

Forms 990 / 990-EZ Return Summary

For calendar year 2016, or tax year beginning **01/01/17** , and ending **06/30/17**

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

**** - ***7197**

Net Asset / Fund Balance at Beginning of Year		<u>10,880,454</u>
Revenue		
Contributions	<u>691,093</u>	
Program service revenue	<u>1,802,614</u>	
Investment income	<u>131,394</u>	
Capital gain / loss	<u> </u>	
Fundraising / Gaming:		
Gross revenue	<u>137,297</u>	
Direct expenses	<u>37,140</u>	
Net income	<u>100,157</u>	
Other income	<u>291,048</u>	
Total revenue		<u>3,016,306</u>
Expenses		
Program services	<u>2,159,703</u>	
Management and general	<u>297,262</u>	
Fundraising	<u>208,515</u>	
Total expenses		<u>2,665,480</u>
Excess / (deficit)		<u>350,826</u>
Changes		<u> </u>
Net Asset / Fund Balance at End of Year		<u><u>11,231,280</u></u>

Reconciliation of Revenue	
Total revenue per financial statements	<u>3,016,306</u>
Less:	
Unrealized gains	<u> </u>
Donated services	<u> </u>
Recoveries	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total revenue per return	<u><u>3,016,306</u></u>

Reconciliation of Expenses	
Total expenses per financial statements	<u>2,665,480</u>
Less:	
Donated services	<u> </u>
Prior year adjustments	<u> </u>
Losses	<u> </u>
Other	<u> </u>
Plus:	
Investment expenses	<u> </u>
Other	<u> </u>
Total expenses per return	<u><u>2,665,480</u></u>

Balance Sheet			
	Beginning	Ending	Differences
Assets	<u>12,527,374</u>	<u>12,738,124</u>	
Liabilities	<u>1,646,920</u>	<u>1,506,844</u>	
Net assets	<u><u>10,880,454</u></u>	<u><u>11,231,280</u></u>	<u><u>350,826</u></u>

Miscellaneous Information

Amended return _____
 Return / extended due date 11/15/17
 Failure to file penalty _____

Form 990-T Return Summary

For calendar year 2016, or tax year beginning **01/01/17** , and ending **06/30/17**

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

**** - *** 7197**

Income

Gross profit			
Capital gain / loss			
Unrelated debt-financed income			
All other income	29,310		
Total income		29,310	

Deductions

Officer compensation			
Salaries	7,428		
All other deductions	29,232		
Net operating loss			
Specific deduction			
Total deductions		36,660	
Unrelated business taxable income			-7,350

Taxes / Credits / Payments

Regular tax			
Proxy tax			
Alternative minimum tax			
Tax			
Foreign tax credit			
Other credits			
General business credits			
Prior year minimum tax credit			
Total nonrefundable credits			
Other taxes			
Total tax			
Estimated tax payments			
Paid with extension			
Tax withheld			
Other credits / payments			
Estimated tax penalty			
Overpayment applied to next year's tax			
Payments / penalty / application			
Net tax due			

Additions to Tax

Interest on late payments			
Failure to file penalty			
Failure to pay penalty			
Total additions			

Balance due			
Refund			

Next Year's Estimates

1st quarter	
2nd quarter	
3rd quarter	
4th quarter	
Total	

Miscellaneous Information

Amended return	
Return / extended due date	11/15/17

CHANGE OF ACCOUNTING PERIOD

Form 990

Return of Organization Exempt From Income Tax

OMB No. 1545-0047

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

2016

Department of the Treasury Internal Revenue Service

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

Open to Public Inspection

Information about Form 990 and its instructions is at www.irs.gov/form990.

A For the 2016 calendar year, or tax year beginning 01/01/17, and ending 06/30/17

- B Check if applicable: Address change, Name change, Initial return, Final return/terminated, Amended return, Application pending

C Name of organization: CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC. Doing business as: P. O. BOX 470309. City or town, state or province, country, and ZIP or foreign postal code: LAKE MONROE FL 32747-0309

D Employer identification number: **-***7197. E Telephone number: 407-323-4450. G Gross receipts \$: 3,166,318

H(a) Is this a group return for subordinates? Yes [X] No []. H(b) Are all subordinates included? Yes [] No []. If "No," attach a list. (see instructions)

I Tax-exempt status: [X] 501(c)(3) [] 501(c) () t (insert no.) [] 4947(a)(1) or [] 527

J Website: WWW.CENTRALFLORIDAZOO.ORG

H(c) Group exemption number u

K Form of organization: [X] Corporation [] Trust [] Association [] Other u

L Year of formation: 1971

M State of legal domicile: FL

Part I Summary

Table with 3 columns: Description, Prior Year, Current Year. Rows include: 1-7a Summary items, 8-12 Revenue, 13-19 Expenses, 20-22 Net Assets or Fund Balances.

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign Here: Signature of officer, Date, Type or print name and title

Paid Preparer Use Only: Print/Type preparer's name (ROBERT KIMELMAN), Preparer's signature, Date (03/06/18), Check self-employed [], PTIN (*****), Firm's name (GREENE, DYCUS & CO., PA), Firm's address (205 N ELM AVE, SANFORD, FL 32771-1274), Firm's EIN (**-***5346), Phone no. (407-322-0561)

May the IRS discuss this return with the preparer shown above? (see instructions) [X] Yes [] No

For Paperwork Reduction Act Notice, see the separate instructions.

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission:

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 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 measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code:) (Expenses \$ **1,244,993** including grants of \$) (Revenue \$ **1,460,192**)

OPERATION OF A ZOOLOGICAL PARK. THE PARK EXHIBITS LIVE ANIMALS, PROVIDES THE PUBLIC WITH EDUCATIONAL INFORMATION ON WILDLIFE AND AWARENESS OF ENDANGERED SPECIES. THE PARK IS OPEN SEVEN (7) DAYS A WEEK. ATTENDANCE IN THE CURRENT YEAR WAS OVER 130,000.

CORE VALUES - PROTECT - WE PASSIONATELY COMMIT OUR EXPERTISE AND RESOURCES TO SAVING ANIMALS AND TO ENSURING THEIR LONG-TERM SURVIVAL. INNOVATE - WE STRIVE TO DISCOVER SOLUTIONS THROUGH PROGRESSIVE PRACTICES AND PARTNERSHIPS IN EDUCATION, CONSERVATION AND PRESERVATION. ENGAGE - WE CONNECT PEOPLE WITH WILDLIFE AND WILD PLACES AND CREATE OPPORTUNITIES TO INSPIRE OUR GUESTS TO RESPECT, VALUE AND CARE FOR THE NATURAL WORLD. CONTD. SCHEDULE O

4b (Code:) (Expenses \$ **490,285** including grants of \$) (Revenue \$ **153,240**)

GUEST SERVICES - OUR VISITOR SERVICES DEPARTMENT PERFORM A GREAT VARIETY OF SERVICES TO OUR COMMUNITY. IT IS THROUGH THE HARD AND DEDICATED WORK THAT THESE PEOPLE PERFORM EACH AND EVERY DAY WHICH GREATLY ENHANCES THE COMMUNITY'S OVERALL EXPERIENCE AT THE CENTRAL FLORIDA ZOO.

4c (Code:) (Expenses \$ **318,315** including grants of \$) (Revenue \$ **189,182**)

EDUCATION - IN THE CURRENT YEAR THE EDUCATION DEPARTMENT PLAYED A VITAL ROLE IN ENGAGING OVER 95,000 LEARNERS, LEADERS AND ADVOCATES IN THE CENTRAL FLORIDA COMMUNITY. MANY OF OUR PROGRAMS ARE INTEGRATED CURRICULUM-BASED THAT TARGET THE FLORIDA SUNSHINE STATE STANDARDS. THE EDUCATION PROGRAMS ARE SPECIFICALLY CREATED FOR EACH STAGE OF LIFE FROM EARLY LEARNING TO ADULT. EDUCATION PROGRAMS ENCOURAGE CURIOSITY AND UNDERSTANDING ABOUT OUR ENVIRONMENT AND BRING AWARENESS TO THE VITAL ROLE THAT OUR ZOOLOGICAL PARK PLAYS IN CONNECTING FAMILIES TO NATURE. IN ADDITION THE ZOOLOGICAL PARK IS A UNIQUE VENUE FOR STUDENTS TO ENGAGE IN PROBLEM-SOLVING AND CRITICAL THINKING, WITH OPPORTUNITIES FOR REAL LIFE APPLICATIONS.

4d Other program services (Describe in Schedule O.)

(Expenses \$ **106,110** including grants of \$) (Revenue \$)

4e Total program service expenses **2,159,703**

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)? <i>If "Yes," complete Schedule A</i>	X	
2	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> (see instructions)?	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I</i>		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? <i>If "Yes," complete Schedule C, Part II</i>	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 Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III</i>		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>		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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
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? <i>If "Yes," complete Schedule D, Part VII</i>		X
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		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? <i>If "Yes," complete Schedule D, Part IX</i>		X
e	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV</i>		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV</i>		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
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? <i>If "Yes," complete Schedule G, Part I (see instructions)</i>		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>	X	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X

Part IV Checklist of Required Schedules *(continued)*

		Yes	No
20a	Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
20b	<i>If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?</i>		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>		X
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? <i>If "Yes," complete Schedule I, Parts I and III</i>		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
24b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?		
24d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		X
25b	<i>If "Yes" to line 25a, is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I</i>		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? <i>If "Yes," complete Schedule L, Part II</i>		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
28a	a A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	X	
28b	b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		X
28c	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? <i>If "Yes," complete Schedule L, Part IV</i>	X	
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>		X
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1</i>		X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35b	<i>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</i>		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	X	

Part 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

Input box for Schedule O response

Table with columns for question ID, question text, and Yes/No response boxes. Includes questions 1a-1c, 2a-2b, 3a-3b, 4a-4b, 5a-5c, 6a-6b, 7a-7h, 8, 9a-9b, 10a-10b, 11a-11b, 12a-12b, 13a-13c, and 14a-14b.

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

Section A. Governing Body and Management

		Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.		
1b	Enter the number of voting members included in line 1a, above, who are independent		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?		X
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?		X
5	Did the organization become aware during the year of a significant diversion of the organization's assets?		X
6	Did the organization have members or stockholders?		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?		X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:		
a	The governing body?	X	
b	Each committee with authority to act on behalf of the governing body?	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	X	

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

		Yes	No
10a	Did the organization have local chapters, branches, or affiliates?		X
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	X	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.		
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	X	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	X	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	X	
13	Did the organization have a written whistleblower policy?	X	
14	Did the organization have a written document retention and destruction policy?	X	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a	The organization's CEO, Executive Director, or top management official	X	
b	Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions).		X
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?		

