Form <b>9</b>	<b>}0</b>
---------------	-----------

# PUBLIC INSPECTION COPY \*\* PUBLIC DISCLOSURE COPY \*\* Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public

OMB No. 1545-0047 2022 ic

Department of the Treasury Internal Revenue Service Go to www.irs.gov/Form990 for instructions and the latest information.						Inspection				
			lar year, or tax year beginning and	ending						
	Check if		forganization		D Em	ployer identific	cation	number		
a	pplicab									
	Addre	e Hous	ton Zoo, Inc.							
	Name chang Initial	; je Doing b	usiness as		7	4-15902	71			
	return		r and street (or P.O. box if mail is not delivered to street address)	Room/suite		ephone number				
	Final return termir	n-	13-533-			410				
_	ated Amen	City or 1	town, state or province, country, and ZIP or foreign postal code		-	s receipts \$		1,862,	410.	
	return Applio	HOUS	ton, TX 77030			this a group re			<b>v</b> ]	
L	tion pendi	F Name a	IND address of principal officer: Lee Ehmke as C above			or subordinates				
Same as C above         H(b) Are all subordinates included?           I Tax-exempt status:         X 501(c)(3)         501(c) (         )         (insert no.)         4947(a)(1) or         527         If "No," attach a list. See ins									No	
	Nebsi		houstonzoo.org		-	roup exemption			115	
			X Corporation Trust Association Other	I Year		ion: 1920 N			cile <sup>.</sup> TX	
	art I	Summary			oriorinat		I Oluli	7 of logal doffi	0110. = = =	
	1	Briefly describ	be the organization's mission or most significant activities: ${ m To}$ ${ m co}$	onnect	com	munities	5 W.	ith		
Governance			, inspiring action to save wildlif							
rnai	2	Check this bo	ox if the organization discontinued its operations or dispos	sed of more	than 25	% of its net ass	sets.			
ove	3	Number of vo	ting members of the governing body (Part VI, line 1a)						<u>32</u> 32	
	4	Number of ind	dependent voting members of the governing body (Part VI, line 1b)	ent voting members of the governing body (Part VI, line 1b)						
es &	5	5 Total number of individuals employed in calendar year 2022 (Part V, line 2a) 5								
<u>viti</u>	6								524	
Activities			d business revenue from Part VIII, column (C), line 12						<u>183.</u>	
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>					<u>790.</u>	
						or Year		Current Yea		
e	8		and grants (Part VIII, line 1h)			80,468.		3,522,		
Revenue	9		ice revenue (Part VIII, line 2g)			94,018.		3,662,		
Rev	10		come (Part VIII, column (A), lines 3, 4, and 7d)			18,732.		1,032, -55,		
	11		e (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)			-4,426. 88,792.	6	-55,		
	12		- add lines 8 through 11 (must equal Part VIII, column (A), line 12)			56,074.		2,997,		
	13		milar amounts paid (Part IX, column (A), lines 1-3)		<b>Z</b> , J	0.		4,991,	020.	
	14		to or for members (Part IX, column (A), line 4)		24 5	63,070.	2	6,984,	-	
ses	15   16a	Brofessional f	r compensation, employee benefits (Part IX, column (A), lines 5-10)			20,000.		139,		
Expenses	h	Total fundrais	rr compensation, employee benefits (Part IX, column (A), lines 5-10) iundraising fees (Part IX, column (A), line 11e) 	99.	<u> </u>	2070001			5000	
Ă	17	Other expens	es (Part IX, column (A), lines 11a-11d, 11f-24e)		21.3	94,058.	2	4,096,	938.	
			es. Add lines 13-17 (must equal Part IX, column (A), line 25)			33,202.		4,219,		
	19		expenses. Subtract line 18 from line 12			55,590.		3,942,		
or			÷		eginning o	of Current Year		End of Yea		
sets	20	Total assets (	Part X, line 16)		327,4	62,677.	34	8,888,	874.	
Net Assets or	21		s (Part X, line 26)			12,630.		4,853,		
ERe:	22		fund balances. Subtract line 21 from line 20		284,0	50,047.	29	4,035,	147.	
	art II	Signatur								
			I declare that I have examined this return, including accompanying schedules				' knowl	ledge and belie	ef, it is	
true	, corre	<u> </u>	e. Declaration of preparer (other than officer) is based on all information of wh	hich preparer	has any k	knowledge.				
		1 tleci	Tronically Filed							

Sign	Signature of officer	Date						
Here	Jeri Nordbrock, CFO							
	Type or print name and title							
	Print/Type preparer's name	Preparer's signature	Date Check PTIN					
Paid	Barbara Murphy	Barbara Murphy	11/02/23 self-employed P01386215					
Preparer	Firm's name Blazek & Vetterlin	ng	Firm's EIN 76-0269860					
Use Only	Firm's address 2900 Weslayan, Su	ite 200						
	Houston, TX 77027 Phone no.71							
May the II	RS discuss this return with the preparer shown abo	ve? See instructions	X Yes No					
			- 000 (*****					

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form		74-1590271 Page <b>2</b>
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission:	
	See Schedule O	
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O.	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes 🔀 No
	If "Yes," describe these changes on Schedule O.	
4	Describe the organization's program service accomplishments for each of its three largest program services, as me	asured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others,	the total expenses, and
	revenue, if any, for each program service reported.	
4a	(Code:) (Expenses \$41,741,971. including grants of \$) (Revenue \$	<u>42,891,223.</u> )
	See Schedule O	
4b	(Code:) (Expenses \$3,663,336. including grants of \$2,997,821. ) (Revenue \$	
40	(Code:) (Expenses \$3,003,330. including grants of \$2,997,821. ) (Revenue \$ See Schedule 0	۶۲
	bee benedule 0	
4c	(Code:) (Expenses \$1, 488, 372. including grants of \$) (Revenue \$	<b>771,743.</b> )
	See Schedule 0	
4d	Other program services (Describe on Schedule O.)	
	(Expenses \$ including grants of \$ ) (Revenue \$	)
4e	Total program service expenses46,893,679.	
		Form <b>990</b> (2022)

Form	990	(2022)

 Form 990 (2022)
 Houston Zoo, Inc.

 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	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		X
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4		X
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		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u> </u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		<u> </u>
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8	Х	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		X 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	X	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X,			
	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	<u> </u>
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X X
С	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		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	37	X
-	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	<u> </u>
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)? <i>If</i> "Yes," <i>complete Schedule D, Part X</i>	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes, " complete		v	
	Schedule D, Parts XI and XII	12a	Х	<u> </u>
b	Was the organization included in consolidated, independent audited financial statements for the tax year?	101		x
40	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)? <i>If</i> "Yes," <i>complete Schedule E</i>	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
Ø	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
		14b	х	
15	or more? <i>If</i> "Yes," <i>complete Schedule F, Parts I and IV</i> Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			<u> </u>
15	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			
10	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	х	
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."			
	complete Schedule G, Part III	19		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21	х	

Form 990 (2022)

Form	990	(2022)
FUIIII	990	(2022)

 Form 990 (2022)
 Houston Zoo, Inc.

 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	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a		х
h	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	210		
Ū	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	240 24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit	ZTU		
254	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
h		ZJa		- 23
D	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? <i>If</i> "Yes," <i>complete</i>			
		OFL		х
	Schedule L, Part I	25b		
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%			х
	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			37
	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		X
	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		X
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		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
_	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Par	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			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 151			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	

(gambling) winnings to prize winners? 232004 12-13-22

Form	<u>990 (2022)</u> Houston Zoo, Inc. 74-155	0271	Р	age <b>5</b>			
Par							
			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 56	2					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	. 2b	Х				
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	. 3a	Х				
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O	. 3b	Х				
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	. 4a		X			
b	If "Yes," enter the name of the foreign country	_					
	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?	. <u>5</u> a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	. <u>5</u> b		X			
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	<u>5c</u>					
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?	<u>6a</u>		X			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b					
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	? <u>7a</u>	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 7d	_		x			
е	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?						
f							
g							
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C2	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.	9a					
а	a Did the sponsoring organization make any taxable distributions under section 4966?						
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	. <u>9b</u>					
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12	_					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	_					
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders	_					
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
40-	amounts due or received from them.)	- 10-					
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes." enter the amount of tax-exempt interest received or accrued during the year	12a					
	, , , , , , , , , , , , , , , , , , , ,	-					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	13a	-				
а	Is the organization licensed to issue qualified health plans in more than one state?	. 158					
Ь	<b>Note:</b> 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 gualified health plans						
•		-					
с 14а		14a		X			
	Did the organization receive any payments for indoor tanning services during the tax year? If "Yes," has it filed a Form 720 to report these payments? <i>If</i> "No," <i>provide an explanation on Schedule O</i>	·		<u> </u>			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
.0	excess parachute payment(s) during the year?	15		x			
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16							
	If "Yes," complete Form 4720, Schedule O.	. 16		X			
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person 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.						

Form	990 (2022) Houston Zoo, Inc.		74-1590	271	P	age <b>6</b>
Pa	t VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 th	rough	7b below, and for a	"No" r	espon	se
	to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O.					
	Check if Schedule O contains a response or note to any line in this Part VI					X
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	1a	32			
	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	32			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with a	any other			
	officer, director, trustee, or key employee?			2		Х
3	Did the organization delegate control over management duties customarily performed by or under the					
	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 99	90 wa	s filed?	4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?		5		Х
6	Did the organization have members or stockholders?			6		Х
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap					
	more members of the governing body?			7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto	ockho	lders, 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					
а	The governing body?			8a	Х	
	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 read					
organization's mailing address? If "Yes." provide the names and addresses on Schedule O						
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev	venue	Code.)			
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a		Х
b	If "Yes," did the organization have written policies and procedures governing the activities of such cha	apters	, affiliates,			
	and branches to ensure their operations are consistent with the organization's exempt purposes?			10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body	befor	e filing the form?	11a	Х	
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.					
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13			12a	Х	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise			12b	Х	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	es," d	escribe			
	on Schedule O how this was done			12c	Х	
13	Did the organization have a written whistleblower policy?			13	Х	
14	Did the organization have a written document retention and destruction policy?			14	Х	
15	Did the process for determining compensation of the following persons include a review and approval	by in	dependent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?					
а	The organization's CEO, Executive Director, or top management official			15a	Х	
b	Other officers or key employees of the organization			15b	Х	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem					
	taxable entity during the year?			16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate	-	-			
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi					
0	exempt status with respect to such arrangements?			16b		
	tion C. Disclosure					
17	List the states with which a copy of this Form 990 is required to be filed None					
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990	-T (section 501(c)(3)s	only)	availat	ble
	for public inspection. Indicate how you made these available. Check all that apply.					
	X Own website Another's website X Upon request Other (explain			_		
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	nflict c	of interest policy, and	financ	cial	
	statements available to the public during the tax year.					
20	State the name, address, and telephone number of the person who possesses the organization's boo	ks and	d records			
	Jeri Nordbrock - 713-533-6750					
	1513 Cambridge, Houston, TX 77030				000	

Form 990 (2	Houston Zoo, Inc.	74-1590271	Page 7
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Com	pensated	
	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		
	te this table for all persons required to be listed. Report compensation for the calendar year ending wit Il of the organization's <b>current</b> officers, directors, trustees (whether individuals or organizations), regare	5	,

