			PUBLIC DISCLOSURE COPY		
	EXTENDED TO FEBRUARY 15, 2024				
	n	00	Return of Organization Exempt Fron	n income i ax	OMB No. 1545-0047
Forr	n J	90	Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code		
Depa	rtment	of the Treasury	Do not enter social security numbers on this form as it may		Open to Public
Interr	al Reve	enue Service	Go to www.irs.gov/Form990 for instructions and the late		Inspection
<u>A</u> F	or th			MAR 31, 2023	
B c a	heck if	C Name of	organization	D Employer identified	cation number
	Addr				
	chan Name		OLN PARK ZOOLOGICAL SOCIETY		0.4
	chan Initia	Ŭ	usiness as	36-25124	
	returr Final		and street (or P.O. box if mail is not delivered to street address) Room/s NORTH CLARK STREET	Suite E Telephone numbe 312-742-	
	returi termi	n_			<u>59,343,197.</u>
	ated Amer	nded CUTC	own, state or province, country, and ZIP or foreign postal code AGO , IL 60614	G Gross receipts \$	
	returi Appli	·	nd address of principal officer: MEGAN ROSS	H(a) Is this a group reference for subordinates	
	tion pend		AS C ABOVE	H(b) Are all subordinates in	
<u> </u>	32.01	empt status:			list. See instructions
	Vebs		0.0RG	H(c) Group exemptio	
				Year of formation: 1959	
	nrt I	Summary			
	1	Briefly describ	e the organization's mission or most significant activities: LINCOLN	PARK ZOO IS DI	EDICATED TO
Ce	-	CONNECT	ING PEOPLE WITH NATURE BY PROVIDING A	FREE, FAMILY-	ORIENTED
nar	2	Check this bo	x if the organization discontinued its operations or disposed of n	nore than 25% of its net as	sets.
ver	3	Number of vot		3	62
ဗိ	4	Number of ind	ependent voting members of the governing body (Part VI, line 1b)		60
Activities & Governance	5		of individuals employed in calendar year 2022 (Part V, line 2a)		511
vitie	6	Total number	of volunteers (estimate if necessary)	6	302
vctiv	7 a		d business revenue from Part VIII, column (C), line 12		775,429.
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11		9,585.
				Prior Year	Current Year
Ð	8	Contributions	and grants (Part VIII, line 1h)	48,228,195.	29,293,267.
Revenue	9	0	ce revenue (Part VIII, line 2g)	10,214,548.	12,919,911.
sev.	10	Investment ind	come (Part VIII, column (A), lines 3, 4, and 7d)	4,037,086.	4,683,935.
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,679,687.	1,523,918.
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)	64,159,516.	48,421,031.
	13		nilar amounts paid (Part IX, column (A), lines 1-3)	298,958.	347,681.
	14		to or for members (Part IX, column (A), line 4)	0.	0.20,787,376.
es	15		r compensation, employee benefits (Part IX, column (A), lines 5-10)	19,180,742.	
Expenses			undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 2,628,394.	0.	0.
Ц. Д				20 506 021	10 070 751
			es (Part IX, column (A), lines 11a-11d, 11f-24e)	20,596,021. 40,075,721.	<u>18,870,751.</u> 40,005,808.
	18	-	s. Add lines 13-17 (must equal Part IX, column (A), line 25)	24,083,795.	8,415,223.
or	19	Revenue less	expenses. Subtract line 18 from line 12	Beginning of Current Year	0,415,225. End of Year
ts o		Total acceta (Dart V line 16)	237,808,256.	225,884,838.
Assets - Balanc	20 21	Total assets (F		83,200,947.	75,970,919.
Vet ∕ und	21		(Part X, line 26) fund balances. Subtract line 21 from line 20	154,607,309.	149,913,919.
Pa	nrt II				
		-	I declare that I have examined this return, including accompanying schedules and sta	atements, and to the best of my	knowledge and helief it is
			Declaration of preparer (other than officer) is based on all information of which prep		mougo and bonon, it lo
		,	, , , , , , , , , , , , , , , , , , ,	,	

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer	Date			
	MEGAN ROSS, PRESIDENT & CEO				
	Type or print name and title				
	Print/Type preparer's name Preparer's signature	Date Check PTIN			
Paid	LU ANN TRAPP LU ANN TRAPP	02/01/24 self-employed P01506476			
Preparer	Firm's name PLANTE & MORAN, PLLC	Firm's EIN 38-1357951			
Use Only	Firm's address 10 S. RIVERSIDE PLAZA, 9TH FLOOR				
	CHICAGO, IL 60606	Phone no. (312) 207-1040			
May the I	May the IRS discuss this return with the preparer shown above? See instructions X Yes No				
232001 12-1	3-22 LHA For Paperwork Reduction Act Notice, see the separate instructions	s. Form 990 (2022)			

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form	990 (2022) LINCOLN PARK ZOOLOGICAL SOCIETY 36-2512404 Page 2
Pa	rt III Statement of Program Service Accomplishments
	Check if Schedule O contains a response or note to any line in this Part III
1	Briefly describe the organization's mission: LINCOLN PARK ZOO IS DEDICATED TO CONNECTING PEOPLE WITH NATURE BY
	PROVIDING A FREE, FAMILY-ORIENTED WILDLIFE EXPERIENCE IN THE HEART OF
	CHICAGO AND BY ADVANCING THE HIGHEST QUALITY OF ANIMAL CARE,
	EDUCATION, SCIENCE AND CONSERVATION.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ? Yes X No
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code:) (Expenses \$11,217,700. including grants of \$) (Revenue \$)
Tu	BUILDINGS AND GROUNDS
	SET ON NEARLY 49 ACRES OF PARK-LIKE SETTING, LINCOLN PARK ZOO IS ONE OF
	THE FEW ZOOS IN THE NATION THAT OFFERS FREE YEAR-ROUND ADMISSION AND IS
	HOME TO MORE THAN 642 ANIMALS, MANY OF WHICH ARE ENDANGERED OR
	THREATENED, THAT RESIDE IN A VARIETY OF BUILDINGS DESIGNED TO HOUSE
	ANIMALS HABITATS, SOME OF WHICH ARE HISTORICALLY LANDMARKED.
4b	(Code:) (Expenses \$ 13,257,967. including grants of \$ 64,500.) (Revenue \$)
	ANIMAL CARE AND CONSERVATION
	LINCOLN PARK ZOO HAS ONE OF THE LARGEST ZOO-BASED CONSERVATION &
	SCIENCE DEPARTMENTS IN THE COUNTRY, WITH EXPERTS IN AREAS INCLUDING
	URBAN WILDLIFE; BEHAVIORAL, COGNITIVE, AND WELFARE RESEARCH; COMPUTER
	MODELING OF POPULATIONS AND ECOSYSTEMS; AND THE STUDY OF HORMONES AND
	DISEASE.
4c	(Code:) (Expenses \$5,547,239. including grants of \$) (Revenue \$10,899,013.)
	VISITOR SERVICES
	VISITORS COME TO ZOO GROUNDS EVERY YEAR TO DISCOVER THER WONDERS OF
	WILDLIFE IN THE HEART OF CHICAGO.
<u> </u>	
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ 5,003,466. including grants of \$ 283,181.) (Revenue \$ 2,020,898.)
4e	Total program service expenses 35,026,372. Form 990 (2022)
232002	3
	5

07530201 147228 101286

Form	ggn	(2022)	

 Form 990 (2022)
 LINCOLN
 PARK
 ZOOLOGICAL
 SOCIETY

 Part IV
 Checklist of Required Schedules
 Content of the second seco

			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	Х	
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		X
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	Х	
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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		_X
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		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
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?			v
	If "Yes," complete Schedule D, Part IV	9		<u> </u>
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments		х	
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	<u> </u>	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
-	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,	11a	х	
h	Part VI Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total	11a	- 23	
D	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	х	
c	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
Ū	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
-	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		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
	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		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	Х	
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		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	L
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any		77	
46	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	X	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	17		х
40	column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	1/		
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	18	х	
19	1c and 8a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If</i> "Yes,"		43	
13		19	х	
20a	complete Schedule G, Part III Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a		
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? <i>If</i> "Yes," <i>complete Schedule I, Parts I and II</i>	21	х	
232003	12-13-22			(2022)

232003 12-13-22

Form	990	(2022)
	330	(2022)

	·		Vac	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on		Yes	No
22		22		x
23	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III			
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If</i> "Yes," <i>complete</i>			
		23	х	
24.0	Schedule J	23	- 23	<u> </u>
240	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? <i>If</i> "Yes," <i>answer lines 24b through 24d and complete</i>			
		24a	х	
h	Schedule K. If "No," go to line 25a Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	- 23	x
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	240		<u> </u>
U	any tax-exempt bonds?	24c		x
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		X
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	2-10		<u> </u>
200	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	200		<u> </u>
5	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
		25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current	200		<u> </u>
20	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 member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, 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? <i>If</i>			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		x
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
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		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		x
35a	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 organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par				
	Check if Schedule O contains a response or note to any line in this Part V			\square
			Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	<u> </u>
232004	12-13-22 –	Form	990	(2022)

5

07530201 147228 101286

Form	990 (2022) LINCOLN PARK ZOOLOGICAL SOCIETY		36-2512	404	Р	age 5
Par	t V 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 Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	511			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax return	ns?		2b	Х	
3a				3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b	Х	
	At any time during the calendar year, did the organization have an interest in, or a signature or other a					
	financial account in a foreign country (such as a bank account, securities account, or other financial a		•	4a		x
b	If "Yes," enter the name of the foreign country		,			
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccoun	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transac			5b		x
c	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 th					
ou	any contributions that were not tax deductible as charitable contributions?			6a		x
h	If "Yes," did the organization include with every solicitation an express statement that such contributi			u		<u> </u>
D		0113 01	giits	6b		
7	Organizations that may receive deductible contributions under section 170(c).			0.0		
· ^	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vicos r	rovidad to the pover?	7a	х	
a b				7a 7b	X	<u> </u>
			virad	70	- 23	<u> </u>
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			7.		x
	to file Form 8282?			7c		
a	If "Yes," indicate the number of Forms 8282 filed during the year	7d		7.		v
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co		ť?	7e		X X
т	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra			7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo			7g		├──
n	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza			7h		-
8				-		
				8		
9	Sponsoring organizations maintaining donor advised funds.			-		
a				9a		<u> </u>
b				9b		
10	Section 501(c)(7) organizations. Enter:	1	1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:		1			
	Gross income from members or shareholders	<u>11a</u>				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
b	Enter the amount of reserves the organization is required to maintain by the states in which the		1			
	organization is licensed to issue qualified health plans	13b				
С	Enter the amount of reserves on hand	13c				<u> </u>
14a				14a		X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu			14b		┝──
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune					
	excess parachute payment(s) during the year?			15		X
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?			16		X
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities	5			1
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					
232005	12-13-22			Form	990	(2022)

Form	990 ((2022)
------	-------	--------

36-2512404 Page 6

X

 Form 990 (2022)
 LINCOLN
 PARK
 ZOOLOGICAL
 SOCIETY
 36-2512404
 Page

 Part VI
 Governance, Management, and Disclosure.
 For each "Yes" response to lines 2 through 7b below, and for a "No" response
 Page

 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	
Section A. Governing Body and Management	

	<u> </u>				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	62		103	
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.					
b	Enter the number of voting members included on line 1a, above, who are independent	1b	60			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other					
	officer, director, trustee, or key employee?					Х
3	Did the organization delegate control over management duties customarily performed by or under the		supervision			
	of officers, directors, trustees, or key employees to a management company or other person?			3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 9	90 wa	s filed?	4		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?					X
6	Did the organization have members or stockholders?					X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap	point o	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, st	tockho	lders, or			
	persons other than the governing body?			7b		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year	ar by the	e following:			
а	The governing body?			8a	X	
b	Each committee with authority to act on behalf of the governing body?			8b	Х	<u> </u>
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read					
<u></u>	organization's mailing address? If "Yes," provide the names and addresses on Schedule O			9		X
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Re	evenue	Code.)			
					Yes	No
	Did the organization have local chapters, branches, or affiliates?			10a		_X_
b	"Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?					
	and branches to ensure their operations are consistent with the organization's exempt purposes?				v	
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?			11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			40	v	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	X X	
b				12b	~	
с					v	
40	on Schedule O how this was done			12c	X X	
13	Did the organization have a written desument retention and destruction policy?			13 14	X	
14 15	Did the organization have a written document retention and destruction policy?			14	Δ	
15	Did the process for determining compensation of the following persons include a review and approva persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	a by in	dependent			
~				15a	х	
a h	The organization's CEO, Executive Director, or top management official			15a 15b	X	<u> </u>
U	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			100		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangen	nent w	ith a			
	taxable entity during the year?			16a		х
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluat					
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organ	-	-			
	exempt status with respect to such arrangements?			16b		
Sec	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed $__ extsf{IL}$					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and	nd 990	-T (section 501(c)(3)s	only)	availat	ole
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain	n on Sc	hedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, co			financ	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	oks and	l records			
	RENA SOLANO - 312-742-2348					
	2001 N. CLARK STREET, CHICAGO, IL 60614					
232006	5 12-13-22			Form	990	(2022)
	7					

Part VII	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

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 the instructions for definition of "key employee."

List al of the organization of current key employees, if any, dee the instructions for deminitor of key employees.