Section C. Disclosure

- 17** List the states with which a copy of this Form 990 is required to be filed **u** **NONE**
- 18** Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.
 Own website Another's website Upon request Other (explain in Schedule O)
- 19** Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial 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 books and records: **u**

CHUCK GRIMES
LAKE MONROE

3755 NW HWY 17/92

FL 32747

407-323-4450

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

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

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

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) LEE CONSTANTINE	1.00									
DIRECTOR	0.00	X					0	0	0	
(2) CHARLES DAVIS	1.00									
CHAIRMAN	0.00	X					0	0	0	
(3) JORGE BORRELLI	1.00									
FACILITIES CHAIR	0.00	X					0	0	0	
(4) EDYE MURPHY-HADDOCK	1.00									
SECRETARY	0.00	X					0	0	0	
(5) ROB PANEPINTO	1.00									
DIRECTOR	0.00	X					0	0	0	
(6) MARK SCHEINBLUM	1.00									
DIRECTOR	0.00	X					0	0	0	
(7) ALAN SINGER	1.00									
DIRECTOR	0.00	X					0	0	0	
(8) ALEX WILLIAMS	1.00									
VICE CHAIR	0.00	X					0	0	0	
(9) ANDREW ASHER	1.00									
DEVELOPMENT CHAIR	0.00	X					0	0	0	
(10) BRIGGS K. SELLERS	1.00									
DIRECTOR	0.00	X					0	0	0	
(11) GEORGE SMITH	1.00									
DIRECTOR	0.00	X					0	0	0	

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) PHIL TISCHER	1.00									
DIRECTOR	0.00	X					0	0	0	
(13) LARRY VOLENEC	1.00									
DIRECTOR	0.00	X					0	0	0	
(14) MIKE LANE	1.00									
DIRECTOR	0.00	X					0	0	0	
(15) MAGGIE BONKO	1.00									
DIRECTOR	0.00	X					0	0	0	
(16) ROBERT B. MORRISON	1.00									
TREASURER/FINANCE CH	0.00	X					0	0	0	
(17) TINA CALDERONE	1.00									
DIRECTOR	0.00	X					0	0	0	
(18) ALBERT SARABASSA	1.00									
DIRECTOR	0.00	X					0	0	0	
(19) DINO FERRI	40.00									
PRESIDENT & CEO	0.00			X			0	0	0	
1b Sub-total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)										

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **u 0**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **u 0**

Form 990 (2016)

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a				
	b Membership dues	1b 318,946				
	c Fundraising events	1c				
	d Related organizations	1d				
	e Government grants (contributions)	1e 157,477				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 214,670				
	g Noncash contributions included in lines 1a-1f: \$					
	h Total. Add lines 1a-1f	u 691,093				
Program Service Revenue		Busn. Code				
	2a GATE RECEIPTS	713110	1,460,192	1,460,192		
	b EDUCATIONAL PROGRAMS	611600	189,182	189,182		
	c OTHER INCOME	713110	153,240	153,240		
	d					
	e					
	f All other program service revenue					
g Total. Add lines 2a-2f	u 1,802,614					
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	u 131,394	131,258		136	
	4 Income from investment of tax-exempt bond proceeds	u				
	5 Royalties	u				
	6a Gross rents	(i) Real	127,913			
		(ii) Personal				
	b Less: rental exps.	45,792				
	c Rental inc. or (loss)	82,121				
	d Net rental income or (loss)	u 82,121		29,310	52,811	
	7a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
	b Less: cost or other basis & sales exps.					
	c Gain or (loss)					
	d Net gain or (loss)	u				
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a 137,297				
		b Less: direct expenses	37,140			
c Net income or (loss) from fundraising events		u 100,157				
9a Gross income from gaming activities. See Part IV, line 19	a					
	b Less: direct expenses					
	c Net income or (loss) from gaming activities	u				
10a Gross sales of inventory, less returns and allowances	a 276,007					
	b Less: cost of goods sold	67,080				
	c Net income or (loss) from sales of inventory	u 208,927	208,927			
Miscellaneous Revenue	Busn. Code					
	11a					
	b					
	c					
	d All other revenue					
e Total. Add lines 11a-11d	u					
12 Total revenue. See instructions.	u 3,016,306	2,142,799	29,310	52,947		

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 response or note to any line in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21				
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	65,110	39,066	13,022	13,022
7 Other salaries and wages	1,158,918	931,738	112,270	114,910
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	17,897	14,317	1,790	1,790
9 Other employee benefits				
10 Payroll taxes	106,975	85,579	10,698	10,698
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	20,667		20,667	
d Lobbying	25,390			25,390
e Professional fundraising services. See Part IV, line 17				
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	64,833	64,833		
12 Advertising and promotion	53,400	38,300	30	15,070
13 Office expenses	12,520	11,130	460	930
14 Information technology	9,910	6,850		3,060
15 Royalties				
16 Occupancy	136,100	122,490	6,805	6,805
17 Travel				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings				
20 Interest	21,396		21,396	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	266,880	264,450	2,430	
23 Insurance	247,580	170,500	69,130	7,950
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a ANIMAL CARE	104,460	104,460		
b REPAIR	91,310	88,540	2,410	360
c UTILITIES	81,000	73,990	6,480	530
d OTHER	79,224	56,630	18,064	4,530
e All other expenses	101,910	86,830	11,610	3,470
25 Total functional expenses. Add lines 1 through 24e	2,665,480	2,159,703	297,262	208,515
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest bearing	447,478	1	420,953
	2	Savings and temporary cash investments		2	
	3	Pledges and grants receivable, net		3	
	4	Accounts receivable, net	58,902	4	2,125
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7	Notes and loans receivable, net		7	
	8	Inventories for sale or use	21,973	8	10,352
	9	Prepaid expenses and deferred charges	18,752	9	35,378
	10a	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 13,981,965		
	b	Less: accumulated depreciation	10b 5,054,478	10c 8,633,598	8,927,487
	11	Investments—publicly traded securities		11	
	12	Investments—other securities. See Part IV, line 11		12	
	13	Investments—program-related. See Part IV, line 11		13	
	14	Intangible assets	3,303,333	14	3,298,491
	15	Other assets. See Part IV, line 11	43,338	15	43,338
16	Total assets. Add lines 1 through 15 (must equal line 34)	12,527,374	16	12,738,124	
Liabilities	17	Accounts payable and accrued expenses	366,361	17	256,089
	18	Grants payable		18	
	19	Deferred revenue	278,636	19	304,030
	20	Tax-exempt bond liabilities		20	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties	632,394	23	746,650
	24	Unsecured notes and loans payable to unrelated third parties	175,122	24	
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	194,407	25	200,075
	26	Total liabilities. Add lines 17 through 25	1,646,920	26	1,506,844
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27	Unrestricted net assets	7,288,134	27	7,648,786
	28	Temporarily restricted net assets	3,592,320	28	3,582,494
	29	Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.				
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building, or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
33	Total net assets or fund balances	10,880,454	33	11,231,280	
34	Total liabilities and net assets/fund balances	12,527,374	34	12,738,124	

Part XI Reconciliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	3,016,306
2	Total expenses (must equal Part IX, column (A), line 25)	2	2,665,480
3	Revenue less expenses. Subtract line 2 from line 1	3	350,826
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	10,880,454
5	Net unrealized gains (losses) on investments	5	
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 in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	11,231,280

Part XII Financial Statements and Reporting

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

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	X	
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	X	

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

u Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

u Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.	Employer identification number **-***7197
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land grant college of agriculture (see instructions). Enter the name, city, and state of the college or university:
- 10 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2)**. (Complete Part III.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	897,914	1,129,074	1,135,666	1,576,633	1,374,671	6,113,958
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	897,914	1,129,074	1,135,666	1,576,633	1,374,671	6,113,958
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public support. Subtract line 5 from line 4.						6,113,958

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	897,914	1,129,074	1,135,666	1,576,633	1,374,671	6,113,958
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,000	921	562	75,897	148,118	226,498
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	385,667	184,200	191,742	194,463	281,360	1,237,432
11 Total support. Add lines 7 through 10						7,577,888

12 Gross receipts from related activities, etc. (see instructions) 12 13,208,820

13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here**

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	80.68 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	80.07 %

16a 33 1/3% support test—2016. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here**. The organization qualifies as a publicly supported organization

b 33 1/3% support test—2015. 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—2016. 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—2015. 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

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) u	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

- 19a 33 1/3% support tests—2016.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2015.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>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.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
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)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>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.</i>		
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)? <i>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.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) 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).</i>		
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? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (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? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
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))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
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)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
11a		
b A family member of a person described in (a) above?		
11b		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11c		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI 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 directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
1		
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.		
2		

Section C. Type II Supporting Organizations

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

Section D. All 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 in (2), 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 year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) 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.		
2a		
b Did the activities described in (a) 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.		
2b		
3 Parent of Supported Organizations. Answer (a) and (b) 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? Provide details in Part VI.		
3a		
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.		
3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section 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	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	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 1-1/2% 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 .035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	

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

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions.	
7 Total annual distributions. Add lines 1 through 6.	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required-explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2017. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

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

PART II, LINE 10 - OTHER INCOME DETAIL

FUND RAISING AND GUEST SERV. SALES \$ 1,237,432

Schedule B
(Form 990, 990-EZ,
or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

u Attach to Form 990, Form 990-EZ, or Form 990-PF.

u Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Name of the organization

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

Employer identification number

**** - ***7197**

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

501(c)(**3**) (enter number) organization

4947(a)(1) nonexempt charitable trust **not** 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

For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃ % support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), 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, 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 ► \$

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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, 990-EZ, or 990-PF).

Name of organization CENTRAL FLORIDA ZOOLOGICAL	Employer identification number ** - ***7197
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Part I Contributors (See instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DIVISION OF CULTURAL AFFAIRS FLORIDA DEPT. OF STATE DIVISION OF CULTURAL AFFAIRS TALLAHASSEE FL 32399	\$ 44,977	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	WHARTON-SMITH, INC. PO BOX 471028 LAKE MONROE FL 32747	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	WAYNE M DENSCH CHARITABLE TRUST PO BOX 536845 ORLANDO FL 32853-6845	\$ 111,954	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	SEMINOLE COUNTY TDC PO BOX 8080 SANFORD FL 32772	\$ 112,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
.....	\$	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.
 Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

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

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

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

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

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

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization **CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.** Employer identification number **** - ***7197**

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

- 1 Provide a description of the organization's direct and indirect political campaign activities in Part IV. (see instructions for definition of "political campaign activities")
- 2 Political campaign activity expenditures (see instructions) \$
- 3 Volunteer hours for political campaign activities (see instructions)

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

- 1 Enter the amount of any excise tax incurred by the organization under section 4955 \$
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 \$
- 3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Yes No
- 4a Was a correction made? Yes No
- b If "Yes," describe in Part IV.

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

- 1 Enter the amount directly expended by the filing organization for section 527 exempt function activities \$
- 2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities \$
- 3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b \$
- 4 Did the filing organization file Form 1120-POL for this year? Yes No
- 5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				

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

Schedule C (Form 990 or 990-EZ) 2016

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

- A** Check if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).
- B** Check if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures
(The term "expenditures" means amounts paid or incurred.)

(a) Filing organization's totals	(b) Affiliated group totals
----------------------------------	-----------------------------

- 1a** Total lobbying expenditures to influence public opinion (grass roots lobbying)
- b** Total lobbying expenditures to influence a legislative body (direct lobbying)
- c** Total lobbying expenditures (add lines 1a and 1b)
- d** Other exempt purpose expenditures
- e** Total exempt purpose expenditures (add lines 1c and 1d)
- f** Lobbying nontaxable amount. Enter the amount from the following table in both columns.