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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	(do not check more than one box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week			from related	other					
	(list any	recto						the	organizations	compensation
	hours for related	e or di	ee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/	from the
	organizations	rustee	l trus		ee	npen		1099-NEC)	1099-NEC)	organization and related
	below	dual ti	ıtiona		nploy	st cor yee	-	1000 NEO)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) Lee Ehmke	40.00		_							
President & CEO	0.00			Х				585,301.	0.	20,417.
(2) Sheryl Kolasinski	40.00									
<u>coo</u>	0.00			Х				312,955.	0.	19,024.
(3) Jeri Nordbrock	40.00									
CFO	0.00			Х				277,276.	0.	19,120.
(4) Roberto Espinosa	40.00									
VP Development	0.00			Х				253,157.	0.	27,823.
(5) Kristin Finney	40.00									
VP Human Resources	0.00					X		220,601.	0.	21,376.
(6) Trazanna Moreno	40.00									
VP Marketing and Communications	0.00					X		216,495.	0.	19,761.
(7) Mark Van Winkler	40.00									
Exhibit Design Director	0.00					X		200,458.	0.	15,286.
(8) Peter Riger	40.00									
VP Conservation and Education	0.00					X		195,017.	0.	17,069.
(9) Conor Lalor	40.00									
Exhibit Artist	0.00					X		184,310.	0.	25,553.
(10) Joe Cleary	4.00									
Board Chair as of 7/22	0.00	Х		Х				0.	0.	0.
(11) Stacy Methvin	4.00									
Immediate Past Chair as of 7/22	0.00	Х		Х				0.	0.	0.
(12) Joshua Davidson	1.00									
Vice Chair as of 7/22	0.00	Х		Х				0.	0.	0.
(13) Cullen Geiselman	1.00									
Vice Chair	0.00	Х		Х				0.	0.	0.
(14) Jill Jewett	1.00								•	
Vice Chair thru 6/22	0.00	Х		Х				0.	0.	0.
(15) Kimberly McKay	1.00								•	
Vice Chair	0.00	X		Х				0.	0.	0.
(16) Jim Postl	1.00							_	•	
Vice Chair	0.00	Х		Х				0.	0.	0.
(17) Molly Voorhees	1.00			<b>T7</b>					•	
Vice Chair	0.00	Х		Х				0.	0.	0. Form <b>990</b> (2022)

74-1590271 Page 8

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	ploy	ees,	and	d Hig	ghes	st C	ompensated Employee	s (continued)					
(A)	(B)				C)			(D)	(E)	(F)				
Name and title	Average	(do			ition	<b>ا</b> than d	ne	Reportable	Reportable		Estimated			
	hours per	box	, unles	ss pei	rson i	is botł	n an	compensation	compensation		amount of			
	week		cer an	dad	Irecto	or/trus	tee)	from	from related		other			
	(list any	recto						the	organizations		compensation			
	hours for related	or di	ee			ated		organization	(W-2/1099-MIS	J/	from the			
	organizations	ustee	trust		96	upens		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)		organization and related			
	below	lual tr	tional		voldr	st con	-	1033-1120)			organizations			
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizationio			
(18) Sami Ahmad	1.00		_	0	l ≚	1				-+				
Board Member	0.00	х						0.		0.	0.			
(19) George Basu	1.00							• •						
Board Member as of 7/22	0.00	х						0.		0.	0.			
(20) Carlos Bueno	1.00													
Board Member	0.00	х						0.		0.	0.			
(21) Beto Cardenas	1.00													
Board Member as of 7/22	0.00	Х						0.		0.	0.			
(22) Kris Chikelue	1.00													
Board Member as of 7/22	0.00	Х						0.		0.	0.			
(23) Anne Clutterbuck	1.00										0			
Board Member as of 7/22 (24) Mike Dishberger	0.00	Х				-		0.		0.	0.			
Board Member	0.00	х						0.		0.	0.			
(25) Jeff Dudderar	1.00	Δ						0.		••	<u>0.</u>			
Board Member thru 6/22	0.00	х						0.		0.	0.			
(26) Robert Edwards	1.00													
Board Member thru 6/22	0.00	х						0.		0.	0.			
1b Subtotal	•							2,445,570.		0.	185,429.			
c Total from continuation sheets to Part VI								0.		0.	0.			
<u>d</u> Total (add lines 1b and 1c)								2,445,570.		0.	185,429.			
2 Total number of individuals (including but n								eceived more than \$100,0	000 of reportable					
compensation from the organization											23			
											Yes No			
<b>3</b> Did the organization list any <b>former</b> officer,	director, trust	ee, k	key e	mpl	oye	e, or	hig	hest compensated empl	oyee on					
line 1a? If "Yes," complete Schedule J for s	uch individual										3 X			
4 For any individual listed on line 1a, is the su														
and related organizations greater than \$150	0,000? If "Yes,	" со	mple	ete S	Sche	edule	e J f	for such individual			4 X			
5 Did any person listed on line 1a receive or a	•							•	ual for services					
rendered to the organization? <i>If</i> "Yes." com	plete Schedule	e J fo	or su	ich i	oers	on .					5 X			
Section B. Independent Contractors									100.000 (					
1 Complete this table for your five highest co										ensat	tion from			
the organization. Report compensation for	the calendar ye	ear e	enain	ig w	ith C	or wi	<u>tnin</u>		ear.		(0)			
(A) Name and business	address							<b>(B)</b> Description of s	ervices	С	(C) ompensation			
Tellepsen Builders							_							
777 Benmar #400, Houston,	<b>TX 770</b>	60						Construction		21,460,204.				
SSA Group LLC	111 //0							0011002 4002 1011						
4624 Central Park Blvd, D	enver.	со	8	02	38			Food Services	3	3,403,858.				
O'Donnell Snider Construct											,,			
1900 West Loop S #500, Ho	ouston,	тх	7	70	27			Construction		3	,053,114.			
Bright Lights of Houston														
12407 Sowden Rd, Houston,	TX 770	80						Lighting		_1	<u>,448,098.</u>			
Brave Architecture	<b></b> :			_		<u> </u>								
4200 Montrose Blvd #400,								Architect			<u>,397,852.</u>			
2 Total number of independent contractors (ii	ncluding but no	ot lin	nitec	l to	thos	se lis	ted	above) who received mo	ore than					

		tees, Key Employees, and Highest Compensated Employ							, ,	
(A)	(B)							(D)	(E)	(F)
Name and title	, v	5						Reportable	Reportable	Estimated
	hours	(CI	песк Г	ant	nat	app	iy)	compensation from	compensation from related	amount of other
	per week					ee -		the	organizations	compensation
	(list any	ctor				y old r		organization	(W-2/1099-MISC)	from the
	hours for	r dire				ed en		(W-2/1099-MISC)	· · · · ·	organization
	related	stee o	ustee			en sat				and related
	organizations	al trus	onal tr		loyee	comp				organizations
	below	individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former			
	line)	pul	lns	0#	Ke	Hiç	For			
27) Kerry Galvin	1.00	v						0.	0.	0
Board Member (28) Amy Garrou	0.00	Х						0.	0.	0
Board Member thru 6/22	0.00	x						0.	0.	0
(29) Eureka Gilkey	1.00	<b>^</b>						0.	0.	0
Board Member	0.00	x						0.	0.	0
(30) Gillian Hobson	1.00	- 23							•	0
Board Member	0.00	х						0.	Ο.	0
(31) Tandra Jackson	1.00									
Board Member thru 6/22	0.00	х						0.	0.	0
(32) Myrtle Jones	1.00									
Board Member	0.00	Х						0.	0.	0
(33) Sanjay Kalavar	1.00									
Board Member	0.00	Х						0.	0.	0
(34) Peggy Kostial	1.00									
Board Member	0.00	Х						0.	0.	0
(35) Jennifer Laporte	1.00									
Board Member	0.00	Х						0.	0.	0
(36) Claire Liu	1.00	x						0.	0	0
Board Member (37) Kelley Lubanko	0.00	<b>A</b>						0.	0.	0
Board Member	0.00	x						0.	0.	0
(38) Clay Neff	1.00	Δ						0.	0.	0
Board Member	0.00	x						0.	0.	0
(39) Bryon Pope	1.00	23								0
Board Member	0.00	х						0.	0.	0
(40) Alie Pruner	1.00									
Board Member	0.00	х						0.	0.	0
(41) Ron Rand	1.00									
Board Member	0.00	х						0.	0.	0
(42) Tim Roberts	1.00									
Board Member	0.00	Х						0.	0.	0
(43) Bas Solleveld	1.00									
Board Member	0.00	Х						0.	0.	0
(44) Macey Stokes	1.00	1							_	
Board Member	0.00	Х						0.	0.	0
(45) Cynthia Walker	1.00									_
Board Member	0.00	X						0.	0.	0
(46) Keli Weinzierl	1.00									_
Board Member as of 7/22	0.00	X						0.	0.	0

Form 990 Houston 2	Loo, Inc	!.	74-159027							0271
Part VII Section A. Officers, Directors, Tru	stees, Key En						est (	Compensated Employe	es (continued)	
(A)	(B) (C) (D)						(E)	(F)		
Name and title	Average	Average Position						Reportable	Reportable	Estimated
	hours	(check all that apply)			ly)	compensation	compensation	amount of		
	per							from	from related	other
	week	_				o yee		the	organizations	compensation
	(list any	recto				em pl		organization	(W-2/1099-MISC)	from the
	hours for	ordi	ee			sated		(W-2/1099-MISC)		organization
	related organizations	rustee	I trus		ee	n pen:				and related organizations
	below	dual ti	tiona		n ploy	stcor	-			organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated em ployee	Former			
(47) Bill Barnett	1.00	_	_	0	-	-				
Member Emeritus	0.00	х						0.	0.	0.
(48) Anne Duncan	1.00									
Member Emeritus	0.00	х						0.	0.	0.
(49) Robert Graham	1.00	_ <b>-</b>								
Member Emeritus	0.00	х						0.	0.	0.
(50) Randa Duncan Williams	1.00	- 23							• •	
Member Emeritus	0.00	х						0.	0.	0.
(51) Austin Young	1.00							<b></b>		<b>U</b>
Member Emeritus	0.00	х						0.	0.	0.
	0.00									<b>U</b>
		1								
	I	I		I			<u> </u>			
Total to Part VII Soction A line 1a										
Total to Part VII, Section A, line 1c								1		L