• 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) 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 the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)		(C)		(D)	(E)	(F)			
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		ceran	uau	Irecto	r/trus	lee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for	or di	ee			ated		organization	(W-2/1099-MISC/	from the
	related organizations	ustee	trust		ee	npens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	ual tr	tional		yolqr	st con /ee	_	1099-1120)		organizations
	line)	ndividual trustee or director	nstitutional trustee	Officer	Key employee	Highest compensated employee	Former			organizationo
(1) KEVIN BELL	40.00	_			-		-			
PRESIDENT/EMERETUS THRU 12/22	0.00	х		х				359,603.	Ο.	322,180.
(2) MEGAN ROSS	40.00									
PRESIDENT/CEO	0.00	Х		Х				454,667.	0.	38,792.
(3) RENA SOLANO	40.00									
CFO	0.00			Х				281,553.	0.	26,651.
(4) ELIZABETH GILLETTE	40.00									
SENIOR DIRECTOR, PRINCIPAL GIFTS	0.00					X		181,568.	0.	10,605.
(5) MAUREEN LEAHY	40.00									
VP OF ANIMAL CARE AND HORTICULTURE	0.00					X		160,768.	0.	23,547.
(6) LINDA LEADBITTER	40.00									
VP OF HR AND ADMINISTRATION	0.00					X		163,936.	0.	16,221.
(7) BRENDAN DALEY	40.00									
SENIOR DIRECT, PRINCIPAL GIFTS	0.00					X		163,778.	0.	11,871.
(8) DANA MURPHY	40.00									
VP OF LEARNING AND COMMUNITY ENGAGEM	0.00					X		156,279.	0.	9,480.
(9) C. JOHN MOSTOFI	1.00									•
CHAIRMAN	0.00	Х		Х				0.	0.	0.
(10) FRANCESCA M. EDWARDSON	1.00								•	•
CHAIR-ELECT	0.00	Х		Х				0.	0.	0.
(11) TRACEY E. BENFORD	1.00									-
VICE CHAIR OF FINANCE	0.00	Х		Х				0.	0.	0.
(12) CHARLES A. BARONE	1.00									•
SECRETARY	0.00	Х		Х				0.	0.	0.
(13) MANI ASHLEMAN	1.00									-
TRUSTEE	0.00	Х						0.	0.	0.
(14) KELLY POWERS BARIA	1.00									•
TRUSTEE	0.00	Х						0.	0.	0.
(15) BUCK BETTEN	1.00									•
TRUSTEE	0.00	Х						0.	0.	0.
(16) DAVID P. BOLGER	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(17) S. BIFF BOWMAN	1.00								•	<u>^</u>
	0.00	Х						0.	0.	0 .

232007 12-13-22

Form 990 (2022)

07530201 147228 101286

			ZOOLOGICAL	
Part VII Section A. Officers	Directors, Tru	ustees. Ke	ev Employees, and Hi	ahest Compen

36-2512404 Page **8**

Section A. Officers, Directors, Trus		ploy	ees,	and	High H	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)				C)	_		(D)	(E)		(F)	
Name and title	Average		not c		more	than o		Reportable	Reportable		Estimat	
	hours per week					is both pr/trus		compensation	compensation		amount	
	(list any	tor						- from the	from related organizations		othei compens	
	hours for	direc				9		organization	(W-2/1099-MIS		from th	
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	-	organiza	
	organizations	l trust	nal tru		oyee	ompe		1099-NEC)			and rela	ted
	below	Individual trustee or director	Institutional trustee	cer	Key employee	Highest compensated employee	Former				organizat	ions
	line)	Indi	Inst	Officer	Key	Emig	Бог			$ \rightarrow $		
(18) MICHAEL COLLINS	1.00											
TRUSTEE	0.00	Х						0.		0.		0.
(19) JAMES E. COMPTON	1.00											
TRUSTEE	0.00	Х						0.		0.		0.
(20) MAREILE B. CUSACK	1.00											
TRUSTEE	0.00	Х						0.		0.		0.
(21) RONALD DENARD	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
(22) BRIAN EGWELE	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
(23) POLLY ELDRINGHOFF	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
(24) JOHN R. ETTELSON	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
(25) TAREK FADEL	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
(26) RICHARD FEITLER	1.00											•
TRUSTEE	0.00	Х						0.		0.		0.
1b Subtotal								1,922,152.		0.	459,3	
c Total from continuation sheets to Part VI								0.		0.	450 3	0.
d Total (add lines 1b and 1c)								1,922,152.		• •	459,3	4/.
2 Total number of individuals (including but n	ot limited to th	ose	liste	d at	DOVE	e) wh	io re	eceived more than \$100,	000 of reportable			1 2
compensation from the organization											Yes	<u>13</u> No
2 Did the experimetion list and former officer	dive at a v to vat	I.					. I a : a			ſ	165	
3 Did the organization list any former officer,	-		-	•	-		Ŭ		•		3	x
line 1a? If "Yes," complete Schedule J for s For any individual listed on line 1a, is the su											3	
· · · · · · · · · · · · · · · · · · ·	•		•					•	•		4 X	-
and related organizations greater than \$150Did any person listed on line 1a receive or a			•								4 1	
	•							•	idal for services		5	X
rendered to the organization? <i>If "Yes," corr</i> Section B. Independent Contractors	<u>piete Scheaule</u>	<u> </u>	or st	icn j	oers	son .				<u></u>	5	1 21
1 Complete this table for your five highest co	mnensated inc	lono	nder	nt co	ontr	acto	re th	nat received more than \$	100 000 of comp		ion from	
the organization. Report compensation for	•	•							•	Shout		
(A)	the outeridar ye		- Tun	ig vi		51 111		(B)			(C)	
Name and business	address							Description of s	ervices	С	ompensatio	on
C&W SERVICES, 4002 SOLUTI		TE	R.					-				
CHICAGO, IL 60677-4000			,					ENGINEERING :	SERVICES	1	,666,3	34.
AC PAVING							_	CONSTRUCTION			<u>,</u> ,.	<u> </u>
321 E WILSON ST, BATAVIA,	IL 605	10						SERVICES		1	,347,6	17.
MONTERREY SECURITY							1				<u>/ • - / / •</u>	
2232 S BLUE ISLAND AVE, C	HICAGO.	I	L	60	60	8		SECURITY SERV	/ICES		940,0	40.
STANTON MECHANICAL						-	_	MECHANICAL				
2301 ESTES AVENUE, ELK GR	OVE. IL	6	00	07				CONTRACTOR			788,5	46.
COMMUNITY COUNSELING SERV						ON	_				,.	
AVENUE, 5TH FLOOR, NEW YC	-				_~~	1		CONSULTING SI	ERVICES		455,4	62.
2 Total number of independent contractors (ii					thos	se lis						
\$100,000 of compensation from the organiz	-			-	23	-		,				
SEE PART VII, SECTION		IN	UA	ΤI	ON	S	HE	ETS			Form 990	(2022)

232008 12-13-22

	N PARK ZOC								36-251	2404
Part VII Section A. Officers, Directors,		nplo	yee			lighe	est (· /	[
(A)	(B)			(0	-			(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
	hours	(cl	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week (list any	or				loye		the organization	organizations (W-2/1099-MISC)	compensation from the
	hours for	direct				d em		(W-2/1099-MISC)	(00-2/1033-10100)	organization
	related	ee or	stee			nsate		(112/1000 11100)		and related
	organizations	Individual trustee or director	Institutional trustee		oyee	Highest com pensated em ployee				organizations
	below	idual	tutior	er	Key employee	est c	ıer			
	line)	Indiv	Insti	Officer	Key	High	Former			
(27) DENISE STEFAN GINASCOL	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(28) CATHERINE H. GLEDHILL	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(29) LORI GOLTERMANN	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(30) LUIS GUTIERREZ	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(31) EDWARD C. HAFFNER	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(32) BARBARA A. HIGGINS	1.00									
TRUSTEE	0.00	Х						0.	0.	0.
(33) ROGER G. HILL II	1.00								0	
TRUSTEE	0.00	Х						0.	0.	0.
(34) JOHN M. HOLMES TRUSTEE	1.00	х						0.	0.	0.
(35) J. THOMAS HURVIS	1.00	Λ						0.	0.	0.
TRUSTEE	0.00	х						0.	0.	0.
(36) OSCAR JOHNSON	1.00	Λ						0.	0.	0.
TRUSTEE	0.00	х						0.	0.	0.
(37) MARCIA S. KAMINSKY	1.00									
TRUSTEE	0.00	х						0.	0.	0.
(38) KAREN STONE KAPLAN	1.00									
TRUSTEE	0.00	х						0.	0.	0.
(39) ELIZABETH A. KARLSON	1.00									
TRUSTEE	0.00	x						0.	0.	0.
(40) BARBARA MALOTT KIZZIAH	1.00								•••	
TRUSTEE	0.00	x						0.	0.	0.
(41) NEIL KAWASHIMA	1.00								•••	
TRUSTEE	0.00	x						0.	0.	0.
(42) KANDACE LENTI	1.00							• -		
TRUSTEE	0.00	х						0.	0.	0.
(43) GREG LEOS	1.00							• -		
TRUSTEE	0.00	х						0.	0.	0.
(44) PAMELA LUCINA	1.00	_ -								
TRUSTEE	0.00	х						0.	0.	0.
(45) JOHN MCLINDEN	1.00	_ -								
TRUSTEE	0.00	х						0.	0.	0.
(46) ELISABETH C. MEEKER	1.00									
TRUSTEE	0.00	х						0.	0.	0.
								.	5.	

Form 990 LINCO. Part VII Section A. Officers, Directo	LN PARK ZOC								36-251	v 4
(A)	(B)		yee:	<u>s, ar</u> (C		ngin		(D)	(E)	(F)
Name and title	Average			Posi	-			Reportable	Reportable	Estimated
Nume and the	hours	(c		all t			ly)	compensation	compensation	amount of
	per						,,	from	from related	other
	week					yee		the	organizations	compensation
	(list any	rector				emplo		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee			sated		(W-2/1099-MISC)		organization
	related organizations	Individual trustee or director	l trust		ee	npens				and related organizations
	below	dual tr	itiona	_	nploy	stcor	ar			organizations
	line)	Indivi	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
(47) RANDALL E. MEHRBERG	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(48) ELIZABETH A. MIHAS	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(49) JASON MILLER	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(50) LEE T. MOORE	1.00									
TRUSTEE	0.00	Х						0.	Ο.	0
(51) DAVID L. NICHOLS	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(52) ADAM NORDIN	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(53) BRENDA PALMS	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(54) GREGORY Y. PEARLMAN	1.00									
TRUSTEE	0.00	Х						0.	0.	0
(55) SCOT PEPPER	1.00								•	
	0.00	Х						0.	0.	0
(56) RICHARD POULTON	1.00	77						0	0	
IRUSTEE	0.00	Х						0.	0.	0
(57) MAYARI PRITZKER IRUSTEE		v						0.	0.	
	0.00	Х						0.	0.	0
(58) IAN RADOMSKI TRUSTEE	0.00	x						0.	0.	0
(59) SUSAN L. REGENSTEIN	1.00	Δ						0.	0.	0
RUSTEE	0.00	v						0.	0.	0
(60) MYRA REILLY	1.00	^						0.	0.	0
TRUSTEE	0.00	v						0.	0.	0
(61) JOHN H. RODI	1.00	Λ						0.	0.	0
IRUSTEE	0.00	v						0.	0.	0
(62) SHANNON SCHUYLER	1.00	Δ							0.	
IRUSTEE	0.00	y						0.	0.	0
(63) SUSAN SHERMAN, D.V.M.	1.00							0 •	0.	0
IRUSTEE	0.00	x						0.	0.	0
(64) JOSEPH R. TRPIK JR.	1.00								0.	0
IRUSTEE	0.00	x						0.	0.	0
(65) THOMAS F. WALKER, JR.	1.00	- 23						· · ·	• •	
IRUSTEE	0.00	x						0.	0.	0
(66) KIMBRA D. WALTER	1.00	- 23						· · ·	• •	
IRUSTEE	0.00	x						0.	0.	0
	1 0.00	17	1			I			0.	- <u> </u>

	PARK ZOC								36-251	2404
		nplo I	yee			ligh	est (
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(Cl	heck	all	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	5				lo ye		the organization	organizations	compensatior from the
	(list any	irecto				emp			(W-2/1099-MISC)	
	hours for related	or d	fee			sated		(W-2/1099-MISC)		organization and related
	organizations	ustee	trus		ee	npen				organizations
	below	ual tr	tional		yolqr	t con	_			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
67) K. JAY WEAVER	1.00	=	=		×	-	ш			
RUSTEE	0.00	х						0.	0.	0
68) SHARON ZACKFIA	1.00									
RUSTEE	0.00	x						0.	0.	0
		-								
otal to Part VII, Section A, line 1c										