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over \$500,000	20% of the amount on line 1e.
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.
Over \$17,000,000	\$1,000,000.

- g** Grassroots nontaxable amount (enter 25% of line 1f)
- h** Subtract line 1g from line 1a. If zero or less, enter -0-
- i** Subtract line 1f from line 1c. If zero or less, enter -0-
- j** If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?

Yes No

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

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total
2a Lobbying nontaxable amount					
b Lobbying ceiling amount (150% of line 2a, column(e))					
c Total lobbying expenditures					
d Grassroots nontaxable amount					
e Grassroots ceiling amount (150% of line 2d, column (e))					
f Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.

	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?		X	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
c Media advertisements?		X	
d Mailings to members, legislators, or the public?		X	
e Publications, or published or broadcast statements?		X	
f Grants to other organizations for lobbying purposes?		X	
g Direct contact with legislators, their staffs, government officials, or a legislative body?		X	
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	
i Other activities?	X		25,390
j Total. Add lines 1c through 1i			25,390
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X	
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE C, PART II-B, LINE 1

RETAINER PAID TO GRAY ROBINSON, ATTORNEYS AT LAW TO REPRESENT THE CENTRAL FLORIDA ZOO AND BOTANICAL GARDENS DURING THE 2017 SESSION OF THE FLORIDA EXECUTIVE AND LEGISLATIVE BRANCHES FOR THE PURPOSE OF INCLUDING SPECIAL FUNDING IN THE STATE BUDGET FOR FUNDING ENHANCEMENTS TO THE ZOO'S

Part IV Supplemental Information *(continued)*

INFRASTRUCTURE AND EDUCATIONAL FACILITIES.

SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

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

u Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization

CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.

Employer identification number

** - ***7197

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

Table with 2 columns: (a) Donor advised funds, (b) Funds and other accounts. Rows include: 1 Total number at end of year, 2 Aggregate value of contributions to (during year), 3 Aggregate value of grants from (during year), 4 Aggregate value at end of year, 5 Did the organization inform all donors... Yes No, 6 Did the organization inform all grantees... Yes No.

Part II Conservation Easements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

Table with 2 columns: Description, Held at the End of the Tax Year. Rows include: 1 Purpose(s) of conservation easements, 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution, 3 Number of conservation easements modified, 4 Number of states where property subject to conservation easement is located, 5 Does the organization have a written policy..., 6 Staff and volunteer hours..., 7 Amount of expenses..., 8 Does each conservation easement..., 9 In Part XIII, describe how the organization reports...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

Table with 2 columns: Description, Amount. Rows include: 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report..., 1b If the organization elected, as permitted under SFAS 116 (ASC 958), to report..., 2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain...

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):

- a** Public exhibition
- b** Scholarly research
- c** Preservation for future generations
- d** Loan or exchange programs
- e** Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements.

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No

b If "Yes," explain the arrangement in Part XIII and complete the following table:

- c** Beginning balance
- d** Additions during the year
- e** Distributions during the year
- f** Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII

Part V Endowment Funds.

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

- a** Board designated or quasi-endowment **u**
- b** Permanent endowment **u**
- c** Temporarily restricted endowment **u**

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

- (i)** unrelated organizations
- (ii)** related organizations

	Yes	No
3a(i)		
3a(ii)		
3b		

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		879,958		879,958
b Buildings		5,391,777	1,595,592	3,796,185
c Leasehold improvements		5,132,452	2,336,328	2,796,124
d Equipment		1,146,828	664,549	482,279
e Other		1,430,950	458,009	972,941
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) u				8,927,487

Part VII Investments—Other Securities.

Complete if the organization answered "Yes" 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. (Column (b) must equal Form 990, Part X, col. (B) line 12.) u		

Part VIII Investments—Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) u		

Part IX Other Assets.

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

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

Part X Other Liabilities.

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

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) OTHER LIABILITIES	145,978	
(3) ACCRUED COMPENSATED ABSENCES	32,413	
(4) ACCRUED SALARIES	21,684	
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) u	200,075	

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 FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return.

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	3,016,306
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	3,016,306
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	3,016,306

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	2,665,480
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	2,665,480
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	2,665,480

Part XIII Supplemental Information.

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

PART X - FIN 48 FOOTNOTE

THE SOCIETY IS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C) (3) OF THE INTERNAL REVENUE CODE. HOWEVER, INCOME FROM CERTAIN ACTIVITIES NOT DIRECTLY RELATED TO THE SOCIETY'S TAX-EXEMPT PURPOSE MAY BE SUBJECT TO TAXATION AS UNRELATED BUSINESS INCOME. IN ADDITION, THE SOCIETY QUALIFIES AS A PUBLIC CHARITY UNDER SECTIONS 509(A) (1) AND 170(B) (1) (A) (VI) OF THE INTERNAL REVENUE CODE.

THE SOCIETY ADOPTED THE PROVISIONS OF FASB INTERPRETATION NO. 48, ACCOUNTING FOR UNCERTAINTY IN INCOME TAXES (FASB ASC 740 - 10). UNDER THIS INTERPRETATION, THE SOCIETY IS REQUIRED TO EVALUATE EACH OF ITS TAX POSITIONS TO DETERMINE IF THEY ARE MORE LIKELY THAN NOT TO BE SUSTAINED IF THE TAXING AUTHORITY EXAMINES THE RESPECTIVE POSITION. A TAX POSITION

Part XIII Supplemental Information *(continued)*

INCLUDES AN ENTITY'S STATUS, INCLUDING ITS STATUS AS A 501 (C) (3), AND THE DECISION NOT TO FILE A TAX RETURN. THE SOCIETY HAS EVALUATED EACH OF ITS TAX POSITIONS AND HAS DETERMINED THAT NO PROVISION OR LIABILITY FOR INCOME TAXES IS NECESSARY.

THE SOCIETY FILES A FEDERAL INCOME TAX RETURN AND IS NO LONGER SUBJECT TO U.S. FEDERAL INCOME TAX EXAMINATION BY TAX AUTHORITIES FOR YEARS BEFORE 2014.

PART XIII - SUPPLEMENTAL FINANCIAL INFORMATION

CHANGE OF FISCAL YEAR

EFFECTIVE JANUARY 1, 2017 THE SOCIETY CHANGED ITS FISCAL YEAR FROM DECEMBER 31 TO JUNE 30. THE CURRENT FINANCIALS REFLECT A SIX MONTH SHORT PERIOD ENDING JUNE 30, 2017. IN FUTURE YEARS A FULL TWELVE MONTH PERIOD ENDING JUNE 30, 2018 WILL BE PRESENTED.

**SCHEDULE G
(Form 990 or 990-EZ)**

Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

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

2016

Department of the Treasury
Internal Revenue Service

U Attach to Form 990 or Form 990-EZ.

Open to Public Inspection

U Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Name of the organization

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

Employer identification number

**** - ***7197**

Part I Fundraising Activities. Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities. Check all that apply.

- a Mail solicitations
- b Internet and email solicitations
- c Phone solicitations
- d In-person solicitations
- e Solicitation of non-government grants
- f Solicitation of government grants
- g Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees, or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? Yes No

b If "Yes," list the 10 highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization.

	(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
			Yes	No			
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total							

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events
		<u>BREWS AT THE ZO</u>	<u>OTHER FUNDRAISI</u>	<u>NONE</u>	(add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts	119,207	18,090		137,297
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)	119,207	18,090		137,297
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses	25,131	12,009		37,140
	10 Direct expense summary. Add lines 4 through 9 in column (d)				37,140
11 Net income summary. Subtract line 10 from line 3, column (d)				100,157	

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

		(a) Bingo	(b) Pull tabs/instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col. (a) through col. (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	<input type="checkbox"/> Yes % <input type="checkbox"/> No	
	7 Direct expense summary. Add lines 2 through 5 in column (d)				
	8 Net gaming income summary. Subtract line 7 from line 1, column (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 No

b If "No," explain: _____

10a Were any of the organization's gaming licenses revoked, suspended, or terminated during the tax year? Yes No

b If "Yes," explain: _____

11 Does the organization conduct gaming activities with nonmembers? Yes No

12 Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming? Yes No

13 Indicate the percentage of gaming activity conducted in:
a The organization's facility

13a		%
13b		%

b An outside facility

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name **u**

Address **u**

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? Yes No

b If "Yes," enter the amount of gaming revenue received by the organization **u** \$ and the amount of gaming revenue retained by the third party **u** \$

c If "Yes," enter name and address of the third party:

Name **u**

Address **u**

16 Gaming manager information:

Name **u**

Gaming manager compensation **u** \$

Description of services provided **u**

- Director/officer
- Employee
- Independent contractor

17 Mandatory distributions:

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? Yes No

b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year **u** \$

Part IV Supplemental Information. Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also provide any additional information.
See instructions

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SCHEDULE L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Name of the organization

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

Transactions With Interested Persons

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

u Attach to Form 990 or Form 990-EZ.

u Information about Schedule L (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2016

Open To Public
Inspection

Employer identification number

**** - *** 7197**

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

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

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

- 2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under section 4958 **u** \$ _____
- 3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization **u** \$ _____

Part II Loans to and/or From Interested Persons.

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

1	(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the org.?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
				To	From			Yes	No	Yes	No	Yes	No
(1)													
(2)													
(3)													
(4)													
(5)													
(6)													
(7)													
(8)													
(9)													
(10)													

Total **u** \$ _____

Part III Grants or Assistance Benefiting Interested Persons.

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

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

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

u Attach to Form 990 or 990-EZ.

u Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2016

**Open to Public
Inspection**

Name of the organization

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.**

Employer identification number

**** - ***7197**

FORM 990 - ORGANIZATION'S MISSION

THE CENTRAL FLORIDA ZOOLOGICAL PARK IS DEDICATED TO PRESERVING THE BEAUTY AND WONDER OF ANIMALS AND THEIR HABITATS. WE ARE COMMITTED TO SHARING OUR KNOWLEDGE, ENGAGING VISITORS, AND CELEBRATING OUR NATURAL WORLD.

CONSERVATION OF ANIMALS IS PARAMOUNT; MANY ENDANGERED SPECIES ENTRUSTED TO OUR CARE MAY SOON BE EXTINCT IN THE WILD. CAPTIVE BREEDING PROGRAMS MAY BE THEIR ONLY HOPE FOR SURVIVAL. SPECIES SURVIVAL PLANS, COORDINATED THROUGH THE ASSOCIATION OF ZOOS & AQUARIUMS, ARE ATTEMPTING TO MAINTAIN GENETIC DIVERSITY TO ENSURE HEALTHY, VIGOROUS ANIMALS TO REPRODUCE NOW AND IN THE FUTURE. BEYOND THIS, SSPS PARTICIPATE IN A VARIETY OF OTHER COOPERATIVE CONSERVATION ACTIVITIES SUCH AS RESEARCH, PUBLIC EDUCATION, REINTRODUCTION AND FIELD PROJECTS. THE CENTRAL FLORIDA ZOO PARTICIPATES IN SSP PROGRAMS.

