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Return of Organization Exempt From Income Tax

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

OMB No. 1545-0047

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

Department of the Treasury

▶ Do not enter social security numbers on this form as it may be made public.

Open to Public Inspection

and ending A For the 2021 calendar year, or tax year beginning Check if applicable: C Name of organization D Employer identification number Address change CLEVELAND ZOOLOGICAL SOCIETY Name change 34-0816490 Doing business as Initial return Number and street (or P.O. box if mail is not delivered to street address) E Telephone number Room/suite Final return/ 3900 WILDLIFE WAY 216-635-3368 termin-ated 16,686,829. G Gross receipts \$ City or town, state or province, country, and ZIP or foreign postal code Amended return CLEVELAND, OH 44109 H(a) Is this a group return Applica-F Name and address of principal officer: SARAH CRUPI Yes X No for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Yes No Tax-exempt status: X = 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or If "No," attach a list. See instructions J Website: ► WWW.CLEVELANDZOOSOCIETY.ORG **H(c)** Group exemption number ▶ K Form of organization: X Corporation Trust Association Other > L Year of formation: 1957 M State of legal domicile: OH Part I Summary Briefly describe the organization's mission or most significant activities: CONNECTING PEOPLE WITH WILDLIFE Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets. 38 Number of voting members of the governing body (Part VI, line 1a) <u>38</u> Number of independent voting members of the governing body (Part VI, line 1b) 27 5 Total number of individuals employed in calendar year 2021 (Part V, line 2a) 6 Total number of volunteers (estimate if necessary) 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a b Net unrelated business taxable income from Form 990-T, Part I, line 11 7b **Prior Year Current Year** Contributions and grants (Part VIII, line 1h) 8,763,488. 11,518,798. Revenue Ō. 0. Program service revenue (Part VIII, line 2g) 785,779. 1,189,070. Investment income (Part VIII, column (A), lines 3, 4, and 7d) 10 -8,035.138,263. Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 9,541,232. 12,846,131. Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12) 7,355,224 8,307,557. Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0. 0. Benefits paid to or for members (Part IX, column (A), line 4) 1,404,368. 1,606,744. Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10) Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) **b** Total fundraising expenses (Part IX, column (D), line 25) 992,282 964,914. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 9,751,874. 10,879,215. Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25) 1,966,916. -210,642. Revenue less expenses. Subtract line 18 from line 12 Assets or Balances **Beginning of Current Year End of Year** 29,186,847. 22,626,585. 20 Total assets (Part X, line 16) 4,800,754. 8,128,360. 21 Total liabilities (Part X, line 26) Net/ 17,825,831. 21,058,487. 22 Net assets or fund balances. Subtract line 21 from line 20 Part II | Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Signature of officer Date Sign EXECUTIVE DIRECTOR SARAH CRUPI, Here Type or print name and title PTIN Print/Type preparer's name Preparer's signature if self-employed Paid HERZL GINSBURG, CPA HERZL GINSBURG, CPA 09/30/22 P01351635 Firm's name CIUNI & PANICHI, INC. Firm's EIN **▶** 34-1322309 Preparer Firm's address > 25201 CHAGRIN BLVD. #200 Use Only Phone no. (216)831-7171 CLEVELAND, OH 44122-5683 X Yes No May the IRS discuss this return with the preparer shown above? See instructions

Pai	t 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: THE CLEVELAND ZOOLOGICAL SOCIETY IS THE NONPROFIT PARTNER OF CLEVELAND
	METROPARKS ZOO, COMMITTED TO RAISING AWARENESS OF THE ZOO AS A
	COMMUNITY PRIORITY AND CIVIC ASSET; SECURING PRIVATE SUPPORT FOR THE
	ZOO; AND GIVING MEMBERS AND DONORS GREAT VALUE FOR THEIR INVESTMENT.
2	Did the organization undertake any significant program services during the year which were not listed on the
_	prior Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services? Yes X No
Ū	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.
7	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 \$ 3,883,893 • including grants of \$ 2,855,540 •) (Revenue \$
-1 a	IN 2021, THE ZOO SOCIETY BEGAN TO RECOVER FROM THE FINANCIAL STRESS
	BROUGHT ON BY COVID-19 IN 2020. WE EXCEEDED OUR REVENUE GOALS FOR
	ANNUAL OPERATIONS AND EVENTS, INCLUDING RECORD MEMBERSHIP REVENUE OF
	\$4.7 MILLION, AND THE ADDITION OF 11,000 NEW FAMILIES TO OUR MEMBERSHIP
	BASE. THE ZOO SOCIETY CONTINUED DIGITAL MEMBERSHIP COMMUNICATIONS AND
	RETURNED TO IN-PERSON EVENTS. IN TURN, THE ZOO SOCIETY PROVIDED
	\$2,734,530 IN GENERAL OPERATING SUPPORT TO CLEVELAND METROPARKS ZOO.
	4 000 000
4b	(Code:) (Expenses \$ 4,270,000. including grants of \$ 4,270,000.) (Revenue \$
	IN 2021, THE ZOO SOCIETY SECURED \$4,270,000 IN CAPITAL PROJECT SUPPORT.
	IN JULY 2021, THE BOARD OF DIRECTORS COMMITTED \$650,000 IN SUPPORT OF A
	CLEVELAND METROPARKS LAND ACQUISITION ADJACENT TO THE ZOO. IN OCTOBER
	2021, THE ZOO SOCIETY COMMITTED \$3.5 MILLION IN SUPPORT OF THE DESIGN
	AND CONSTRUCTION OF A NEW TROPICAL BEAR HABITAT. THIS MONEY WAS DONOR
	DESIGNATED FOR THE TROPICAL BEAR PROJECT. THE HABITAT WILL BREAK GROUND
	IN 2022. ALSO IN OCTOBER, THE ZOO SOCIETY COMMITTED \$120,000 FOR NEW
	AMBASSADOR ANIMAL HOLDING QUARTERS.
	4 400 440
4c	(Code:) (Expenses \$1,372,975. including grants of \$1,182,018.) (Revenue \$
	THE ZOO SOCIETY PROVIDED NEARLY \$1.2 MILLION TO THE ZOO IN SUPPORT OF
	ITS EDUCATION, CONSERVATION, ANIMAL CARE PROGRAMS, AND OTHER SPECIAL
	PROJECTS.
	THE ZOO SOCIETY PROVIDED MORE THAN \$263,000 IN SUPPORT OF ANIMAL CARE
	PROGRAMMING, THE RESULT OF A PUBLIC FUNDRAISING CAMPAIGN TO OFFSET THE
	COST OF KEEPING ANIMAL CARE AND WELFARE AT THE HIGHEST-STANDARDS EVEN
	DURING THE FINANCIAL CHALLENGES BROUGHT BY COVID-19.
	THE ZOO SOCIETY PROVIDED \$667,000 IN SUPPORT OF CONSERVATION
	PROGRAMMING. THIS FUNDING WAS A BLEND OF GENEROUS DONATIONS,
	(CONTINUED ON SCHEDULE O)
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$) (Revenue \$)
<u>4e</u>	
	Form 990 (202 ⁻

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect		Х	
_	during the tax year? If "Yes," complete Schedule C, Part II	4	Λ	
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	3		
Ü	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	_		
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,		Х	
	Part VI	11a	Λ	
D	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		x
_	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total	110		
·	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
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	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
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? Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,	14a		
b	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			
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to			
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
	1c and 8a? If "Yes," complete Schedule G, Part II	18	Х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
00	complete Schedule G, Part III	19		X
	Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20a 20b		<u> </u>
b 21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or	200		
-1	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Х	
	grand grand and an any section (y) mile in			

Part IV Checklist of Required Schedules (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete		.,	
	Schedule J	23	Х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%	00		Х
07	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		
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? If			
	"Yes," complete Schedule L, Part IV	28a		Х
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		Х
С	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	37	Х
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	20		Х
31	contributions? If "Yes," complete Schedule M Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	30		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete	31		
O_	Schedule N, Part II	32		х
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		Х
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		Х
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Х
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?	26		x
37	If "Yes," complete Schedule R, Part V, line 2 Did the organization conduct more than 5% of its activities through an entity that is not a related organization	36		21
31	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	L
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
	1 1 -		Yes	No
	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable			
	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	4 -	Х	
	(gambling) winnings to prize winners?	1c	_ 42	l .

132004 12-09-21

Part 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 27			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2 b	Х	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. See instructions.			
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Х
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 Accounts (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 transaction?	5b		Х
С	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5с		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible as charitable contributions?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	Х	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		Х
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		Х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			
	sponsoring organization have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
a	Initiation fees and capital contributions included on Part VIII, line 12 10a			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			
11	Section 501(c)(12) organizations. Enter: Gross income from members or shareholders 11a			
b	Gross income from other sources. (Do not net amounts due or paid to other sources against			
100	amounts due or received from them.) Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	IZa		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	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			
	organization is licensed to issue qualified health plans			
С	Enter the amount of reserves on hand 13c			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O	14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or			
	excess parachute payment(s) during the year?	15		Х
	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		Х
	If "Yes," complete Form 4720, Schedule O.			
17	Section 501(c)(21) organizations. Did the trust, any disqualified person, or mine operator engage in any			
	activities that would result in the imposition of an excise tax under section 4951, 4952 or 4953?	17		
	If "Yes," complete Form 6069.			

6 Form **990** (2021) 2021.04030 CLEVELAND ZOOLOGICAL SOCIET 16150__1 Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

_	Creck if Schedule O contains a response or note to any line in this Part VI			22
Sec	tion A. Governing Body and Management			
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year			
	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 38			
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?	2		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6	Did the organization have members or stockholders?	6		Х
7a				
	more members of the governing body?	7a		Х
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			
	persons other than the governing body?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	8b	Х	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
Ū	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)			
	tion Divided (mis decidal Broqueste information about politics not required by the internal revenue dead.)		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	100		
-	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
112	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		114		
12a		12a	Х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X	
		120		
·	on Schedule O how this was done	12c	х	
13		13	X	
14		14	X	
15	Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a review and approval by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
•	The organization's CEO, Executive Director, or top management official	15a	х	
a h	Other officers or key employees of the organization	15b	X	
D	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.	130		
162	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			
ioa		16a		Х
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	ioa		
b	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's			
	and the second s	16b		
Sec	exempt status with respect to such arrangements?tion C. Disclosure	100		
17	List the states with which a copy of this Form 990 is required to be filed ▶OH			
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3	s only) avails	able
	for public inspection. Indicate how you made these available. Check all that apply.	,5 0,119	, availe	
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, ar	d fina	ncial	
13	statements available to the public during the tax year.	u ma	ioidi	
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
20	SARAH CRUPI - 216-635-3368			
	3900 WILDLIFE WAY, CLEVELAND, OH 44109			

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 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, 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.