232201 04-01-22

Check if Schedule O contains a response or note to any line in this Part NU (A) (C) Unrelated function revenue (D) Image of the second of t	Form	n 990		ARK	ZOOLOGICAL	SOCIETY		36-2512	404 Page 9
Image: state in the ima	Pa	rt VI	III Statement of Revenue						
Total invenue Related or sevenue Diversities during business revenue Revenue for a function of sevenue Revenue for a fu			Check if Schedule O contains a re	sponse	or note to any line i	n this Part VIII			
Bit of Formation of the Formation						• •	Related or exempt	Unrelated	Revenue excluded from tax under
Begin Membership dues Ib 169, 400, 126, 977, 126 C Chandaling events It 8, 555, 150, 126, 127, 126, 861, 127, 126, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 86, 861, 127, 127, 127, 127, 127, 127, 127, 12	<i>(</i> 0 , <i>u</i>)		- Fodewated comparison						360110113 3 12 - 3 12
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	ants	16			169 440				
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	<u>n</u> g	I I							
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	fts,	(e		1,100,577.				
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	ia Gi		•		8 555 150				
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	Sins	4							
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	utic				19 381 700				
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	d∄								
Baseline Universe Code Universe Universe Code b EVENT EXTURTE 551439 7,743,225. 7743,225. c MARGERSHIP DUBB 611710 3,155,780. 3,155,780. 7743,222. c MARGERSHIP DUBB 611710 1,441,951. 1,441,951. 1 d OTHER FROCKAKS 611710 1,441,951. 1 1 f All other program service revenue 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 g Total. Add lines 2a-2! 12,919,911. 1 1 1 h Income from investment for tax exempt bord proceeds 1 <	Son	1		914	, , _	29,293,267.			
OF BYERT REVENUE 611710 3,155,788. 3,155,788. 3,155,788. d OTHER PROGRAMS 611710 1,341,951. 1,241,951. 0 g Total. Add Ines 2a.21 611710 1,241,951. 0 0 g Total. Add Ines 2a.21 12,919,911. 0 0 0 g Total. Add Ines 2a.21 12,919,911. 0 0 0 g Total. Add Ines 2a.21 12,919,911. 0 0 0 g Total. Add Ines 2a.21 12,919,911. 0 0 0 g Income from investment of tax exempt bond proceeds 0	0.0				Business Code	, , -			
95 8 TEXP EVENT EVENT REVENT EVENT	Ð	2 :	a VISITOR SERVICES		561499	7,743,225.			7743225
g Total. Add lines 22:1 12,919,911. 3 Investment income (including dividends, interest, and other similar amounts) 2,452,376. -2,931. 4 income from investment of tax exempt bond proceeds 5 Royalties 5 5 Royalties 6 921,700. 5 6 a Gross rents 6 921,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 8 a Gross mount from sales of assets other than inventory 7 2,452,904. 325,904. 7 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 10. See 2,231,559. 22,231,559. 8 a Gross income from fundraising events 22,859. 22,859. 22,855. 9 Gross income from fundraising events 22,859. 22,855. 9 Gross income from gaming activities 49,100. 49,100. 9 Less: direct expenses 99 0. 49,100. 9 Gross sales of Inventory. <th>vic</th> <td></td> <td></td> <td></td> <td>611710</td> <td></td> <td>3,155,788.</td> <td></td> <td></td>	vic				611710		3,155,788.		
g Total. Add lines 22:1 12,919,911. 3 Investment income (including dividends, interest, and other similar amounts) 2,452,376. -2,931. 4 income from investment of tax exempt bond proceeds 5 Royalties 5 5 Royalties 6 921,700. 5 6 a Gross rents 6 921,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 8 a Gross mount from sales of assets other than inventory 7 2,452,904. 325,904. 7 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 10. See 2,231,559. 22,231,559. 8 a Gross income from fundraising events 22,859. 22,859. 22,855. 9 Gross income from fundraising events 22,859. 22,855. 9 Gross income from gaming activities 49,100. 49,100. 9 Less: direct expenses 99 0. 49,100. 9 Gross sales of Inventory. <th>Ser</th> <td>(</td> <td>c MEMBERSHIP DUES</td> <td></td> <td>611710</td> <td></td> <td></td> <td></td> <td></td>	Ser	(c MEMBERSHIP DUES		611710				
g Total. Add lines 22:1 12,919,911. 3 Investment income (including dividends, interest, and other similar amounts) 2,452,376. -2,931. 4 income from investment of tax exempt bond proceeds 5 Royalties 5 5 Royalties 6 921,700. 5 6 a Gross rents 6 921,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 8 a Gross mount from sales of assets other than inventory 7 2,452,904. 325,904. 7 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 10. See 2,231,559. 22,231,559. 8 a Gross income from fundraising events 22,859. 22,859. 22,855. 9 Gross income from fundraising events 22,859. 22,855. 9 Gross income from gaming activities 49,100. 49,100. 9 Less: direct expenses 99 0. 49,100. 9 Gross sales of Inventory. <th></th> <td>Ċ</td> <td>d OTHER PROGRAMS</td> <td></td> <td>611710</td> <td></td> <td></td> <td></td> <td></td>		Ċ	d OTHER PROGRAMS		611710				
g Total. Add lines 22:1 12,919,911. 3 Investment income (including dividends, interest, and other similar amounts) 2,452,376. -2,931. 4 income from investment of tax exempt bond proceeds 5 Royalties 5 5 Royalties 6 921,700. 5 6 a Gross rents 6 921,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 7 a Gross mount from sales of assets other than inventory 6 922,700. 5 8 a Gross mount from sales of assets other than inventory 7 2,452,904. 325,904. 7 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 10. See 2,231,559. 22,231,559. 8 a Gross income from fundraising events 22,859. 22,859. 22,855. 9 Gross income from fundraising events 22,859. 22,855. 9 Gross income from gaming activities 49,100. 49,100. 9 Less: direct expenses 99 0. 49,100. 9 Gross sales of Inventory. <th>Ba</th> <td></td> <td>e</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>	Ba		e						
g Total: Add lines 2a:21 12,919,911. 3 investment income (including dividends, interest, and other similar amounts) 2,452,376. -2,931. 4 income from investment of tax exempt bond proceeds 0 -2,931. 2455301 5 Royaties 0 0 92,700. 0 0 6 3021,700. 0 0 0 0 0 0 7 6 cross rents 6a 925,796. 0	Pr	1	f All other program service revenue						
other similar amounts) 2,452,376. -2,931. 2455300 4 income from investment of tax exempt bond proceeds 0		ç	g Total. Add lines 2a-2f			12,919,911.			
4 Income from investment of tax-exempt bond proceeds 5 Royatties		3	Investment income (including dividence	ls, intere	est, and				
S Royatties Image: constraint of the state systems of the system			other similar amounts)			2,452,376.		-2,931.	2455307.
6 a Gross rents 6a 921,700, 921,700, 6b 921,700, 925,904, b Less: rental expenses 6b 595,796, 6c 325,904, 325,904, c Rental income or (loss) 6c 325,904, 325,904, 325,904, d Net rental income or (loss) 10 Sec. 125,904, 325,904, 325,904, d Net rental income or (loss) 70 7,266,794, 72 7,231,559, 2231555 d Net agin or (loss) 72 2,231,559, 22,3155 2231555 8 Gross income from fundraising events (not including \$1186,977, of continuctarising events 22,859, 22,859, 22,855 9 Gross income from gaming activities 9b 0, 49,100, 49,100, b Less: cort or goods sold 10b 3,385,798, 10b 3,385,798, 1,126,055, 347,695, 778,360, 0 C Net income or (loss) form gaming activities 49,100, 49,100, 49,100, 49,100, 49,100, 0 C <t< td=""><th></th><td>4</td><td>Income from investment of tax-exemp</td><td>t bond p</td><td>roceeds</td><td></td><td></td><td></td><td></td></t<>		4	Income from investment of tax-exemp	t bond p	roceeds				
6 a Gross rents 6a 921,700. b Less: rental expenses 6b 595,796. c Rental income or (loss) 6c 325,904. 325,904. d Net rental income or (loss) (l) Securities (l) Other a Gross anount from sales of the basis and sales expenses 7b 7,266,794. 2,231,559. c Gain or (loss) 7c 2,231,559. 2,231,559. 8 a Gross income from fundraising events (not including \$\frac{1,186,977.of}{2,231,559.d}\$ 2,231,559. 2231555 8 a Gross income from fundraising events (not including \$\frac{1,186,977.of}{2,000000000000000000000000000000000000		5							
b Less: rental expenses 6b 595,796. 325,904. c Rental income or (loss)					(ii) Personal				
c Rental income or (loss) 6c 325,904. 325,904. 325,904. d Net rental income or (loss) 0 325,904. 325,904. 325,904. 7 a Gross amount from sales of a assets other than inventory b Less: cost or other basis and sales expenses 1 0, 94.98,353. 1 7 a Gross income from fundraising events including \$ 7,266,794. 1 1 7 z Z 31,559. 2.231,559. 2.231,559. 2.231,559. 8 a Gross income from fundraising events including \$ 1,186,977. of contributions reported on line 1c). See Part IV, line 18 8a 822,692. 1 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. 22,855 9 a Gross sales of inventory, less returns and allowances 9b 0. 49,100. 49,100 10 a Gross sales of inventory, a All other revenue e total invences 10a 3,385,798. 10b 2,259,743. c 11 <		6 a							
d Net rental income or (loss) 325,904. 325,904. 7 a Gross amount from sales of assist other than inventory i) 0.0 Securities (ii) Other assist other than inventory iii) b Less: cost or there thasis and sales expenses 7b 7,266,794. iiii) 2,231,559. c Gain or (loss) 7,266,794. iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		ł							
7 a Gross amount from sales of assets other than inventory 0) Securities (ii) Other 7a Gross action of ther basis and sales expenses 7b 7,266,794. c Gain or (loss) 7c 2,231,559. d Net gain or (loss) 7c 2,231,559. a Gross income from fundraising events (not including \$1.186,977. of contributions reported on line tc). See 8a 9 a Gross income from gaming activities. 8b 799,933. 9 a Gross income from gaming activities. 9a 49,100. 9 a Gross sincome from gaming activities. 9a 49,100. 9 a Gross sincome from gaming activities. 9b 0. 10 a Gross allos of inventory, less returns and allowances 10a 3,385,798. b Less: cost of goods sold 10a 3,385,798. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 11 a		0	· · ·	5,904.					
assets other than inventory b Ta 9,498,353. Tb Ta Ta 7,266,794. Tb Ta Ta 7,266,794. Tb Ta Ta 7,266,794. Tb Ta Ta 7,266,794. Tb Ta Ta <thta< th=""> Ta <thta< th=""> <thta< th=""></thta<></thta<></thta<>				<u></u>		325,904.	325,904.		
Bit Less: cost or other basis and sales expenses Tb 7, 266, 794. (2, 231, 559.) c Gain or (loss) (2, 231, 559.) 2231, 559.) d Net gain or (loss) (2, 231, 559.) 2231, 559.) 8 Gross income from fundraising events (not including \$1, 186, 977 of contributions reported on line 1c). See Part IV, line 18 8a 822, 692. b Less: direct expenses 8b 799, 833. 22, 859. 9 Gross income from gaming activities. See Part IV, line 19 9a 49, 100. b Less: direct expenses 9b 0. 10 Gross sales of inventory, less returns and allowances 10a 3, 385, 798. b Less: cost of goods sold 10b 2, 259, 743. c Net income or (loss) from sales of inventory 1, 126, 055. 347, 695. 778, 360. gametric Metiness Code 0 0 0 0 11 A A A 0 0 0 c Net income or (loss) from sales of inventory 1, 126, 055. 347, 695. 778, 360.		7 8			(II) Other				
Bit Tb 7, 266, 794. C <thc< th=""> <thc< th=""> <thc< th=""> <!--</td--><th></th><td></td><td></td><td>8,353.</td><td></td><td></td><td></td><td></td><td></td></thc<></thc<></thc<>				8,353.					
E Gain or (loss) To 2,231,559. 2231555 8 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 1c). See Part IV, line 18 8 a 822,692. 8 a 8 a 8 a 2,231,559. 2231555 9 a Gross income from fundraising events 8 a 822,692. 8 a 8 a 22,859.	~	1		6 704					
d Net gain or (loss) 2,231,555 2231555 8 a Gross income from fundraising events (not including \$ 1,186,977. of contributions reported on line 1c). See a 822,692. b Less: direct expenses Bb 799,833. 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. 9b 0. 9 a Gross sincome from gaming activities. See Part IV, line 19 9b 0. 49,100. 49,100. 9 a Gross since or (loss) from gaming activities. See Part IV, line 19 9b 0. 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. 9 a Gross sales of inventory 1,126,055. 347,695. 778,360. 9 a C Int a	nue								
8 a Gross income from fundraising events (not including \$1, 186, 977. of contributions reported on line 1c). See Part IV, line 18			· · · · · · · · · · · · · · · · · · ·			2 231 559			2231559
contributions reported on line 1c). See Part IV, line 18 Ba 822,692. b Less: direct expenses Bb 799,833. c Net income or (loss) from fundraising events 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. b Less: direct expenses 9b 0. 49,100. c Net income or (loss) from gaming activities 49,100. 49,100. b Less: cost of goods sold 10a 3,385,798. 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. ganget Int a Ess: cost of goods sold Int a Int a Int a c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. ganget Int a Int a Int a Int a Int a Int a b Int a Int a Int a Int a Int a Int a c Int a Int a Int a I	r B		• · ·			2,231,335.			2231333
contributions reported on line 1c). See Part IV, line 18 Ba 822,692. b Less: direct expenses Bb 799,833. c Net income or (loss) from fundraising events 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. b Less: direct expenses 9b 0. 49,100. c Net income or (loss) from gaming activities 49,100. 49,100. b Less: cost of goods sold 10a 3,385,798. 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. ganget Int a Ess: cost of goods sold Int a Int a Int a c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. ganget Int a Int a Int a Int a Int a Int a b Int a Int a Int a Int a Int a Int a c Int a Int a Int a I	the	0 0							
Part IV, line 18 Ba 822,692. b Less: direct expenses 8b 799,833. 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. 49,100. 49,100. b Less: direct expenses 9b 0. 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. 2259,743. b Less: cost of goods sold 10b 2,259,743. 1,126,055. 347,695. 778,360. start in come or (loss) from sales of inventory 1,126,055. 347,695. 778,360. 100 c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. c d All other revenue 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	0								
b Less: direct expenses Bb 799,833. c Net income or (loss) from fundraising events 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. b Less: direct expenses 9b 0. c Net income or (loss) from gaming activities 49,100. b Less: direct expenses 9b 0. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. b Less: cost of goods sold 10b 2,259,743. 22,055. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. source d d d d d c d d d d d c d d d d d d d d d d d d d d d d d d d d d			• • •		822,692.				
c Net income or (loss) from fundraising events 22,859. 22,859. 9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. b Less: direct expenses 9b 0. c Net income or (loss) from gaming activities 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. b Less: cost of goods sold 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. til a Business Code 10a 10a 10a c Intervenue Intervenue Intervenue 10a c Intervenue Intervenue Intervenue 10a 10a 11 a Intervenue Intervenue Intervenue 10a		ł							
9 a Gross income from gaming activities. See Part IV, line 19 9a 49,100. 9b 0. 9a 49,100. 9b 0. b Less: direct expenses 9b 0. c Net income or (loss) from gaming activities and allowances 49,100. b Less: cost of goods sold 10a 3,385,798. 10b 2,259,743. 49,100. c Net income or (loss) from sales of inventory 1,126,055. 347,695. c Net income or (loss) from sales of inventory 1,126,055. 347,695. t I a b Business Code 10a 1,126,055. c All other revenue 10a 1,126,055. 347,695. c Total revenue. See instructions 48,421,031. 5,850,285. 775,429.						22,859.			22,859.
Part IV, line 19 ga 49,100. b Less: direct expenses 9b 0. c Net income or (loss) from gaming activities 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. 49,100. b Less: cost of goods sold 10b 2,259,743. 1,126,055. 347,695. 778,360. some c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. some c Essence Image: Code Image: Code Image: Code Image: Code 11 a Image: Code		9 a							
b Less: direct expenses 9b 0. c Net income or (loss) from gaming activities 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. b Less: cost of goods sold 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. s Business Code 10 10 10 10 10 c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. s Image: Colored					49,100.				
c Net income or (loss) from gaming activities 49,100. 49,100. 10 a Gross sales of inventory, less returns and allowances 10a 3,385,798. b Less: cost of goods sold 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. s Business Code 10a 10a 10a 10a 10a s Image: Cost of goods sold Image: Cost of goods sold 10b 2,259,743. 1,126,055. 347,695. 778,360. s Image: Cost of goods sold		I							
and allowances 10a 3,385,798. b Less: cost of goods sold 10b 2,259,743. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. 11 a						49,100.			49,100.
b Less: cost of goods sold 10b 2,259,743. 1,126,055. 347,695. 778,360. c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. source Business Code Image: Code Image: Code Image: Code Image: Code t Image: Code <		10 a	a Gross sales of inventory, less returns						
c Net income or (loss) from sales of inventory 1,126,055. 347,695. 778,360. 11 a			and allowances	10a					
11 a Business Code b Business Code c Image: Comparison of the second		ł	b Less: cost of goods sold	10b	2,259,743.				
11 a		(c Net income or (loss) from sales of inve	ntory		1,126,055.	347,695.	778,360.	
e Total. Add lines 11a-11d 48,421,031. 5,850,285. 775,429. 12502050 12 Total revenue. See instructions 48,421,031. 5,850,285. 775,429. 12502050	s				Business Code				
e Total. Add lines 11a-11d 48,421,031. 5,850,285. 775,429. 12502050 12 Total revenue. See instructions 48,421,031. 5,850,285. 775,429. 12502050	noa	11 a	a						
e Total. Add lines 11a-11d 48,421,031. 5,850,285. 775,429. 12502050 12 Total revenue. See instructions 48,421,031. 5,850,285. 775,429. 12502050	lan	I							
e Total. Add lines 11a-11d 48,421,031. 5,850,285. 775,429. 12502050 12 Total revenue. See instructions 48,421,031. 5,850,285. 775,429. 12502050	Scel	(
12 Total revenue. See instructions 48,421,031. 5,850,285. 775,429. 12502050	Mis								
						48 421 021	5 850 285	775 420	12502050
	00000			<u></u>		10,121,031.	,000,200.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Form 990 (2022