FORM 990, PART I, LINE 6

THE SOCIETY TRAINS INDIVIDUALS TO SERVE AS VOLUNTEER ZOOLOGICAL PARK TOUR GUIDES. IN ADDITION MANY OTHER INDIVIDUALS VOLUNTEER THEIR TIME AND EFFORT ON A VARIETY OF ADMINISTRATIVE AND FUND RAISING TASKS. IN 2017 APPROXIMATELY 140 VOLUNTEERS DONATED APPROXIMATELY 16,631 HOURS OF SERVICE.

FORM 990, PART III, LINE 4A - FIRST ACCOMPLISHMENT

CONTINUED FROM FORM 990 PART III, LINE 4A.

EMPOWER AND EDUCATE- WE GIVE OUR GUESTS, STAFF, VOLUNTEERS AND THE COMMUNITIES WE SERVE THE KNOWLEDGE AND TOOLS TO TAKE POSITIVE ACTION FOR

Name of the organization

Employer identification number

CENTRAL FLORIDA ZOOLOGICAL

** - ***7197

ALL SPECIES. WE WILL ACCOMPLISH THIS BY: UTILIZING THE ZOO THROUGH ITS STAFF, ANIMALS AND EXHIBITS IN TARGETED EDUCATIONAL PROGRAMS THAT WILL PROVIDE INFORMATION, ACTIVITIES AND EXPERIENCES TO PROMOTE AN UNDERSTANDING OF THE ZOO'S ANIMAL COLLECTION AND THE HABITATS THEY LIVE.

FORM 990, PART III, LINE 4D - ALL OTHER ACCOMPLISHMENT

THE SOCIETY ALSO OPERATES THE ORIANNE CENTER FOR INDIGO CONSERVATION (OCIC) THE MAIN GOAL OF THE PROGRAM IS TO FACILITATE A COMPREHENSIVE APPROACH TO LONG-TERM CAPTIVE BREEDING PROGRAMS FOR EASTERN INDIGO SNAKES AND THE IMPORTANCE OF CONSERVATION AND PROMOTION OF PUBLIC EDUCATION AND TO FOSTER TOLERANCE OF SNAKES IN OUR NATURAL COMMUNITIES. IN THE CURRENT YEAR, THE OCIC HATCHED A RECORD NUMBER OF EASTERN INDIGO SNAKES.

FORM 990, PART VI, LINE 9 - OFFICERS WHO CANNOT BE REACHED

PHILIP FLYNN III

PO BOX 470309

LAKE MONROE, FL 32747

FORM 990, PART VI, LINE 11B - ORGANIZATION'S PROCESS TO REVIEW FORM 990

THE MANAGEMENT TEAM OF THE ORGANIZATION REVIEWS AND APPROVES THE FORM 990 FILING AND THEN PRESENTS IT FOR REVIEW AND APPROVAL BY THE BOARD. THE REVIEW PROCESS CONSISTS OF THE BOARD EXAMINING THE DOCUMENT AND ASKING THE MANAGEMENT TEAM QUESTIONS ABOUT THE FORM 990. ONCE THE BOARD IS SATISFIED, THEY APPROVE THE FILING OF THE TAX RETURN.

FORM 990, PART VI, LINE 12C - ENFORCEMENT OF CONFLICTS POLICY

THE ENFORCEMENT OF THE CONFLICT OF INTEREST POLICY IS BY THE BOARD OF

Name of the organization

Employer identification number

CENTRAL FLORIDA ZOOLOGICAL

** - ***7197

DIRECTORS AND BY DISCLOSURE BY THE INTERESTED PARTY.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL THE BOARD CONDUCTS LIMITED REVIEW AND APPROVAL OF THE COMPENSATION, BY APPROVING THE INITIAL SALARY AND RAISES THEREAFTER. THE REVIEW CONSISTS OF BOTH FORMAL AND INFORMAL ANALYSIS OF THE CEO FROM AN INDIVIDUAL AND AGGREGATE PERSPECTIVE. IN ESTABLISHING COMPENSATION LEVELS THE BOARD LOOKS AT COMPARABLE DATA AND ENTITY RESULTS.

FORM 990, PART VI, LINE 19 - GOVERNING DOCUMENTS DISCLOSURE EXPLANATION MADE AVAILABLE UPON REQUEST.

Form **990-T**

Exempt Organization Business Income Tax Return
(and proxy tax under section 6033(e))

OMB No. 1545-0687

2016

For calendar year 2016 or other tax year beginning **01/01/17**, and ending **06/30/17**

Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

Open to Public Inspection for 501(c)(3) Organizations Only

Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

Department of the Treasury
Internal Revenue Service

A Check box if address changed

B Exempt under section

501(c) (**3**)

408(e) 220(e)

408A 530(a)

529(a)

Name of organization (Check box if name changed and see instructions.)
CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.

Number, street, and room or suite no. If a P.O. box, see instructions.
P. O. BOX 470309

City or town, state or province, country, and ZIP or foreign postal code
LAKE MONROE FL 32747-0309

D Employer identification number
(Employees' trust, see instructions.)
**** - ***7197**

E Unrelated business activity codes
(See instructions.)
531120

C Book value of all assets at end of year
12,738,124

F Group exemption number (See instructions.) **u**

G Check organization type **u** 501(c) corporation 501(c) trust 401(a) trust Other trust

H Describe the organization's primary unrelated business activity.
u CONFERENCE CENTER EVENTS RENTAL.

I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? **u** Yes No
If "Yes," enter the name and identifying number of the parent corporation.

J The books are in care of **u CHUCK GRIMES** Telephone number **u 407-323-4450**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1a	Gross receipts or sales			
b	Less returns and allowances			
	c Balance u	1c		
2	Cost of goods sold (Schedule A, line 7)	2		
3	Gross profit. Subtract line 2 from line 1c	3		
4a	Capital gain net income (attach Schedule D)	4a		
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c	Capital loss deduction for trusts	4c		
5	Income (loss) from partnerships and S corporations (attach statement)	5		
6	Rent income (Schedule C)	6	29,310	29,310
7	Unrelated debt-financed income (Schedule E)	7		
8	Interest, annuities, royalties, and rents from controlled organizations (Schedule F)	8		
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10	Exploited exempt activity income (Schedule I)	10		
11	Advertising income (Schedule J)	11		
12	Other income (See instructions; attach schedule)	12		
13	Total. Combine lines 3 through 12	13	29,310	29,310

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.) (Except for contributions, deductions must be directly connected with the unrelated business income.)			
14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	7,428
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	
20	Charitable contributions (See instructions for limitation rules)	20	
21	Depreciation (attach Form 4562)	21	18,808
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
		22b	18,808
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule) SEE STATEMENT 1	28	10,424
29	Total deductions. Add lines 14 through 28	29	36,660
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-7,350
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-7,350
33	Specific deduction (Generally \$1,000, but see line 33 instructions for exceptions)	33	1,000
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	-7,350

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> u <input type="checkbox"/> See instructions and:	
a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order): (1) \$ _____ (2) \$ _____ (3) \$ _____	
b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ (2) Additional 3% tax (not more than \$100,000) \$	
c Income tax on the amount on line 34	35c
36 Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 34 from: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36
37 Proxy tax. See instructions	37
38 Alternative minimum tax	38
39 Tax on Non-Compliant Facility Income. See instructions	39
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a	
b Other credits (see instructions)	41b	
c General business credit. Attach Form 3800 (see instructions)	41c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d	
e Total credits. Add lines 41a through 41d	41e	
42 Subtract line 41e from line 40	42	
43 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (alt. sch.)	43	
44 Total tax. Add lines 42 and 43	44	0
45a Payments: A 2015 overpayment credited to 2016	45a	
b 2016 estimated tax payments	45b	
c Tax deposited with Form 8868	45c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	45d	
e Backup withholding (see instructions)	45e	
f Credit for small employer health insurance premiums (Attach Form 8941)	45f	
g Other credits and payments: <input type="checkbox"/> Form 2439 _____ <input type="checkbox"/> Form 4136 _____ <input type="checkbox"/> Other _____ Total u	45g	
46 Total payments. Add lines 45a through 45g	46	
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached u <input type="checkbox"/>	47	
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed u	48	
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid u	49	
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax u Refunded u	50	

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here u	Yes	No
		X
52 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
53 Enter the amount of tax-exempt interest received or accrued during the tax year u \$		

Sign Here **u** _____ **u** _____
Signature of officer Date Title

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

May the IRS discuss this return with the preparer shown below (see instructions)?
 Yes No

Paid Preparer Use Only	Print/Type preparer's name ROBERT KIMELMAN	Preparer's signature _____	Date 03/06/18	Check <input type="checkbox"/> if self-employed	PTIN *****
	Firm's name } GREENE, DYCUS & CO., PA	Firm's EIN } ** - *** 5346			
	Firm's address } 205 N ELM AVE SANFORD, FL 32771-1274	Phone no. 407-322-0561			

Schedule A – Cost of Goods Sold. Enter method of inventory valuation **u**

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3				
4a Additional sec. 263A costs (attach schedule)	4a		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes No
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

Schedule C – Rent Income (From Real Property and Personal Property Leased With Real Property)

(see instructions)

1. Description of property

(1) CONFERENCE HALL RENTAL
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1) 29,310		
(2)		
(3)		
(4)		
Total 29,310	Total	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) **u** **29,310**

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) **u**

Schedule E – Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property		
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)	
(1) N/A				
(2)				
(3)				
(4)				
4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals u			Enter here and on page 1, Part I, line 7, column (A).	Enter here and on page 1, Part I, line 7, column (B).
Total dividends-received deductions included in column 8 u				

Schedule F – Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross inc.	6. Deductions directly connected with income in column 5
(1) N/A					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable Income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A).	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B).
Totals			u	

Schedule G – Investment Income of a Section 501(c)(7), (9), or (17) Organization (see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col.4)
(1) N/A				
(2)				
(3)				
(4)				
		Enter here and on page 1, Part I, line 9, column (A).		Enter here and on page 1, Part I, line 9, column (B).
Totals		u		

Schedule I – Exploited Exempt Activity Income, Other Than Advertising Income (see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
		Enter here and on page 1, Part I, line 10, col. (A).	Enter here and on page 1, Part I, line 10, col. (B).			Enter here and on page 1, Part II, line 26.
Totals		u				

Schedule J – Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		u				

Part II **Income From Periodicals Reported on a Separate Basis** (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1) N/A						
(2)						
(3)						
(4)						
Totals from Part I u						
	Enter here and on page 1, Part I, line 11, col. (A).	Enter here and on page 1, Part I, line 11, col. (B).				Enter here and on page 1, Part II, line 27.
Totals, Part II (lines 1-5) u						

Schedule K – Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1) N/A		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14		u	

Federal Statements

Statement 1 - Form 990-T, Part II, Line 28 - Other Deductions

<u>Description</u>	<u>Amount</u>
ADVERTISING	\$ 280
INSURANCE	1,356
SUPPLIES	1,636
REPAIRS	1,380
OTHER EXPENSES	5,772
TOTAL	<u>\$ 10,424</u>

Form **4562**

Department of the Treasury
Internal Revenue Service (99)

Name(s) shown on return

Depreciation and Amortization

(Including Information on Listed Property)

u Attach to your tax return.

u Information about Form 4562 and its separate instructions is at www.irs.gov/form4562.