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

See the instructions for the order in which to list the persons above.

(A) Name and title	(B) Average hours per	box	not c	ss pe	ition more rson	than is bot	h an	(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of
	week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer of the state of the sta		Highest compensated employee	Ĺ	from the organization (W-2/1099-MISC/ 1099-NEC)	from related organizations (W-2/1099-MISC/ 1099-NEC)	other compensation from the organization and related organizations
(1) SARAH CRUPI	50.00			l				154 560		20 656
EXECUTIVE DIRECTOR	F0 00			Х				174,760.	0.	37,656.
(2) LETA OBERTACZ	50.00	1						111 520		06 064
DIRECTOR OF ADVANCEMENT	45 00					Х		111,539.	0.	26,964.
(3) MARY MCMILLAN	45.00	1		x				116,160.	0.	16,191.
CONTROLLER	4.00			Δ				110,100.	0.	10,191.
(4) VIRGINIA D. BENJAMIN LIFE DIRECTOR	4.00	x						0.	0.	0.
(5) CARL E. BLACK	2.00	^						0.	0.	0.
BOARD MEMBER	2.00	X						0.	0.	0.
(6) BARBARA BROWN, PHD	4.00	122						0.	0.	
SECRETARY	1.00	x						0.	0.	0.
(7) MARILYN K. BROWN	1.00							0.		
LIFE DIRECTOR		x						0.	0.	0.
(8) GEORGE S. COAKLEY	1.00									
LIFE DIRECTOR		Х						0.	0.	0.
(9) JULIE A. EDGAR, PHD	2.00									
BOARD MEMBER		Х						0.	0.	0.
(10) ROBERT ELMORE	2.00									
BOARD MEMBER		Х						0.	0.	0.
(11) THEODORE R. EVANS, JR.	2.00									
BOARD MEMBER		Х						0.	0.	0.
(12) SALLY EVERETT	1.00									
LIFE DIRECTOR		Х						0.	0.	0.
(13) THOMAS G. FISTEK	4.00									
VICE PRESIDENT		Х		Х				0.	0.	0.
(14) JAMES L. FRANCIS	4.00									
BOARD MEMBER		Х						0.	0.	0.
(15) GREGORY D. FRIEDMAN	2.00	1_						_	_	_
LIFE DIRECTOR	1	Х						0.	0.	0.
(16) LINDSAY M. GUZOWSKI	2.00								_	_
BOARD MEMBER	1	Х						0.	0.	0.
(17) CAROL HALL	1.00	۱							_	_
LIFE DIRECTOR		Х						0.	0.	0. Form 990 (2021)

Part VII Section A. Officers, Directors, Trus	tees, Key Em	ploy	ees	, and	d Hi	ghe	st C	ompensated Employe	es (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average hours per week	box	not c , unle cer an	ss pe	more rson	than is bot	h an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) LAWRENCE H. HATCH	2.00							_	_	_
BOARD MEMBER		Х						0.	0.	0.
(19) PAUL A. HECHKO, DVM BOARD MEMBER	2.00	x						0.	0.	0.
(20) LISA M. HUNT	4.00									
TREASURER		х		Х				0.	0.	0.
(21) JESSICA M. JUNG	1.00									
BOARD MEMBER		Х						0.	0.	0.
(22) LORI J. KALBERER BOARD MEMBER	2.00	х						0.	0.	0.
(23) BERNARD L. KARR	1.00									
BOARD MEMBER		Х						0.	0.	0.
(24) JOANNE M. KIRK	2.00									
BOARD MEMBER		Х						0.	0.	0.
(25) JOSEPH J. MAHOVLIC	1.00									
LIFE DIRECTOR		Х						0.	0.	0.
(26) SARA S. MESSINGER	1.00									
BOARD MEMBER		Х						0.	0.	0.
1b Subtotal								402,459.	0.	80,811.
c Total from continuation sheets to Part V							>	0.	0.	0.
d Total (add lines 1b and 1c)							<u> </u>	402,459.	0.	80,811.
2 Total number of individuals (including but r	at limited to th	000	licto	d al	201/	3) va/k	20 r	acaived more than \$100	000 of roportable	

compensation from the organization

Yes No 3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual ______ Х 4 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services X rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
37 77 1122 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	EVENT CATERING	410,197.
	PRINTING	120,176.
MEDICAL MUTUAL OHIO 2060 EAST NINTH STREET, CLEVELAND, OH 44115	HEALTH INSURANCE	107,858.

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

SEE PART VII, SECTION A CONTINUATION SHEETS

Part VII Section A. Officers, Directors, Tr (A) Name and title	ustees, Key Eı (B)	mple	oyee	s, a ((ligh	est	Compensated Employ (D)		(=)
	(B)			(0	2)			(D)	/ F\	/- \
Name and title				•	,			(D)	(E)	(F)
Name and title	Average				ition			Reportable	Reportable	Estimated
	hours	(с	heck	all t	that	app	ly)	compensation	compensation	amount of
	per							from	from related	other
	week	<u> </u>				loyee		the	organizations	compensation
	(list any hours for	irecto				emp		organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	related	e or c	stee			satec		(44-2/1099-141130)		and related
	organizations	Individual trustee or director	Institutional trustee		yee	Highest compensated employee				organizations
	below	dual	ution	ı.	Key employee	st co	-i-			
	line)	Indiv	Instit	Officer	Key e	Highe	Former			
27) ALLEN J. MISTYSYN	2.00									
SOARD MEMBER		Х						0.	0.	0.
28) A. MALACHI MIXON, IV	4.00									
VICE PRESIDENT	4.00	X		Х				0.	0.	0.
29) PATRICK S. MULLIN	1.00			22				•	•	•
JIFE DIRECTOR	1.00	Х						0.	0.	0.
30) GREGG G. MURESAN	4.00	^						0.	0.	0.
	4.00	x						0.	0.	0.
BOARD MEMBER	1 00	^						0.	0.	0.
31) CHRISTINE MYEROFF	4.00	7.		7.7					0.	0
PRESIDENT	2 00	Х		Х				0.	0.	0.
32) CHRISTOPHER NEHEZ	2.00	,,							0	0
SOARD MEMBER	0.00	Х						0.	0.	0.
33) JAMES M. PARISH	2.00	l							•	•
SOARD MEMBER	1	Х						0.	0.	0.
34) SHELLY M. PEET	4.00									
SOARD MEMBER		Х		Х				0.	0.	0.
35) ANTHONY R. PETRUZZI	1.00								_	
SOARD MEMBER		Х						0.	0.	0.
36) KIMBERLY PINTER	2.00									
SOARD MEMBER		Х						0.	0.	0.
37) RONALD E. PLAZEK	2.00									
SOARD MEMBER		Х						0.	0.	0.
38) SUSAN L. RACEY	2.00									
SOARD MEMBER		Х						0.	0.	0.
39) ROBERT S. REITMAN	4.00									
HAIRMAN EMERITUS		Х						0.	0.	0.
40) ROBERT J. ROGERS	2.00									
JIFE DIRECTOR		Х						0.	0.	0.
41) MARY KAY SCHNEIDER	4.00									
CICE PRESIDENT		Х		Х				0.	0.	0.
42) LAUREN SPILMAN	1.00								-	_
IFE DIRECTOR		х						0.	0.	0.
43) IRIS J. VAIL	1.00									
IFE DIRECTOR		x						0.	0.	0.
44) MICHAEL D. VAUGHN	4.00	+				\vdash				<u></u>
MMEDIATE PAST PRESIDENT	1.00	X						0.	0.	0.
45) THEODORE A. WAGNER	4.00								0.	J •
SOARD MEMBER	—	X					ĺ	0.	0.	0.
46) THOMAS A. WALTERMIRE	4.00	122				\vdash	\vdash		0.	0.
TO / INCHAS A. WADIEKHIKE	7.00	1					l	0.	0.	0.
SOARD MEMBER		X	1							

Form 990 CLEVELAN	D ZOOTO	<u> , T (</u>	AI	, ,	500	TI	STY	Y	34-081	6490
Part VII Section A. Officers, Directors, True	ustees, Key Eı	mple	oyee	s, a	nd F	ligh	est	Compensated Employ	ees (continued)	
(A) Name and title	(B) Average hours	verage Position Reportable					(E) Reportable compensation	(F) Estimated amount of		
	per week (list any hours for related organizations below line)	stee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MISC)	other compensatio from the organization and related organizations
47) SUSAN M. ZANETTI	4.00	x						0.	0.	O
OARD MEMBER		^						0.	0.	
		-								
	1	1	1	1	I	l	l	1		