		Check if Schedule O	JUNE	ans a respor	ise	or note to any line	(A)	(B)	(C)	(D)
							Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue exclue from tax und sections 512 -
ŝ	1 a	Federated campaigns		1a						
and Other Similar Amounts	b	Membership dues		1b		7,964,436.				
Ā	с	Fundraising events		1c		1,976,008.				
ar	d	Related organizations		1d						
		Government grants (contr				690,465.				
Ъ Л	f	All other contributions, gifts,								
Ê		similar amounts not included				12,891,283.				
na n	-	Noncash contributions included in	lines 1	a-1f <b>1g</b> \$		564,649.	22 522 102			
g	n	Total. Add lines 1a-1f				Business Code	23,522,192.			
	0.0	Admission fees				900099	18,878,180.	18878180.		
		City management fee			_	561499	10,774,747.	10774747.		
anc	c	Educ. progr. & event	s		_	611600	8,817,261.	8,817,261.		
ver	-	Concessions			_	722210	5,192,778.	5,192,778.		
Revenue	e				_		, , •	,,		
		All other program service	rever	nue	_					
		All other program service revenue					43,662,966.			
	3	Investment income (includ								
							879,769.		5,183.	874,5
	4	Income from investment of	of tax	-exempt bor	nd p	roceeds				
	5	Royalties	· <u>·····</u>							
				(i) Real		(ii) Personal				
		Gross rents	6a							
		Less: rental expenses $\dots$	6b							
		Rental income or (loss)	6c							
		Net rental income or (loss)	)	(i) Securiti		(ii) Other				
	<i>i</i> a	Gross amount from sales of	7-	() Securit 13,329,7		11,044.				
	h	assets other than inventory Less: cost or other basis	7a	13,325,7	<u>.</u>	11,011.				
,	D	and sales expenses	76	13,188,4	58.	0.				
	c	Gain or (loss)	7c			11,044.				
		Net gain or (loss)					152,317.			152,3
		Gross income from fundraisi					·			
		including \$ 1,								
		contributions reported on	line	1c). See						
		Part IV, line 18			8a	456,708.				
	b	Less: direct expenses			8b	512,652.				
		Net income or (loss) from		0	s		-55,944.			-55,9
	9 a	Gross income from gamin								
		Part IV, line 19			9a					
		Less: direct expenses			9b	L				
		Net income or (loss) from	-	-						
	10 a	Gross sales of inventory, I			10-	j l				
	h	and allowances Less: cost of goods sold			10a 10b					
		Net income or (loss) from								
+	U		50103			Business Code				
	11 a									
Revenue	b									
eve	c									
Å		All other revenue								
				••••••	• • •					

Form 990 (2022)

74-1590271

Page **9** 

Form 990 (2	
Part IX	Statement of Functional Expenses

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

	Check if Schedule O contains a respor	ise or note to any line in	this Part IX		
Do i	not include amounts reported on lines 6b,	(A) Total expenses	<b>(B)</b> Program service	<b>(C)</b> Management and	<b>(D)</b> Fundraising
7b,	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21	1,333,254.	1,333,254.		
2	Grants and other assistance to domestic				
	individuals. See Part IV, line 22	8,960.	8,960.		
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16	1,655,606.	1,655,606.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	1,515,074.	654,230.	529,727.	331,117.
6	Compensation not included above to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	20,834,388.	17,628,159.	1,288,760.	1,917,469.
8	Pension plan accruals and contributions (include				
	section 401(k) and 403(b) employer contributions)	678,284.	570,801.	42,171.	65,312.
9	Other employee benefits	2,245,815.	1,899,612.	172,169.	174,034.
10	Payroll taxes	1,711,260.	1,454,141.	97,711.	159,408.
11	Fees for services (nonemployees):				
а	Management				
b	Legal	2,956.		2,956.	
с	Accounting	43,830.		43,830.	
d	Lobbying				
	Professional fundraising services. See Part IV, line 17	139,500.			139,500.
f	Investment management fees	227,055.		227,055.	
g	Other. (If line 11g amount exceeds 10% of line 25,				
	column (A), amount, list line 11g expenses on Sch 0.)	4,172,268.	3,414,612.	522,894.	234,762.
12	Advertising and promotion	1,345,804.	1,343,195.	305.	2,304.
13	Office expenses	1,017,068.	727,887.	60,665.	228,516.
14	Information technology	933,307.	695,982.	106,413.	130,912.
15	Royalties				
16	Occupancy	1,685,861.	1,681,155.	2,266.	2,440.
17	Travel	220,714.	193,636.	6,981.	20,097.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials $\dots$				
19	Conferences, conventions, and meetings	517,355.	213,021.	44,388.	259,946.
20	Interest	146,502.	117,417.	21,527.	7,558.
21	Payments to affiliates	0 004 650	0 0 0 0 0 0 0 0 0		
22	Depreciation, depletion, and amortization	9,074,653.	9,074,653.		48.080
23	Insurance	835,775.	735,956.	52,447.	47,372.
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.)	2 200 060	2 242 027	10 546	25 405
a	Supplies Grounds/events	2,388,068.	2,343,027.	19,546.	25,495.
b		541,898. 481,296.	541,898. 469,973.	8,165.	2 1 5 0
C.	Equipment expense	462,528.	136,504.	111,025.	<u>3,158.</u> 214,999.
d	Printing & publications	404,940.	10,004.	,UZJ.	414,777.
	All other expenses	54,219,079.	46,893,679.	3,361,001.	3,964,399.
<u>25</u>	Total functional expenses. Add lines 1 through 24e	J4,413,013.	±0,055,0/3•	5,501,001.	J, JU4, JJJ.
26	<b>Joint costs.</b> Complete this line only if the organization reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
	1000 100 III 1010001119 SUP 98-2 (ASU 938-720)				- 000 (2222)

74-1590271	Page <b>11</b>
------------	----------------

<u>Form 990 (</u>		Houston	Zoo,	Inc.	
Part X	Balance Sheet				

1 41		Check if Schedule O contains a response or note to any line in this Part X			
		Shook in Conclude C Contains a response of note to any fine in this Fall A	(A)		(B)
			Beginning of year		End of year
	1	Cash - non-interest-bearing	24,370,270.	1	16,565,140.
	2	Savings and temporary cash investments	9,570,999.	2	1,600,469.
	3	Pledges and grants receivable, net	54,323,635.	3	50,947,459
	4	Accounts receivable, net	1,169,979.	4	1,224,436
	5	Loans and other receivables from any current or former officer, director,			
		trustee, key employee, creator or founder, substantial contributor, or 35%			
		controlled entity or family member of any of these persons		5	
	6	Loans and other receivables from other disqualified persons (as defined			
		under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
s	7	Notes and loans receivable, net		7	
Assets	8	Inventories for sale or use	109,211.	8	98,304
As	9	Prepaid expenses and deferred charges	1,138,058.	9	1,172,914.
	10a	Land, buildings, and equipment: cost or other			
		basis. Complete Part VI of Schedule D 10a 308, 483, 063.			
	b	Less: accumulated depreciation		10c	215,464,811.
	11	Investments - publicly traded securities	45,403,943.	11	55,755,181.
	12	Investments - other securities. See Part IV, line 11	2,195,626.	12	1,906,363.
	13	Investments - program-related. See Part IV, line 11		13	
	14	Intangible assets		14	
	15	Other assets. See Part IV, line 11	0.	15	4,153,797
	16	Total assets. Add lines 1 through 15 (must equal line 33)	327,462,677.	16	348,888,874
	17	Accounts payable and accrued expenses	12,183,560.	17	14,991,596.
	18	Grants payable		18	
	19	Deferred revenue	5,373,053.	19	6,513,078
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
ies	22	Loans and other payables to any current or former officer, director,			
oilit		trustee, key employee, creator or founder, substantial contributor, or 35%			
Liabilities	00	controlled entity or family member of any of these persons	25,330,832.	22 23	32,869,542.
_	23	Secured mortgages and notes payable to unrelated third parties	23,330,032.	23 24	52,009,5420
	24 25	Unsecured notes and loans payable to unrelated third parties		24	
	25	parties, and other liabilities not included on lines 17-24). Complete Part X			
		of Schedule D	525,185.	25	479,511.
	26	Total liabilities. Add lines 17 through 25	43,412,630.	26	54,853,727
	20	Organizations that follow FASB ASC 958, check here		20	
es		and complete lines 27, 28, 32, and 33.			
anc	27	Net assets without donor restrictions	210,577,483.	27	216,569,675.
Bala	28	Net assets with donor restrictions	73,472,564.	28	77,465,472.
nd I		Organizations that do not follow FASB ASC 958, check here			
μ		and complete lines 29 through 33.			
° or	29	Capital stock or trust principal, or current funds		29	
set	30	Paid-in or capital surplus, or land, building, or equipment fund		30	
As	31	Retained earnings, endowment, accumulated income, or other funds		31	
Net Assets or Fund Balances	32	Total net assets or fund balances	284,050,047.	32	294,035,147.
_	33	Total liabilities and net assets/fund balances	327,462,677.	33	348,888,874.

Form **990** (2022)

Form	990 (2022) Houston Zoo, Inc.	74-	1590	271	Pa	<sub>ge</sub> 12
	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	68	,163	1,3	00.
2	Total expenses (must equal Part IX, column (A), line 25)	2	54	,219	9,0	79.
3	Revenue less expenses. Subtract line 2 from line 1	3	13	,942	2,2	21.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	284	,050	Ο,Ο	47.
5	Net unrealized gains (losses) on investments	5	-8	,101	1,8	05.
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	4	,144	4,6	84.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	294	,03!	5,1	<u>47.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII		<u></u>			
					Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?			2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?			2b	Х	
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
с	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	audit,				
	review, or compilation of its financial statements and selection of an independent accountant?			2c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sche	edule C				
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					1
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?			3a		X
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red aud	it			1
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		

Form 990 (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

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

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

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

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization	
--------------------------	--

Nan	ne of t	the organization							identification number
De			ton Zoo, Ii						4-1590271
Pa	art I	Reason for Public (	Johanity Status.	(All organizations must c	complete th	nis part.) S	ee instruction	S.	
The	organ	ization is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only	one box.)			
1		A church, convention of ch	urches, or associatio	n of churches described	l in <b>sectio</b>	n 170(b)(1	1)(A)(i).		
2		A school described in sect	ion 170(b)(1)(A)(ii). (	Attach Schedule E (Forn	n 990).)				
3		A hospital or a cooperative	hospital service orga	anization described in se	ection 170	(b)(1)(A)(ii	ii).		
4		A medical research organiz	ation operated in cor	njunction with a hospital	described	in sectio	on 170(b)(1)(A)	(iii). Enter	the hospital's name,
		city, and state:							
5		An organization operated for	or the benefit of a col	lege or university owned	l or operat	ed by a go	overnmental ur	nit describe	ed in
		section 170(b)(1)(A)(iv). (C	Complete Part II.)						
6		A federal, state, or local gov		nental unit described in	section 17	70(b)(1)(A)	(v).		
	X	An organization that norma	-					e general r	oublic described in
•		section 170(b)(1)(A)(vi). (C	-		onn a gore			e general r	
8		A community trust describe		1)(A)(vi) (Complete Par	+ 11 )				
9		An agricultural research org				ad in coniu	unction with a	land-grant	college
3						-		-	-
or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college of university or a non-land-grant college of agriculture (see instructions).									
40		university:	II						d avecas vasa inte fuera
10		An organization that norma						-	•
		activities related to its exen		-					-
		income and unrelated busir		(less section 511 tax) fro	om busines	ses acqui	red by the org	anization a	itter June 30, 1975.
		See section 509(a)(2). (Con							
11		An organization organized a	-	•	-				_
12		An organization organized a	•	•	•		-	•	
		more publicly supported or	-						Check the box on
		lines 12a through 12d that	• •					-	
а		<b>Type I.</b> A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	f the direc	tors or trustee	es of the su	ipporting
		organization. You must o	complete Part IV, Se	ections A and B.					
b		<b>Type II.</b> A supporting org	anization supervised	or controlled in connect	tion with its	s supporte	ed organizatior	n(s), by hav	ring
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or manag	ge the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С	;	] Type III functionally inte	grated. A supporting	g organization operated	in connect	ion with, a	and functional	y integrate	d with,
		its supported organization	n(s) (see instructions)	). You must complete l	Part IV, Se	ctions A,	D, and E.		
d	ı 🗌	Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection v	vith its suppor	ted organiz	ation(s)
		that is not functionally int						-	
		requirement (see instructi			•		-		
е		Check this box if the orga		-				I. Type III	
-		functionally integrated, or					· ) [ ·, · ) [ ·	·, · <b>,</b> -	
f	Ente	er the number of supported of							
		vide the following information	-						
		i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	inization listed	(v) Amount of	monetary	(vi) Amount of other
		organization		(described on lines 1-10	Yes	No	support (see in	structions)	support (see instructions)
				above (see instructions))					
Tota	al								