OMB No. 1545-0172

2016

Attachment Sequence No. **179**

CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.

Identifying number

**** - ***7197**

Business or activity to which this form relates

INDIRECT DEPRECIATION

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	510,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,030,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2015 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but don't enter more than line 11	12	
13	Carryover of disallowed deduction to 2017. Add lines 9 and 10, less line 12	13	

Note: Don't use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Don't include listed property.) (See instructions.)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	324,462

Part III MACRS Depreciation (Don't include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2016	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input checked="" type="checkbox"/>		

Section B—Assets Placed in Service During 2016 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property						
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property			25 yrs.		S/L	
h Residential rental property			27.5 yrs.	MM	S/L	
i Nonresidential real property			39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2016 Tax Year Using the Alternative Depreciation System

20a Class life					S/L	
b 12-year			12 yrs.		S/L	
c 40-year			40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	324,462
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2016)

Year Ending: June 30, 2017

_*7197

Central Florida Zoological
Society, Inc.
P. O. Box 470309
Lake Monroe, FL 32747-0309

NOL Carryback Election

Under IRC Section 172(b)(3), the taxpayer elects to relinquish the entire carryback period with respect to any regular tax and AMT net operating loss incurred during the current tax year.

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Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	Per Conv	Meth	Prior	Current
Other Depreciation:											
7	CONCESSION/GIFT BUILDING	7/30/75	36,256				36,256	40	MO S/L	36,256	0
9	ANIMAL COMMISSARY	7/30/75	13,812				13,812	40	MO S/L	13,812	0
15	NORTH MAIN EXHIBIT AREA	7/31/75	29,700				29,700	40	MO S/L	29,700	0
16	S.E. MAIN EXHIBIT AREA	7/31/75	29,700				29,700	40	MO S/L	29,700	0
17	WEST MAIN EXHIBIT AREA	7/31/75	29,700				29,700	40	MO S/L	29,700	0
20	SM CROCODILIANS EXHIBIT	7/31/75	1,500				1,500	20	MO S/L	1,500	0
25	WISHING WELL PAVILION	12/30/76	3,850				3,850	15	MO S/L	3,850	0
26	QUARANTINE AREA	12/31/76	2,000				2,000	15	MO S/L	2,000	0
29	GASOLINE TANK 500 GAL	8/30/77	438				438	10	MO S/L	438	0
30	DIESEL TANK 500 GAL	8/30/77	438				438	10	MO S/L	438	0
31	AMERICAN ALLIGATOR EXHIBI	8/31/77	2,500				2,500	10	MO S/L	2,500	0
33	ADMINISTRATIVE BUILDING	6/30/78	32,000				32,000	40	MO S/L	30,000	400
34	MEDICAL TREATMENT BLDG	6/30/78	19,886				19,886	40	MO S/L	18,643	249
45	AMERICAN ALLIGATOR	3/29/81	500				500	15	MO S/L	500	0
46	AMERICAN ALLIGATOR	3/29/81	400				400	15	MO S/L	400	0
48	AMERICAN CROCODILE EXHIBI	6/30/81	3,391				3,391	10	MO S/L	3,391	0
49	BLACKHANDED SPIDER MONKEY	1/16/82	750				750	15	MO S/L	750	0
50	BLACKHANDED SPIDER MONKEY	2/22/82	750				750	15	MO S/L	750	0
52	RED-FRONTED MACAW	12/02/82	750				750	29	MO S/L	750	0
53	RED-FRONTED MACAW	12/02/82	750				750	29	MO S/L	750	0
54	RED-LORED AMAZON	12/21/82	250				250	38	MO S/L	217	3
57	SULPHUR-CRESTED COCKATOO	1/26/83	600				600	36	MO S/L	549	8
58	TOCO TOUCAN	9/08/83	1,500				1,500	9	MO S/L	1,500	0
59	GOFFIN'S COCKATOO	10/06/83	500				500	29	MO S/L	500	0
61	REPTILE EXHIBIT BUILDING	6/30/84	53,000				53,000	25	MO S/L	53,000	0
62	CONC/GIFT/ADMISS ROOF REP	6/30/84	4,828				4,828	5	MO S/L	4,828	0
67	PERIMETER FENCE ADDITION	8/30/85	7,170				7,170	15	MO S/L	7,170	0
71	ANIMAL COMMISSARY	2/28/86	2,127				2,127	40	MO S/L	1,586	27
73	BLACKHANDED SPIDER MONKEY	8/22/86	500				500	14	MO S/L	500	0
104	EAST AFRICAN GREEN MAMBA	4/04/88	450				450	16	MO S/L	450	0
105	EAST AFRICAN GREEN MAMBA	4/04/88	450				450	16	MO S/L	450	0
106	CONCESSIONS DRAIN FIELD	5/30/88	2,675				2,675	10	MO S/L	2,675	0
107	MAINTENANCE POLE BARN	10/30/88	1,500				1,500	15	MO S/L	1,500	0
110	THE PAVILION	11/30/88	84,458				84,458	30	MO S/L	76,247	1,408
113	AMERICAN CROCODILE	1/16/89	2,000				2,000	7	MO S/L	2,000	0
114	BLACK HOWLER MONKEY	2/20/89	750				750	17	MO S/L	750	0
115	MACAW ISOLATION CAGES	2/28/89	1,250				1,250	5	MO S/L	1,250	0
116	EAST AFRICAN GREEN MAMBA	4/01/89	450				450	15	MO S/L	450	0
117	RED-TAILED HAWK	6/30/89	670				670	5	MO S/L	670	0
118	GREY PARROT	7/03/89	400				400	37	MO S/L	286	6
120	SPIRAL WISHING WELL	7/31/89	800				800	5	MO S/L	800	0
121	RIDGENOSE RATTLESNAKE	8/14/89	400				400	10	MO S/L	400	0
122	RIDGENOSE RATTLESNAKE	8/14/89	400				400	10	MO S/L	400	0
123	RIDGENOSE RATTLESNAKE	8/14/89	400				400	10	MO S/L	400	0
124	LESSER SPOT-NOSED GUENON	8/21/89	750				750	25	MO S/L	750	0
126	SPOT-NOSE GUENON RENOVATE	11/30/89	400				400	5	MO S/L	400	0
128	ADMIN OFFICE ADDITION	12/30/89	32,000				32,000	15	MO S/L	32,000	0
129	RHINOCEROS IGUANA	1/29/90	1,500				1,500	30	MO S/L	1,296	25
130	CROCODILLAN EXHIBITS (3)	2/28/90	6,103				6,103	5	MO S/L	6,103	0
132	TOUCAN EXHIBIT	3/31/90	3,058				3,058	5	MO S/L	3,058	0
133	LILAC-CROWNED AMAZON	5/18/90	300				300	36	MO S/L	213	4
135	GIANT KINGFISHER	6/28/90	200				200	12	MO S/L	200	0
136	PREHENSILE-TAILED SKINK	6/29/90	150				150	8	MO S/L	150	0
137	ISOLATION AVARIES	6/30/90	4,970				4,970	5	MO S/L	4,970	0
138	ADMIN OFFICE ADDITION	6/30/90	1,540				1,540	15	MO S/L	1,540	0
140	KOOKABURRA EXHIBIT	6/30/90	747				747	5	MO S/L	747	0
141	GIANT KINGFISHER	8/21/90	200				200	13	MO S/L	200	0
147	PREHENSILE-TAILED SKINK	2/10/91	150				150	8	MO S/L	150	0
148	SALMON-CRESTED COCKATOO	2/19/91	600				600	32	MO S/L	466	9
156	CROCODILE MONITOR	7/19/91	750				750	27	MO S/L	678	14
157	KOOKABURRA EXHIBIT ADD'L	7/31/91	3,032				3,032	10	MO S/L	3,032	0
158	MEA-DRAINFIELD	8/15/91	1,750				1,750	5	MO S/L	1,750	0
159	GREEN-WINGED MACAW	8/22/91	1,000				1,000	28	MO S/L	869	18
164	ANIMAL ADVENTURE EXHIBIT	11/30/91	32,576				32,576	25	MO S/L	31,382	651
187	RHINOCEROS IGUANA	3/09/92	1,500				1,500	33	MO S/L	1,083	23
192	PANAMA YELLOW-CRND AMAZON	9/01/92	250				250	20	MO S/L	250	0
194	EAGLE EXHIBIT	10/31/92	12,655				12,655	10	MO S/L	12,655	0
195	REPTILE BOARDWALK	10/31/92	0				0	10	MO S/L	25,531	0