Form 990 (2021) CLEVELAI
Part VIII Statement of Revenue

			Check if Schedule O contains	a response	or note to any lin	ne in this Part VIII			X
					,	(A)	(B)	(C)	(D)
						Total revenue	Related or exempt	Unrelated	Revenue excluded
							function revenue	business revenue	from tax under sections 512 - 514
σω				1.1					000110110 0 12 0 1 1
II i			Federated campaigns		4 555 000				
اع ق			Membership dues		4,777,200.				
Ţ,			Fundraising events		196,058.				
를 를		d	Related organizations	1d					
Contributions, Gifts, Grants and Other Similar Amounts		е	Government grants (contributions)) 1e	285,960.				
들었		f	All other contributions, gifts, grants, ar	nd					
ള			similar amounts not included above \dots	. 1f	6,259,580.				
당		g	Noncash contributions included in lines 1a-1f	1g \$	500,136.				
a S		h	Total. Add lines 1a-1f			11,518,798.			
					Business Code				
o l	2	а							
اء <u>ج</u>		b							
Ser				_					
ΕĒ		۳ C							
gra Re		d							
Program Service Revenue		e							
_			All other program service revenue						
_		g	Total. Add lines 2a-2f						
	3		Investment income (including divident						
			other similar amounts)			311,583.			311,583.
	4		Income from investment of tax-exe						
	5		Royalties						
				(i) Real	(ii) Personal				
	6	а	Gross rents 6a						
		b	Less: rental expenses 6b						
		С	Rental income or (loss) 6c						
		d	Net rental income or (loss)						
			· · · · · · · · · · · · · · · · · · ·	Securities	(ii) Other				
				,203,087.	6,500.				
		h	Less: cost or other basis	, ,	,				
e l		~		,318,201.	13,899.				
enr		_		884,886.	-7,399.				
Revenue		ا ا	Gain or (loss) 7c	-	-	877,487.			877,487.
유			Net gain or (loss)			077,407.			077,407.
)ther	8	а		.`					
0			including \$ 196,05	_					
			contributions reported on line 1c).		646 061				
			Part IV, line 18		646,861.				
			Less: direct expenses		508,598.				
			Net income or (loss) from fundrais	_		138,263.			138,263.
	9	а	Gross income from gaming activiti						
			Part IV, line 19	9a					
		b	Less: direct expenses	9b					
		С	Net income or (loss) from gaming a	activities					
	10	а	Gross sales of inventory, less retu	rns					
			and allowances	10a					
		b	Less: cost of goods sold						
			Net income or (loss) from sales of						
					Business Code				
on (11	а							
ng a		b							
		c							
Miscellaneous Revenue			All other revenue						
2			Total. Add lines 11a-11d						
	12	_	Total revenue. See instructions			12,846,131.	0.	0.	1,327,333.

132009 12-09-21

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

	on 501(c)(3) and 501(c)(4) organizations must com Check if Schedule O contains a respor	·		· · · · · · · · · · · · · · · · · · ·	
Do	not include amounts reported on lines 6b,	(A)	(B) Program service	(C) Management and	(D) Fundraising
7b,	8b, 9b, and 10b of Part VIII.	Total expenses	expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	8,074,762.	8,074,762.		
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	000 505			
	individuals. See Part IV, lines 15 and 16	232,795.	232,795.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	244 566	150 060	40 400	126 485
	trustees, and key employees	344,766.	158,862.	49,429.	136,475
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)			1.50	
7	Other salaries and wages	1,059,961.	479,540.	152,008.	428,413
8	Pension plan accruals and contributions (include	00.000		46 3-3	04 44=
	section 401(k) and 403(b) employer contributions)	90,992.	56,388.	12,979.	21,625
9	Other employee benefits	16,907.	10,477.	2,412.	4,018
10	Payroll taxes	94,118.	38,981.	16,096.	39,041
11	Fees for services (nonemployees):				
а	Management				
b	Legal	13,660.		13,542.	118
С	Accounting	47,227.		46,819.	408
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch O.)	43,350.		42,976.	374
12	Advertising and promotion	29,305.	19,506.		9,799
13	Office expenses	53,022.	34,197.	4,838.	13,987
14	Information technology	85,027.	8,466.	59,096.	17,465
15	Royalties				
16	Occupancy				
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,113.	978.	143.	3,992
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	51,847.		51,847.	
23	Insurance	153,438.	59,143.	28,016.	66,279
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 0.)				
а	OTHER EXPENSE	254,439.	183,207.	23,014.	48,218
b	POSTAGE & SHIPPING	171,395.	145,187.	979.	25,229
С	DUES & SUBSCRIPTIONS	41,792.	19,957.	4,668.	17,167
d	PRINTING & PUBLICATIONS	15,299.	4,422.		10,877
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	10,879,215.	9,526,868.	508,862.	843,485
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 X if following SOP 98-2 (ASC 958-720)	303,602.	241,364.	0.	62,238
	12-09-21				Form 990 (202

132010 12-09-21

Pa	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	note to a	ny line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing	683,035.	1	2,835,131.		
	2	Savings and temporary cash investments			3,177,523.	2	6,607,269.
	3	Pledges and grants receivable, net		3,824,294.	3	3,576,968.	
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul					
		controlled entity or family member of any of the	nese pers	sons		5	
	6	Loans and other receivables from other disqu	alified pe	ersons (as defined			
		under section 4958(f)(1)), and persons describ	oed in se	ction 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			62,665.	9	62,276.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	. 10a				
	b	Less: accumulated depreciation	. 10b	681,887.	132,747.		106,202.
	11	Investments - publicly traded securities			13,847,788.	11	14,964,487.
	12	Investments - other securities. See Part IV, lin			12		
	13	Investments - program-related. See Part IV, lin				13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11	898,533.	15	1,034,514.		
	16	Total assets. Add lines 1 through 15 (must ed			22,626,585.	16	29,186,847.
	17	Accounts payable and accrued expenses	4,731,646.	17	8,045,330.		
	18	Grants payable	<u> </u>	18	10 000		
	19	Deferred revenue			5,000.	19	10,000.
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complet				21	
ies	22	Loans and other payables to any current or fo					
Liabilities		trustee, key employee, creator or founder, sul					
Lia Tia		controlled entity or family member of any of the				22	
	23	Secured mortgages and notes payable to unr				23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	ies 17-24	i). Complete Part X	64,108.		73,030.
	00	of Schedule D			4,800,754.	25 26	8,128,360.
	26	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, c			4,000,734.	26	0,120,300.
es		and complete lines 27, 28, 32, and 33.	neck ne	ie 🖊 🔼			
auc	27	Net assets without donor restrictions			14,598,357.	27	16,825,773.
Bal	28	Net assets with donor restrictions			3,227,474.	28	4,232,714.
БП	20	Organizations that do not follow FASB ASC			3,22,,1,1,	20	1,202,,210
Ξ		and complete lines 29 through 33.	, 900, CI	leck liefe			
ō	29	Capital stock or trust principal, or current fund	ds			29	
ets	30	Paid-in or capital surplus, or land, building, or				30	
Ass	31	Retained earnings, endowment, accumulated				31	
Net Assets or Fund Balances	32	Total net assets or fund balances			17,825,831.	32	21,058,487.
~	33	Total liabilities and net assets/fund balances		ı	22,626,585.	33	29,186,847.
	1 00	Total habilities and not assets/fully balances			,,	- 55	Form 990 (2021)

Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI					X
1	Total revenue (must equal Part VIII, column (A), line 12)	1		,84		
2	Total expenses (must equal Part IX, column (A), line 25)	2		,87		
3	Revenue less expenses. Subtract line 2 from line 1	3		.,96		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4		,82		
5	Net unrealized gains (losses) on investments	5	1	.,16	8,7	23.
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		9	7,0	17.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	21	.,05	8,4	87.
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					X
					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 Schedul	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		Х
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed					
	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 separat					
	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	t.			
	review, or compilation of its financial statements and selection of an independent accountant?				Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.					
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si					
	Act and OMB Circular A-133?	J	·-	3a		х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requ	ired au	udit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		
	, , , , , , , , , , , , , , , , , , , ,					

SCHEDULE A

(Form 990)

Total

Department of the Treasury Internal Revenue Service

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.

OMB No. 1545-0047

Open to Public Inspection

Employer identification number Name of the organization CLEVELAND ZOOLOGICAL SOCIETY 34-0816490 Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only 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 organization described in section 170(b)(1)(A)(iii). A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 X An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: 10 An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 11 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV. Sections A and C. its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. Type III non-functionally integrated. A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). You must complete Part IV, Sections A and D, and Part V. Check this box if the organization received a written determination from the IRS that it is a Type I, Type III, Type III functionally integrated, or Type III non-functionally integrated supporting organization. f Enter the number of supported organizations Provide the following information about the supported organization(s). (iv) Is the organization listed (i) Name of supported (ii) EIN (iii) Type of organization (v) Amount of monetary (vi) Amount of other ì your governing document? (described on lines 1-10 organization support (see instructions) support (see instructions) Yes No above (see instructions))

Part II 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	71	•	,					
Cale	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
	Gifts, grants, contributions, and	(-,	(-,	(-)	(-,	(-,	(-)		
	membership fees received. (Do not								
	include any "unusual grants.")	7,742,739.	7,888,407.	7,817,056.	8,763,488.	11,518,798.	43,730,488.		
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	7,742,739.	7,888,407.	7,817,056.	8,763,488.	11,518,798.	43,730,488.		
5	The portion of total contributions								
	by each person (other than a								
	governmental unit or publicly								
	supported organization) included								
	on line 1 that exceeds 2% of the								
	amount shown on line 11,								
	column (f)						4,868,030.		
	Public support. Subtract line 5 from line 4.						38,862,458.		
	ction B. Total Support		1			1			
	ndar year (or fiscal year beginning in)	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total		
	Amounts from line 4	7,742,739.	7,888,407.	7,817,056.	8,763,488.	11,518,798.	43,730,488.		
8	Gross income from interest,								
	dividends, payments received on								
	securities loans, rents, royalties,	315,582.	343,090.	388,333.	303,326.	311,583.	1 661 014		
_	and income from similar sources	313,302.	343,090.	300,333.	303,320.	311,303.	1,661,914.		
9	Net income from unrelated business								
	activities, whether or not the		16,580.	48,192.		138,263.	203,035.		
40	business is regularly carried on		10,500.	40,172.		130,203.	203,033.		
10	Other income. Do not include gain or loss from the sale of capital								
	assets (Explain in Part VI.)								
11	Total support. Add lines 7 through 10						45,595,437.		
12	Gross receipts from related activities,	etc (see instructi	ons)			12			
	First 5 years. If the Form 990 is for the								
	organization, check this box and stor								
Sec	ction C. Computation of Publ								
14	Public support percentage for 2021 (line 6, column (f), c	divided by line 11,	column (f))		14	85.23 %		
	Public support percentage from 2020					15	86.88 %		
	33 1/3% support test - 2021. If the					nore, check this bo	x and		
	stop here. The organization qualifies	as a publicly supp	orted organization				►X		
b	33 1/3% support test - 2020. If the	organization did no	ot check a box on I	ine 13 or 16a, and	line 15 is 33 1/3%	or more, check th	nis box		
	and stop here. The organization qual	ifies as a publicly	supported organiza	ation			▶□		
17a	10% -facts-and-circumstances tes								
	and if the organization meets the fact	s-and-circumstand	es test, check this	box and stop he	r e. Explain in Part	VI how the organiz	ation		
	meets the facts-and-circumstances to	est. The organization	on qualifies as a pu	ublicly supported o	organization		▶□		
b	10% -facts-and-circumstances tes	t - 2020. If the org	anization did not c	heck a box on line	e 13, 16a, 16b, or	17a, and line 15 is	10% or		
	more, and if the organization meets the				-				
	organization meets the facts-and-circ								
18	8 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions								

Schedule A (Form 990) 2021

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

(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.)