	edule A (Form 990) 2022 H	Iouston Zo	o, Inc.			74-159	0271 Page 2
Pa	ITT II Support Schedule for (Complete only if you checke fails to qualify under the test	ed the box on line 5	, 7, or 8 of Part I o	r if the organization			•
See	ction A. Public Support		-				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	65803520.					
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						
	<b>Total.</b> Add lines 1 through 3 The portion of total contributions by each person (other than a	65803520.	32441395.	27412831.	37880468.	23522192.	187060406
	governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the						
	amount shown on line 11, column (f)						51344859.
6	Public support. Subtract line 5 from line 4.						135715547
See	ction B. Total Support			•			•
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
7	Amounts from line 4	65803520.	<u>32441395.</u>	27412831.	<u>37880468.</u>	23522192.	<u>187060406</u>
	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	538.598.	601.681.	425.958.	705.259.	879.769.	3151265.
8	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business	538,598.	601,681.	425,958.	705,259.	879,769.	3151265.
8	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the	538,598.	601,681.		705,259.	879,769.	
8	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital	538,598.	601,681.	425,958. 52,558.	705,259.	879,769.	<u>3151265.</u> 52,558.
8 9 10	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain	538,598.	601,681.		705,259.		
8 9 10	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10			52,558.			52,558.
8 9 10 11 12 13	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities <b>First 5 years.</b> If the Form 990 is for the organization, check this box and <b>sto</b>	, etc. (see instructionhe organization's fin	ons) rst, second, third,	52,558.	vear as a section 5	12 189 101(c)(3)	52,558. 190264229 ,910,316.
8 9 10 11 12 13	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities <b>First 5 years.</b> If the Form 990 is for t	, etc. (see instructionhe organization's fin	ons) rst, second, third,	52,558.	vear as a section 5	12 189 01(c)(3)	52,558. 190264229 ,910,316.
8 9 10 11 12 13 <b>Sec</b>	dividends, payments received on securities loans, rents, royalties, and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.) <b>Total support.</b> Add lines 7 through 10 Gross receipts from related activities <b>First 5 years.</b> If the Form 990 is for the organization, check this box and <b>sto</b>	, etc. (see instruction he organization's fii p here ic Support Per line 6, column (f), d	ons) rst, second, third, r <b>centage</b> ivided by line 11, o	52,558. fourth, or fifth tax y	vear as a section 5	12 189 101(c)(3)	52,558. 190264229 ,910,316.

b 33 1/3% support test - 2021. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization

17a 10% - facts-and-circumstances test - 2022. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

b 10% -facts-and-circumstances test - 2021. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts and circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization

18 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) 2022

%

%

Schedule A	Form 990	) 2022

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

Section A. Public Support							
Calendar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(	<b>e)</b> 2022	(f) Total
<b>1</b> 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							
<ul> <li>Gross receipts from activities that are not an unrelated trade or bus- iness under section 513</li> </ul>							
<ul> <li>Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf</li> </ul>							
<b>5</b> The value of services or facilities furnished by a governmental unit to the organization without charge							
6 Total. Add lines 1 through 5							
7a Amounts included on lines 1, 2, and							
3 received from disqualified persons <b>b</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							
<b>c</b> Add lines 7a and 7b							
8 Public support. (Subtract line 7c from line 6.)							
Section B. Total Support		1		1			
Calendar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(	e) 2022	<b>(f)</b> Total
<ul> <li>9 Amounts from line 6</li> <li>10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources</li> </ul>							
<b>b</b> Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975							
<ul> <li>c Add lines 10a and 10b</li> <li>11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on</li> </ul>							
<ul> <li>12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)</li> <li>12 Total upport of the sale of th</li></ul>							
<ul> <li>13 Total support. (Add lines 9, 10c, 11, and 12.)</li> <li>14 First 5 years. If the Form 990 is for the form 100 is f</li></ul>	Le organization's fi	I	l fourth or fifth toy	Vear as a sostion 5	1	3) organizatia	
	0						, , ,
Section C. Computation of Publi						<u></u>	·····
15 Public support percentage for 2022 (I			column (f))		15		%
16 Public support percentage for 2022 (1					16		%
Section D. Computation of Inves							/0
17 Investment income percentage for 20			ne 13. column (f))		17		%
18 Investment income percentage from					18		%
19a 33 1/3% support tests - 2022. If the						6. and line 17	
more than 33 1/3%, check this box ar							
<b>b 33 1/3% support tests - 2021.</b> If the	-					n 33 1/3%. a	nd
line 18 is not more than 33 1/3%, che							
20 Private foundation. If the organization			-			-	

1

Yes

No

### Part IV Supporting Organizations

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

#### Section A. All Supporting Organizations

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

2 3a 3b 3c 4a 4b 4c 5a 5b 5c 6 7 8 9a 9b 9c 10a

	(Form 990) 2022	Houston		Inc.
Part IV	Supporting Orga	nizations (contin	nued)	

1

2

No

			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?			
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and			
	11c below, the governing body of a supported organization?	11a		
b	A family member of a person described on line 11a above?	11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide			
	detail in Part VI.	11c		
Sec	tion B. Type I Supporting Organizations			
			Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or			

	more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in <b>Part VI</b> how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported	
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	
2	Did the organization operate for the benefit of any supported organization other than the supported	
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in	

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

#### supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		

	bonted organ	112011011(3).	
Section D	. All Type	III Supporting	organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

#### Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used to satisfy the Integral Part Test during the ye	ear (see instructions)
-	Oneon the box next to the method that the organization used to satisfy the integral r art rest during the ye	<i>far (</i> <b>eee</b>

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		] The organization supported a governm	nental entity. Describe in F	Part VI how y	ou supported a	governmental entity	(see instruction <u>s).</u>
---	--	--	------------------------------	---------------	----------------	---------------------	-----------------------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in* Part VI *the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.*
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.
- **a** Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**
- **b** Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

Yes No

Pa	rt V Type III Non-Functionally Integrated 509(a)(3) Supportir	ng Organi	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifyir	ng trust on N	lov. 20, 1970 ( <i>explain in</i> )	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations mus			
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount			(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	a Average monthly value of securities			
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		
_				

Schedule A (Form 990) 2022

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

Schedule A (Form 990) 2022

74-1590271 Page 6

and 4c. 8 Breakdown of line 7: a Excess from 2018 b Excess from 2019 c Excess from 2020 d Excess from 2021 e Excess from 2022

7 Excess distributions carryover to 2023. Add lines 3j

Par	dule A (Form 990) 2022     Houston Zoo,       t V     Type III Non-Functionally Integrated 509(	(a)(3) Supporting Orga	nizations (continu	ued)	
Secti	ion D - Distributions		loontain		Current Year
	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
	Amounts paid to perform activity that directly furthers exemp				
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	3	3	
4	Amounts paid to acquire exempt-use assets	4			
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	ne organization is responsive			
	(provide details in <b>Part VI</b> ). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	าร	(iii) Distributable Amount for 202
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
2	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
	From 2017				
	From 2018				
	From 2019				
	From 2020				
	From 2021				
	Total of lines 3a through 3e				
	Applied to underdistributions of prior years				
	Applied to 2022 distributions of phot years				
	Carryover from 2017 not applied (see instructions)				
	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
а	Applied to underdistributions of prior years				
	Applied to 2022 distributable amount				
	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
č	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
-	0				
	and 4b from line 1. For result greater than zero, explain in				

Schedule A (Form 990) 2022

Schedule A	(Form 990) 2022 Houston Zoo, Inc.	74-1590271 Page 8
Part VI	<b>Supplemental Information.</b> Provide the explanations required by Part II, lin Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Pa line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete (See instructions.)	e 10; Part II, line 17a or 17b; Part III, line 12; art IV, Section B, lines 1 and 2; Part IV, Section C, 3b; Part V, line 1; Part V, Section B, line 1e; Part V,

#### \*\* PUBLIC DISCLOSURE COPY

## Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

•		
Department o	f the Tressury	
Department	r the neadury	

(Form 990)

Schedule B

Internal Revenue Service

Name of the organization

He	ouston Zoo, Inc.	74-1590271				
Organization type (check of	Organization type (check one):					
Filers of:	Section:					
Form 990 or 990-EZ	$\fbox$ 501(c)( 3 ) (enter number) organization					
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private foundation					
	527 political organization					
Form 990-PF	501(c)(3) exempt private foundation					
	4947(a)(1) nonexempt charitable trust treated as a private foundation					
	501(c)(3) taxable private foundation					

Check if your organization is covered by the General Rule or a Special Rule.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

#### **General Rule**

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

#### **Special Rules**

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set is the set in the set in the set is the set in the set in the set is the set is the set in the set is the set in the set is the set is the set in the set is the set in the set is the set is the set in the set is the set is the set is the set is the set in the set is t

**Caution:** An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

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

Schedule B (Form 990) (2022)

Part I	Contributors (see instructions). Use duplicate copies of Part I if addit	ional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$1,500,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>1,000,000.</u>	Person     X       Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3		\$941,753.	PersonXPayroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4		\$514,689.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

74-1590271

Schedule I	B (Form 990) (2022)			Page <b>3</b>
Name of o	rganization		Employ	yer identification number
Houst	on Zoo, Inc.		74	-1590271
Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	f additional space is needed	d.	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
3	Publicly-traded securities	-		
		\$338,5	64.	_11/01/22_
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions	-	(d) Date received
		_   _   _   \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		 \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		_   _   _   \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
		 \$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimat (See instructions		(d) Date received
			_	

Name of or	ganization	Employer identification number					
Housto	on Zoo, Inc.			74-1590271			
Part III	Exclusively religious, charitable, etc., contributing from any one contributor. Complete columns (a) completing Part III, enter the total of exclusively religious, completing Part III, enter the total of exclusively rel	through (e) and the following line entry	/. For organizations	hat total more than \$1,000 for the year			
	Use duplicate copies of Part III if additional	space is needed.	· · ·				
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
F		e) Transfer of gift					
-	Transferee's name, address, a	and ZIP + 4 Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-	(e) Transfer of gift						
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held			
-		(e) Transfer of gift	<u> </u>				
-	Transferee's name, address, a	nd ZIP + 4	Relationship of tra	nsferor to transferee			