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Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
196	RHINOCEROS HORNBILL EXHIB	10/31/92	7,995				7,995	10 MO S/L	7,995	0
197	BOARDWALK-PHASE II	10/31/92	7,566				7,566	10 MO S/L	7,566	0
198	KIOSK	10/31/92	2,961				2,961	7 MO S/L	2,961	0
202	ENTRANCE ZOO SIGNS (2)	3/31/93	6,990				6,990	10 MO S/L	6,990	0
208	STAR TORTOISE	4/02/93	400				400	10 MO S/L	400	0
212	TREK BOARDWALK	7/31/93	45,026				45,026	10 MO S/L	45,026	0
213	CLOUDED LEOPARD EXHIBIT	7/31/93	16,704				16,704	15 MO S/L	16,704	0
214	LIZARD EXHIBIT	7/31/93	4,186				4,186	10 MO S/L	4,186	0
226	CROCODILE ENCLOSURE	12/31/93	813				813	5 MO S/L	813	0
227	BLACK FOOTED CAT EXHIBIT	2/28/94	6,856				6,856	7 MO S/L	6,856	0
228	RED-TAILED HAWK	2/28/94	188				188	5 MO S/L	188	0
230	AMERICAN ALLIGATOR	3/24/94	100				100	20 MO S/L	100	0
231	ARUBA ISLAND RATTLESNAKE	4/23/94	250				250	10 MO S/L	250	0
232	ARUBA ISLAND RATTLESNAKE	4/23/94	250				250	10 MO S/L	250	0
233	SPIDER MONKEY	4/25/94	500				500	20 MO S/L	500	0
234	RUFFED LEMUR	4/27/94	500				500	10 MO S/L	500	0
235	RUFFED LEMUR	4/27/94	500				500	10 MO S/L	500	0
237	TAWNY FROGMOUTH	5/04/94	200				200	5 MO S/L	200	0
239	SAND GOANNA	6/23/94	250				250	10 MO S/L	250	0
240	SAND GOANNA	6/23/94	250				250	10 MO S/L	250	0
244	GREY MONITOR	8/24/94	500				500	5 MO S/L	500	0
245	GREY MONITOR	8/24/94	500				500	5 MO S/L	500	0
246	GREY MONITOR	8/24/94	500				500	5 MO S/L	500	0
247	GREY MONITOR	8/24/94	500				500	5 MO S/L	500	0
248	MAGPIE JAY	8/31/94	3,926				3,926	7 MO S/L	3,926	0
250	WISHING WELL RENOVATION	8/31/94	3,280				3,280	5 MO S/L	3,280	0
252	ZOO ENTRANCE SIGN	8/31/94	2,200				2,200	3 MO S/L	2,200	0
256	WISHING WELL RENOV/LABOR	9/30/94	2,760				2,760	5 MO S/L	2,760	0
257	GOFFIN'S COCKATOO/LABOR	9/30/94	1,380				1,380	7 MO S/L	1,380	0
259	ELEPHANT BARN SLAB	11/30/94	4,414				4,414	10 MO S/L	4,414	0
261	WREATHED HORNBILL	12/22/94	5,000				5,000	10 MO S/L	5,000	0
262	WWREATHED HORNBILL	12/22/94	5,000				5,000	10 MO S/L	5,000	0
263	BRIDGE B'WALK	12/31/94	6,603				6,603	10 MO S/L	6,603	0
264	EDUC BLDG RENOVATION	12/31/94	2,307				2,307	10 MO S/L	2,307	0
266	CROCODILE MONITOR	2/16/95	650				650	5 MO S/L	650	0
270	MAGPIE JAY	7/03/95	700				700	5 MO S/L	700	0
271	COLLARED ARACARI	7/03/95	600				600	5 MO S/L	600	0
272	COLLARED ARACARI	7/03/95	600				600	5 MO S/L	600	0
274	1995 JOHN DEER GATOR	8/31/95	4,650				4,650	10 MO S/L	4,650	0
275	HFCF RESTROOMS	9/30/95	76,829				76,829	25 MO S/L	62,231	1,537
276	HOOFSTOCK/CHEETAH EXHIBIT	9/30/95	60,799				60,799	15 MO S/L	60,799	0
277	RESTROOM DECK	9/30/95	8,880				8,880	10 MO S/L	8,880	0
278	HFCF RESTROOMS (final pmt)	10/31/95	24,490				24,490	25 MO S/L	19,755	490
285	CRESTED PORCUPINE	11/27/95	1,000				1,000	5 MO S/L	1,000	0
286	CRESTED PORCUPINE	11/27/95	1,000				1,000	5 MO S/L	1,000	0
303	RADIATED TORTOISE	2/29/96	500				500	15 MO S/L	500	0
305	SPIDER MONKEY	3/30/96	500				500	15 MO S/L	500	0
308	HYACINTH MACAW	5/17/96	5,000				5,000	30 MO S/L	3,264	83
309	SILVERY-CHEEKED HORNBILL	6/11/96	600				600	5 MO S/L	600	0
310	AWNING F/EDUC BUILDING	7/31/96	3,500				3,500	5 MO S/L	3,500	0
313	RED-SHOULDERED HAWK	8/23/96	100				100	6 MO S/L	100	0
342	PRIMATE EXHIBIT UPGRADE	11/30/96	603				603	5 MO S/L	603	0
344	RHINOCEROS IGUANA	12/20/96	150				150	20 MO S/L	143	3
345	SPACE MASTER TRAILER	12/31/96	46,468				46,468	15 MO S/L	46,468	0
346	RESTROOM DECK	12/31/96	2,779				2,779	10 MO S/L	2,779	0
347	AA PHASE II WIP	12/31/96	2,703				2,703	5 MO S/L	2,703	0
352	CARPET F/HERPETARIUM	1/31/97	2,001				2,001	5 MO S/L	2,001	0
357	CRESTED PORCUPINE	2/17/97	500				500	8 MO S/L	500	0
358	PORCUPINE EXHIBIT	2/28/97	6,102				6,102	10 MO S/L	6,102	0
363	HYACINTH MACAW	5/26/97	6,000				6,000	50 MO S/L	2,230	60
370	FLOOR TILE F/COMMISSARY	7/31/97	1,266				1,266	10 MO S/L	1,266	0
377	MADAGASCAR TREE BOA	8/03/97	500				500	10 MO S/L	500	0
378	HYACINTH MACAW	8/21/97	8,000				8,000	40 MO S/L	3,667	100
379	SILVERY-CHEEKED HORNBILL	8/26/97	800				800	30 MO S/L	489	13
382	DRAIN FIELD-TOP OF HILL	9/30/97	5,304				5,304	10 MO S/L	5,304	0
383	BLACK HOWLER MONKEY	9/30/97	400				400	12 MO S/L	400	0
404	LESSER SPOT-NOSED GUENON	10/08/97	500				500	15 MO S/L	500	0
415	JOHN DEERE AMT 626	3/31/98	1,500				1,500	10 MO S/L	1,500	0
417	RED-BILLED HORNBILL	4/30/98	223				223	5 MO S/L	223	0
418	KUBOTA TRACTOR L2500	6/30/98	18,500				18,500	10 MO S/L	18,500	0
424	PORCUPINE	8/20/98	319				319	5 MO S/L	319	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv	Meth	Prior	Current
428	ZOOFARI OUTPOST	9/30/98	56,715				56,715	20	MO S/L	48,917	1,417
429	PAVILION RENOVATION	9/30/98	53,103				53,103	10	MO S/L	53,103	0
435	ROCK IGUANA	9/30/98	192				192	5	MO S/L	192	0
436	CROC MONITOR	9/30/98	192				192	5	MO S/L	192	0
443	GIANT GECKO	12/16/98	150				150	3	MO S/L	150	0
446	ADMISSIONS RENOVATION	1/01/99	12,965				12,965	5	MO S/L	12,965	0
449	WELL CONSTRUCTION	1/01/99	3,165				3,165	5	MO S/L	3,165	0
454	BLACK HOWLER MONKEY	2/04/99	200				200	8	MO S/L	200	0
465	MAGPIE JAY	4/22/99	700				700	4	MO S/L	700	0
482	PREHEN TAIL PORCUPINE EXH	7/01/99	1,962				1,962	10	MO S/L	1,962	0
486	REPTILE EGG INCUBATOR	7/26/99	675				675	5	MO S/L	675	0
487	PAINTING-ADMISSIONS AREA	7/30/99	4,160				4,160	5	MO S/L	4,160	0
488	SPIDER MONKEY	7/30/99	350				350	15	MO S/L	350	0
492	LESSER SPOT NOSED GUENON	8/18/99	250				250	10	MO S/L	250	0
494	KING VULTURE	9/27/99	600				600	15	MO S/L	600	0
513	GREEN WINGED MACAW	1/01/00	600				600	10	MO S/L	600	0
518	SEPTIC IMPROVEMENTS	2/08/00	6,441				6,441	15	MO S/L	6,441	0
519	EXHIBIT IMPROVEMENTS	2/17/00	3,698				3,698	15	MO S/L	3,698	0
520	GREEN WINGED MACAW	2/26/00	500				500	10	MO S/L	500	0
521	GREEN WINGED MACAW	2/26/00	500				500	5	MO S/L	500	0
522	GREEN WINGED MACAW	3/15/00	600				600	10	MO S/L	600	0
526	GREEN WINGED MACAW	5/09/00	600				600	25	MO S/L	376	12
532	2000 FORD VAN	7/20/00	18,958				18,958	5	MO S/L	18,958	0
533	RED FRONTED MACAW	7/28/00	300				300	20	MO S/L	231	8
534	CRESTED PORCUPINE	8/02/00	300				300	5	MO S/L	300	0
535	CRESTED PORCUPINE	8/02/00	300				300	5	MO S/L	300	0
537	BIRD ENCLOSURE	8/31/00	600				600	5	MO S/L	600	0
538	BIRD ENCLOSURE	8/31/00	200				200	5	MO S/L	200	0
542	LAND-ADJACENT PROPERTY	9/26/00	80,000				80,000	0	-- Memo	0	0
548	MADAGASCAR TREE BOA	11/02/00	250				250	10	MO S/L	250	0
549	MADAGASCAR TREE BOA	11/02/00	250				250	10	MO S/L	250	0
550	AMUR LEOPARD EXHIBIT	12/31/00	46,536				46,536	10	MO S/L	46,536	0
551	BUTTERFLY SENSORY GARDEN	12/31/00	12,188				12,188	10	MO S/L	12,188	0
553	HYACINTH MACAW EXHIBIT	12/31/00	12,112				12,112	10	MO S/L	12,112	0
557	BLACK HOWLER MONKEY	1/01/01	300				300	10	MO S/L	300	0
558	RHINOCEROS VIPER	1/01/01	225				225	5	MO S/L	225	0
559	PUERTO RICAN CRESTED TOAD	1/01/01	78				78	5	MO S/L	78	0
578	ARUBA ISL RATTLESNAKE - F	3/27/01	100				100	5	MO S/L	100	0
579	ARUBA ISL RATTLESNAKE - F	3/27/01	100				100	5	MO S/L	100	0
582	WELL WORK	4/30/01	1,479				1,479	10	MO S/L	1,479	0
583	GREEN WINGED MACAW - UNK	5/11/01	600				600	10	MO S/L	600	0
585	GREEN WINGED MACAW - UNK	5/14/01	600				600	10	MO S/L	600	0
593	LESSER SPOT-NOSED GUENON	6/24/01	250				250	10	MO S/L	250	0
596	SILVERY-CHEEKED HORNBILL	7/14/01	500				500	8	MO S/L	500	0
598	CLOUDED LEOPARD - F	7/24/01	250				250	10	MO S/L	250	0
600	PALAWAN PEACOCK PHEASANT	7/29/01	200				200	3	MO S/L	200	0
601	PALAWAN PEACOCK PHEASANT	7/29/01	200				200	3	MO S/L	200	0
603	CROCODILE MONITOR	8/24/01	700				700	5	MO S/L	700	0
608	CHEETAH EXHIBIT - ADDNL	11/01/01	532				532	5	MO S/L	532	0
609	RETICULATE GILA MONSTER	11/01/01	200				200	5	MO S/L	200	0
621	WREATHED HORNBILL	3/14/02	1,500				1,500	10	MO S/L	1,500	0
624	STAR TORTOISE	5/31/02	200				200	20	MO S/L	136	5
625	STAR TORTOISE	5/31/02	200				200	20	MO S/L	136	5
626	STAR TORTOISE	5/31/02	200				200	20	MO S/L	136	5
631	AC ZOOFARI	11/12/02	5,775				5,775	10	MO S/L	5,775	0
632	SPIDER MONKEY EX REHAB	1/15/03	173				173	10	MO S/L	173	0
635	Roof-Concession Bldg	3/21/03	4,500				4,500	10	MO S/L	4,500	0
636	WREATHED HORNBILL	3/21/03	1,200				1,200	10	MO S/L	1,200	0
637	TUCUMAN AMAZON	3/29/03	500				500	10	MO S/L	500	0
640	SILVERY-CHEEKED HORNBILL	5/21/03	250				250	10	MO S/L	250	0
641	SILVERY-CHEEKED HORNBILL	5/23/03	250				250	10	MO S/L	250	0
643	PREHENS TAILED PORCUPINE	5/28/03	200				200	10	MO S/L	200	0
644	COTTON-TOP TAMARIN	6/06/03	100				100	10	MO S/L	100	0
645	KING VULTURE EXHIBIT	7/01/03	40,185				40,185	15	MO S/L	33,488	1,339
646	RED-FRONTED MACAW	7/25/03	200				200	10	MO S/L	200	0
647	King Vulture Exhibit	7/31/03	40,185				40,185	20	MO S/L	24,948	1,005
650	Black Howler	9/24/03	500				500	3	MO S/L	500	0
653	Cougar Exhibit	11/01/03	58,887				58,887	20	MO S/L	35,823	1,472
654	COUGAR EXHIBIT	11/01/03	58,887				58,887	15	MO S/L	47,764	1,963
657	DUCT WORK - ZOOFARI	11/05/03	2,925				2,925	10	MO S/L	2,925	0
658	Lesser Spot-Nosed Guenon	11/06/03	500				500	3	MO S/L	500	0