Sec	ction A. Public Support		,				
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
1	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 bus-						
	iness 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						
	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						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support				•	•	
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2017	(b) 2018	(c) 2019	(d) 2020	(e) 2021	(f) Total
9	Amounts from line 6						
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						
c	Add lines 10a and 10b						
	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	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section	501(c)(3) organizat	tion,
	check this box and stop here						>
Sec	ction C. Computation of Publ	ic Support Pe	rcentage				
15	Public support percentage for 2021 (line 8, column (f), c	divided by line 13,	column (f))		15	%
	Public support percentage from 2020					16	%
	ction D. Computation of Inves						
17	Investment income percentage for 20)21 (line 10c, colur	mn (f), divided by li	ne 13, column (f))		17	%
	Investment income percentage from 2					18	%
	33 1/3% support tests - 2021. If the					33 1/3%, and line	17 is not
	more than 33 1/3%, check this box a						
b	33 1/3% support tests - 2020. If the						
	line 18 is not more than 33 1/3%, che	-					
20	Private foundation. If the organization						

Part IV | Supporting Organizations

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

Section A. 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.)

		Yes	No
	1		
	2		
	3a		
	3b		
	3с		
	4a		
	4a		
	4b		
	4c		
	5a		
	5b		
	5c		
	6		
	7		
	8		
	9a		
	0.		
	9b		
	9c		
			_
	10a		
	10b		
416		~ 000ì	

Par	t IV Supp	orting Organizations _(continued)			
		•		Yes	No
11	Has the organ	ization 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	e governing body of a supported organization?	11a		
b	A family memb	per of a person described on line 11a above?	11b		
С	A 35% contro	lled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part \		11c		
Sect	tion B. Type	e I Supporting Organizations			
				Yes	No
1		ning body, members of the governing body, officers acting in their official capacity, or membership of one or			
		ed organizations have the power to regularly appoint or elect at least a majority of the organization's officers,			
		ustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) rated, supervised, or controlled the organization's activities. If the organization had more than one supported			
		lescribe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the			
	supported org	anizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organi	zation operate for the benefit of any supported organization other than the supported			
		that operated, supervised, or controlled the supporting organization? If "Yes," explain in			
		roviding such benefit carried out the purposes of the supported organization(s) that operated,			
		controlled the supporting organization.	2		
Sect	ion C. Type	e II Supporting Organizations			
				Yes	No
1	•	y of the organization's directors or trustees during the tax year also a majority of the directors			
		each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	_	nt of the supporting organization was vested in the same persons that controlled or managed	_		
Soci		organization(s). Type III Supporting Organizations	1		
360	ion D. Air i	ype iii Supporting Organizations		V	N
	Diel the evereni			Yes	No
1		zation provide to each of its supported organizations, by the last day of the fifth month of the			
		tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
		y of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the governing documents in effect on the date of notification, to the extent not previously provided?	1		
2		ne organization's officers, directors, or trustees either (i) appointed or elected by the supported			
2		organization's onicers, directors, or trustees either (i) appointed or elected by the supported organization? If "No," explain in Part VI how			
		on maintained a close and continuous working relationship with the supported organization(s).	2		
3	_	the relationship described on line 2, above, did the organization's supported organizations have a			
•		ce in the organization's investment policies and in directing the use of the organization's			
	•	ets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
		anizations played in this regard.	3		
Sect		e III Functionally Integrated Supporting Organizations			
1		next to the method that the organization used to satisfy the Integral Part Test during the yea (see instructions)			
а		anization satisfied the Activities Test. Complete line 2 below.			
b	The orga	anization is the parent of each of its supported organizations. Complete line 3 below.			
С	The orga	anization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see in	structio	ns).	
2	Activities Test	Answer lines 2a and 2b below.		Yes	No
а	Did substantia	ally 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 suppor	ted organizations and explain how these activities directly furthered their exempt purposes,			
	how the organ	ization was responsive to those supported organizations, and how the organization determined			
	that these acti	vities constituted substantially all of its activities.	2a		
b	Did the activiti	es described on line 2a, above, constitute activities that, but for the organization's involvement,			
	one or more o	f the organization's supported organization(s) would have been engaged in? If "Yes," explain in			
	Part VI the rea	asons for the organization's position that its supported organization(s) would have engaged in			
	these activities	but for the organization's involvement.	2b	igsqcup	
3	Parent of Sup	ported Organizations. Answer lines 3a and 3b below.			
а	_	zation have the power to regularly appoint or elect a majority of the officers, directors, or			
		ch of the supported organizations? If "Yes" or "No" provide details in Part VI.	3a		
b	Did the organi	zation exercise a substantial degree of direction over the policies, programs, and activities of each			

Schedule A (Form 990) 2021

3b

of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

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

Schedule	A (For	m 990)	2021

5

<u>4</u> 5

6

Enter greater of line 2 or line 3.

instructions).

Income tax imposed in prior year

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions).

Schedule A (Form 990) 2021

4 Distributions for 2021 from Section D,

Part VI. See instructions.

a Applied to underdistributions of prior yearsb Applied to 2021 distributable amount

c Remainder. Subtract lines 4a and 4b from line 4.
 5 Remaining underdistributions for years prior to 2021, if any. Subtract lines 3g and 4a from line 2. For result greater

than zero, explain in Part VI. See instructions.
 Remaining underdistributions for 2021. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2022. Add lines 3j

line 7:

and 4c.

8 Breakdown of line 7:

a Excess from 2017

b Excess from 2018

c Excess from 2019

d Excess from 2020

e Excess from 2021

Part VI	Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12;
	Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information.
	(See instructions.)

SCHEDULE C (Form 990)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 Complete if the organization is described below. Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047 Open to Public

Inspection

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

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

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

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

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

Name of orga	nization	tions. Complete Fait III.		Empl	oyer identification number
		ND ZOOLOGICAL SO			34-0816490
Part I-A	Complete if the org	janization is exempt un	der section 501(c)	or is a section 527 o	rganization.
2 Political	campaign activity expendit	cation's direct and indirect polit ures gn activities		▶ \$	
Part I-B	Complete if the org	janization is exempt un	der section 501(c)	(3).	
1 Enter the	e amount of any excise tax	incurred by the organization ur	nder section 4955	▶\$	
2 Enter the	e amount of any excise tax	incurred by organization mana	gers under section 4955	5 ▶ \$	
3 If the org	ganization incurred a sectio	n 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a co	orrection made?				Yes No
b If "Yes,"	describe in Part IV.		-l		(-1/O)
		anization is exempt un		•	,,,,
		d by the filing organization for s	•		
		ization's funds contributed to d	•		
		s. Add lines 1 and 2. Enter here			
4 Did the f	iling organization file Form	1120-POL for this year?		Ψ	Yes No
made pa contribut	lyments. For each organiza tions received that were pr	nployer identification number (I tion listed, enter the amount pa omptly and directly delivered to additional space is needed, pro	aid from the filing organi o a separate political org	zation's funds. Also enter th panization, such as a separa	ne amount of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0

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

Schedule C (Form 990) 2021

LHA

132041 11-03-21

		CLEVEI	LAND	ZOOLOGICAI	SOCIETY	34-0	816490	Page 2	
Pa	rt II-A	Complete if t section 501(h		n is e	xempt under se	ction 501(c)(3) and f	iled Form 5768 (el	ection un	der
A C	heck >	if the filing of	organization belong	gs to an	affiliated group (and	list in Part IV each affiliate	d group member's nam	e, address, E	ΞΙΝ,
		expenses, a	and share of exces	s lobbyi	ng expenditures).				
B C	heck -	if the filing of	organization check	ed box	A and "limited contro	" provisions apply.			
		(The term	Limits on Lobb "expenditures" m		openditures nounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliate total	
1a	Total lol	obying expenditure	es to influence publ	ic opini	on (grassroots lobbyi	ng)			
b	Total lol	obying expenditure	es to influence a leg	gislative	body (direct lobbying	1)	15,000.		
С	Total lol	obying expenditure	es (add lines 1a and	d 1b)			15,000.		
d	Other ex	xempt purpose exp	oenditures				10,864,215.		
е	Total ex	empt purpose exp	enditures (add line	s 1c and	d 1d)		10,879,215.		
f	Lobbyin	ıg nontaxable amoı	unt. Enter the amou	unt from	the following table ir	n both columns.	693,961.		
	If the am	nount on line 1e, colu	umn (a) or (b) is:	The	lobbying nontaxable	amount is:			
	Not ove	r \$500,000		20%	of the amount on lin	e 1e.			
	Over \$5	00,000 but not ove	er \$1,000,000	\$100	0,000 plus 15% of the	e excess over \$500,000.			
	Over \$1	,000,000 but not o	over \$1,500,000	\$175	5,000 plus 10% of the	e excess over \$1,000,000			
	Over \$1	,500,000 but not o	over \$17,000,000	\$225	5,000 plus 5% of the	excess over \$1,500,000.			
	Over \$1	7,000,000		\$1,0	00,000.				
g	Grassro	ots nontaxable am	nount (enter 25% of	f line 1f)			173,490.		
h	Subtrac	t line 1g from line 1	1a. If zero or less, e	nter -0-			0.		
i	Subtrac	t line 1f from line 1	c. If zero or less, er	nter -0-			0.		
j	If there	is an amount other	than zero on eithe	r line 1h	or line 1i, did the org	anization file Form 4720			
	reportin	g section 4911 tax	for this year?					Yes	☐ No
	•			4-Year	Averaging Period U	nder Section 501(h)			•
		(Some organiza			` '	not have to complete al or lines 2a through 2f.)	l of the five columns b	elow.	
			Lobb	ying Ex	penditures During 4	-Year Averaging Period			