		, <u> </u>				E 00.47
SC	HEDULE D		al Financial Statements		OMB No. 154	5-0047
(Forr	n 990)		nization answered "Yes" on Form 990, , 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.		202	2
Depart	ment of the Treasury	A	ttach to Form 990.		Open to P	
	I Revenue Service		0 for instructions and the latest information.	E	Inspection	
Nam	e of the organizati	Houston Zoo, Inc.		Employer id	-159027	
Pa	rt I Organiza		d Funds or Other Similar Funds or Ac			
	organizatio	n answered "Yes" on Form 990, Part IV, lin	e 6.		•	
			(a) Donor advised funds (I	<b>b)</b> Funds and c	ther account	ts
1	Total number at e	nd of year				
2	Aggregate value o	f contributions to (during year)				
3	Aggregate value o	f grants from (during year)				
4		t end of year				
5	-		writing that the assets held in donor advised fund	_		
			exclusive legal control?		Yes	No No
6	•	<b>u</b>	dvisors in writing that grant funds can be used or			
			r donor advisor, or for any other purpose conferri	с Г		
Pa	impermissible priv		ganization answered "Yes" on Form 990, Part IV,		Yes	No No
1		servation easements held by the organization				
•		of land for public use (for example, recrea		rically importa	nt land area	
		of natural habitat	Preservation of a certif			
		n of open space			uoturo	
2		• •	ied conservation contribution in the form of a con	servation ease	ement on the	last
	day of the tax yea	<b>o o</b> 1			the End of the	
а	Total number of c	onservation easements		2a		
b		tere alle second tere second		2b		
с	Number of conser	vation easements on a certified historic stru	ucture included in (a)	2c		
d	Number of conser	vation easements included in (c) acquired a	after July 25,2006, and not on a			
			[	2d		
3	Number of conser	vation easements modified, transferred, rel	eased, extinguished, or terminated by the organiz	zation during th	ne tax	
	year					
4		where property subject to conservation eas				
5		tion have a written policy regarding the per		Г		— <b>.</b> .
~	,	forcement of the conservation easements it			Yes	No
6	Stall and voluntee	r nours devoted to monitoring, inspecting,	handling of violations, and enforcing conservatior	i easements u	uning the yea	lr
7	Amount of expens	 ses incurred in monitoring inspecting band	lling of violations, and enforcing conservation eas	ements durina	the vear	
•	, another of oxpone			onnonno dannig	the year	
8	Does each conser	vation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)(B)(i	i)		
				· _	Yes	No
9			on easements in its revenue and expense stateme			
	balance sheet, an	d include, if applicable, the text of the footr	note to the organization's financial statements tha	t describes the	e	
		ounting for conservation easements.			_	
Pa		•	Art, Historical Treasures, or Other Si	milar Asse	ls.	
		f the organization answered "Yes" on Form				
1a	•	· •	8, not to report in its revenue statement and bala		KS	
			blic exhibition, education, or research in furtherand	ce of public		
h	· •		ncial statements that describes these items.	sheet works	f	
b	-		8, to report in its revenue statement and balance exhibition, education, or research in furtherance			
		ing amounts relating to these items:			,	
	•	0		\$		
2			asures, or other similar assets for financial gain, p			
	•	unts required to be reported under FASB A				
а	-		~ 	\$		
b						

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

Sche	dule D (Form 990) 2022 Houston	Zoo, Inc.				7	4-15	9027	1 Pa	age <b>2</b>
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or Othe	er Sir	nilar /	Assets	s (contii	nued)	
3	Using the organization's acquisition, accession	on, and other records	, check any of the f	ollowing that make	signific	cant us	e of its			
	collection items (check all that apply):									
а	X Public exhibition	d	X Loan or exc	hange program						
b	X Scholarly research	е	Other							
с	X Preservation for future generations									
4	Provide a description of the organization's co	ellections and explain	how they further th	e organization's exe	empt p	ourpose	in Part	XIII.		
5	During the year, did the organization solicit o	r receive donations of	art, historical treas	sures, or other simila	ar asse	ets				_
	to be sold to raise funds rather than to be ma							Yes		No
Par	t IV Escrow and Custodial Arrangereported an amount on Form 990, Par		te if the organizatio	n answered "Yes" o	n Forn	n 990, I	Part IV,	line 9, or		
1a	Is the organization an agent, trustee, custodi	an or other intermedia	ary for contributions	s or other assets not	t inclu	ded				
	on Form 990, Part X?						🗆	Yes		No
b	If "Yes," explain the arrangement in Part XIII a	and complete the follo	owing table:		_					
								Amoun	t	
с	Beginning balance				L	1c				
d	Additions during the year					1d				
е	Distributions during the year					1e				
f	Ending balance				L	1f		_		
	Did the organization include an amount on Fe						L	Yes		No
Par	If "Yes," explain the arrangement in Part XIII.									
Fai	t V Endowment Funds. Complete i					broo you	aro book	(a) Four	r vooro	book
4.	Designing of some holes of	(a) Current year 21,452,286.	(b) Prior year	(c) Two years back	-		ars back			
	Beginning of year balance	3,620,483.	17,433,313.	15,227,888. 718,500.	_		9,422. 2,829.			
b	Contributions	-3,783,981.	2,233,452.	1,951,269.			7,539.			
C	Net investment earnings, gains, and losses	-5,705,901.	2,233,432.	1,951,209.		2,40	7,339.		-/11,	005.
	Grants or scholarships									
е	Other expenditures for facilities	534,458.	425,469.	368,500.		Q.	3,982.		8	200.
4	and programs	99,507.	119,009.				7,920.			322.
1	Administrative expenses	20,654,823.	21,452,286.		,					
2 2	End of year balance Provide the estimated percentage of the curr	, ,	, ,	, ,			,		, ,	
2	Board designated or quasi-endowment	64.6100	%	) field as.						
a h	Permanent endowment 17.6000	%	_/0							
	1	% %								
Ŭ	The percentages on lines 2a, 2b, and 2c show	, -								
3a	Are there endowment funds not in the posses	•	ion that are held ar	nd administered for t	the					
	organization by:								Yes	No
	(i) Unrelated organizations							3a(i)		Х
	(ii) Related organizations							3a(ii)		Х
b	If "Yes" on line 3a(ii), are the related organiza									
4	Describe in Part XIII the intended uses of the									
Par	t VI Land, Buildings, and Equipm	ent.								
	Complete if the organization answered	d "Yes" on Form 990,	Part IV, line 11a. S	ee Form 990, Part X	(, line <sup>-</sup>	10.				
	Description of property	<b>(a)</b> Cost or ot basis (investm	. ,		Accun epreci	nulated ation		<b>(d)</b> Boo	k valu	e
1a	Land									
	Buildings									
	Leasehold improvements							4,35		
	Equipment				416	i,16		2,78	0,9	90.
	Other		88,33	0,477.			8	8,33	0,4	77.
Total	. Add lines 1a through 1e. (Column (d) must e	qual Form 990. Part X	<u>, column (B), line 1</u>	0c.)				5,46		
						~		D / C		

Schedule D (Form 990) 2022

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" of			
(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" of		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	<u>15.)</u>		
Part X Other Liabilities.			
Complete if the organization answered "Yes" of	n 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) Lease payable			479,511.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			100 011
Total. (Column (b) must equal Form 990, Part X, col. (B) line	<u>25.)</u>		479,511.

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

74-1590271 Page 3

Schedule D (Form 990) 2022

Houston Zoo, Inc.

Sche	dule D (Form 990) 2022 Houston Zoo, Inc.			74-	1590271 Page 4
Pa	t XI Reconciliation of Revenue per Audited Financial Statemer	nts Wi	th Revenue per R	eturn.	
	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	59,832,440.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:				
а	Net unrealized gains (losses) on investments	2a	-8,101,805	<u>.</u>	
b	Donated services and use of facilities	2b			
с	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)				
е	Add lines 2a through 2d			2e	-8,101,805.
3	Subtract line 2e from line 1			3	67,934,245.
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	227,055	<u> </u>	
b	Other (Describe in Part XIII.)	4b			
с	Add lines 4a and 4b			4c	227,055.
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)			5	68,161,300.
Pa	t XII Reconciliation of Expenses per Audited Financial Stateme		ith Expenses per	Retur	n.
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.			_	
1	Total expenses and losses per audited financial statements			1	53,992,024.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		I		
а	Donated services and use of facilities	2a		_	
b	Prior year adjustments	2b		_	
С	Other losses	2c			
d	Other (Describe in Part XIII.)	2d			
е	Add lines 2a through 2d			2e	0.
3					
	Subtract line 2e from line 1			3	53,992,024.
4					53,992,024.
4 a	Subtract line 2e from line 1				53,992,024.
а	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1:	4a	227,055		
a b	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	4a 4b	227,055		227,055.
a b c 5	Subtract line <b>2e</b> from line <b>1</b> Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	4a 4b	227,055		

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

#### Part III, line 1a:

In accordance with industry practice, the Houston Zoo does not capitalize
animal and horticultural collections; acquisitions are reported as
expenditures in the period of acquisition. The Houston Zoo is responsible
for the health and welfare of its animal and horticultural collections.
The Houston Zoo maintains records of its collections and any exchanges
with other organizations. Under the direction of the Board of Directors,
the President, and the curatorial staff, collections continue to be cared
for, used, and expanded. In 2022 and 2021, the Houston Zoo expended
approximately \$153,000 and \$43,000, respectively, to expand its
collections.

Schedule D (Form 990) 2022	Houston Z	00,	Inc.	74-1590271	Page 5
Schedule D (Form 990) 2022 Part XIII Supplemental Inform	nation (continued	d)			
In an ongoing commit	ment to en	nhan	ce worldwide reproduction	and	
conservation of anima	als, the H	Hous	ton Zoo exchanges animals	with zoos and	L
aquariums accredited	by the A	ZA. (	Consistent with industry p	practice, the	
Houston Zoo does not	record a	ny 1:	iability for such exchange	arrangements	ł
as generally these a	rrangement	ts a:	re without monetary consid	eration.	

Part III, line 4:

The Houston Zoo is a conservation, education, and recreation organization dedicated to the reproduction, protection, and exhibition of animals in their habitats. The Houston Zoo provides a fun, unique and inspirational experience fostering appreciation, knowledge, and care for the natural world.

Part V, line 4:

The purpose of the endowment fund is to provide ongoing support for operating needs and program services that are consistent with the Houston Zoo's mission, and to provide for growth and expansion of programs and/or creation of new programs.

(Form 990)	Complete if the	organization a	nswered "Yes" on Form 990, Part IV,	line 14b, 15, c		ZUZZ
Department of the Treasury Internal Revenue Service	Go to w	ww.irs.gov/Form	Attach to Form 990. 1990 for instructions and the latest i	nformation		Open to Public Inspection
Name of the organization		•••••.ii3.90•/F0III				lentification number
-						
Houston Zoo, In	nc.	ativitiaa Out	aida tha Unitad Stataa		74-159	0271
Part I General Info Form 990, Part		ctivities Out	side the United States. Comple	ete if the organ	ization answei	red "Yes" on
		n maintain record	ds to substantiate the amount of its gra	ints and other a	assistance,	
-	-		he selection criteria used to award the			X Yes No
2 For grantmakers. Des United States.	scribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and otl	her assistance	outside the
	The following Part	L line 3 table ca	an be duplicated if additional space is n	eeded.)		
(a) Region	(b) Number of	(c) Number of	(d) Activities conducted in the region		vity listed in (d	
	offices	employees, agents, and	(by type) (such as, fundraising, pro-		gram service,	expenditures for and
	in the region	independent contractors	gram services, investments, grants to recipients located in the region)		e specific type (s) in the regio	investments
		in the region			., .	in the region
East Asia and the						
Pacific	0	0	Program	Conservatio	n	187,000.
Sub-Saharan Africa	0	0	Program	Conservatio	n	1,248,150.
South America	0	0	Program	Conservatio	n	214,840.
Russia and						
Neighboring States	0	0	Grantmaking			5,616.
	+					
<b>3 a</b> Subtotal		0				1,655,606.
b Total from continuation sheets to Part I		0				0.
c Totals (add lines 3a						
and 3b)	0	0				1,655,606.