13

LINCOLN PARK ZOOLOGICAL SOCIETY Part IX Statement of Functional Expenses

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

	Check if Schedule O contains a respon	se or note to any line in	this Part IX		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	283,181.	283,181.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign		64 500		
	individuals. See Part IV, lines 15 and 16	64,500.	64,500.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	1 105 014			470 000
	trustees, and key employees	1,125,014.	351,739.	293,375.	479,900
6	Compensation not included above to disqualified				
	persons (as defined under section $4958(f)(1)$) and				
_	persons described in section 4958(c)(3)(B)	16 170 546	14,394,384.	944,337.	840,825
7	Other salaries and wages	10,179,540.	14,394,304.	944,337.	040,023
8	Pension plan accruals and contributions (include	707,043.	615,355.	40,370.	51,318,
9	section 401(k) and 403(b) employer contributions) Other employee benefits	1,517,398.		76,484.	105,622
9		1,258,375.	1,095,191.	71,850.	91,334
11	Payroll taxes Fees for services (nonemployees):	1,230,375.	1,000,1010	/1,050.	J1,334
'' a					
a b		94,849.		94,849.	
c	•	107,365.		107,365.	
d		20770001			
e					
f	Investment management fees	111,104.		111,104.	
	Other. (If line 11g amount exceeds 10% of line 25,	/_		/	
3	column (A), amount, list line 11g expenses on Sch 0.)	3,145,517.	2,371,794.	231,702.	542,021.
12	Advertising and promotion	91,930.	91,311.	619.	
13	Office expenses	717,949.	588,056.	19,128.	110,765.
14	Information technology	782,653.	561,374.	106,078.	115,201.
15	Royalties				
16	Occupancy	2,382,088.	2,376,021.	5,867.	200.
17	Travel	181,709.	170,142.	5,862.	5,705.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	525,990.	350,680.	131,556.	43,754
20	Interest	2,232,523.	2,232,523.		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	565,252.	546,094.	18,745.	413
23	Insurance	516,523.	455,878.	46,572.	14,073
24	Other expenses. Itemize expenses not covered				
	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		927.		927.	1.64 .0.4
b		2,846,804.	2,642,637.	42,786.	161,381.
С		1,859,147.	1,859,147.		
d		1,666,334.	1,666,334.	1 4 6 6	
	All other expenses	1,042,087.	974,739.	1,466.	65,882
25	Total functional expenses. Add lines 1 through 24e	40,005,808.	35,026,372.	2,351,042.	2,628,394.
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)				
	Check here if following SOP 98-2 (ASC 958-720)				Form 990 (2022

14

33

Total liabilities and net assets/fund balances

15 2022.05040 LINCOLN PARK ZOOLOGICAL S 101286_1

237,808,256. 33 225,884,838.

Form **990** (2022)

	• • •				
		Check if Schedule O contains a response or note to any line in this Part X			
			(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	16,930,766.	1	2,932,084.
	2	Savings and temporary cash investments	24,850,787.	2	37,168,386.
	3	Pledges and grants receivable, net	12,927,828.	3	13,696,007.
	4	Accounts receivable, net	1,972,864.	4	297,690.
	5	Loans and other receivables from 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		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	48,925.	8	54,598.
Ä	9	Prepaid expenses and deferred charges	1,108,718.	9	405,156.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 7,855,626.			
	b	Less: accumulated depreciation 10b 4,631,239.	2,578,176.	10c	3,224,387.
	11	Investments - publicly traded securities	119,087,024.	11	113,950,422.
	12	Investments - other securities. See Part IV, line 11	58,303,168.	12	54,156,108.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11		15	
	16	Total assets. Add lines 1 through 15 (must equal line 33)	237,808,256.	16	225,884,838.
	17	Accounts payable and accrued expenses	11,155,945.	17	4,978,520.
	18	Grants payable	470 007	18	(20, 200
	19	Deferred revenue	479,927.	19	638,399.
	20	Tax-exempt bond liabilities	70,300,900.	20	70,354,000.
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
ilit		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities		controlled entity or family member of any of these persons		22	
_	23	Secured mortgages and notes payable to unrelated third parties	1,264,175.	23 24	0.
	24 25	Unsecured notes and loans payable to unrelated third parties	1,204,175.	24	<u></u>
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D		25	
	26		83,200,947.	26	75,970,919.
	20	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, check here X	00720079170	20	13737073131
es		and complete lines 27, 28, 32, and 33.			
Net Assets or Fund Balances	27	Net assets without donor restrictions	67,277,607.	27	66,330,365.
3alɛ	28	Net assets with donor restrictions	87,329,702.	28	83,583,554.
Π		Organizations that do not follow FASB ASC 958, check here	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Бu		and complete lines 29 through 33.			
p	29	Capital stock or trust principal, or current funds		29	
iets	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
Ass	31	Retained earnings, endowment, accumulated income, or other funds		31	
let.	32	Total net assets or fund balances	154,607,309.	32	149,913,919.
2	33	Total liabilities and net assets/fund balances	237,808,256.		225,884,838.

Part X Balance Sheet

	990 (2022) LINCOLN PARK ZOOLOGICAL SOCIETY	36-	<u>2512</u>	404	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI		<u></u>			
1	Total revenue (must equal Part VIII, column (A), line 12)	1	48	3,42	1,0	<u>31.</u>
2	Total expenses (must equal Part IX, column (A), line 25)	2	40),00	5,8	08.
3	Revenue less expenses. Subtract line 2 from line 1	3		3,41		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,60		
5	Net unrealized gains (losses) on investments	5	-13	3,10	8,6	13.
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				0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	149	91	3,9:	<u>19.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII	<u></u>	<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
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 were 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?			2b	Х	
	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:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule O.				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a	Х	
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audi	t			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits		<u></u>	3b	Х	1
					000	

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

l	OMB No. 1545-0047
	2022
	Open to Public Inspection

Name of the organization

Name	Name of the organization Employer identification number								
	LINCOLN PARK ZOOLOGICAL SOCIETY 36-2512404								
Part	Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.								
The org	anization is not a private found	lation because it is: (F	For lines 1 through 12, c	heck only o	one box.)				
1	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).								
2	A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
3	A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).			
4	A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
	city, and state:								
5	An organization operated for	or the benefit of a col	lege or university owned	l or operate	ed by a go	overnmental u	nit describe	ed in	
	section 170(b)(1)(A)(iv). (0	Complete Part II.)							
6	A federal, state, or local go	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).			
7 Σ	An organization that norma	ally receives a substar	ntial part of its support fi	om a gove	ernmental	unit or from th	ne general p	oublic described in	
_	section 170(b)(1)(A)(vi). (C	complete Part II.)							
8 _	A community trust describe	ed in section 170(b)((1)(A)(vi). (Complete Par	t II.)					
9 🗌	An agricultural research org	ganization described	in section 170(b)(1)(A)(ix) operate	ed in conju	inction with a	land-grant	college	
	or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	or	
_	university:								
10	An organization that norma								
	activities related to its exen								
	income and unrelated busir		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	Ifter June 30, 1975.	
_	See section 509(a)(2). (Co	-							
	An organization organized		•	•					
12 🗌	_ An organization organized		-	-			•		
	more publicly supported or	-						Sheck the box on	
-	lines 12a through 12d that	• •					-	aivin a	
а	Type I. A supporting orga		-	•	-				
	the supported organization			majonty o	i the alrec	cors or truste	es of the st	ipporting	
h	organization. You must o	-		ion with it	oupporte	d organizatio	n(a) by bay	ina	
b	Type II. A supporting org control or management of	-				-		•	
	organization(s). You mus			ame perso	ns that co	ntioi or mana	Je i le supp	Joned	
с	Type III functionally inte	-		in connect	ion with a	and functional	lv integrate	od with	
U I	its supported organizatio						ly integrate		
d	Type III non-functionally		-				ted organiz	zation(s)	
	that is not functionally int						-		
	requirement (see instruct			•		-			
е	Check this box if the orga		-				II. Type III		
	functionally integrated, or					, , , , , , , , , , , , , , , , , , ,	<i>,</i> ,		
fΕ	nter the number of supported of	organizations		0 0					
g F	Provide the following information							-	
	(i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of	,	(vi) Amount of other	
	organization		above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)	
Total									
Total								1	

LINCOLN PARK ZOOLOGICAL SOCIETY

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	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total	
1	Gifts, grants, contributions, and							
	membership fees received. (Do not							
	include any "unusual grants.")	26132090.	36998266.	21643657.	48228195.	29293267.	162295475	
2	Tax revenues levied for the organ-							
	ization's benefit and either paid to							
	or expended on its behalf							
3	The value of services or facilities							
	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	<u>26132090.</u>	36998266.	21643657.	48228195.	29293267.	<u>162295475</u>	
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)						19081272.	
6	Public support. Subtract line 5 from line 4.						143214203	
	ction B. Total Support	1		1		1		
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019		(d) 2021	(e) 2022	(f) Total	
	Amounts from line 4	20132090.	36998266.	21643657.	48228195.	29293267.	162295475	
8	Gross income from interest,							
	dividends, payments received on							
	securities loans, rents, royalties,	2040050	2101000	1000001	0010106	2284086	1 4 5 0 3 5 0 5	
	and income from similar sources	3242958.	3181876.	1876751.	2918136.	3374076.	14593797.	
9	Net income from unrelated business							
	activities, whether or not the		0 405		00.460	0.400		
	business is regularly carried on	23,236.	9,485.		23,462.	9,488.	65,671.	
10	Other income. Do not include gain							
	or loss from the sale of capital	200 100		20 025	1040100	071 700	2024746	
	assets (Explain in Part VI.)	398,169.	594,600.	20,025.	1040160.			
	Total support. Add lines 7 through 10		<u> </u>				179879689 ,819,831.	
12		·	,			·	,019,031.	
13	First 5 years. If the Form 990 is for th	-						
Sec	organization, check this box and stop ction C. Computation of Publi	o nere Ic Support Per	centade				·····	
				column (f))		14	79.62 %	
	Public support percentage for 2022 (I Public support percentage from 2021					15	<u>79.62 %</u> 79.95 %	
	33 1/3% support test - 2022. If the d							
100	stop here. The organization qualifies						V	
h	33 1/3% support test - 2021. If the o		-					
	and stop here. The organization qual							
17a			• •					
	17a 10% -facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization							
	meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization							
b	10% -facts-and-circumstances test	•	•		•			
~	more, and if the organization meets th	-						
	organization meets the facts-and-circi							
18	Private foundation. If the organization		•				s	
							(Form 990) 2022	

232022 12-09-22

 Gifts, grants, contributions, and membership fees received. (Do not 						
include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5					Ļ	\perp
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						
Section B. Total Support		1	1			
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	
9 Amounts from line 6					<u> </u>	_
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
b Unrelated business taxable income						
(less section 511 taxes) from businesses						
acquired after June 30, 1975					<u> </u>	
c Add lines 10a and 10b						\square
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First 5 years. If the Form 990 is for th	e organization's fi	rst, second, third,	fourth, or fifth tax y	vear as a section 5	501(c)(3) organiza	tion,
check this box and stop here					<u></u>	
Section C. Computation of Publi	c Support Per	rcentage				
15 Public support percentage for 2022 (I	ne 8, column (f), d	livided by line 13, o	column (f))		15	
16 Public support percentage from 2021					16	
Section D. Computation of Inves	tment Income	e Percentage				
17 Investment income percentage for 20	22 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	

18 Investment income percentage from 2021 Schedule A, Part III, line 17

more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization

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

19a 33 1/3% support tests - 2022. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not

b 33 1/3% support tests - 2021. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization

19

LINCOLN PARK ZOOLOGICAL SOCIETY Part III Support Schedule for Organizations Described in Section 509(a)(2)

(a) 2018

(b) 2019

(e) 2022

(f) Total

(f) Total

% %

%

%

Schedule A (Form 990) 2022

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

(c) 2020

<u>(d) 20</u>21

07530201 147228 101286

232023 12-09-22

Schedule A (Form 990) 2022

Calendar year (or fiscal year beginning in)

2022.05040 LINCOLN PARK ZOOLOGICAL S 101286_1

LINCOLN PARK ZOOLOGICAL SOCIETY

Yes No

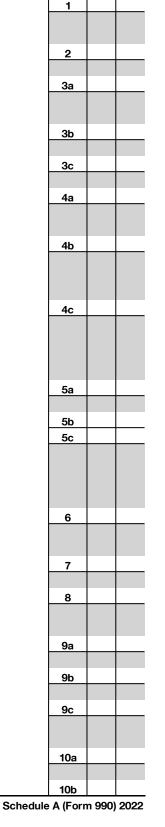
Part IV | Supporting Organizations

(Complete only if you checked a box on line 12 of 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. All Supporting Organizations

- 1 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.
- 2 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.
- **b** 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.
- **b** 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).
- **b 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?
- 6 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.**
- 7 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).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If "Yes," complete Part I of Schedule L (Form 990).*
- **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.**
- **b** Did one or more disqualified persons (as defined on 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 on 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.)