Lobbying Expenditures During 4-Year Averaging Period											
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) Total						
2a Lobbying nontaxable amount	494,768.	590,247.	637,594.	693,961.	2,416,570.						
b Lobbying ceiling amount (150% of line 2a, column(e))					3,624,855.						
c Total lobbying expenditures	15,000.	15,000.	15,000.	15,000.	60,000.						
d Grassroots nontaxable amount	123,692.	147,562.	159,399.	173,490.	604,143.						
e Grassroots ceiling amount (150% of line 2d, column (e))					906,215.						
f Grassroots lobbying expenditures					do C (Form 900) 2021						

Schedule C (Form 990) 2021

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	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description	(:	a)	(b)	
of th	e lobbying activity.	Yes	No	Amo	ount
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of: Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements?				
d	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?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities?				
i	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				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Pai	t III-A Complete if the organization is exempt under section 501(c)(4), section	on 501(c)	(5), or se	ction	
	501(c)(6).				
				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				
Pai	t III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(4)				. 0 :-
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered answered "Yes."			III-A, IIn	e 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 political	cal			
	expenses for which the section 527(f) tax was paid).				
	Current year				
b	Carryover from last year				
С	7.5.55				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exc				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and p				
_	expenditure next year?				
	Taxable amount of lobbying and political expenditures. See instructions		5		
	t IV Supplemental Information	" N D 11	1 4 11 4	10.0	
	ide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	ist); Part i	I-A, lines 1 a	and 2 (See	
	uctions); and Part II-B, line 1. Also, complete this part for any additional information. RT II-A, LINE 1, LOBBYING ACTIVITIES:				
IN	2021, THE CLEVELAND ZOOLOGICAL SOCIETY PARTICIPATE	D IN I	LOBBYI	NG	
AC'	TIVITIES BY CONTRIBUTING TO THE COMMITTEE FOR OUR M	ETROPA	ARKS,	AN	
IN	DEPENDENT GROUP OF CITIZENS RESPONSIBLE FOR ALL ASP	ECTS (OF MAN	AGING	THE
<u>CL</u>	EVELAND METROPARKS 10-YEAR LEVY CAMPAIGN CYCLE.				

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

OMB No. 1545-0047

Inspection

Name of the organization

CLEVELAND ZOOLOGICAL SOCIETY

Employer identification number 34-0816490

Par			or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	(a) Done, danied idinae	(2)
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	L	d funds
3	are the organization's property, subject to the organization's	_	
6	Did the organization inform all grantees, donors, and donor a		
Ü	for charitable purposes and not for the benefit of the donor of		
Par		panization answered "Yes" on Form 990. Pa	
1	Purpose(s) of conservation easements held by the organizat		
·	Preservation of land for public use (for example, recrea		historically important land area
	Protection of natural habitat		certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a quali	fied conservation contribution in the form o	f a conservation easement on the last
	day of the tax year.		Held at the End of the Tax Year
а	Total number of conservation easements		2a
	Total acreage restricted by conservation easements		
	Number of conservation easements on a certified historic str		
	Number of conservation easements included in (c) acquired		
	listed in the National Register		
3	Number of conservation easements modified, transferred, re		
	year▶		
4	Number of states where property subject to conservation ea	sement is located ►	
5	Does the organization have a written policy regarding the pe	riodic monitoring, inspection, handling of	
	violations, and enforcement of the conservation easements i	t holds?	Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing conse	ervation easements during the year
	>		
7	Amount of expenses incurred in monitoring, inspecting, hand	dling of violations, and enforcing conservation	on easements during the year
	▶ \$		
8	Does each conservation easement reported on line 2(d) above	ve satisfy the requirements of section 170(h	n)(4)(B)(i)
	and section 170(h)(4)(B)(ii)?		Yes No
9	In Part XIII, describe how the organization reports conservation	on easements in its revenue and expense s	statement and
	balance sheet, and include, if applicable, the text of the footi	note to the organization's financial statemen	nts that describes the
	organization's accounting for conservation easements.		
Par	t III Organizations Maintaining Collections o		her Similar Assets.
	Complete if the organization answered "Yes" on Form		
1a	If the organization elected, as permitted under FASB ASC 95	•	
	of art, historical treasures, or other similar assets held for pul	, ,	•
	service, provide in Part XIII the text of the footnote to its final		
b	If the organization elected, as permitted under FASB ASC 95		
	art, historical treasures, or other similar assets held for public	e exhibition, education, or research in furthe	erance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		
	(ii) Assets included in Form 990, Part X		
2	If the organization received or held works of art, historical tre		gain, provide
	the following amounts required to be reported under FASB A		
	Revenue included on Form 990, Part VIII, line 1		
	Assets included in Form 990, Part X		
LHA	For Paperwork Reduction Act Notice, see the Instruction	s for Form 990.	Schedule D (Form 990) 2021

132051 10-28-21

Sche	edule D (Form 990) 2021 CLEVELAN	ID ZOOLOGIC	AL SOCIET	Y		34-08	16490	Pa	age 2
	rt III Organizations Maintaining C	ollections of Art	, Historical Tr	easures, or	Other S	Similar Asse	ts(continu	ıed)	
3	Using the organization's acquisition, accession	n, and other records	, check any of the	following that n	nake signi	ificant use of its			
	collection items (check all that apply):								
а	Public exhibition	d	Loan or exc	hange program					
b	Scholarly research	е	Other						
С	Preservation for future generations								
4	Provide a description of the organization's co	lections and explain	how they further t	he organization	's exempt	purpose in Par	t XIII.		
5	During the year, did the organization solicit or	receive donations of	art, historical trea	sures, or other	similar as:	sets	_		
	to be sold to raise funds rather than to be ma						Yes		No
Par	rt IV Escrow and Custodial Arrang	•	e if the organizatio	n answered "Ye	es" on For	rm 990, Part IV,	line 9, or		
	reported an amount on Form 990, Part								
1a	Is the organization an agent, trustee, custodia						7		1
	on Form 990, Part X?					L	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	nd complete the folk	owing table:		г	1			
							Amount		
	Beginning balance					1c			
	Additions during the year					1d			
	Distributions during the year					1e			
	Ending balance					1f	1	_	T
	Did the organization include an amount on Fo				-	′∟	Yes	\vdash	│ No
_	If "Yes," explain the arrangement in Part XIII.								
rai	rt V Endowment Funds. Complete if					Three years back	(e) Four y	aare l	hack
	<u> </u>	(a) Current year	(b) Prior year						
	Beginning of year balance	7,796,120.	6,904,368.	5,532,		5,922,658.			253. 760.
	Contributions	1,390,785.	1 120 552	·	176.	144,173. -363,880.			
	Net investment earnings, gains, and losses	208,500.	1,130,553.	87,		170,513.			$\frac{207.}{562.}$
	Grants or scholarships	200,300.	230,001.	87,	030.	170,313.		205,	302.
е	Other expenditures for facilities								
	and programs								
	Administrative expenses	8,978,405.	7,796,120.	6,904,	368	5,532,438.	5 (922	658.
	End of year balance		<u> </u>	<u> </u>	300.	3,332,430.	J , .	, ,	030.
	Board designated or quasi-endowment	00 1100	%	a)) Held as.					
	Permanent endowment • 4.4600	%	70						
	Term endowment 5.4300 %								
C	The percentages on lines 2a, 2b, and 2c shou								
32	Are there endowment funds not in the posses		ion that are hold a	nd administoro	d for the c	rganization			
Ja	by:	Sion of the organizat	ion that are neid a	ind administered		nganization	1	/es	No
	•							-	X
	(ii) Unrelated organizations (iii) Related organizations								X
h	If "Yes" on line 3a(ii), are the related organizate								
4	Describe in Part XIII the intended uses of the						30		
_	rt VI Land, Buildings, and Equipme		vincin iunus.						
	Complete if the organization answered		Part IV, line 11a. S	See Form 990, F	Part X, line	e 10.			
	Description of property	(a) Cost or oth	, , ,	or other	(c) Accur	l l	(d) Book	value	9
		basis (investme	ent) basis	(other)	depred	ciation			

	Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value			
1a	Land							
b	Buildings							
С	Leasehold improvements							
d	Equipment		788,089.	681,887.	106,202.			
	Other							
Tota	Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)							

Schedule D (Form 990) 2021

Schedule D) (Form 990) 2021	CLEVELAND	ZOOLOGICAL	SOCIETY	34-0816490	Page
Part VII	Investments -	Other Securities.				

Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶		
Part VIII Investments - Program Related.		

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: 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.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	•

Part X Other Liabilities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1.	(a) Description of liability	(b) Book value
(1)	Federal income taxes	
(2)	ANNUITY OBLIGATIONS	73,030.
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total.	(Column (b) must equal Form 990, Part X, col. (B) line 25.)	73,030.

^{2.} Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII... X

Schedule D (Form 990) 2021

10,879,215.

Sche	dule D (Form 990) 2021 CLEVELAND ZOOLOGICAL SOC	IETY		34-	0816490 Page 4
Pai	t XI Reconciliation of Revenue per Audited Financial State	ments Wi	th Revenue per R	eturi	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total revenue, gains, and other support per audited financial statements			1	10,753,577.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	1,168,723.		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	151,453.		
е	Add lines 2a through 2d			2e	1,320,176.
3	Subtract line 2e from line 1			3	9,433,401.
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			
b	Other (Describe in Part XIII.)	4b	3,412,730.		
С	Add lines 4a and 4b			4c	3,412,730.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	12,846,131.
Pai	t XII Reconciliation of Expenses per Audited Financial Stat	ements W	ith Expenses per	Retu	ırn.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	12a.			
1	Total expenses and losses per audited financial statements			1	7,919,177.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:				
а	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d	54,436.		
е	Add lines 2a through 2d			2e	54,436.
3	Subtract line 2e from line 1			3	7,864,741.
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIII.)	4b	3,014,474.		
С	Add lines 4a and 4b			4c	3,014,474.