**Statement of Activities Outside the United States** 

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

Schedule F (Form 990) 2022

OMB No. 1545-0047

SCHEDULE F

74-1590271

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	<b>(d)</b> Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV appraisal, other)
		Sub-Saharan	Heritage-Turambe					
		Africa	operating support	61,000.	Wire	0.		
			Lemur Conservation,					
		Sub-Saharan	, Community health					
		Africa	program	100,000.	Wire	0.		
		Sub-Saharan	Hirola, Giraffe					
		Africa	conservation progam	130,235.	Wire	0.		
			IRDNC Rhino Rangers,					
		Sub-Saharan	Community development					
		Africa	program	50,000.	Wire	Ο.		
			Grey Crowned Crane					
		Sub-Saharan	support, Mobile					
		Africa	veterinary clinic	250,000.	Wire	0.		
		Sub-Saharan						
		Africa	Niassa Lion program	464,936.	Wire	0.		
		Sub-Saharan						
		Africa	Ewaso Lion program	112,500.	Wire	0.		
		Russia and						
		Neighboring						
		States	Ukraine Zoo support	5,616.	Credit Card	٥.		
2 Enter total number of	recipient organization	ns listed above that are	recognized as charities by the	foreign country,	recognized as a tax			•
			or counsel has provided a sec		-	► _		18
3 Enter total number of	other organizations of	or entities				►		

Schedule F (Form 990) 2022

Page 2

Schedule F (Form 990)		on Zoo, Inc.			74-15			Page 2
	of Grants and Other	Assistance to Organiza	tions or Entities Outside the	United States.	(Schedule F (Form 9			
1 (a) Name of organization	<b>(b)</b> IRS code section and EIN (if applicable)	(c) Region	<b>(d)</b> Purpose of grant	<b>(e)</b> Amount of cash grant	(f) Manner of cash disbursement	<b>(g)</b> Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FM) appraisal, other)
		East Asia and the Pacific	Pangolin conservation program	10,000.	Wire	0.		
				10,000.				
		East Asia and the	HUTAN Kinabatangan					
		Pacific	Orangutan program	90,000.	Wire	0.		
		East Asia and the	Painted Terrapin					
		Pacific	project	25,000.	Wire	0.		
			Galapagos Tortoise Movement Ecology					
		South America	Program	50,000.	Wire	0.		
			Pantanal Giant Otter					
		South America	program	40,000.	Wire	Ο.		
			Giant Armadillo,					
		South America	Anteater programs	42,040.	Wire	0.		
			Lowland Tapir					
		South America	conservation program	35,000.	Wire	Ο.		
			Giant Anteater program, Highways					
		South America	project	13,500.	Wire	0.		
			Penguin nesting site					
		South America	maintenance	14,300.	Wire	0.		

Schedule F (Form 990)		on Zoo, Inc.			74-15			Page <b>2</b>
Part II     Continuation of       1     (a) Name of organization	of Grants and Other A (b) IRS code section and EIN (if applicable)	(a) Pagion	tions or Entities Outside the (d) Purpose of grant	(e) Amount	(Schedule F (Form 9 (f) Manner of cash disbursement	90), Part II, line 1 (g) Amount of non-cash assistance	( <b>h)</b> Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
		South America	Cotton-top Tamarin conservation program	20,000.	Wire	0.		

## 74-1590271 Houston Zoo, Inc. Schedule F (Form 990) 2022 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. (c) Number of (d) Amount of (e) Manner of (f) Amount of (g) Description of (a) Type of grant or assistance (b) Region recipients cash grant cash disbursement noncash assistance noncash assistance East Asia and the Conservation support Pacific 2 62,000. Wire transfer Ο. Sub-Saharan Conservation support Africa 79,479. Wire transfer 0. 1

Schedule F (Form 990) 2022

Page 3

**(h)** Method of valuation (book, FMV, appraisal, other)

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

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 Houston Zoo, Inc.

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:
The Houston Zoo's selection standards for awarding grants are based on
its mission statement goals and long term development of regional
programs. We do not solicit proposals nor do we have a formal process for
receiving and evaluating grant requests. Instead we actively seek out
projects that fit the guidelines of the Zoo's Wildlife Conservation
Program (see Part III, Line 4b). We then meet with the researchers to see
how well they fit with our Zoo. We do not spend much money up front until
we are satisfied that the researchers will communicate and interact with
the Zoo (web, media, reports, speaker requests, articles, etc.), and
their research program is sustainable over the next 1-3 years that we
intend to partner with them. We monitor their progress through periodic
site visits where practicable and request that they provide periodic
reports of activities.

Part I, line 3:

The expenses reflected on Schedule F are reported using the accrual method of accounting.

SCHEDULE G	Suppleme	ntal Information Regarding	Func	Iraisi	ng or Gaming A	ctiv	ities	OMB I	No. 1545-0047
(Form 990)		e organization answered "Yes" on organization entered more than \$1				r 19,	or if the	2	022
Department of the Treasury		Attach to Form 990	or Forr	n 990	·EZ.				n to Public
Internal Revenue Service		o www.irs.gov/Form990 for instru	ctions	and th	ne latest information	า.		•	ection
Name of the organization									cation number
Deut I. Franklasia		Zoo, Inc.					74-159		
required to	complete this par					ine 1	7. Form 990	EZ filer	s are not
<ul> <li>a X Mail solicitat</li> <li>b X Internet and</li> <li>c X Phone solici</li> <li>d X In-person so</li> <li>2 a Did the organization</li> </ul>	tions email solicitations tations licitations on have a written c	f X Solicita g X Specia or oral agreement with any individual	ation of ation of I fundra	non-g gover aising d	overnment grants nment grants events ficers, directors, trus	tees,			
, , ,	highest paid indiv	art VII) or entity in connection with p viduals or entities (fundraisers) pursu organization.			•	ne fur	X N Noraiser is to		L No
(i) Name and addres or entity (fund		(ii) Activity	fùndi have c or cor	Did raiser ustody ntrol of utions?	(iv) Gross receipts from activity	to (c	Amount paio or retained b fundraiser ted in col. <b>(i</b> )	y) to (	Amount paid or retained by) organization
Sterling Associates	s – 55		Yes	No					
Waugh Dr #601, Hous	ston, TX	Centennial campaign		x	6,900,540.		139,50	٥.	6,761,040.
Total 3 List all states in wh	ich the organizatio	n is registered or licensed to solicit	contrib	utions	6,900,540. or has been notified	itise	139,50 exempt from		6,761,040.
or licensing.									
14									

Houston Zoo, Inc.

74-1590271 Page 2

Part II Fundraising Events. Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990.FZ lines 1 and 6b. List events with gross receipts greater than \$5,000

			(a) Event #1 Zoo Ball	<b>(b)</b> Event #2	(c) Other events None	(d) Total events (add col. (a) through
a			(event type)	(event type)	(total number)	- col. <b>(c)</b> )
Hevenue	1	Gross receipts	2,432,716.			2,432,716
	2	Less: Contributions	1,976,008.			1,976,008
	3	Gross income (line 1 minus line 2)	456,708.			456,708
	4	Cash prizes				
	5	Noncash prizes				
Ulrect Expenses	6	Rent/facility costs				
ect Exp	7	Food and beverages	138,824.			138,824
Ē	8	Entertainment	57,928.			57,928
	9	Other direct expenses	315,900.			315,900
	9 10	Direct expense summary. Add lines 4 throug	h 9 in column (d)			512,652
	9 10 11	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	h 9 in column (d) line 3, column (d)			512,652
	9 10	Direct expense summary. Add lines 4 throug         Net income summary. Subtract line 10 from         II       Gaming. Complete if the organization	h 9 in column (d) line 3, column (d)			512,652
Pa	9 10 11	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from	h 9 in column (d) line 3, column (d)			512,652 -55,944 (d) Total gaming (add
	9 10 11	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from 1 Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a.	h 9 in column (d) line 3, column (d) answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	512,652 -55,944 (d) Total gaming (add
anuexeune	9 10 11 rt I	Direct expense summary. Add lines 4 throug         Net income summary. Subtract line 10 from         II       Gaming. Complete if the organization	h 9 in column (d) line 3, column (d) answered "Yes" on Form	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	512,652 -55,944 (d) Total gaming (add
Panene	9 10 11 rt I	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue	h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	512,652 -55,944 (d) Total gaming (add
Panene	9 10 <u>11</u> rt I 2 3	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes	h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	512,652 -55,944 (d) Total gaming (add
Pa	9 10 <u>11</u> rt I 2 3	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes	h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	
aniavan	9 10 <u>11</u> 1 2 3 4 5	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs	h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant	reported more than	512,652 -55,944 (d) Total gaming (add col. (a) through col. (d
aniavan	9 10 <u>11</u> rt I 2 3 4 5 6	Direct expense summary. Add lines 4 throug Net income summary. Subtract line 10 from Gaming. Complete if the organization \$15,000 on Form 990-EZ, line 6a. Gross revenue Cash prizes Noncash prizes Rent/facility costs Other direct expenses	h 9 in column (d) line 3, column (d) answered "Yes" on Form (a) Bingo (a) Bingo	990, Part IV, line 19, or r (b) Pull tabs/instant bingo/progressive bingo	reported more than (c) Other gaming	512,652 -55,944 (d) Total gaming (add col. (a) through col. (d

9 Enter the state(s) in which the organization conducts gaming activities:

a Is the organization licensed to conduct gaming activities in each of these states? \_\_\_\_\_\_ Yes \_\_\_\_\_ Yes \_\_\_\_\_

232082 10-27-22

No

No

Sch	edule G (Form 990) 2022	Houston	Zoo,	Inc.	74-	1590271	Page 3
11	Does the organization conduct ga	aming activities w	ith nonme	embers?		Yes	No No
12	Is the organization a grantor, bene	eficiary or trustee	of a trust	t, or a mem	ber of a partnership or other entity formed		
						Yes	No
	Indicate the percentage of gaming					1 1	
							%
						13b	%
14	Enter the name and address of th	e person who pre	epares the	e organizati	on's gaming/special events books and records:		
	Name						
	Address						
15a	Does the organization have a con	tract with a third	party fror	n whom the	organization receives gaming revenue?	Yes	🗌 No
k	If "Yes," enter the amount of gam	iing revenue recei	ived by th	e organizat	ion \$ and the amount		
	of gaming revenue retained by the			5			
c	If "Yes," enter name and address				_		
	Name						
	Address						
16	Gaming manager information:						
	Name						
	Gaming manager compensation	\$					
	5 5 1						
	Description of services provided						
	Director/officer	Employee		Inc	lependent contractor		
17	Mandatory distributions:						
	Is the organization required under	r state law to mak	ke charita	ble distribu	tions from the gaming proceeds to		
	retain the state gaming license?					🗌 Yes	No No
k	Enter the amount of distributions	required under st	tate law to	o be distrib	uted to other exempt organizations or spent in the		
	organization's own exempt activit			\$			
Ра			-		equired by Part I, line 2b, columns (iii) and (v); and F	Part III, lines 9,	9b, 10b,
	15b, 15c, 16, and 17b, as	s applicable. Also	provide a	any addition	al information. See instructions.		
Sc	hedule G, Part I,	Line 2b,	List	c of T	en Highest Paid Fundraiser	s:	
(i	) Name of Fundrais	ser: Ster	ling	Assoc	iates		
<u>(i</u>	) Address of Fund	raiser: 5	5 Wai	igh Dr	#601, Houston, TX 77007		