232024 12-09-22



Schedule A (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY Part IV Supporting Organizations (continued)

No

1 41			
		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 on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI. 11c		
Sec	on B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. <i>If the organization had more than one supported</i> organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the		
	supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
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		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,		
	supervised, or controlled the supporting organization.		
Sec	on C. Type II Supporting Organizations		

			Yes	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	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 managed			
	the supported organization(s).	1		

Section D.	All Typ	e 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			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have 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		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method	d that the organization used	d to satisfy the Integral Part	t Test during the vear	(see instructions)
•	Check the DOX heat to the method	<i>inal line organization use</i>		i col uunny inc year	1000 1100 000

- a 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 er	ntity (see instruction <u>s).</u>
---	--	---	-------------------------	---------------------------------	-----------------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of 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 purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

a 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.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.* 232025 12-09-22

 Yes
 No

 2a
 ...

 2a
 ...

 2b
 ...

 3a
 ...

 3b
 ...

Schedule A (Form 990) 2022

07530201 147228 101286

2022.05040 LINCOLN PARK ZOOLOGICAL S 101286_1

Schedule A	(Form 990) 2022 (
------------	-----------	----------

Schedule A	(Form 990)	2022	LINC	OLN PA	ARK	ZOOLO	GICAL	SOCIETY	2
Part V	Type III	Non-	Functionally I	ntegrate	d 509((a)(3) Su	pporting	ı Organizat	ions

1	Check here if the organization satisfied the Integral Part Test as a qualifying	trust or	n Nov. 20, 1970 (<i>explain in</i> I	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	complet	e Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
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		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
с	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount	_		Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
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		

7 Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).

Schedule A (Form 990) 2022

232026 12-09-22

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY 3 Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exem	npt purposes		1	
2	Amounts paid to perform activity that directly furthers exempt	purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purposes	of supported organizations	;	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prov	vide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	e organization is responsive			
	(provide details in Part VI). See instructions.	•		8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	s	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
а	From 2017				
b	From 2018				
с	From 2019				
d	From 2020				
е	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
С	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j				
	and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2021				
е	Excess from 2022				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022	LINCOLN						36-2512404	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D, Section D, lines 5, 6, and (See instructions.)	, 2, 3b, 3c, 4b, 4 lines 2 and 3; Pa	c, 5a, 6, 9a art IV, Sect	a, 96, 96, 11a ion E, lines 10	a, 11b, and c, 2a, 2b,	3 11c; Part IV, 3a, and 3b; P	, Section B, lines 1 art V, line 1; Part V	and 2; Part IV, Section /, Section B, line 1e; Pa	ı C, ırt V,
232028 12-09-2	2		_	24	1			Schedule A (Form S	90) 2022

07530201 147228 101286

SCHEDULE C	Po	litical Campaign a	nd Lobbying	g Activities		OMB No. 1545-0047
(Form 990)	For Org	anizations Exempt From Income	Tax Under section 6	- 01(c) and coction F	07	2022
	-	if the organization is described b				
Department of the Treasury Internal Revenue Service	-	to www.irs.gov/Form990 for in			• ==:	Open to Public Inspection
If the organization answ	wered "Yes," on	Form 990, Part IV, line 3, or For	m 990-EZ, Part V, line	e 46 (Political Camp	baign Ac	tivities), then
 Section 501(c)(3) org 	ganizations: Com	plete Parts I-A and B. Do not com	plete Part I-C.			
		1(c)(3)) organizations: Complete P	arts I-A and C below. I	Do not complete Pa	t I-B.	
Section 527 organization	•	•				
		Form 990, Part IV, line 4, or For				
.,.,	•	nave filed Form 5768 (election und nave NOT filed Form 5768 (electior		•		
.,.,	•	Form 990, Part IV, line 5 (Proxy	. ,	· ·		•
Tax) (See separate inst		· · · · · · · · · · · · · · · · · · ·				_, · · · · · , · · · · (. · · · · ,
 Section 501(c)(4), (5)), or (6) organizat	ions: Complete Part III.				
Name of organization					Employ	yer identification number
		PARK ZOOLOGICAL				36-2512404
Part I-A Comple	ete if the org	anization is exempt under	r section 501(c) o	r is a section 5	27 orga	anization.
•	8	ation's direct and indirect political	campaign activities in	Part IV.		
2 Political campaign						
3 Volunteer hours for	political campai	gn activities				
Part I-B Comple	ete if the org	anization is exempt under	section 501(c)(3	i).		
1 Enter the amount o	f any excise tax	incurred by the organization under	r section 4955	-	\$	
2 Enter the amount o	f any excise tax	incurred by organization managers				
3 If the organization i	ncurred a section	n 4955 tax, did it file Form 4720 fo				
4a Was a correction m	nade?					Yes No
b If "Yes," describe in						0)
-		anization is exempt under		-	. , ,	3).
		l by the filing organization for secti			\$_	
		ization's funds contributed to othe	C C		¢	
exempt function ac 3 Total exempt function		. Add lines 1 and 2. Enter here and			\$_	
-	-				\$	
						Yes No
		ployer identification number (EIN)				
made payments. Fo	or each organizat	tion listed, enter the amount paid f	from the filing organization	ation's funds. Also er	nter the a	amount of political
		omptly and directly delivered to a s			eparate s	segregated fund or a
political action com	mittee (PAC). If a	additional space is needed, provid	e information in Part N	V.		
(a) Name	e	(b) Address	(c) EIN	(d) Amount paid		(e) Amount of political
				filing organization funds. If none, ent		contributions received and promptly and directly
				,		delivered to a separate
						political organization. If none, enter -0
						,
	ion Act Nation	soo the Instructions for Form 99	 0 or 000 E7	1	C _	hadula C (Earm 990) 2022

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. LHA

Schedule C (Form 990) 2022

232041 11-08-22

Schedule C (Form 990) 2022	LINCOLN PAR	K ZOOLOGICA	L SOCIETY	36-2	512404 Page 2
Part II-A Complete if the org	anization is exen	npt under section	1 501(c)(3) and file	ed Form 5768 (ele	ction under
section 501(h)).					
	ation belongs to an affil	• • •	Part IV each affiliated	group member's name	e, address, EIN,
	re of excess lobbying e	• •			
B Check if the filing organiza	ation checked box A an	id "limited control" pro	visions apply.		
Limi	ts on Lobbying Exper	nditures		(a) Filing organization's	(b) Affiliated group totals
(The term "expend	ditures" means amou	nts paid or incurred.)		totals	101010
1a Total lobbying expenditures to influ	uence public opinion (c	rassroots lobbying)		47,018.	
b Total lobbying expenditures to influence				3,772.	
c Total lobbying expenditures (add li	-	• • • • •		50,790.	
d Other exempt purpose expenditure				40,005,808.	
e Total exempt purpose expenditure				40,056,598.	
f Lobbying nontaxable amount. Ente				1,000,000.	
If the amount on line 1e, column (a) o	or (b) is: The lob	bying nontaxable amo	ount is:		
Not over \$500,000	20% of t	he amount on line 1e.			
Over \$500,000 but not over \$1,000	0,000 \$100,00	0 plus 15% of the exce	ess over \$500,000.		
Over \$1,000,000 but not over \$1,5	600,000 \$175,00	0 plus 10% of the exce	ess over \$1,000,000.		
Over \$1,500,000 but not over \$17,	,000,000 \$225,00	0 plus 5% of the exces	ss over \$1,500,000.		
Over \$17,000,000	\$1,000,0	000.			
g Grassroots nontaxable amount (en	,			250,000.	
h Subtract line 1g from line 1a. If zer				0.	
i Subtract line 1f from line 1c. If zero				U•	
j If there is an amount other than ze				Г	Yes No
reporting section 4911 tax for this		raging Period Under	Section 501(h)	L	
(Some organizations t				of the five columns be	low.
		ate instructions for lin			
	Lobbying Exper	ditures During 4-Yea	ar Averaging Period		
Colonder voor					
Calendar year (or fiscal year beginning in)	(a) 2019	(b) 2020	(c) 2021	(d) 2022	(e) Total
	1 000 000	1 000 000	1 000 000	1 000 000	4 000 000
2a Lobbying nontaxable amount	1,000,000.	1,000,000.	1,000,000.	1,000,000.	4,000,000.
b Lobbying ceiling amount					
(150% of line 2a, column(e))					6,000,000.
- Tatal lable is a super diture	43,639.	29,577.	33,229.	50,790.	157,235.
c Total lobbying expenditures	45,059.	<u> </u>	55,225.	50,750.	137,233.
d Grassroots nontaxable amount	250,000.	250,000.	250,000.	250,000.	1,000,000.
e Grassroots ceiling amount	200,000.	200,000	200,000.		_,
(150% of line 2d, column (e))					1,500,000.
f Grassroots lobbying expenditures	40,374.	26,125.	30,024.	47,018.	143,541.
				Schody	le C (Form 990) 2022

Schedule C (Form 990) 2022

232042 11-08-22

Schedule C (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY 36-25124 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	ach "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(a)	(k))
	e lobbying activity.	Yes	No	Amo	ount
1 a	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: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
	Media advertisements?				
b b	Mailings to members, legislators, or the public?				
	Publications, or published or broadcast statements?				
	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?				
	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
	Other activities?				
J	Total. Add lines 1c through 1i				
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
	If "Yes," enter the amount of any tax incurred under section 4912				
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?t III-A Complete if the organization is exempt under section 501(c)(4), section	n 501(c)(5), or sec	tion	
	501(c)(6).			1	
				Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?				
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the				
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered ' answered "Yes."				3, is
1	Dues, assessments and similar amounts from members		1		
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of politic expenses for which the section 527(f) tax was paid).				
-			0.0		
	Current year				
	Carryover from last year				
-					
3			3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical			
	expenditures next year?		4		
_	Taxable amount of lobbying and political expenditures. See instructions	<u></u>	5		
Par					
instru	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group actions); and Part II-B, line 1. Also, complete this part for any additional information. RT II – DESCRIPTION OF LOBBYING ACTIVITIES	list); Part II	A, lines 1 a	nd 2 (See	
	E VICE PRESIDENT OF GOVERNMENTAL AFFAIRS IS RESPONSI	BLE FO	א עדש: אר ארד		
		1			
DEV	ELOPMENT, OVERSIGHT, AND EXECUTION OF LINCOLN PARK	Z00'S	STRAT	EGIC	
IN	TIATIVES, ISSUES AND PROGRAMS TO ELECTED OFFICIALS	AND S	ГАКЕНО	LDERS	
LOC	CALLY, REGIONALLY, AND NATIONALLY. THE VP OF GOVERNM	ENTAL	AFFAI	RS SER	VES
AS	LIAISON WITH LOCAL, REGIONAL AND NATIONAL COMMUNITY	, BUSI			
23204	3 11-08-22		Schedu	ile C (Form	990) 2022

Schedule C (Form 990) 2022	LINCOLN PARK	ZOOLOGICAL	SOCIETY	36-2512404	Page 4
Part IV Supplemental Infor	mation (continued)				
AND CIVIC ORGANIZAT	IONS. ADDITION	NALLY THE OF	RGANIZATION	PAYS A SMALL FEE	то
MUSEUMS IN THE PARK	FOR COORDINAT	TED SUPPORT	INITIATIVES	WITH OTHER AREA	
	1011 0001011111				
CULTURAL INSTITUTION	ALC .				
COLIURAL INSTITUTIO	ND •				
				Schodulo C (Earm 0	001 2022

Schedule C (Form 990) 2022

232044 11-08-22

(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.