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
665	GRAVEL-PARKING LOT	1/31/04	700				700	10 MO S/L	700	0
673	2000 DODGE RAM PICKUP	3/31/04	9,882				9,882	5 MO S/L	9,882	0
674	CROCODILE MONITOR	3/31/04	400				400	10 MO S/L	400	0
675	CROCODILE MONITOR	3/31/04	400				400	10 MO S/L	400	0
677	CROCODILE MONITOR	3/31/04	300				300	10 MO S/L	300	0
691	AFRICAN CRESTED PORCUPINE	4/05/04	550				550	5 MO S/L	550	0
692	AFRICAN CRESTED PORCUPINE	4/05/04	550				550	5 MO S/L	550	0
693	RUFFED LEMUR	4/05/04	500				500	5 MO S/L	500	0
695	BLUE-BELLIED ROLLER	4/16/04	300				300	3 MO S/L	300	0
696	BLUE-BELLIED ROLLER	4/16/04	300				300	3 MO S/L	300	0
697	SPLENDID GLOSSY STARLING	4/16/04	175				175	3 MO S/L	175	0
698	SPLENDID GLOSSY STARLING	4/16/04	175				175	3 MO S/L	175	0
706	COMMISSARY FREEZER	5/27/04	1,937				1,937	10 MO S/L	1,937	0
712	Prehensile tail porcupine	8/31/04	973				973	10 MO S/L	973	0
714	BLACK HOWLER	9/01/04	500				500	10 MO S/L	500	0
715	MAGPIE JAY	9/01/04	350				350	10 MO S/L	350	0
716	RED-FRONTED MACAW	9/01/04	300				300	20 MO S/L	170	8
717	RED-FRONTED MACAW	9/01/04	300				300	20 MO S/L	170	8
720	Used Horse Trailer	12/01/04	800				800	10 MO S/L	800	0
721	Lesser Spot Nosed Guenon	12/01/04	500				500	15 MO S/L	369	17
723	Madagascar Tree Boa	12/01/04	250				250	10 MO S/L	250	0
724	Madagascar Tree Boa	12/01/04	250				250	10 MO S/L	250	0
725	Madagascar Tree Boa	12/01/04	250				250	10 MO S/L	250	0
726	Madagascar Tree Boa	12/01/04	250				250	10 MO S/L	250	0
729	Discovery Island items	12/31/04	14,732				14,732	7 MO S/L	14,732	0
734	WMD Discovery Center	12/01/05	4,075,409				4,075,409	50 MO S/L	516,861	40,754
735	childrens python	5/01/05	500				500	5 MO S/L	500	0
737	education van	7/31/05	11,722				11,722	5 MO S/L	11,722	0
743	Herp Renovation	1/01/06	40,528				40,528	20 MO S/L	20,264	1,013
744	Insect Zoo	1/01/06	55,434				55,434	20 MO S/L	27,717	1,386
746	Black Howler Exhibit	1/01/06	11,994				11,994	15 MO S/L	7,996	400
747	Macaw Exhibit	1/01/06	20,593				20,593	15 MO S/L	13,729	686
750	FF&E WMD	6/01/06	121,050				121,050	5 MO S/L	121,050	0
751	Concessions Repairs	6/01/06	28,576				28,576	10 MO S/L	27,386	1,190
753	Coqui Exhibit	9/01/06	3,491				3,491	15 MO S/L	2,172	117
754	Herp Repairs	9/01/06	8,338				8,338	10 MO S/L	7,782	417
755	Admin Roof	10/01/06	7,800				7,800	10 MO S/L	7,215	390
756	Aldabra Exhibit	12/01/06	4,181				4,181	15 MO S/L	2,532	139
757	Spider Monkey Exhibit	12/01/06	42,659				42,659	15 MO S/L	25,832	1,422
758	Birds	12/01/06	321				321	10 MO S/L	291	16
759	Zoolab	12/31/07	51,240				51,240	10 MO S/L	40,992	2,562
760	Splash Ground	1/01/07	475,000				475,000	10 MO S/L	427,500	23,750
761	Master Plan	12/01/07	200,000				200,000	10 MO S/L	161,667	10,000
762	Kangaroo Exhibit	1/01/07	37,917				37,917	10 MO S/L	34,125	1,896
763	Equipment	5/01/07	3,501				3,501	3 MO S/L	3,501	0
764	Equipment	6/01/07	2,034				2,034	3 MO S/L	2,034	0
766	Gazebo	9/01/07	5,944				5,944	10 MO S/L	4,954	297
767	Spec Events Deck	9/01/07	6,625				6,625	10 MO S/L	5,521	331
768	Gato Deck	9/01/07	28,495				28,495	10 MO S/L	23,746	1,425
769	Spiny Garden	9/01/07	4,818				4,818	10 MO S/L	4,015	241
770	Commissary Freezer	1/08/08	8,800				8,800	10 MO S/L	7,040	440
771	Admin Carpet	4/01/08	6,318				6,318	10 MO S/L	4,896	316
772	Scooterbugs	4/01/08	10,315				10,315	10 MO S/L	7,994	516
773	Concessions Repair	4/01/08	2,500				2,500	10 MO S/L	1,938	125
774	Concessions Equipment	5/01/08	3,712				3,712	5 MO S/L	3,712	0
775	Elephant Deck	6/01/08	10,955				10,955	10 MO S/L	8,308	547
776	WMD Repairs	6/01/08	16,952				16,952	10 MO S/L	12,856	847
777	Clouded Leopard Breeding	6/01/08	57,873				57,873	20 MO S/L	21,943	1,447
778	Black Footed Cat	6/01/08	4,874				4,874	20 MO S/L	1,848	122
779	Defibillators	8/01/08	3,998				3,998	5 MO S/L	3,998	0
782	Train	12/12/08	621,000				621,000	20 MO S/L	219,938	15,525
784	Log Cabin	12/31/09	173,660				173,660	50 MO S/L	20,839	1,737
785	Master Plan	12/01/09	300,000				300,000	25 MO S/L	73,000	6,000
786	Shed	2/01/09	1,600				1,600	5 MO S/L	1,600	0
787	Awning	2/01/09	1,950				1,950	5 MO S/L	1,950	0
792	Shed	4/01/09	2,000				2,000	5 MO S/L	2,000	0
793	POS system	6/01/09	26,722				26,722	5 MO S/L	26,722	0
794	Renovations	6/01/09	8,969				8,969	10 MO S/L	5,905	448
795	ZoomAir Bldgs	6/01/09	12,062				12,062	10 MO S/L	7,941	603
796	Concessions Renovations	6/01/09	21,956				21,956	20 MO S/L	7,227	549
797	Carousel Renovations	6/01/09	33,185				33,185	20 MO S/L	10,923	830

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Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
798	Changing Rooms	6/01/09	17,756				17,756	10 MO S/L	11,689	888
799	Splashground	6/01/09	35,723				35,723	20 MO S/L	11,759	893
800	Front Entrance	6/01/09	131,032				131,032	25 MO S/L	34,505	2,621
802	Amphibian House	6/01/09	21,515				21,515	20 MO S/L	7,082	538
803	Hillside Sidewalk	6/01/09	11,593				11,593	20 MO S/L	3,816	290
804	WMD Shed	6/01/09	5,756				5,756	5 MO S/L	5,756	0
805	Lemur Exhibit	6/01/09	20,988				20,988	30 MO S/L	4,606	350
806	Toucan Exhibit	6/01/09	5,269				5,269	30 MO S/L	1,156	88
807	Air Conditioner	9/01/09	4,941				4,941	10 MO S/L	3,129	248
809	Fryer	11/01/09	5,995				5,995	5 MO S/L	5,995	0
810	Parking Lot	1/01/10	217,630				217,630	20 MO S/L	65,289	5,441
811	Ticket Booth	1/01/10	66,518				66,518	30 MO S/L	13,304	1,108
812	Barn Renovations	1/01/10	100,465				100,465	20 MO S/L	30,140	2,511
813	Air Conditioner	4/01/10	2,200				2,200	10 MO S/L	1,265	110
814	Bird Isolation	4/01/10	3,166				3,166	10 MO S/L	1,820	159
815	Fencing	4/01/10	13,168				13,168	10 MO S/L	7,571	659
816	Backhoe	4/01/10	26,780				26,780	7 MO S/L	21,998	1,913
817	Maint Stoaqe	4/01/10	8,500				8,500	7 MO S/L	6,982	607
818	Concessions Equipment	6/01/10	1,442				1,442	5 MO S/L	1,442	0
820	Bathroom Renovations	6/01/10	40,070				40,070	10 MO S/L	22,372	2,004
821	Butterfly Collection	9/01/10	5,000				5,000	5 MO S/L	5,000	0
822	Carpeting	9/01/10	4,000				4,000	5 MO S/L	4,000	0
823	Trucks	10/01/10	6,575				6,575	5 MO S/L	6,575	0
824	Master Plan	12/01/10	400,000				400,000	25 MO S/L	81,333	8,000
827	Awning	1/01/11	1,431				1,431	10 MO S/L	716	71
828	Electrical Upgrade	1/01/11	18,285				18,285	10 MO S/L	9,142	915
829	Fencing	1/01/11	10,477				10,477	10 MO S/L	5,239	524
830	2009 projects	1/01/11	21,752				21,752	5 MO S/L	21,752	0
831	2010 projects	1/01/11	15,587				15,587	5 MO S/L	15,587	0
832	Education Van	1/01/11	23,000				23,000	5 MO S/L	23,000	0
834	Charging Station	4/01/11	5,510				5,510	10 MO S/L	2,617	276
835	Camel Exhibit	6/01/11	12,000				12,000	10 MO S/L	5,500	600
836	Cistem Project	6/01/11	5,222				5,222	5 MO S/L	4,787	435
837	Kaboom project	6/01/11	9,642				9,642	5 MO S/L	8,838	804
838	2011 projects	12/01/11	50,865				50,865	5 MO S/L	41,540	5,086
840	Dell Server	9/01/11	13,397				13,397	3 MO S/L	13,397	0
842	Toro workman vehicle	11/01/11	20,307				20,307	3 MO S/L	20,307	0
843	Keller Outdoor	1/01/12	7,100				7,100	20 MO S/L	1,420	178
844	Ice Maker	1/01/12	1,199				1,199	3 MO S/L	1,199	0
845	Train Engine	1/01/12	1,950				1,950	10 MO S/L	780	97
846	Washer and Dryer	1/01/12	1,120				1,120	10 MO S/L	448	56
847	Butterfly garden renovations	3/01/12	44,355				44,355	10 MO S/L	17,003	2,218
848	barrons racer	4/01/12	358				358	10 MO S/L	134	18
850	Donor Perfect Software	6/01/12	25,979				25,979	3 MO S/L	25,979	0
852	Restaurant equipment	6/01/12	7,500				7,500	10 MO S/L	2,688	375
854	Commissary Freezers	6/01/12	1,950				1,950	10 MO S/L	699	97
855	Reptile quarantine	6/01/12	32,605				32,605	10 MO S/L	11,684	1,630
856	Otter Isolation	6/01/12	2,932				2,932	10 MO S/L	1,050	147
857	McCarty Projects	6/01/12	20,600				20,600	5 MO S/L	14,763	2,060
858	Electrical Upgrades	6/01/12	11,806				11,806	5 MO S/L	8,461	1,181
859	WMD AC Unit	7/01/12	3,500				3,500	10 MO S/L	1,225	175
860	WMD AC Unit Protech	7/01/12	12,345				12,345	10 MO S/L	4,321	617
861	Otter Exhibit	9/01/12	255,157				255,157	20 MO S/L	42,526	6,379
862	Otter Canopy	9/01/12	13,592				13,592	10 MO S/L	4,531	679
863	Otter Landscaping	9/01/12	1,141				1,141	5 MO S/L	760	114
865	Llama	9/01/12	2,200				2,200	10 MO S/L	733	110
866	Master Plan	12/01/12	300,000				300,000	25 MO S/L	37,000	6,000
867	Train grant	1/01/13	5,039				5,039	5 MO S/L	3,023	504
868	Camel exhibit	1/01/13	6,227				6,227	10 MO S/L	1,868	312
869	Computers	6/01/13	7,374				7,374	3 MO S/L	6,349	1,025
870	Commissary Equipment	6/01/13	1,712				1,712	5 MO S/L	885	171
871	Concessions stand	6/01/13	8,820				8,820	5 MO S/L	4,557	882
872	Boardwalk	6/01/13	2,407				2,407	10 MO S/L	622	120
873	Fire Inspection	6/01/13	5,779				5,779	5 MO S/L	2,986	578
874	Rhino exhibit	6/01/13	242,300				242,300	20 MO S/L	31,297	6,058
875	Otter exhibit	6/01/13	23,357				23,357	20 MO S/L	3,017	584
876	Spider Monkey exhibit	6/01/13	9,842				9,842	10 MO S/L	2,542	493
877	Caracal exhibit	6/01/13	5,059				5,059	10 MO S/L	1,307	253
878	Clouded Leopard exhibit	6/01/13	2,796				2,796	10 MO S/L	722	140
879	Fossa exhibit	6/01/13	1,226				1,226	10 MO S/L	317	61
880	Bug zoo enclosures	6/01/13	2,063				2,063	10 MO S/L	533	103