	(*******		

SCHEDULE I (Form 990)	Go	irants and Oth vernments, ar	nd Individual	s in the Ŭni	ted States		OMB No. 1545-0047
Department of the Treasury Internal Revenue Service	Comple	ete if the organizatio Go to www.irs	n answered "Yes" Attach to Form s.gov/Form990 for	990.			Open to Public Inspection
Name of the organization							Employer identification number
Houston Z							74-1590271
Part I General Information on Grants a							
1 Does the organization maintain records the criteria used to award the grants or assist	stance?				-		
2 Describe in Part IV the organization's pro							
Part II Grants and Other Assistance to recipient that received more than S	•				anization answered "Y	es" on Form 990, Parl	t IV, line 21, for any
<b>1 (a)</b> Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
American Assoc. of Zoological							
Parks and Aquariums - 8403							
Colesville Rd Ste 710 - Silver							
Spring, MD 20910	55-0526930	501(c)(3)	15,000.	0.			Employee Relief Fund
Baylor College of Medicine PO Box 301207							
Dallas, TX 75303	74-1613878	501(c)(3)	400,901.	0.			EEHV Research Project
Global Conservation Network 12101 Johnny Cake Ridge Rd Apple Valley, MN 55124	41-1719362	501(c)(3)	10,000.	0.			Operating Support
Dian Fossey Gorilla Fund Int'l. 800 Cherokee Avenue SE Atlanta, GA 30315	52-1118866	501(c)(3)	50,000.	0.			Operating Support
Ecology Project International 315 S 4th St E Missoula, MT 59801	91-2163952	501(c)(3)	124,000.	0.			Galapagos Educational Program
George Miksch Sutton Avian Research Center – PO Box 2007 – Bartlesville, OK 74005	73-1023595	501(c)(3)	215,700.	0.			Attwater Prairie Chicken conservation support
2 Enter total number of section 501(c)(3) a			e line 1 table				13.
3 Enter total number of other organization	s listed in the line 1	table					

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

Schedule I (Form 990) 2022

# Schedule I (Form 990) Houston Zoo, Inc. Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments (Schedule I (Form 990), Part II.)

74-1590271 Page 1

(a) Name and address of organization or government	<b>(b)</b> EIN	(c) IRC section if applicable	<b>(d)</b> Amount of cash grant	<b>(e)</b> Amount of noncash assistance	<b>(f)</b> Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
International Elephant Foundation							
PO Box 366							Elephant conservation
Azle, TX 76098	75-2815706	501(c)(3)	15,000.	0.			support
·							
MGVP Inc.							Mountain and Eastern
PO Box 356							Lowland Gorilla
Davis, CA 95617	06-1752363	501(c)(3)	75,000.	0.			conservation support
Telonics Inc.							
932 E Impala Ave							Giant Anteater
Mesa, AZ 85204	86-0348648		76,783.	0.			conservation support
<u>Mesa, AZ 05204</u>	00-0340040		10,105.	0.			
University of California - Davis							
PO Box 989062							
West Sacramento, CA 95798	94-6036494	501(c)(3)	24,000.	0.			Latin America Program
,							
White Oak Conservation Foundation							Emerging wildlife
227 W Montroe St, Ste 4800							conservation leader
Chicago, IL 60606	46-4249512	501(c)(3)	11,069.	0.			support
Fort Worth Zoological Association							
1989 Colonial Parkway	75 0001707		04.400	0			Houston Toad conservation
Fort Worth, TX 76110	75-0991727	501(C)(3)	94,496.	0.			support
Fossil Rim Wildlife Center							
2155 County Rd 2008							Attwater Prairie Chicken
Glen Rose, TX 76043	75-2327438	501(c)(3)	185,708.	0.			conservation support
Texas State University							
601 University Dr							Houston Toad conservation
San Marcos, TX 78666	74-6002248	501(c)(3)	26,765.	0.			support

Schedule I (Form 990)

Schedule I (Form 990) 2022

Houston Zoo, Inc.

74-1590271 Page 2

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

(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
		0.000			
Conservation research support	1	8,960.	0.		
Part IV Supplemental Information. Provide the information requ	uired in Part I, lin	e 2; Part III, column	(b); and any other ac	ditional information.	
Part I, Line 2:					
The Houston Zoo's selection criteri	a for aw	arding gra	nts are ba	sed on our	
mission statement goals and long-te	erm devel	opment of	regional p	rograms. We	
				-	
do not solicit proposals, nor do we	e nave a	<u>iormai pro</u>	cess for r	eceiving and	
evaluating grant requests. Instead,	we acti	vely seek	out projec	ts that fit	
the areas of interest of the Zoo's	leadersh	ip and sta	ff. We the	n meet with	
the researchers to see how well the	y fit wi	th our Zoo	. We do no	t spend much	
money up front until we are satisfi	ed that	they will	communicat	e and	
interact with the Zoo (web, media,					

Schedule I (Form 990) Houston Zoo, Inc.	74-1590271	Page 2
Schedule I (Form 990) Houston Zoo, Inc. Part IV Supplemental Information		g
etc.) and their research program is sustainable over t	he next 1-3 years	
ceet, and cherr rebearen program is subcarmable over (	me mente i o yeuro	
that we intend to partner with them. We monitor their	progress through	
chat we intend to partner with them. we monitor their	progress chrough	
nonialis site mists where superiorhle and nonnest non		
periodic site visits where practicable and request per	clodic reports of	
activities.		

SC	HEDULE J	Compensation Information	OMB	No. 15	45-004	7
(Fo	rm 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest	2	n	22	
		Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		U/	22	
Depar	tment of the Treasury	Attach to Form 990.	-		Publi	C
Intern	al Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		spec		
Nam	e of the organizatior		Employer identific			nber
De		Houston Zoo, Inc. s Regarding Compensation	74-15902	271		
Pa		s Regarding Compensation		Т,		
40	Chaoli the energy	ate hav(as) if the experimation are vided any of the following to as fer a nerson listed on Ferm	000	_	Yes	No
па		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	i i i i i i i i i i i i i i i i i i i				
	Travel for com	panions Payments for business use of personal re ation and gross-up payments Health or social club dues or initiation fee				
		spending account Personal services (such as maid, chauffel				
h	If any of the boxes	on line 1a are checked, did the organization follow a written policy regarding payment or				
b	•	rovision of all of the expenses described above? If "No," complete Part III to explain	-	b	x	
2		n require substantiation prior to reimbursing or allowing expenses incurred by all directors,	·····			
-	•	rs, including the CEO/Executive Director, regarding the items checked on line 1a?		2	X	
	tradices, and onloc			_		
3	Indicate which if an	ny, of the following the organization used to establish the compensation of the organization's				
-		ector. Check all that apply. Do not check any boxes for methods used by a related organizati				
		ation of the CEO/Executive Director, but explain in Part III.				
	X Compensation					
		ompensation consultant IX Compensation survey or study				
	X Form 990 of of		ommittee			
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 re					
а	0	e payment or change-of-control payment?	4	a		Х
b		eive payment from a supplemental nonqualified retirement plan?		b	X	
с	Participate in or rec	eive payment from an equity-based compensation arrangement?		c		Х
	If "Yes" to any of lin	hes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	-					
	Only section 501(c	)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n			
	contingent on the re					
а	The organization?			ia		Х
b	Any related organiz	ation?		ib 🛛		X
	If "Yes" on line 5a c	or 5b, describe in Part III.				
6	For persons listed c	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	n 📃			
	contingent on the n					
а	The organization?		<u>e</u>	ia 🗌		X
b	Any related organiz	ation?	<u>e</u>	ib 🛛		Х
		or 6b, describe in Part III.				
7		on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments				
	not described on lin	nes 5 and 6? If "Yes," describe in Part III	Ľ	7	X	
8	•	reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the	1e			
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9		id the organization also follow the rebuttable presumption procedure described in				
	Regulations section	1 53.4958-6(c)?		9		
LHA	For Paperwork Re	eduction Act Notice, see the Instructions for Form 990.	Schedule J (F	orm	990)	2022

#### 74-1590271

#### 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>B)</b> Breakdown of W	-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) Lee Ehmke	(i)	488,526.	93,727.	3,048.	11,162.	9,255.	605,718.	0.
President & CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) Sheryl Kolasinski	(i)	275,672.	35,569.	1,714.	9,994.	9,030.	331,979.	0.
COO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) Jeri Nordbrock	(i)	244,472.	31,090.	1,714.	8,479.	10,641.	296,396.	0.
CFO	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) Roberto Espinosa	(i)	206,913.	46,004.	240.	10,483.	17,340.	280,980.	0.
VP Development	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) Kristin Finney	(i)	196,195.	24,046.	360.	7,401.	13,975.	241,977.	0.
VP Human Resources	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) Trazanna Moreno	(i)	192,156.	23,979.	360.	8,853.	10,908.	236,256.	0.
VP Marketing and Communications	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) Mark Van Winkler	(i)	198,544.	200.	1,714.	8,020.	7,266.	215,744.	0.
Exhibit Design Director	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) Peter Riger	(i)	171,927.	22,058.	1,032.	7,934.	9,135.	212,086.	0.
VP Conservation and Education	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) Conor Lalor	(i)	158,646.	3,000.	22,664.	5,510.	20,043.	209,863.	0.
Exhibit Artist	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

#### Part III Supplemental Information

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

Part I, Line 1a:

Conor Lalor received a housing allowance of \$15,147 during the year ended

December 31, 2022. This benefit was included in his taxable compensation.

Part I, Line 4b:

Lee Ehmke participates in a 457(b) Top Hat plan. The contribution for 2022

was \$20,348.

Part I, Line 7:

The Houston Zoo has an Incentive Plan for eligible individuals based on

their achievement of organizational goals and individual/department goals

aligned with the Zoo's Strategic Plan. The Human Resources Committee of the

Board reserves the right to amend, modify, suspend, or terminate the

Leadership Incentive Plan, in whole or in part, at any time, for any

reason, with or without notice. The CEO retains the discretion to withhold

any or all portions of the Plan payout to an eligible employee or employees

for performance, disciplinary or other reasons.

### SCHEDULE M (Form 990)

### **Noncash Contributions**

OMB No. 1545-0047

2022 Open to Public

Inspection

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.

Department of the Treasury Internal Revenue Service

Employer	identification	number

74-1590271

Name of the organization

#### Houston Zoo, Inc.

Zoo,	Inc.