OMB No. 1545-0047 **Open to Public**

	nent of the Treasury Revenue Service		tach to Form 990. for instructions and the latest information	on.	Inspection
-	e of the organization				ver identification number
	-	LINCOLN PARK ZOOLOG			36-2512404
Par	t I Organiza	ations Maintaining Donor Advised	Funds or Other Similar Funds o	r Accounts.	Complete if the
	organizatio	n answered "Yes" on Form 990, Part IV, line	6.		
			(a) Donor advised funds	(b) Funds	and other accounts
1	Total number at er	nd of year			
2	Aggregate value of	f contributions to (during year)			
3	Aggregate value of	f grants from (during year)			
4		t end of year			
5	Did the organizatio	on inform all donors and donor advisors in w	riting that the assets held in donor advised	l funds	
	are the organizatio	on's property, subject to the organization's e	xclusive legal control?		Yes No
6	•	on inform all grantees, donors, and donor ad			
	for charitable purp	oses and not for the benefit of the donor or		•	
Der	impermissible priva	ate benefit?			Yes No
Par		ation Easements. Complete if the orga		rt IV, line 7.	
1		servation easements held by the organization	· · · · · · · · · · · · · · · · · · ·		
		of land for public use (for example, recreati	·		
		f natural habitat	Preservation of a	certified histor	ic structure
•		of open space	ad concernation contribution in the form of	a conconvotion	accoment on the last
2	day of the tax year	through 2d if the organization held a qualifier	ed conservation contribution in the form of		Id at the End of the Tax Year
2					
	•	vation easements on a certified historic structure	sture included in (a)		
		vation easements included in (c) acquired af		20	
u				2d	
3		vation easements modified, transferred, relea			ing the tax
	year			0	0
4	Number of states v	where property subject to conservation ease	ement is located		
5		tion have a written policy regarding the perio			
	violations, and enf	orcement of the conservation easements it h	nolds?		🗌 Yes 📃 No
6	Staff and voluntee	r hours devoted to monitoring, inspecting, h	andling of violations, and enforcing conser	vation easeme	nts during the year
7	Amount of expens	es incurred in monitoring, inspecting, handli	ng of violations, and enforcing conservatio	n easements d	uring the year
8	Does each conserv	vation easement reported on line 2(d) above	satisfy the requirements of section 170(h)	(4)(B)(i)	
	and section 170(h)				Yes No
9		be how the organization reports conservation			
		d include, if applicable, the text of the footno	ote to the organization's financial statemen	ts that describe	es the
Par	organization's acco	ounting for conservation easements. ations Maintaining Collections of A	Art Historical Treasures or Oth	er Similar A	ssets
1 41		f the organization answered "Yes" on Form S			
10		elected, as permitted under FASB ASC 958			tworko
Id		easures, or other similar assets held for publi			
		Part XIII the text of the footnote to its finance		nerance of pub	
b	•	elected, as permitted under FASB ASC 958		lance sheet wo	rks of
U	-	sures, or other similar assets held for public e	-		
		ing amounts relating to these items:			
	-	ded on Form 990, Part VIII, line 1		\$	
2	.,	received or held works of art, historical treas			
-	-	unts required to be reported under FASB AS	· · · · ·		
а	-	on Form 990, Part VIII, line 1	~	\$	

Assets included in Form 990, Part X b

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990. 232051 09-01-22

07530201 147228 101286

35

2022.05040 LINCOLN PARK ZOOLOGICAL S 101286_1

\$

Schedule D (Form 990) 2022

		PARK ZOOLO			_	36-25			ιge 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Oth	er Simi	ar Asset	(continu	led)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	significar	nt use of its			
	collection items (check all that apply):								
а	X Public exhibition	d	Loan or exc						
b	X Scholarly research	е	Other						
С	X Preservation for future generations								
4	Provide a description of the organization's co					oose in Part	XIII.		
5	During the year, did the organization solicit o					_	-		1
De	to be sold to raise funds rather than to be ma						Yes	X	No
Par	t IV Escrow and Custodial Arrang		te if the organizatio	n answered "Yes"	on Form 9	90, Part IV,	line 9, or		
4	reported an amount on Form 990, Par				the strate				
1a	Is the organization an agent, trustee, custodi		•						
L	on Form 990, Part X? If "Yes," explain the arrangement in Part XIII					∟	Yes		No
a	If Yes, explain the arrangement in Part All	and complete the long	owing table.				Amount		
•	Reginning balance				10		7 uno cune		
	Beginning balance Additions during the year								
	Distributions during the year								
	Ending balance								
	Did the organization include an amount on Fe						Yes		No
	If "Yes," explain the arrangement in Part XIII.				•				
Par	t V Endowment Funds. Complete i	f the organization ans	wered "Yes" on Fo	rm 990, Part IV, lin	e 10.				
		(a) Current year	(b) Prior year	(c) Two years back	(d) Thre	e years back	(e) Four	years I	Jack
1a	Beginning of year balance	88,053,865.	77,974,754.	55,646,309	. 62	,839,336.	58,3	L04,3	133.
b	Contributions	50,422.	9,913,811.	1,032,416		42,520.	5,	053,9	<u>300.</u>
с	Net investment earnings, gains, and losses	-4,104,366.	2,920,765.	23,499,015	-5	,149,024.	1,	728,	583.
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs	2,852,396.	2,755,465.	2,202,986	. 2	,086,523.	2,	047,3	280.
f	Administrative expenses								
g	End of year balance	81,147,525.	88,053,865.		. 55	,646,309.	62,8	339,3	336.
2	Provide the estimated percentage of the curr) held as:					
	Board designated or quasi-endowment	8.0000	_%						
	Permanent endowment 92.0000	%							
с		%							
•	The percentages on lines 2a, 2b, and 2c show								
3a	Are there endowment funds not in the posse	ssion of the organizat	ion that are held ar	id administered for	the			Yes	No
	organization by:							103	X
	(i) Unrelated organizations						3a(i) 3a(ii)		X
h	(ii) Related organizations If "Yes" on line 3a(ii), are the related organiza								
4	Describe in Part XIII the intended uses of the			•••••			50		
Par	t VI Land, Buildings, and Equipm								
	Complete if the organization answere		Part IV, line 11a. S	ee Form 990, Part	X, line 10.				
	Description of property	(a) Cost or ot	her (b) Cost	or other (c)	Accumul	ated	(d) Book	value	,
		basis (investm	• •		depreciati		,, 2000		
1 a	Land								
b	Buildings								
	Leasehold improvements		2,70	0,079. 1	,778,	163.	921	, 91	6.
	Equipment				,777,		2,296		
	Other		8	1,998.	75,	740.		, 25	
Tota	. Add lines 1a through 1e. (Column (d) must e	qual Form 990, Part X	, column (B), line 1	0c.)			3,224	, 38	37.
								000	~~~~

Schedule D (Form 990) 2022

	K ZOOLOGICAL S	SOCIETY	36-2512404 Page 3
Part VII Investments - Other Securities.			
Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other (A) HEDGE FUNDS	54,156,108.	END_OF_VEND	MARKET VALUE
	54,130,100.	END-OF-IEAK	MARKEI VALUE
(B) (C)			
(D)			
(E)			
(F)			
(G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	54,156,108.		
Part VIII Investments - Program Related.	· · · · · ·		
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1c. See Form 990, Part X,	line 13.
(a) Description of investment	(b) Book value	(c) Method of valuatio	n: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.) Part IX Other Assets.			
	on Form 000 Dort IV line 1	1d Coo Form 000 Dort V	line 15
Complete if the organization answered "Yes"	Description		(b) Book value
	Description		
(1)			
(2)			
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line	9 15.)		
Part X Other Liabilities.			· · · · ·
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	1e or 11f. See Form 990, I	Part X, line 25.
1. (a) Description of liability			(b) Book value
(1) Federal income taxes			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) line			······
2. Liability for uncertain tax positions. In Part XIII, provide			
organization's liability for uncertain tax positions under	FASE ASC /40. Check her	re in the text of the foothote	e nas been provided in Part XIII 🛛 🛄

Schedule D (Form 990) 2022

232053 09-01-22

	edule D (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SO				2512404 Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Statem		Revenue per Re	turn.	
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12	2a.			
1	Total revenue, gains, and other support per audited financial statements			1	36,844,503.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	т. г.			
а	Net unrealized gains (losses) on investments	<u>2a</u> – 1	3,108,613.		
b	Donated services and use of facilities	2b	843,356.		
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	799,833.		
е	Add lines 2a through 2d			2e	-11,465,424.
3	Subtract line 2e from line 1			3	48,309,927.
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	111,104.		
b	Other (Describe in Part XIII.)	4b			
	Add lines 4a and 4b			4c	111,104.
С	Add lines 4a and 4b				
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	48,421,031.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem				<u>48,421,031.</u> n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	nents With			n.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem	nents With 2a.	Expenses per F		48,421,031. n. 41,537,893.
5 Pa	Total revenue. Add lines 3 and 4c. (<i>This must equal Form 990, Part I, line 12.</i>) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12	nents With 2a.	Expenses per F	Retur	n.
5 Ра 1	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With ^{2a.}	Expenses per F	Retur	n.
5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990. Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	nents With 2a.	Expenses per F	Retur	n.
5 Pa 1 2 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	nents With 2a. 2a 2b	Expenses per F	Retur	n.
5 Pa 1 2 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	2a. 2a 2b 2c	Expenses per F	Retur	n.
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a. 2a 2b 2c 2d	Expenses per F 843,356. 799,833.	Retur	n. <u>41,537,893.</u> 1,643,189.
5 Pa 1 2 a b c d	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2a 2b 2c 2c 2d	Expenses per F 843,356. 799,833.	letur 1	n. <u>41,537,893.</u>
5 Pa 1 2 a b c d e	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) TXII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2a 2b 2c 2c 2d	Expenses per F 843,356. 799,833.	letur 1	n. <u>41,537,893.</u> 1,643,189.
5 Pa 1 2 a b c d e 3	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a. 2a 2b 2c 2d	Expenses per F 843,356. 799,833.	letur 1	n. <u>41,537,893.</u> 1,643,189.
5 Pa 1 2 a b c d e 3 4 a	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	2a 2b 2c 2d	Expenses per F 843,356. 799,833.	letur 1	n. 41,537,893. 1,643,189. 39,894,704.
5 Pa 1 2 a b c d e 3 4 a b	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	2a 2a 2b 2b 2c 2c 2d 2d	Expenses per F 843,356. 799,833. 111,104.	letur 1	n. <u>41,537,893.</u> <u>1,643,189.</u> <u>39,894,704.</u> 111,104.
5 Pa 1 2 a b c d e 3 4 a b c 5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Statem Complete if the organization answered "Yes" on Form 990, Part IV, line 12 Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	2a 2a 2b 2c 2c 2d 2d 4a 4b 4b	Expenses per F 843,356. 799,833. 111,104.	1 2e 3	n. 41,537,893. 1,643,189. 39,894,704.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

ANIMAL COLLECTION -

IN CONNECTION WITH THE PRIVATIZATION AGREEMENT, OWNERSHIP OF THE ZOO'S

ANIMAL COLLECTION WAS TRANSFERRED TO THE SOCIETY. THE SOCIETY HAS

ESTABLISHED A POLICY OF NOT CAPITALIZING THE ANIMAL COLLECTION. NO GAINS

FINANCIAL STATEMENTS. ALL EXPENSES REGARDING COLLECTION TRANSACTIONS ARE

REFLECTED IN THE ACCOMPANYING STATEMENTS OF ACTIVITIES AND CHANGES IN NET

38

ASSETS.

PART III, LINE 4:

ANIMAL COLLECTION -

232054 09-01-22

Schedule D (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY 36-2512404 Page 5 Part XIII Supplemental Information (continued) 36-2512404 Page 5
ALL OF THE APPROXIMATELY 642 ANIMALS (EXCLUDING FISH AND INVERTEBRATES)
FOUND AT LINCOLN PARK ZOO ACT AS AMBASSADORS FOR THEIR COUNTERPARTS IN THE
WILD. THIS LIVING COLLECTION OF ANIMALS PROVIDES THE BASIS FOR US TO
ENGAGE VISITORS AND EDUCATE THE PUBLIC ABOUT CONSERVATION, ECOLOGY,
POPULATION BIOLOGY, BEHAVIOR AND NATURAL HISTORY OF THE ANIMALS.
PART V, LINE 4:
THE SOCIETY'S ENDOWMENT CONSISTS OF APPROXIMATELY 23 INDIVIDUAL FUNDS
ESTABLISHED FOR A VARIETY OF PURPOSES WHICH INCLUDE THE FUNDING OF THE
SOCIETY'S ANIMAL CARE, CONSERVATION AND SCIENCE, EDUCATION, HORTICULTURE
AND SCULPTURES, AND GENERAL OPERATIONS.
PART XI, LINE 2D - OTHER ADJUSTMENTS:
SPECIAL EVENT EXPENSES 799,833.
PART XII, LINE 2D - OTHER ADJUSTMENTS:
SPECIAL EVENT EXPENSES 799,833.

Schedule D (Form 990) 2022

232055 09-01-22

Department of the Treasury Internal Revenue Service	Go to w	ww.irs.aov/Form	1990 for instructions and the latest i	information.		Open to Public Inspection
Name of the organization		www.io.goviroini				entification number
LINCOLN PARK ZO	OLOGICAL	SOCIETY			36-2512	2404
			side the United States. Compl	ete if the orgar		
Form 990, Part I						
			ds to substantiate the amount of its gra the selection criteria used to award the			Yes X No
				granto or uson		
2 For grantmakers. Desc United States.	ribe in Part V the	e organization's	procedures for monitoring the use of it	s grants and ot	her assistance	outside the
3 Activities per Region. (T	1	T	an be duplicated if additional space is r			
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in (d) gram service, e specific type e(s) in the region	expenditures for and investments
SUB-SAHARAN AFRICA -						
ANGOLA, BENIN,				GOUALOUGO 7	RIANGLE APE	2
BOTSWANA, BURKINA					APE BEHAVIOR	
FASO,	0	0	FIELDWORK	AND CONSERV	ATION (CONG	31,205
EUROPE	0	0	INVESTMENTS			14,031,862
CENTRAL AMERICA AND						
THE CARIBBEAN -						
ANTIGUA & BARBUDA,						
ARUBA, BAHAMAS,	0	0	INVESTMENTS			22,067,019
SUB-SAHARAN AFRICA -						
ANGOLA, BENIN,						
BOTSWANA, BURKINA				TANZANIA CO	DNSERVATION	
FASO,	0	0	FIELDWORK	RESEARCH PF	ROGRAM	22,821
3 a Subtotal	0	0				36,152,907
b Total from continuation sheets to Part I	0	0				0.
c Totals (add lines 3a	0	0				36 152 907

Statement of Activities Outside the United States Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16. Attach to Form 990.

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

232071 10-17-22

SCHEDULE F (Form 990)

Schedule F (Form 990) 2022

OMB No. 1545-0047

Open to Public

36-2512404

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		SUB-SAHARAN	GRANT FUNDS ARE					
		AFRICA - ANGOLA,	PROVIDED TO SUPPORT					
		BENIN, BOTSWANA,	COSTS RELATED TO					
		BURKINA FASO,	MUTUALLY-AGREED	20,000.	WIRE	0.		CASH
		SUB-SAHARAN	GRANT FUNDS ARE					
		AFRICA - ANGOLA,	PROVIDED TO SUPPORT					
		BENIN, BOTSWANA,	COSTS RELATED TO					
		BURKINA FASO,	MUTUALLY-AGREED	40,000.	WIRE	0.		CASH
			recognized as charities by the or counsel has provided a sec			▶ _		(
						······ 5 -		2

SEE PART V FOR COLUMN (D) DESCRIPTIONS

36-2512404

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

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022	LINCOLN	PARK	ZOOLOGICAL	SOCIETY
Part IV Foreign For	ms			

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	Yes	X No

Schedule F (Form 990) 2022

LINCOLN PARK ZOOLOGICAL SOCIETY 36-2512404 Schedule F (Form 990) 2022 Page 5 Part V | Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions. PART II, COLUMN (D): REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO, (D) PURPOSE OF GRANT: GRANT FUNDS ARE PROVIDED TO SUPPORT COSTS RELATED TO MUTUALLY-AGREED PROJECT ACTIVITES, AS DETAILED BELOW: 1. RESTORING THE ECOLOGICAL CONNECTIVITY FOR LIONS BETWEEN NGORONGORO CONSERVATION AREA AND THE SERENGETI NATIONAL PARK BY PROMOTING A CORRIDOR OF TOLERANCE TO SUSTAIN THE METAPOPULATION OF LIONS IN THE GREATER SERENGETI ECOSYSTEM. 2. SUPPORTING THE COMMUNITY LION CUSTODIANS ("ILCHOKUTI") IN THEIR CONFLICT MITIGATION AND LION MONITORING WORK IN THE NGORONGORO CONSERVATION AREA. 3. SUPPORTING THE LONG-TERM LION MONITORING IN NGORONGORO CONSERVATION AREA THROUGH DIRECT OBSERVATION, GPS COLLARS, TOURIST PHOTOS, RANGER SIGHTINGS, AND ILCHOKUTI DATA. 4. SUPPORTING CORE OPERATING COSTS, SUCH AS GRANTEE PERSONNEL AND OFFICE

ADMINISTRATION.

