Section A, Line 1A. The fiscal, general oversight, and policies of the
Society are vested in a Board of not more than 58 Trustees. As of March 31, 2021, there were
45 voting Trustess The elected Officers of the Board, the chairs of the standing committees
and such other Trustees as may be appointed by the Chairman constitute the Executive
Committee The Executive Committee has the power to transact all regular business of the
Society during the period between the regular Board meetings
Form 990, Part VI, Section A, Line 2 Cindy Zeigler, Key Employee and Frank Zeigler, Key
Employee - Family Relationship
Form 990, Part VI, Section A, Line 6 The membership of the Society is composed of up to 250
Governing Members Up to 55 of the 58 Board of Trustees are elected by the Governing Members
at their annual meeting. Governing Members are also eligible for appointment by the Society's
Chairman to serve on Board committees other than the Exectuive Committee Governing Members
are chosen by the Nominating Committee of the Board of Trustees and voted on by the full Board
of Trustees
Form 990, Part VI, Section A, Line 7A The membership of the Society is composed of up to 250
Governing Members Up to 55 of the 58 Board of Trustees are elected by the Governing Members

•	
Schedule O (Form 990 or 990-EZ) 2020 Name of the organization	Page 3 Employer identification number
`Chicago Zoological Society	36-2167016
Chairman to serve on the Board committees other than the Executive Committee Governing	
Members are chosen by the Nominating and Govenance Committee of the Board of Trustees and	i
voted on by the full Board of Trustees	
Form 990, Part VI, Section B, Line 11B The IRS Form 990 is prepared by Society's managemen	<u>t</u>
and reviewed and signed by the Society's tax advisor The Form 990 is also reviewed by the	
Audit Committee of the Board of Trustees A copy of the entire final version of the form is	
also made available to the Board of Trustees prior to filing with the IRS	
Form 990, Part VI, Section B, Line 12C Annually, a conflict of interest form is sent out to	•
all members of the Board of Trustess, Key Employees and any employee with purchasing	
authority The form covers potential conflicts through financial interests, use of Society	
services, priviledged information and representation of Society interests. It also covers	
specific disclosures required by the IRS Form 990 and the Illinois AG990IL Board of Trustees	
responses are reviewed by the Secretary of the Board and the Chief Financial Officer who	••
together determine if a conflict exists. Employee responses are reviewed by the VP Human	•
Resources and the Chief Financial Officer Any conflicts are addressed to ensure that all	
internal procedures are followed for any transactions with that individual and that all items	
requiring disclosure are properly noted. Any Board members with a conflict must abstain from	
voting on decisions involving the transaction in question. Any transactions entered into with	
interested parties follow the Society's established procurement policies and are provided at	
rates competitive with market rates	
Form 990, Part VI, Section B, Line 15A and 15B The Society's policy for approval of	
compensation arrangements with officers and certain senior employees requires review and	
approval of the compensation arrangement by the Executive Committee of the Board, excluding	·
anyone who is related to or under the control of the person involved in the arrangement. The	••
Committee relies on appropriate comparability data which indicates the types and levels of	
similar compensation and benefit packages for similar positions provided by similar	
organizations The Committee documents the basis for its determination of the reasonableness	

of compensation This process is done annually for the President, Sr VP of Operatons, Chief

Schedule O (Form 990 or 990-EZ) 2020	Page 3	3
Name of the organization	Employer identification number	_
Chicago Zoological Society	36-2167016	-
Financial Officer and the Chief Advancement Officer any year where there is an increase in		
compensation		
Form 990, Part VI, Section C, Line 19 Governing documents are available through applicable		
governmental agencies, the conflict of interest policy and financial statements are available		
upon written request to the Society		
Form 990, Part XI, Line 9 Other Changes in net assets or fund balances. Changes in Post		
Retirement Benefits not yet recognized in operations \$71,635, change in market value of swap		
agreements \$183,947, rounding and other \$-1,272		
Form 990, Part VII, Section A, Line Line 1A This Form 990 is for the short-year period of		
1/1/21-3/31/21 due to a change in accounting period. Per the IRS instructions, compensation		
amounts are not being reported and no key employees or highest compensated employees are be	eing	
listed since there is no calendar year ending with or within this short period tax year		
	,	