Part I 1	Types of Property								
·		<b>(a)</b> Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contri amounts repor Form 990, Part VI	ted on	(c Method of c noncash contrib	, determin	•	s
<b>1</b> Art - Wo	rks of art				.,				
	torical treasures								-
	ctional interests								
	Ind publications								
	and household goods								
	d other vehicles								
	nd planes								
	ual property								
	es - Publicly traded	X	6	366	,364.	FMV			
	es - Closely held stock								
	es - Partnership, LLC, or								
trust inte	erests								
12 Securitie	es - Miscellaneous								
13 Qualified	d conservation contribution -								
Historic	structures								
14 Qualified	d conservation contribution - Other $_{\dots}$								
15 Real est	ate - Residential								
16 Real est	ate - Commercial								
17 Real est	ate - Other								
18 Collectit	oles								
	ventory								
	nd medical supplies								
	my								
	al artifacts								
	c specimens								
	ogical artifacts			1.1.0					
25 Other	( <u>Auction items</u> )	X	60		<u>,899.</u>				
26 Other	( <b>Food/beverages</b> )	X	1	57	<u>,386.</u>	F.WA			
27 Other	()								
28 Other	()								
	of Forms 8283 received by the organiz							0	
for whic	h the organization completed Form 82	83, Part V, L	onee Acknowledg	ement	29			-	
200 During t	he week did the organization receive h	( oontributio	n ony proporty rop	ortad in Dart L lina	o 1 throug	ab 29 that it		Yes	No
	he year, did the organization receive by Id for at least 3 years from the date of								
	,		,	•			30a		х
	purposes for the entire holding period? describe the arrangement in Part II.	۰					<u>30a</u>		
	e organization have a gift acceptance p	oolicy that re	ouires the review (	of any nonstandard	l contribu	tions?	31	х	
	e organization hire or use third parties						31		
contribu			-				32a		x
	itions? ' describe in Part II.						<u>52</u> a		
	ganization didn't report an amount in c	olumn (c) fo	r a type of property	for which column	(a) is che	cked			
	e in Part II.	e.a							
	aperwork Reduction Act Notice, see	the Instruct	tions for Form 990	).		Schedule	M (Forn	n 990)	2022

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


SCHEDULE O (Form 990) Department of the Treasury Internal Revenue Service	Supplemental Information to Form 990 or 990 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.	-EZ	OMB No. 1545-0047	
Name of the organizatio	n Houston Zoo, Inc.		identification number 590271	
Form 990, Pa	rt III, Line 1, Description of Organization Mi	ssion:		
Houston Zoo, Inc. (HZI) strives to be a zoo that practices exemplary				
animal care, delivers an outstanding guest experience, creates a				
workplace that instills respect and teamwork, provides learning				
opportunities, promotes conservation awareness, and inspires community				
support.				

Form 990, Part III, Line 4a, Program Service Accomplishments: Houston Zoo, Inc. (HZI) is accredited by the Association of Zoos and Aquariums (AZA), America's leading accrediting organization for zoos and aquariums. AZA accredits only those institutions that have achieved the highest standards for animal and veterinary care, safety practices, education, wildlife conservation, and science.

HZI is one of 237 AZA-accredited institutions - essential to
accomplishing its mission to connect communities with animals and
inspire action to save wildlife. HZI does this guided by the following
principles: 1) Be a zoo for all; 2) Provide exemplary animal care,
assuring outstanding animal welfare; 3) Deliver a smart, fun, inspiring
guest experience; 4) Be the leading environmental education resource in
Texas; 5) Inspire broad community support and collaborations; 6) Change
behaviors to help protect wildlife; 7) Create a workplace culture that
embodies respect, empowerment, teamwork, and personal development; 8)
Employ best business practices and sound financial management; 9)
Ensure safety for guests, staff and the animals in our care; and 10)
Operate sustainably and set an example for others.

HZI's animal collection is among the largest and most well-rounded in the nation, providing our guests with opportunities to enjoy and learn about the diversity of the natural world. HZI's veterinary team is also among the best in the nation, responsible for an ambitious preventive medicine program that includes routine health exams, vaccinations, and ongoing health surveillance. HZI is recognized as a leader in the global movement to save wildlife, including several Texas native species such as Attwater's Prairie Chicken, Houston Toad, Whooping Crane and Kemp Ridley Sea Turtle.

HZI's Centennial Master Plan, a multi-year effort to construct conservation-minded, multi-species exhibits for the public and make critical improvements to its 100-year-old infrastructure, overcame pandemic-related construction challenges to complete the South American Pantanal exhibit. This immersive, 4.5-acre project (opened in October 2020) highlights the extraordinary biological diversity of the world's largest freshwater wetland with multiple exhibits, featuring jaguars, giant anteaters, giant river otters, anacondas, and more, with a focus on conservation efforts in the Pantanal and HZI's many-year support of those programs.

Under the guidance of the Houston Health Department, HZI also implemented wide-ranging protocols to mitigate COVID-19 transmission by protecting guests, staff and animals. Measures included timed ticket entry, contactless transactions, hand sanitizers throughout the grounds, physical distance signage, masking indoors, and much more.

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization	Employer identification number
Houston Zoo, Inc.	74-1590271
In keeping with its mission to be a "Zoo for All," the dem	ographics of
Zoo attendance continues to closely match the demographics	of the City
of Houston's population. HZI takes pride in its vital pres	ence in the
community and will continue to cultivate community engagem	ent utilizing
traditional marketing mediums (television, print, radio, c	outdoor) as
well as digital and social media. Though attendance was li	mited due to
pandemic-related capacity constraints, almost 25% of guest	s visited the
Zoo free of charge or at a heavily discounted price throug	h HZI's
multifaceted approach to ensure all Houstonians, regardles	s of means,
have access. Lone Star cardholding guests could bring 2 ad	ults and 3
children for \$6 each, a 70% discount off regular price, an	d Military ID
holding guests could bring up to 2 adults and 3 children a	t a 50%
discount. 172,627 Lone Star Card and Military ID holding g	uests took
advantage of these programs.	

In 2010 HZI eliminated its original free days in favor of monthly free Tuesdays to eliminate problems created for the Texas Medical Center as traffic gridlock on those days adversely affected emergency vehicle access to emergency rooms. With this program, guests now have 12 opportunities to attend the Zoo for free over the course of a year. During 2022, HZI provided free admission to 242,858 guests, mainly during our monthly Free Tuesday day. Total gate attendance was 1,663,111 and our Zoo Lights celebration accounted for 205,368 guests during 2022.

HZI Community Support consists of adult volunteer, Junior League, and Master Naturalist volunteer hours. In 2022, 434 adult volunteers

donated 31,550 hours to HZI by participating in activities from animal
232212 10-28-22
Schedule O (Form 990) 2022

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization	Employer identification number
Houston Zoo, Inc.	74-1590271

care and horticulture to administration, event support, education, and conservation.

Form 990, Part III, Line 4b, Program Service Accomplishments: HZI's Wildlife Conservation Program is a critical mission component and connects communities with animals to inspire wildlife saving action. In 2022, HZI's Wildlife Conservation Program supported nearly 33 partnerships protecting wildlife in 17 countries, including the United States, Central and South America, Africa, and Asia.

Regionally, HZI worked with local, state and federal organizations and local communities to support wildlife and habitat research and conservation measures. Reintroduction programs for the endangered Houston Toad included a nearly 1 million toad egg release in Bastrop County with USFWS and Texas State University partners. Work to reintroduce Texas's most critically endangered bird, the Attwater's Prairie Chicken, back into its native habitat continued at the Attwater's Prairie Chicken National Refuge in Sealy, TX. And 2022 marked HZI's sixth year of support for Whooping Crane recovery along the Central Texas coast. Efforts include habitat protection along with community outreach and awareness programs. All HZI conservation programs are based on long-term close working partnerships and include habitat protection along with community outreach and awareness programs to create the greatest possible impact. Local partners include Texas Parks and Wildlife Department, US Fish and Wildlife Service, Texas State University, NOAA Marine Fisheries, Texas A&M University at Galveston, Association of Zoos and Aquariums, Galveston Bay Foundation, Attwater's Prairie Chicken National Refuge, NASA's Johnson Space

Name of the organization

74-1590271

Center, and many others.

Internationally, HZI's conservation efforts are focused on critical regions and species linked to the animals in its collection. This is accomplished through partnerships with leading conservationists, organizations, zoos, and aquariums around the world. The connection between HZI's partners and its collection is typified by the Pantanal exhibit's focus on efforts in Brazil to protect key species such as Tapirs, Giant Anteaters, Giant Otters, and Jaguars. By effectively communicating this connection, Zoo guests can see the purchase of their admission and memberships as critical support for wildlife across the globe. Another major focus is directed at reducing threats to wildlife affected by plastic pollution.

Form 990, Part III, Line 4c, Program Service Accomplishments: The Houston Zoo's Conservation Education Department aims to ignite in all people a passion for lifelong learning and conservation by creating connections between guests and nature. Formal and informal education programs promote scientific inquiry through hands-on experiences with living plants and animals, leading to increased learning. During this reporting period, the Houston Zoo's Conservation Education Department personnel conducted interpretive programs on the grounds reaching approximately 557,906 participants.

The Zoo's conservation education programs offer a continuum of learning

from birth to adulthood including fee-based educational programs,

on-site live interpretation, adult volunteers, and interpretive

planning. Fee-based programs include family programs, early childhood 232212 10-28-22 Schedule O (Form 990) 2022

Name of the organization	Employer identification number
Houston Zoo, Inc.	74-1590271
programs, teen programs, summer camp, and overnights. Camp	Zoofari, a
popular summer program at the Zoo, provides ages 6-14 with	immersive

experiences led by our professional camp guides.

Conservation Education Programs (1/1/2022 to 12/31/2022):

Total persons served: 566,507 (includes onsite guest interactions by

staff, teens and volunteer interpreters, pre-schedule fee-based

programming)

The Houston Zoo values being a "Zoo for All." Conservation Education supports this value by offering free weeklong summer camp experiences for need-based children ages 6-12. In addition, we partner with school campuses across the Greater Houston region to support students in their wildlife-saving initiatives at no cost to the school or students; as well as awarding college scholarships to our Zoo Crew teens that are graduating out of the program to college. We also offer outreach ZooMobile programs at no cost to Houston-area community partners.

Summer Camp scholarships: 172 campers

Saving Wildlife School Partnerships: 1720 students and educators

ZooMobiles: 28 programs reaching 1470 Houston community members

Zoo Crew teen college scholarships: 4 teens

Form 990, Part VI, Section A, line 7a:

Per the corporate documents, the Mayor of the City of Houston has the power

to appoint 20% of the Board of Directors.

Form 990, Part VI, Section B, line 11b:

Schedule O (Form 990) 2022	Page <b>2</b>
Name of the organization	Employer identification number
Houston Zoo, Inc.	74-1590271

Form 990 is reviewed by the CEO and the CFO. Once reviewed internally, the Form is reviewed and approved by the Audit Committee. A copy of the Form is provided to each Board member prior to filing with the IRS.

Form 990, Part VI, Section B, Line 12c:

The Zoo's Board of Directors has a conflict of interest policy to ensure that both the Zoo and its directors and officers are protected from concerns of conflict of interest. The policy asks the directors and officers to disclose their relationship with other organizations or people that might give rise to a situation in which the officer or director would be subject to criticism for a conflict. Each year the Zoo asks its directors and officers to complete and file a form with the Zoo to meet this requirement. The Audit Committee Chair is responsible for the oversight process and the Board Chair is responsible for addressing any conflicts that may be disclosed in the process.

Form 990, Part VI, Section B, Line 15:

The compensation of the President/CEO is determined by the Compensation <u>Committee of the Board of Directors. The Committee reviews both comparable</u> <u>salaries for similar positions listed on other organizations' Form 990s as</u> <u>well as comparable position salaries in the American Zoological Association</u> <u>Salary Survey.</u>

This process is followed for other officers and key employees as well.

Form 990, Part VI, Section C, Line 19:

These documents are provided upon request.

Schedule O (Form 990) 2022 Name of the organization Houston Zoo, Inc.	Page 2 Employer identification number 74-1590271
Form 990, Part XI, line 9, Changes in Net Assets:	, , , , , , , , , , , , , , , , , , , ,
Change in value of derivative agreement	4,207,189.
Cumulative effect of new lease accounting standard	-62,505.
Total to Form 990, Part XI, Line 9	4,144,684.

Form 990/990-EZ/990-PF	Form 990-T
Exported on 11/02/2023 15:46:13	Exported on 11/02/2023 15:46:44
Form 990	Form 990-T

## Forms included in Electronic Filing