REGION: SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,

(D) PURPOSE OF GRANT: GRANT FUNDS ARE PROVIDED TO SUPPORT COSTS RELATED

TO MUTUALLY-AGREED PROJECT ACTIVITIES, AS DETAILED BELOW:

1. SUPPORTING EXISTING AND NEW LAND PROTECTION EFFORTS THROUGH

CERTIFICATES OF CUSTOMARY RIGHTS OF OCCUPANCY (CCROS) IN THE LAKE NATRON

AND SIMANJIRO WILDLIFE CORRIDORS (SPECIFICALLY IN LANDANAI, SUKURO,

ELWAI, MAKUYNI, AND ENGARUKA VILLAGES).

2. SUPPORTING CORE OPERATING COSTS, SUCH AS GRANTEE PERSONNEL AND OFFICE

ADMINISTRATION.

3. SUPPORTING ANNUAL SALARY COSTS FOR TWO VILLAGE GAME SCOUTS IN SUKURO
232075 10-17-22
44

			ZOOLOGICAL	SOCIETY
Part V	Supplementa	l Information		

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

AND TERRAT VILLAGES.

Schedule F (Form 990) 2022

232075 10-17-22

SCHEDULE G	Suppleme	ntal Information Regarding	Func	Iraisi	ng or Gaming A	ctivi	ties	OMB No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the	2022
Department of the Treasury		Attach to Form 990 c	or Forr	n 990	-EZ.			Open to Public
Internal Revenue Service		o www.irs.gov/Form990 for instruc	ctions	and th	ne latest information	1		Inspection
Name of the organization		PARK ZOOLOGICAL S	ocii	ETY			36-251	dentification number
Part I Fundrais		Complete if the organization answe			n Form 990. Part IV. li	ine 17		
	complete this part							
 a Mail solicitat b Internet and c Phone solicitat d In-person so 2 a Did the organization key employees list b If "Yes," list the 1000000000000000000000000000000000000	tions email solicitations tations licitations on have a written o ed in Form 990, Pa) highest paid indiv	f Solicita g Special or oral agreement with any individual art VII) or entity in connection with p viduals or entities (fundraisers) pursu	tion of tion of fundra (incluc	non-g gover aising o ling of onal fu	overnment grants nment grants events ficers, directors, trus undraising services?	-	<u> </u>	'es No be
compensated at le	east \$5,000 by the	organization.						
(i) Name and address of individual or entity (fundraiser)		(ii) Activity	(iii) fundi have c or cor contrib	ustody itrol of	(iv) Gross receipts from activity	tò (o f	Amount paid r retained b undraiser ed in col. (i)	(v) to (or retained by)
			Yes	No				
Total		1	I	I				
		n is registered or licensed to solicit o		utions	or has been notified	it is e	xempt from	registration

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990) 2022

232081 10-27-22

 Schedule G (Form 990) 2022
 LINCOLN
 PARK
 ZOOLOGICAL
 SOCIETY
 36-2512404
 Page 2

 Part II
 Fundraising Events.
 Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000

 of fundraising event contributio m 990-EZ lines 1 and 6b List events with an n \$5 000 - For ointo rootor the o ond a o inc

		of fundraising event contributions and gro	oss income on Form 990	-EZ, lines 1 and 6b. List e	vents with gross receipt	ts greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			ZOOBALL	ZOOLA	3	(add col. (a) through
			(event type)	(event type)	(total number)	col. (c))
nue			(((
Revenue	1	Gross receipts	1,401,412.	334,821.	273,436.	2,009,669.
	2	Less: Contributions	932,112.	147,435.	107,430.	1,186,977.
	3	Gross income (line 1 minus line 2)	469,300.	187,386.	166,006.	822,692.
	4	Cash prizes				
s	5	Noncash prizes				
Direct Expenses	6	Rent/facility costs				
irect E	7	Food and beverages				
	8	Entertainment				
	9	Other direct expenses		98,864.	145,173.	799,833.
	10	Direct expense summary. Add lines 4 through				799,833.
		Net income summary. Subtract line 10 from li	ine 3, column (d)			22,859.
–	rt I	Gaming. Complete if the organization a \$15,000 on Form 990-EZ, line 6a.			eported more than	
Revenue			(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Rev	1	Gross revenue			49,100.	49,100.
es	2	Cash prizes				
xpens	3	Noncash prizes				
Direct Expenses	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes %	Yes %	
	6	Volunteer labor	No	No	ΧΝο	
	7	Direct expense summary. Add lines 2 through	n 5 in column (d)			
	8	Net gaming income summary. Subtract line 7	from line 1, column (d)			49,100.
•	Ent	ter the state(s) in which the organization condu	usta acmina activitica. T	т.		
		the organization licensed to conduct gaming ac	• • –			X Yes No
		No," explain:				
	_					
		ere any of the organization's gaming licenses re Yes," explain:			/ear?	Yes X No
					_	
23208	82 10)-27-22			Sche	dule G (Form 990) 2022

Schedule G (Form 990) 2022	LINCOLN PARK	ZOOLOGICAL	SOCIETY	36-2512404 Page 3
11 Does the organization conduct ga	aming activities with nonm	embers?		X Yes No
12 Is the organization a grantor, ben				
to administer charitable gaming?				Yes X No
13 Indicate the percentage of gamin				 13a ↓00.00 %
a The organization's facility b An outside facility				
14 Enter the name and address of th				
		o organization o gamm		
Name <u>RENA SOLANO</u>				
Address 2001 N. CL	ARK ST - CHIC.	AGO, IL 606	14	
15a Does the organization have a con	stract with a third party from	n whom the organizat	ion receives gaming revenue?	Yes X No
b If "Yes," enter the amount of gam	ning revenue received by th	ne organization \$	and the a	mount
of gaming revenue retained by the	e third party \$			
c If "Yes," enter name and address	of the third party:			
Name				
Address				
16 Gaming manager information:				
Name <u>RENA SOLANO</u>				
Gaming manager compensation	\$	_		
Description of services provided	OVERSIGHT O	F GAMING BO	OKS AND RECORDS	
X Director/officer	Employee	Independent	contractor	
17 Mandatory distributions:				
a Is the organization required under	r state law to make charita	ble distributions from	the gaming proceeds to	
retain the state gaming license?				Yes X No
b Enter the amount of distributions organization's own exempt activit	•	o be distributed to oth \$	er exempt organizations or spent	. In the
			Part I, line 2b, columns (iii) and (v	/); and Part III, lines 9, 9b, 10b,
	s applicable. Also provide a			
232083 10-27-22				Schedule G (Form 990) 2022
202000 10-21-22		48		

Sch	edule	G	(Form	990)
			-	

Part IV	Supplemental Information	(continued)		
_				
				Sahadula () (Farma (202)
232084 04-01-	22			Schedule G (Form 990)

SCHEDULE I (Form 990)		Go	irants and Oth vernments, an ete if the organizatio	nd Individual	s in the Ŭni [.]	ted States		OMB No. 1545-0047
Department of the Treasury		Compl		Attach to Form		t IV, III e 2 I OI 22.		Open to Public
Internal Revenue Service			Go to www.irs	.gov/Form990 for	the latest informa	ation.		Inspection
Name of the organization	LINCOLN P.	ARK ZOOLO	GICAL SOCIE	ТҮ				Employer identification number $36-2512404$
Part I General Infor	mation on Grants a							•
v			amount of the grants			v		
2 Describe in Part IV t	he organization's pro	cedures for monit	oring the use of grant	funds in the United	States.			
			ations and Domestic be duplicated if addition			anization answered "Y	′es" on Form 990, Par	t IV, line 21, for any
1 (a) Name and addre or govern	•	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
BOYS-GIRLS CLUB CHIC	CAGO							
2950 W 25TH ST								
CHICAGO, IL 60623		36-2166997	501(C)3	6,250.	0.			COMMUNITY OUTREACH
CENTRAL WASHINGTON U 400 E UNIVERSITY WAY								
ELLENSBURG, WA 98926	5	91-6000618	501(C)3	7,997.	0.			CONSERVATION
BETHEL NEW LIFE, INC 4950 W THOMAS CHICAGO, IL 60651	2	36-3013241	501(C)3	15,000.	0.			COMMUNITY OUTREACH
LATINOS PROGRESANDO 3047 W CERMAK RD CHICAGO, IL 60623		36-4355072	501(C)3	17,164.	0.			COMMUNITY OUTREACH
BUILD, INC 5100 WEST HARRISON S	3T			1,101.				
CHICAGO, IL 60644		23-7022085	501(C)3	17,500.	0.			COMMUNITY OUTREACH
CHIMP HAVEN, INC 13600 CHIMPANZEE PL	,	74-2766663	501/0)3	11,821.	0.			CONSERVATION
2 Enter total number of				,	0.		I	10
2 Enter total number of3 Enter total number of								
LHA For Paperwork Re								Schedule I (Form 990) 2022

Schedule I (Form 990) LINCOLN PARK ZOOLOGICAL SOCIETY

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ENLACE CHICAGO 2756 S HARDING AVE CHICAGO, IL 60623	36-3727669	501/013	25,379.	0.			COMMUNITY OUTREACH
RARE SPECIES CONSERVATORY FOUNDATION, INC - 1222 E ROAD - LOXAHATCHEE, FL 33470	65-0560456		32,000.	0.			CONSERVATION
OPEN CENTER FOR THE ARTS 2214 S SACRAMENTO AVE CHICAGO, IL 60623	38-3936972	501(C)3	57,440.	0.			COMMUNITY OUTREACH
NCS – CONGO BZV 2300 SOUTHERN BLVD 3RONX, NY 10460	13-1740011	501(C)3	92,630.	0.			CONSERVATION

Schedule I (Form 990)

232102 10-31-22

Schedule I (Form 990) 2022

LINCOLN PARK ZOOLOGICAL SOCIETY

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance	
	(b) Number of recipients	(b) Number of recipients (c) Amount of cash grant (b) Number of recipients (c) Amount of cash grant (b) Number of recipients (c) Amount of cash grant (b) Number of recipients (c) Amount of cash grant (b) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients (c) Amount of cash grant (c) Number of recipients	(b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance Image: Image	(b) Number of recipients (c) Amount of cash grant (d) Amount of non-cash assistance (e) Method of valuation (book, FMV, appraisal, other) Image:	

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

THE LINCOLN PARK ZOOLOGICAL SOCIETY CLOSELY WORKS WITH ITS SUPPORTED

ORGANIZATIONS TO ENSURE GRANT MONIES PROVIDED ARE USED FOR THE

APPROPRIATE EXEMPT PURPOSE.



36-2512404

SC	HEDULE J	I	OMB No.	1545-00	47		
(Fo	rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Hig	hest		ົງທ	90)
-	-	Compensated Employees			20	22	-
Dono	tment of the Treasury	Complete if the organization answered "Yes" on Form 990, Part IV, I Attach to Form 990.	ine 23.		Open t	o Publ	ic
	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest informa			-	ection	
Nam	e of the organization				identificati		mber
		LINCOLN PARK ZOOLOGICAL SOCIETY		36-2	251240	4	
Ра	rt I Question	s Regarding Compensation				1	
						Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed of	on Form 9	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.					
	First-class or c		•				
	Travel for com						
		ation and gross-up payments X Health or social club dues or initia					
		spending account Personal services (such as maid,	cnautteur	r, cnet)			
la la			- t				
a	•	on line 1a are checked, did the organization follow a written policy regarding paymer			41.	x	
~		provision of all of the expenses described above? If "No," complete Part III to explain			1b		<u> </u>
2	-	n require substantiation prior to reimbursing or allowing expenses incurred by all dire					x
	trustees, and office	rs, including the CEO/Executive Director, regarding the items checked on line 1a?			2		
3	Indicate which if a	ny, of the following the organization used to establish the compensation of the organ	vization's				
5		ector. Check all that apply. Do not check any boxes for methods used by a related or		n to			
		ation of the CEO/Executive Director, but explain in Part III.	ganizatio				
	X Compensation						
		compensation consultant X Compensation survey or study					
	X Form 990 of o		nsation cr	mmittee			
			154101100				
4	During the year, did	I any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing	1				
•	organization or a re						
а	-	e payment or change-of-control payment?			4a		X
b		eive payment from a supplemental nonqualified retirement plan?				Х	
с		eive payment from an equity-based compensation arrangement?					X
		nes 4a-c, list the persons and provide the applicable amounts for each item in Part III					
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.					
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any com	pensatior	า			
	contingent on the r	evenues of:					
а	The organization?				5a		X
		ation?					X
		or 5b, describe in Part III.					
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any com	pensatior	า			
	contingent on the n	et earnings of:					
а	The organization?				<u>6a</u>		<u> </u>
b	Any related organiz	ation?			<u>6b</u>		X
		or 6b, describe in Part III.					
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed part					
		nes 5 and 6? If "Yes," describe in Part III			7	X	<u> </u>
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to						
	initial contract exce			8		X	
9		id the organization also follow the rebuttable presumption procedure described in					
	Regulations section		<u></u>				
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.		Schee	dule J (For	m 990) 2022

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) KEVIN BELL	(i)	309,603.	50,000.	0.	319,129.	3,051.	681,783.	0.
PRESIDENT/EMERETUS THRU 12/22	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) MEGAN ROSS	(i)	402,667.	46,000.	6,000.	24,473.	14,319.	493,459.	0.
PRESIDENT/CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RENA SOLANO	(i)	240,553.	41,000.	0.	14,829.	11,822.	308,204.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) ELIZABETH GILLETTE	(i)	170,568.	11,000.	0.	10,210.	395.	192,173.	0.
SENIOR DIRECTOR, PRINCIPAL GIFTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) MAUREEN LEAHY	(i)	144,768.	16,000.	0.	9,007.	14,540.	184,315.	0.
VP OF ANIMAL CARE AND HORTICULTURE	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) LINDA LEADBITTER	(i)	150,936.	13,000.	0.	9,258.	6,963.	180,157.	0.
VP OF HR AND ADMINISTRATION	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) BRENDAN DALEY	(i)	160,778.	3,000.	0.	0.	11,871.	175,649.	0.
SENIOR DIRECT, PRINCIPAL GIFTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) DANA MURPHY	(i)	147,279.	9,000.	0.	8,892.	588.	165,759.	0.
VP OF LEARNING AND COMMUNITY ENGAGEM	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

SOCIAL CLUB DUES - THE PRESIDENT RECEIVES THIS BENEFIT AND IT IS NOT

TREATED AS TAXABLE COMPENSATION.