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) Part XIII Supplemental Information.

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 V, LINE 4:

c Add lines 4a and 4b

THE ZOOFUTURES FUND ASSETS AVAILABLE FOR DISTRIBUTION ARE TO BE USED FOR CONSERVATION/SCIENCE PROGRAMS AND CLEVELAND ZOOLOGICAL SOCIETY PROJECTS. THERE ARE NO SET RESTRICTIONS ON HOW THE FUNDS MAY BE USED, BUT GENERALLY THIS INCLUDES ITEMS "ABOVE AND BEYOND" ROUTINE PROGRAM AND OPERATIONS.

PART X, LINE 2:

THE ZOO SOCIETY IS TAX-EXEMPT, UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (IRC) OF 1986. NO PROVISION FOR FEDERAL INCOME TAXES HAS BEEN REPORTED IN ITS FINANCIAL STATEMENTS. IN ADDITION, THE ZOO SOCIETY HAS BEEN CLASSIFIED AS AN ORGANIZATION THAT IS NOT A "PRIVATE FOUNDATION" WITHIN THE MEANING OF SECTION 509(A) OF THE IRC.

IN ACCORDANCE WITH THE "INCOME TAXES" TOPIC OF THE FASB ASC, UNCERTAIN

INCOME TAX POSITIONS ARE EVALUATED AT LEAST ANNUALLY BY MANAGEMENT. AS OF

DECEMBER 31, 2021 AND 2020, THE ZOO SOCIETY HAS IDENTIFIED NO UNCERTAIN

INCOME TAX POSITIONS AND HAS INCURRED NO AMOUNTS FOR INCOME TAX PENALTIES

AND INTEREST FOR THE YEARS THEN ENDED. THE ZOO SOCIETY FILES INFORMATION

RETURNS IN THE UNITED STATES AND LOCAL JURISDICTIONS.

PART	XΤ	LINE	2D	_	OTHER	ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	97,017.
SPECIAL EVENTS EXPENSE	47,037.
LOSS ON SALE OF EQUIPMENT	7,399.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	151,453.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

ASC	606	EFFECTS	_	SEE	NOTE	BELOW	3	.412	,730.
1100	000			2	110 11		5	,	, , , , ,

PART XII, LINE 2D - OTHER ADJUSTMENTS:

SPECIAL EVENTS EXPENSE	47,037.
LOSS ON SALE OF EQUIPMENT	7,399.
TOTAL TO SCHEDULE D, PART XII, LINE 2D	54,436.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

ASC 606 EFFECTS - SEE NOTE BELOW	3,014,474.
ASC 000 EFFECIS - SEE NOIE BELOW	J.U14,4/4•

PART XI, LINE 4B & PART XII, LINE 4B:

IN 2019, THE CLEVELAND ZOOLOGICAL SOCIETY ADOPTED, ON A RETROSPECTIVE BASIS, ASU 2014-09 FOR ITS AUDIT PRESENTATION WITH REGARD TO NETTING

Schedule D (Form 990) 2021

Part Alli Supplemental information (continued)
OPERATING AGREEMENT EXPENSES AGAINST MEMBERSHIP REVENUE. THE IRS 990
INSTRUCTIONS STATE THAT "UNLESS INSTRUCTED OTHERWISE, THE ORGANIZATION
GENERALLY SHOULD USE THE SAME ACCOUNTING METHOD ON THE RETURN (INCLUDING
THE FORM 990 AND ALL SCHEDULES) TO REPORT REVENUE AND EXPENSES THAT IT
REGULARLY USES TO KEEP ITS BOOKS AND RECORDS. TO BE ACCEPTABLE FOR FORM
990 REPORTING PURPOSES, HOWEVER, THE METHOD OF ACCOUNTING MUST CLEARLY
REFLECT INCOME." AS THE ZOO SOCIETY CONSIDERS THE OPERATING AGREEMENT
EXPENSES A MAJOR COMPONENT OF ITS PROGRAMMATIC SUPPORT TO CLEVELAND
METROPARKS ZOO, IT RECORDS THE FULL AMOUNT OF MEMBERSHIP REVENUE AND
OPERATING AGREEMENT EXPENSE ON ITS INTERNAL STATEMENTS RATHER THAN A NET
REVENUE FIGURE. THE ZOO SOCIETY'S 2021 AUDITED FINANCIAL STATEMENTS
INCLUDE A SUPPLEMENTAL SCHEDULE TO RECONCILE THE DIFFERENCES BETWEEN THE
METHODS OF PRESENTATION.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

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.

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

2021
Open to Public Inspection

Name of the organization

Employer identification number

CLEVELAND ZOOLOGICAL SOCIETY

| Part I | General Information on Activities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? _____X Yes ____ No
 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.
 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)
 (a) Region _____ (b) Number of _____ (c) Number of ______ (d) Activities conducted in the region ______ (e) If activity listed in (d) ______ (f) Total

(a) Region	(b) Number of	(c) Number of	an be duplicated if additional space is (d) Activities conducted in the region		(f) Total
(=, == g===	offices	employees,	(by type) (such as, fundraising, pro-	is a program service,	expenditures
	in the region	agents, and independent	gram services, investments, grants to		for and
		employees, agents, and independent contractors	recipients located in the region)	of service(s) in the region	investments in the region
		in the region			in the region
EAST ASIA & THE				CONSERVATION AND	
PACIFIC			GRANTMAKING	RESEARCH.	87,885
ave avvenu imprai			ana	CONSERVATION AND	10.000
SUB-SAHARAN AFRICA			GRANTMAKING	RESEARCH.	10,000
				CONSERVATION AND	
SOUTH AMERICA			GRANTMAKING	RESEARCH.	88,910
					,
				CONSERVATION AND	
EUROPE			GRANTMAKING	RESEARCH.	100,000
					1
3 a Subtotal	0	(286,795
b Total from continuation sheets to Part I	0				0
c Totals (add lines 3a					
and 3b)					286,795

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

Schedule F (Form 990) 2021

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)
		EAST ASIA AND THE						
		PACIFIC -						
		AUSTRALIA,	FIELD PARTNER					
		BRUNEI, BURMA,	SUPPORT.	14,885.	WIRE TRANSFER	0.		
		EAST ASIA AND THE		,				
		PACIFIC -						
		AUSTRALIA,	FIELD PARTNER					
			SUPPORT.	20,000.	WIRE TRANSFER	0.		
	<u> </u>	EAST ASIA AND THE						
		PACIFIC -						
		AUSTRALIA,	FIELD PARTNER					
		BRUNEI, BURMA,	SUPPORT.	35,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC -						
		AUSTRALIA,	FIELD PARTNER					
		BRUNEI, BURMA,	SUPPORT.	10,000.	WIRE TRANSFER	0.		
		EAST ASIA AND THE						
		PACIFIC -						
		AUSTRALIA,	FIELD PARTNER					
		BRUNEI, BURMA,	SUPPORT.	8,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND) -	FIELD PARTNER					
		ALBANIA, ANDORRA,	SUPPORT.	60,000.	WIRE TRANSFER	0.		
			FIELD PARTNER					
		SOUTH AMERICA	SUPPORT.	5,732.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND &						
		GREENLAND) -	FIELD PARTNER					
		ALBANIA, ANDORRA,	SUPPORT.	10,000.	WIRE TRANSFER	0.		

Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as a tax exempt 501(c)(3) organization by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter
 Enter total number of other organizations or entities

11 0

Part II Continuation of	f Grants and Other	Assistance to Organiza	ations or Entities Outside the	United States.	(Schedule F (Form 9	90), Part II, line	1)	
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 non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV appraisal, other)
			FIELD PARTNER					
			SUPPORT.	54,000.	WIRE TRANSFER	0.		
		EUROPE (INCLUDING						
		ICELAND & GREENLAND) -	FIELD PARTNER					
			SUPPORT.	30 000	WIRE TRANSFER	0.		
		indiana, internal,	por roker,	30,000.	WIRE IMMODEL	•••		

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. (h) Method of valuation (book, FMV, appraisal, other) (c) Number of (d) Amount of (f) Amount of (e) Manner of (g) Description of (b) Region (a) Type of grant or assistance recipients cash grant cash disbursement noncash noncash assistance assistance CONSERVATION PARTNER SUPPORT. SOUTH AMERICA 29,178. WIRE TRANSFER 0.

Part IV	Foreign Forms
•	

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	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? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X 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? If "Yes," 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)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)	Yes	X No

Schedule F (Form 990) 2021

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 I, LINE 2:

ALL GRANTS ARE AWARDED BASED ON THE YEARLY CONSERVATION BUDGET. **PROJECTS** ARE FUNDED VIA PROPOSALS SUBMITTED TO THE CURATOR OF CONSERVATION AND EVALUATED THROUGH A VARIETY OF MEANS DEPENDING ON THE PROGRAM. ALL AWARDS ARE APPROVED BY THE ZOO EXECUTIVE DIRECTOR. ALL PROGRAMS HAVE EXISTING GUIDELINES DEFINING PROGRAM GOALS/FOCUS, FUNDING/AWARD AMOUNTS AVAILABLE, CRITERIA FOR FUNDING, PROCESS FOR APPLICATION AND REVIEW AND EXPECTATIONS OF GRANT RECIPIENTS. PROCEDURES AND GUIDELINES EXIST FOR GRANTEE ELIGIBILITY, SELECTION AND FUNDING CRITERIA. RECORDS ARE KEPT ON ALL PROJECTS WHICH ARE AWARDED FUNDING, FROM THE INITIAL APPLICATION THROUGH COMPLETION OF GRANT AGREEMENT/COMMITMENT. ALL INTERNATIONAL PROPOSALS ARE PUT THROUGH A REVIEW PROCESS, WHICH INCLUDES AN EVALUATION OF THE PRINCIPAL INVESTIGATOR OR ORGANIZATION REQUESTING FUNDS, ANY COLLABORATORS AND LETTERS OF COMMITMENT/SUPPORT (REQUIRED FOR ALL COLLABORATORS, GOVERNING BODIES, PROTECTED AREA, ORGANIZATION/GROUP OR INSTITUTION WHOSE COOPERATION IS NECESSARY FOR PROJECT COMPLETION), AND/OR LETTERS OF RECOMMENDATION. UPON SELECTION, AWARDEES ARE REQUIRED TO PROVIDE WRITTEN ACCEPTANCE OF AWARD, INCLUDING A SIGNED GRANT AGREEMENT BEFORE FUNDS ARE RELEASED. VERIFICATION MUST ALSO BE SENT ONCE FUNDS ARE RECEIVED. GRANTEES MUST MAINTAIN CONTACT WITH AND PROVIDE PERIODIC UPDATES AND SUBMIT A FINAL REPORT, INCLUDING ACCOUNTING OF FUNDS WITHIN ONE YEAR OF RECEIPT OF THE GRANT.