PART I, LINE 4B:

THE PRESIDENT/EMERETUS PARTICIPATES IN A NON-QUALIFIED DEFERRED

COMPENSATION PLAN (457F - NORTHERN TRUST). NO PAYMENTS WERE MADE IN FY23,

HOWEVER AN ACCRUED VESTED 457F BENEFIT OF \$300,000 IS INCLUDED ON SCHEDULE

J, PART II, COLUMN C. THE 457F FOR THE PRESIDENT/EMERTUS WILL BE PAID OVER

THE NEXT 3 FISCAL YEARS FY24, FY25 AND FY26.

PART I, LINE 7:

THE BOARD APPROVED A BONUS TO SELECT STAFF BASED ON PERFORMANCE AND THE

FINANCIAL RESULTS OF THE ORGANIZATION.

SCHED (Form 9 Departmen Internal Re		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. Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.													
Name o		RK ZOOLOGIC									identif 512		n num	ber	
Part I	Bond Issues S	<u>EE PART VI </u>	FOR COLUMN	I (F) CONT	INUATI	ONS									
	(a) Issuer name	(a) Issuer name (b) Issuer EIN		(d) Date issued	(e) Issu	e price	(f) Descripti	on of purpose	(g) De	efeased	(h) On	behalf	• •	(i) Pooled	
									of			_		inancing	
									Yes	No	Yes	No	Yes	No	
	LINOIS FINANCE						FINANCE								
A AU	JTHORITY	86-1091967	NONE	10/29/19	7035	4000.	ACQUISIT	ION, CONS		X		X		X	
В															
с															
D															
Part II	Proceeds		•		•		•			•		· · ·			
							В	С				D			
1 A	mount of bonds retired														
2 A	mount of bonds legally defeased														
	otal proceeds of issue),000.										
	aross proceeds in reserve funds														
5 C	apitalized interest from proceeds														
7 Is	ssuance costs from proceeds				1,000.										
8 C	redit enhancement from proceeds														
9 W	Vorking capital expenditures from proceeds														
10 C	apital expenditures from proceeds														
<u>11</u> O	other spent proceeds														
12 O	other unspent proceeds														
13 Y	ear of substantial completion														
				Yes	No	Yes	No	Yes	No	_	Yes	\perp	No		
14 W	Vere the bonds issued as part of a refunding	issue of tax-exempt b	onds (or,												
if	issued prior to 2018, a current refunding iss	sue)?		X								\square			
	Vere the bonds issued as part of a refunding														
	sued prior to 2018, an advance refunding is	X	X					_		—					
-		is the final allocation of proceeds been made?								_		\rightarrow			
	oes the organization maintain adequate boo	oks and records to sup	port the	x											
fir	nal allocation of proceeds?	roceeds?													

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

Schedule K (Form 990) 2022

Schedule K (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY

36-2512404

Page 2

Part III Private Business Use	AB				СР			
1. We the examination a partner in a partnership, or a member of an LLC	Yes No		Yes No		Yes No		Yes	No
1 Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?	165	X	162	NO	165		162	
		Δ						
2 Are there any lease arrangements that may result in private business use of		х						
bond-financed property?		A						
3a Are there any management or service contracts that may result in private		х						
business use of bond-financed property?		A						
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?								
c Are there any research agreements that may result in private business use of								
bond-financed property?		X						
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?								
4 Enter the percentage of financed property used in a private business use by entities								
other than a section 501(c)(3) organization or a state or local government		%		%		%		
5 Enter the percentage of financed property used in a private business use as a								
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		
6 Total of lines 4 and 5		%		%		%		
7 Does the bond issue meet the private security or payment test?		Х						
8a Has there been a sale or disposition of any of the bond-financed property to a non-								
governmental person other than a 501(c)(3) organization since the bonds were issued?		х						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		%		%		%		
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations		,,,		/3				
sections 1.141-12 and 1.145-2?								
 9 Has the organization established written procedures to ensure that all 								
nonqualified bonds of the issue are remediated in accordance with the								
requirements under Regulations sections 1.141-12 and 1.145-2?	х							
Part IV Arbitrage				1		1 1		<u> </u>
		\		в		c	r	D
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No No	Yes	No
	169	X	162		169		169	
Penalty in Lieu of Arbitrage Rebate? If "No" to line 1, did the following apply?								L
		X						1
a Rebate not due yet?	x	Δ						
b Exception to rebate?	Δ	x						
c No rebate due?		Δ						<u> </u>
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed				,		,		T
3 Is the bond issue a variable rate issue?	Х							

Schedule K (Form 990) 2022 LINCOLN PARK ZOOLOGICAL SOCIETY

Part IV Arbitrage (continued)								
		4	E	3		ç		2
4a Has the organization or the governmental issuer entered into a qualified	Yes	No	Yes	No	Yes	No	Yes	No
hedge with respect to the bond issue?		X						
b Name of provider								
c Term of hedge								
d Was the hedge superintegrated?								
e Was the hedge terminated?								
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X						
b Name of provider								
c Term of GIC								
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?								
6 Were any gross proceeds invested beyond an available temporary period?		X						
7 Has the organization established written procedures to monitor the								
requirements of section 148?	X							
Part V Procedures To Undertake Corrective Action	•				.		-	
		A	E	3		<u>ç</u>	[<u>, c</u>
Has the organization established written procedures to ensure that violations	Yes	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?	X							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	uctions.					
SCHEDULE K, PART I, BOND ISSUES:								
(A) ISSUER NAME: ILLINOIS FINANCE AUTHORITY								
(F) DESCRIPTION OF PURPOSE:								
FINANCE THE ACQUISITION, CONSTRUCTION, AND RENOVA	ATION O	F ZOO F	ACILITI	IES				

36-2512404

Page 3

SCHED	ULE I	V
(Form 9	90)	

Department of the Treasury Internal Revenue Service

Noncash Contributions

OMB No. 1545-0047

Inspection

22

Complete if the organizations answered "Yes" on Form 990, Part IV, li	ines 29	or 30
Attach to Form 990.		

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

Name of the organization

LINCOLN PARK ZOOLOGICAL SOCIETY

Employer identification number
36-2512404

ſ ΖU **Open to Public**

Par	rt I Types of Property								
		(a) Check if applicable	(b) Number of contributions or	(c) Noncash contrib amounts reporte	ed on	(d) Method of de noncash contribu	etermini		 s
			Items contributed	Form 990, Part VIII	l, line 1g				
1	Art - Works of art								
2	Art - Historical treasures								
3	Art - Fractional interests								
4	Books and publications								
5	Clothing and household goods								
6	Cars and other vehicles								
7	Boats and planes								
8	Intellectual property								
9	Securities - Publicly traded	X	33	1,615,	161.	FMV			
10	Securities - Closely held stock								
11	Securities - Partnership, LLC, or								
	trust interests								
12	Securities - Miscellaneous								
13	Qualified conservation contribution -								
	Historic structures								
14	Qualified conservation contribution - Other								
15	Real estate - Residential								
16	Real estate - Commercial								
17	Real estate - Other								
18	Collectibles								
19	Food inventory								
20	Drugs and medical supplies								
21	Taxidermy								
22	Historical artifacts								
23	Scientific specimens								
24	Archeological artifacts								
25	Other (AIRFARE)	X	1	135.	700.	FMV			
26	Other ()			,					
27	Other ()								
28	Other ()								
29	Number of Forms 8283 received by the organiz	zation during	the tax year for c	ontributions					
20	for which the organization completed Form 828	-			29				
		50, i uit v, E	inee / tokinowicag	L	20			Yes	No
30a	During the year, did the organization receive by	contributio	n any property rep	orted in Part L lines	1 throug	ıh 28 that it		100	
000	must hold for at least 3 years from the date of t								
	exempt purposes for the entire holding period?	_	,	•			30a		Х
h	If "Yes," describe the arrangement in Part II.						504		
31	Does the organization have a gift acceptance p	olicy that re	ouires the review (of any nonstandard	contribut	tions?	31	x	
	Does the organization have a girl acceptance p Does the organization hire or use third parties of	-	-	•					
JZd			0	<i>,</i>			200	x	
L	contributions?						32a	Δ	
	If "Yes," describe in Part II.	aluma (a) fa	a huna of automatic	for which as here (alcod			
33	If the organization didn't report an amount in co	olumn (C) foi	a type of property	ior which column (a) is cheo	cked,			
	describe in Part II.	Ale e 1 a - 4				O de la calcal de	A / E	. 000	0000
LHA	For Paperwork Reduction Act Notice, see	ule instruct		J.		Schedule N	л (гогп	ເສສບ)	2022

Schedule M (Form 990) 2022

232141 09-09-22

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, LINE 32B:

A STOCKBROKER IS ENGAGED TO SELL DONATED SECURITIES IMMEDIATELY UPON

RECEIPT.

SCHEDULE M, PART I, COLUMN B:

THE NUMBER OF CONTRIBUTIONS COLUMN REPRESENTS THE NUMBER OF SEPARATE

CONTRIBUTIONS RECEIVED DURING THE FILING YEAR.

Schedule M (Form 990) 2022

232142 09-09-22

SCHEDULE O (Form 990)

Name of the organization

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 Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



LINCOLN PARK ZOOLOGICAL SOCIETY

Employer identification number 36-2512404

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

WILDLIFE EXPERIENCE IN THE HEART OF CHICAGO AND BY ADVANCING THE

HIGHEST QUALITY OF ANIMAL CARE, EDUCATION, SCIENCE AND CONSERVATION.

FORM 990, PART I, LINE 6:

LINCOLN PARK ZOO HAS APPROXIMATELY 302 VOLUNTEERS THAT PROVIDE SERVICE

ON A WEEKLY BASIS THROUGHOUT THE YEAR. THESE VOLUNTEERS ARE INVOLVED IN

THE FOLLOWING AREAS: GUEST ENGAGEMENT AMBASSADORS, FARM-IN-THE-ZOO

GUEST RELATIONS, RETAIL, MAIN ZOO GARDENING, NATURE BOARDWALK

GARDENING, EDIBLE GARDEN, VOLUNTEER ENRICHMENT GROUP, ADMINISTRATION

CONSERVATION AND SCIENCE, ZOOMONITOR, AND PUBLIC PROGRAMS. IN ADDITION

VOLUNTEERS COME TO HELP WITH SPECIAL EVENTS.

FORM 990, PART III, LINE 4D, OTHER PROGRAM SERVICES:

INCLUDING PUBLIC EDUCATION AND MEMBERSHIP. OTHER PROGRAM SERVICES _

EXPENSES \$ 5,003,466. INCL GRANTS OF \$ 283,181. REVENUE \$ 2,020,898.

FORM 990, SECTION B, LINE 11B: PART VI,

THE BOARD RETAINS THE SERVICES OF AN INDEPENDENT CPA FIRM TO PREPARE THE ORGANIZATION'S FORM 990. MANAGEMENT REVIEWS THE COMPLETED FORM 990 AND THE FORM 990 IS PROVIDED TO THE FINANCE COMMITTEE MEMBERS FOR REVIEW AND COMMENT. A COPY OF THE FORM 990 IS ALSO PROVIDED TO ALL VOTING MEMBERS OF THE GOVERNING BODY PRIOR TO FILING. THE GOVERNING BODY IS PROVIDED A REASONABLE AMOUNT OF TIME TO REVIEW THE RETURN AND ASK ANY QUESTIONS DIRECTLY TO THE ORGANIZATION'S MANAGEMENT PRIOR TO FILING.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. 232211 10-28-22

Schedule O (Form 990) 2022

Name of the organization LINCOLN PARK ZOOLOGICAL SOCIETY	Employer identification number 36-2512404
FORM 990, PART VI, SECTION B, LINE 12C:	
OFFICERS AND DIRECTORS ARE ANNUALLY REQUIRED TO PREPARE A	CONFLICT OF
INTEREST DISCLOSURE STATEMENT. POTENTIAL CONFLICTS ARE LOG	GED WITH AND
MONITORED BY THE ORGANIZATION'S MANAGEMENT.	
FORM 990, PART VI, SECTION B, LINE 15:	
THE PROCESS FOR DETERMINING COMPENSATION FOR THE ORGANIZAT	ION'S CEO, CFO

AND ZOO DIRECTOR INCLUDE A REVIEW AND APPROVAL BY THE COMPENSATION COMMITTEE OF THE BOARD BASED ON COMPARABLE DATA OF SIMILAR ORGANIZATIONS AND POSITIONS. THE RESULTS ARE DOCUMENTED IN WRITING. THE CEO, CFO AND ZOO DIRECTOR ARE NOT PART OF THE COMPENSATION COMMITTEE AND ARE NOT INVOLVED IN THESE COMPENSATION REVIEW PROCEDURES.

FORM 990, PART VI, SECTION C, LINE 19: GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE AVAILABLE THROUGH THE APPLICABLE GOVERNMENTAL AGENCIES AND BY REQUEST TO THE ORGANIZATION. THE CONFLICT OF INTEREST POLICY IS AVAILABLE UPON REQUEST TO THE ORGANIZATION.