PART I, LINE 3:

ALL FUNDS LISTED WERE GRANT DISTRIBUTIONS COVERED BY THE TERMS AND CONDITIONS DESCRIBED ABOVE.

Schedule F (Form 990) 2021 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 III, COL (C): THE ORGANIZATION ACCOUNTS FOR EACH GRANT AWARDED AND THE NUMBER OF RECIPIENTS IS AN EXACT NUMBER. PART II, LINE 1: THE FINANCIAL STATEMENTS AND GRANT AWARDS ARE PREPARED USING THE ACCRUAL METHOD OF ACCOUNTING. PART III: THE FINANCIAL STATEMENTS AND GRANT AWARDS ARE PREPARED USING THE ACCRUAL METHOD OF ACCOUNTING.

SCHEDULE G (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, line 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2021

Open to Public Inspection

Name of the organization

CLEVELAND ZOOLOGICAL SOCIETY

Employer identification number 34-0816490

	<u> </u>				31 0010						
Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.											
1 Indicate whether the organization raised funds through any of the following activities. Check all that apply. a Mail solicitations											
d In-person solicitations 2 a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.											
(i) Name and address of individual or entity (fundraiser) (ii) Activity (iii) Activity (iii) Did fundraiser have custody or control of contributions? (iv) Gross receipts from activity (v) Amount paid to (or retained by) fundraiser listed in col. (i) (vi) Amount paid to (or retained by) fundraiser listed in col. (i)											
		Yes	No								
7 Total 3 List all states in which the organization or licensing.	on is registered or licensed to solicit (contrib	utions	s or has been notified	d it is exempt from re	egistration					

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

Schedule G (Form 990) 2021

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 contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000

		of fundraising event contributions and gro	oss income on Form 990)-EZ, lines 1 and 6b. List	events with gross receip	ots greater than \$5,000.
			(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
			TWILIGHT AT	SUNSET		(add col. (a) through
			THE ZOO	SAFARIS	4	col. (c))
a)			(event type)	(event type)	(total number)	COI. (C))
Revenue						
eve	1	Gross receipts	673,910.	131,774.	37,235.	842,919.
ш						
	2	Less: Contributions	68,218.	119,400.	8,440.	196,058.
	3	Gross income (line 1 minus line 2)	605,692.	12,374.	28,795.	646,861.
	4	Cash prizes				
	5	Noncash prizes				
ses						
oen	6	Rent/facility costs	43,710.		14,771.	58,481.
Direct Expenses						
ect	7	Food and beverages	352,766.	22,397.	23,354.	398,517.
ā						
	8	Entertainment	2,500.		0 222	2,500.
	9	Other direct expenses	45,345.	1,422.	2,333.	49,100.
						508,598.
Da		Net income summary. Subtract line 10 from li				138,263.
Pa	rt I		answered "Yes" on Form	1 990, Part IV, line 19, or	reported more than	
		\$15,000 on Form 990-EZ, line 6a.	Ī	(b) Pull tabs/instant		(d) Total gaming (add
ine			(a) Bingo	bingo/progressive bingo	(c) Other gaming	col. (a) through col. (c))
Revenue						(a) throught con (b)
Re	4	Gross revenue				
	•	GIOSS TEVERIDE				
	2	Cash prizes				
ses	_	Guerr pri 250				
Direct Expenses	3	Noncash prizes				
Ť						
rec	4	Rent/facility costs				
	5	Other direct expenses				
			Yes %	Yes%	Yes %	
	6	Volunteer labor	☐ No	No No	☐ No	
	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)		<u></u>	
		ter the state(s) in which the organization condu	_			
		the organization licensed to conduct gaming ac	ctivities in each of these	states?		Yes No
b	If "	No," explain:				
40	141	and the constitution of th				V
		ere any of the organization's gaming licenses re	•	-	•	Yes Mo
b	IT "	Yes," explain:				

Schedule G (Form 990) 2021

132082 10-21-21

Sch	nedule G (Form 990) 2021	CLEVELAND	ZO	OLOGICA	L SOCIETY	Y	34-0	816	490	Page 3
11	Does the organization conduct	gaming activities with r	nonm	nembers?					Yes	☐ No
12	Is the organization a grantor, be									
	to administer charitable gaming	?							Yes	└── No
	Indicate the percentage of gam	•					1		ı	
	The organization's facility									%
	An outside facility							13b		%
14	Enter the name and address of	the person who prepar	res tn	ne organization	's gaming/specia	al events books and	records:			
	Name									
	Address ►									
15a	a Does the organization have a co	ontract with a third part	ty fro	m whom the o	ganization receiv	ves gaming revenue	?		Yes	☐ No
ŀ	If "Yes," enter the amount of ga	mina revenue received	d by t	he organization	ı ▶ \$	and the	amount			
	of gaming revenue retained by									
(If "Yes," enter name and addres									
	Name									
	Address >									
16	Gaming manager information:									
	Name									
	Gaming manager compensation	ı ▶ \$		-						
	Description of services provided	d >								
	Becomplien of convices provides									
	Director/officer	Employee		Indepe	endent contracto	or				
				· '						
17	Mandatory distributions:									
á	a Is the organization required und		harita	able distribution	ns from the gami	ng proceeds to				
	retain the state gaming license?								Yes	└── No
t	 Enter the amount of distribution organization's own exempt active 	•			a to other exemp	ot organizations or s	pent in the			
Pa	art IV Supplemental Info				ired by Part I. line	e 2b. columns (iii) ar	nd (v): and Par	t III. li	nes 9.	9b. 10b.
	15b, 15c, 16, and 17b,				•		(1),	,	,	,,
				-						

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

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

2021

OMB No. 1545-0047

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

➤ Attach to Form 990.

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

Open to Public Inspection

Name of the organization

CLEVELAND ZOOLOGICAL SOCIETY

Beneral Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection

X Yes criteria used to award the grants or assistance? No 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States. Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (f) Method of 1 (a) Name and address of organization (c) IRC section (b) EIN (d) Amount of (e) Amount of (a) Description of (h) Purpose of grant valuation (book, or government (if applicable) cash grant noncash noncash assistance or assistance FMV, appraisal, assistance other) CLEVELAND METROPOLITAN PARK DISTRICT - 4101 FULTON ROAD -34-6000704 ANIMAL CARE AND RESEARCH CLEVELAND, OH 44111 263,042 0 CLEVELAND METROPOLITAN PARK DISTRICT - 4101 FULTON ROAD -34-6000704 EDUCATION CLEVELAND, OH 44111 285,518 CLEVELAND METROPOLITAN PARK DISTRICT - 4101 FULTON ROAD -CLEVELAND, OH 44111 34-6000704 4,270,000 0 CAPITAL PROJECTS CLEVELAND METROPOLITAN PARK DISTRICT - 4101 FULTON ROAD -CLEVELAND OH 44111 34-6000704 434 205 FIELD CONSERVATION

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

1.

3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) 2021

(a) Type of grant or assistance	(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
Part IV Supplemental Information. Provide the informat	tion required in Part I, lin	e 2; Part III, columr	n (b); and any other a	dditional information.	
ART I, LINE 2:					
LL GRANTS ARE AWARDED BASED OI	N THE YEARLY	CONSERVAT	rion BUDGET	• PROJECTS	
RE FUNDED VIA PROPOSALS SUBMI'	TTED TO THE	CURATOR OF	F CONSERVAT	ION AND	
VALUATED THROUGH A VARIETY OF	MEANS DEPEN	DING ON TH	HE PROGRAM.	ALL AWARDS	
RE APPROVED BY THE ZOO EXECUT:			OGRAMS HAVE	EXISTING	
UIDELINES DEFINING PROGRAM GOZ					
RITERIA FOR FUNDING, PROCESS				·	
F GRANT RECIPIENTS. PROCEDUR	ES AND GUIDE	LINES EXIS	ST FOR GRAN	TEE	

Schedule I (Form 990) CLEVELAND ZOOLOGICAL SOCIETY 34-0816490 P. Part IV Supplemental Information Part IV Supplem	age 2
PROJECTS WHICH ARE AWARDED FUNDING, FROM THE INITIAL APPLICATION THROUGH	 I
COMPLETION OF GRANT AGREEMENT/COMMITMENT. ALL INTERNATIONAL PROPOSALS A	
PUT THROUGH A REVIEW PROCESS, WHICH INCLUDES AN EVALUATION OF THE PRINCI	
	·FAI
INVESTIGATOR OR ORGANIZATION REQUESTING FUNDS, ANY COLLABORATORS AND	
LETTERS OF COMMITMENT/SUPPORT (REQUIRED FOR ALL COLLABORATORS, GOVERNING	
BODIES, PROTECTED AREA, ORGANIZATION/GROUP OR INSTITUTION WHOSE COOPERAT	'IOI
IS NECESSARY FOR PROJECT COMPLETION), AND/OR LETTERS OF RECOMMENDATION.	
UPON SELECTION, AWARDEES ARE REQUIRED TO PROVIDE WRITTEN ACCEPTANCE OF	
AWARD, INCLUDING A SIGNED GRANT AGREEMENT BEFORE FUNDS ARE RELEASED.	
VERIFICATION MUST ALSO BE SENT ONCE FUNDS ARE RECEIVED. GRANTEES MUST	
MAINTAIN CONTACT WITH AND PROVIDE PERIODIC UPDATES AND SUBMIT A FINAL	
REPORT, INCLUDING ACCOUNTING OF FUNDS WITHIN ONE YEAR OF RECEIPT OF THE	
GRANT.	

Schedule I (Form 990)

SCHEDULE J (Form 990)

Compensation Information

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

Compensated Employees

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

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

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

Internal Revenue Service

CLEVELAND ZOOLOGICAL SOCIETY

Employer identification number 34-0816490

Pa	art I Questions Regarding Compensation						
			Yes	No			
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,						
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.						
	First-class or charter travel Housing allowance or residence for personal use						
	Travel for companions Payments for business use of personal residence						
	Tax indemnification and gross-up payments Health or social club dues or initiation fees						
	Discretionary spending account Personal services (such as maid, chauffeur, chef)						
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or						
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b					
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,						
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2					
3	Indicate which, if any, of the following the organization used to establish the compensation of the organization's						
	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to						
	establish compensation of the CEO/Executive Director, but explain in Part III.						
	Compensation committee						
	Independent compensation consultant X Compensation survey or study						
	X Form 990 of other organizations X Approval by the board or compensation committee						
4	During the very did any payon listed on Form 000 Part VIII. Continue A. line 10 with respect to the filing						
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing						
_	organization or a related organization:	40		Х			
a	Receive a severance payment or change-of-control payment? Participate in or receive payment from a supplemental nonqualified retirement plan?	4a 4b		X			
D		4c		X			
C	c Participate in or receive payment from an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.						
	The storage of lines 44.6, 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	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the revenues of:						
а	The organization?	5a		X			
	Any related organization?	5b		X			
	If "Yes" on line 5a or 5b, describe in Part III.						
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation						
	contingent on the net earnings of:						
а	The organization?	6a		X			
	Any related organization?	6b		Х			
	If "Yes" on line 6a or 6b, describe in Part III.						
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments						
	not described on lines 5 and 6? If "Yes," describe in Part III	7		X			
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the						
	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		X			
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in						
	Regulations section 53.4958-6(c)?	9					

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

Schedule J (Form 990) 2021

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 V	V-2 and/or 1099-MIS 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) SARAH CRUPI	(i)	174,760.	0.	0.	11,327.	26,329.	212,416.	0.	
EXECUTIVE DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.	
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
	(i)								
	(ii)								
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	(i)								
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	(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.

SCHEDULE M (Form 990)

Noncash Contributions

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

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

Name of the organization CLEVELAND ZOOLOGICAL SOCIETY Employer identification number 34-0816490

Pai	t I Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of de noncash contribu			s
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	Х	2	500,136.	FAIR MARKET	' VA	LUE	
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 • ()							
26	Other ()							
27	Other • ()							
28	Other ()							
29	Number of Forms 8283 received by the organi	zation durin	g the tax year for o	contributions				
	for which the organization completed Form 82	83, Part V, [Donee Acknowledg	gement 29				
							Yes	No
30a	During the year, did the organization receive b	y contributio	on any property re	oorted in Part I, lines 1 throu	gh 28, that it			
	must hold for at least three years from the dat	e of the initia	al contribution, and	d which isn't required to be u	sed for			
	exempt purposes for the entire holding period	?				30a		X
b	If "Yes," describe the arrangement in Part II.							
31	Does the organization have a gift acceptance	policy that re	equires the review	of any nonstandard contribu	ıtions?	31	Х	
32a	Does the organization hire or use third parties contributions?		-			32a		Х
h	If "Yes," describe in Part II.					J_4		_
33	If the organization didn't report an amount in o	column (c) fo	or a type of propert	v for which column (a) is che	cked.			
			• • • • • • • • • • • • • • • • • • • •	•	-··- ;			
	Gescribe in Part II.	Ale e les eterres		•	Cahadula	- /-		

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

Schedule M (Form 990) 2021

132142 11-17-21 Schedule M (Form 990) 2021

SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

2021
Open to Public Inspection

Name of the organization

CLEVELAND ZOOLOGICAL SOCIETY

Employer identification number 34-0816490

FORM 990, PART III, LINE 4C, PROGRAM SERVICE ACCOMPLISHMENTS:

INVESTMENT SPINOFFS, AS WELL AS A PORTION OF EACH MEMBERSHIP PURCHASED

IN THE YEAR. PUBLIC NAMING CONTESTS FOR THE BABY ORANGUTAN AND TIGER

CUBS RESULTED IN MORE THAN \$20,000 FOR CONSERVATION AND HELPED ENGAGE

THE PUBLIC IN EDUCATION EFFORTS ABOUT THESE SPECIES AND THEIR HABITATS

IN THE WILD.

THE ZOO SOCIETY PROVIDED \$250,000 IN SUPPORT OF EDUCATIONAL PROGRAMING.

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

THE FORM 990 IS REVIEWED BY THE AUDIT COMMITTEE, AS WELL AS THE EXECUTIVE DIRECTOR, PRIOR TO BEING FILED WITH THE IRS AND THE BOARD IS NOTIFIED AND PROVIDED WITH AN ELECTRONIC COPY OF THE REPORT PRIOR TO FILING.

FORM 990, PART VI, SECTION B, LINE 12C:

EACH DIRECTOR IS REQUIRED TO SIGN THE ORGANIZATION'S CONFLICT OF INTEREST STATEMENT ANNUALLY. IF AND WHEN POTENTIAL CONFLICT ARISES, THE DIRECTOR IS EXPECTED TO EXCUSE HIM OR HERSELF FROM ANY DISCUSSIONS, DECISIONS OR VOTES. THERE IS NO HISTORY OF REQUIRED ENFORCEMENT OF THE POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

THE HUMAN RESOURCES COMMITTEE, A SUBSET OF THE EXECUTIVE COMMITTEE, REVIEWS

AND APPROVES THE SALARY AND INCENTIVE AWARDS FOR THE EXECUTIVE DIRECTOR AND

MEMBERS OF THE MANAGEMENT TEAM TO ENSURE REASONABLE COMPENSATION AND TO

OPERATE IN COMPLIANCE WITH IRS INTERMEDIATE SANCTIONS GUIDELINES. THE HUMAN

RESOURCES COMMITTEE USES NONPROFIT INDUSTRY SURVEYS FOR COMPARABILITY DATA,

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

Schedule O (Form 990) 2021

132211 11-11-21

Schedule O (Form 990) 2021 Page 2

Name of the organization CLEVELAND ZOOLOGICAL SOCIETY **Employer identification number** 34-0816490

INCLUDING GUIDESTAR, OHIO ASSOCIATION OF NONPROFIT ORGANIZATIONS, AND THE ASSOCIATION OF ZOOS AND AQUARIUMS; AND SURVEYS THE DIRECTORS OF THE EXECUTIVE COMMITTEE FOR THE PURPOSE OF EVALUATING THE EXECUTIVE DIRECTOR'S PERFORMANCE. THE HUMAN RESOURCES COMMITTEE ADDITIONALLY SERVES AS A RESOURCE FOR THE EXECUTIVE DIRECTOR IN PAYROLL PLANNING FOR THE ENTIRE STAFF, PER A TIERED SYSTEM ESTABLISHED TO ASSIST IN ATTRACTING AND RETAINING HIGH-QUALITY EMPLOYEES. THE CLEVELAND ZOOLOGICAL SOCIETY BUDGET IS RECOMMENDED FOR APPROVAL BY THE FINANCE COMMITTEE TO THE EXECUTIVE COMMITTEE OR TO THE FULL BOARD.

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATEMENTS AVAILABLE TO THE PUBLIC UPON REQUEST.

FORM 990, PART VIII, LINE 1E:

THE ZOO SOCIETY RECEIVED A SECOND PAYROLL PROTECTION PROGRAM GRANT IN FEBRUARY 2021 OF \$285,960 PURSUANT TO THE CARES ACT. THE ZOO SOCIETY ALSO RECEIVED EMPLOYEE RETENTION CREDITS OF \$95,462 IN 2021.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS

97,017.

FORM 990, PART XII, LINE 2C:

THE AUDIT COMMITTEE MEETS WITH THE INDEPENDENT AUDIT FIRM AND ZOO SOCIETY MANAGEMENT IN THE FALL OF EACH YEAR TO REVIEW ANY MAJOR NEW ACCOUNTING PRONOUNCEMENTS AND REGULATORY CHANGES AND TO PLANS FOR THE UPCOMING AUDIT. FIELDWORK IS SCHEDULED AT THAT TIME. ONCE FIELDWORK

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Schedule O (Form 990) 2021 Page 2

Name of the organization **Employer identification number** CLEVELAND ZOOLOGICAL SOCIETY 34-0816490 IS COMPLETE, A DRAFT REPORT IS CIRCULATED TO THE AUDIT COMMITTEE PRIOR TO THE AUDIT COMMITTEE MEETING. AT SAID MEETING, THE AUDIT FIRM REVIEWS THE REPORT, THE AUDIT COMMITTEE VOTES TO ACCEPT THE REPORT, THEN STAFF IS EXCUSED, FOLLOWED BY THE AUDIT FIRM. AFTER THE FINAL AUDIT REPORT IS ISSUED, IT IS CIRCULATED TO THE BOARD OF DIRECTORS. THE AUDIT COMMITTEE REPORTS ON THE AUDIT PROCESS AND OUTCOMES AT THE NEXT REGULARLY SCHEDULED EXECUTIVE COMITTEE OR FULL BOARD MEETING, INCLUDING VOTES FOR ACCEPT THE AUDIT REPORT AND REQUIRED COMMUNICATIONS AND TO ACCEPT THE REPORT OF THE AUDIT COMMITTEE INTO THE RECORDS OF THE CORPORATION. IN ADDITION TO REVIEW OF THE PRIOR YEAR IRS 990 PRIOR TO FILING, THE AUDIT COMMITTEE DECIDES WHETHER OR NOT TO RETAIN THE FIRM FOR THE NEXT CYCLE AT THE SECOND ANNUAL AUDIT COMMITTEE MEETING. SCHEDULE F, PART I, LINE 3, COL (F): INCLUDED IN SCHEDULE F IS A PASS-THROUGH AMOUNT OF \$54,000.