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Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
881	Warthog exhibit	6/01/13	23,993				23,993	10 MO S/L	6,198	1,200
882	Zebu exhibit	6/01/13	7,403				7,403	10 MO S/L	1,912	371
883	Educ van	6/01/13	27,046				27,046	5 MO S/L	13,974	2,704
884	Computers	6/01/13	4,240				4,240	3 MO S/L	3,651	589
885	Tractor	6/01/13	5,550				5,550	5 MO S/L	2,868	555
886	zims program	6/01/13	15,000				15,000	5 MO S/L	7,750	1,500
887	pygmy goats	6/01/13	225				225	5 MO S/L	116	23
888	servals	6/01/13	7,465				7,465	10 MO S/L	1,928	374
889	Boa	6/01/13	800				800	10 MO S/L	207	40
890	Computers	9/01/13	1,642				1,642	3 MO S/L	1,277	273
891	Displays	9/01/13	2,261				2,261	5 MO S/L	1,055	226
892	Scales	9/01/13	2,226				2,226	5 MO S/L	1,039	222
894	Animal Showcase	9/01/13	7,718				7,718	20 MO S/L	900	193
895	Cheetah exhibit	9/01/13	15,665				15,665	20 MO S/L	1,828	391
896	Truck	9/01/13	10,000				10,000	5 MO S/L	4,667	1,000
897	Overflow Parking	12/01/13	46,259				46,259	10 MO S/L	9,637	2,313
898	Master Plan	12/01/13	300,000				300,000	25 MO S/L	25,000	6,000
900	Herp exhibit	1/01/14	8,413				8,413	10 MO S/L	1,613	420
901	Alpaca	1/01/14	1,800				1,800	10 MO S/L	345	90
902	Cat compact skid loader	1/01/14	0				0	0 HY	0	0
903	concessions tables	1/01/14	5,000				5,000	5 MO S/L	1,917	500
904	Ovations Equip	1/01/14	235,252				235,252	5 MO S/L	97,050	23,526
905	Concessions roof	2/01/14	2,350				2,350	10 MO S/L	431	117
906	Herp Roof	2/01/14	16,109				16,109	10 MO S/L	2,953	806
907	Giraffe Exhibit	3/01/14	170,164				170,164	10 MO S/L	29,779	8,508
908	Giraffes	3/01/14	18,500				18,500	10 MO S/L	3,238	925
909	Invert Boxes	3/01/14	2,063				2,063	5 MO S/L	722	206
910	dwarf goats	4/01/14	360				360	10 MO S/L	60	18
911	FGW Fencing	6/01/14	52,535				52,535	10 MO S/L	7,880	2,627
912	Splashground Upgrades	6/01/14	9,051				9,051	10 MO S/L	1,358	452
913	OCIC assets	6/01/14	4,046				4,046	5 MO S/L	1,214	404
914	Picnic tables	6/01/14	2,087				2,087	5 MO S/L	626	209
916	WMD elec upgrades	7/01/14	8,544				8,544	10 MO S/L	1,210	428
917	Goat Barn	7/01/14	1,099				1,099	5 MO S/L	311	110
918	Solar Panel Pad	8/01/14	3,877				3,877	10 MO S/L	549	194
919	WMD SOLAR PANELS	8/01/14	80,000				80,000	10 MO S/L	11,333	4,000
920	Animal Showcase	8/01/14	12,320				12,320	10 MO S/L	1,745	616
921	Jaquarundi	8/01/14	2,167				2,167	10 MO S/L	307	108
922	Billboard	10/01/14	4,800				4,800	5 MO S/L	1,200	480
923	New pig exhibit	10/01/14	2,005				2,005	5 MO S/L	501	201
924	Brighthouse van	10/01/14	4,500				4,500	3 MO S/L	1,875	750
925	kawasaki atv	10/01/14	4,000				4,000	5 MO S/L	1,000	400
926	Carousel shade	11/01/14	6,005				6,005	5 MO S/L	1,401	601
927	new warthog exhibit	11/01/14	2,867				2,867	5 MO S/L	669	287
928	Educ van wrap	11/01/14	3,200				3,200	3 MO S/L	1,244	534
929	Master Plan	12/01/14	294,985				294,985	25 MO S/L	12,783	5,899
930	Herp AC	12/01/14	14,402				14,402	10 MO S/L	1,560	720
931	OCIC CEF grant	12/01/14	34,786				34,786	10 MO S/L	3,768	1,740
932	Digital Media	12/01/14	15,000				15,000	5 MO S/L	3,250	1,500
933	CIP - Tigers	12/31/14	132,176				132,176	0 -- Memo	0	0
934	Loan Fees	12/31/15	9,755				9,755	9 MO S/L	0	542
935	8 Computers and Server- Admin	12/31/15	7,628				7,628	3 MO S/L	0	1,271
936	4 computers- Admin.	12/31/15	2,629				2,629	3 MO S/L	0	438
937	Childrens Garden Exhibit	12/31/15	27,381				27,381	10 MO S/L	0	1,369
938	Splash Ground Upgrade I	12/31/15	11,688				11,688	10 MO S/L	0	584
939	Splash Ground Upgrade II	12/31/15	46,830				46,830	10 MO S/L	0	2,342
940	Various Exhibit Upgrades	12/31/15	27,654				27,654	10 MO S/L	0	1,383
941	Giraffe Upgrade	12/31/15	5,494				5,494	10 MO S/L	0	275
942	Boardwalk	12/31/15	184,399				184,399	20 MO S/L	0	4,610
943	Fencing	12/31/15	19,384				19,384	10 MO S/L	0	969
944	Sidewalks	12/31/15	50,121				50,121	20 MO S/L	0	1,253
945	Commissary Bldg. upgrades	12/31/15	31,442				31,442	15 MO S/L	0	1,048
946	Electrical upgrades	12/31/15	18,648				18,648	15 MO S/L	0	622
947	Herpetarium Upgrades	12/31/15	7,417				7,417	10 MO S/L	0	371
948	Rhino Concession Upgrades	12/31/15	6,639				6,639	10 MO S/L	0	332
949	Vet Clinic Upgrades	12/31/15	14,275				14,275	10 MO S/L	0	714
950	Education Boards	12/31/15	4,412				4,412	3 MO S/L	0	735
951	Garbage/Recycling Containers	12/31/15	40,657				40,657	10 MO S/L	0	2,033
952	Toro Lawn Mower	12/31/15	10,524				10,524	5 MO S/L	0	1,052
953	Land Improvements FKA - Safari Park	12/31/14	17,841				17,841	0 -- Memo	0	0
955	CIP - Other Proj BEAR Borrelli	12/31/15	153,113				153,113	0 -- Memo	0	0

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Federal Asset Report

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179	Bonus	Basis for Depr	PerConv Meth	Prior	Current
957	CIP - Other	12/31/15	8,341				8,341	0 -- Memo	0	0
958	COMMISSARY EQUIP	12/31/15	6,611				6,611	5 MO S/L	0	661
959	Rhino Habitat	12/31/16	259,607				259,607	10 MO S/L	0	12,980
960	AZA Upgrades	12/31/16	133,896				133,896	10 MO S/L	0	6,695
961	POS System	12/31/16	5,942				5,942	3 MO S/L	0	990
962	Education Smartboard	12/31/16	15,168				15,168	3 MO S/L	0	2,528
963	Demo cost bldg near entrance	12/31/16	10,240				10,240	0 -- Memo	0	0
964	Water line Infrastructure Wal-Rose	12/31/16	66,768				66,768	40 MO S/L	0	835
965	Ground Fill - Parking Lot	12/31/16	42,000				42,000	0 -- Memo	0	0
966	OCIC Fencing/Well	12/31/16	5,407				5,407	10 MO S/L	0	270
967	Boardwalk	12/31/16	15,548				15,548	10 MO S/L	0	777
968	Ground Fill - bear exhibit	12/13/16	15,455				15,455	0 -- Memo	0	0
969	cip 2016	12/31/16	122,739				122,739	0 -- Memo	0	0
	Total Other Depreciation		<u>13,548,845</u>				<u>13,548,845</u>		<u>4,335,548</u>	<u>324,462</u>
	Total ACRS and Other Depreciation		<u>13,548,845</u>				<u>13,548,845</u>		<u>4,335,548</u>	<u>324,462</u>
	Grand Totals		13,548,845				13,548,845		4,335,548	324,462
	Less: Dispositions and Transfers		0				0		0	0
	Less: Start-up/Org Expense		0				0		0	0
	Net Grand Totals		<u>13,548,845</u>				<u>13,548,845</u>		<u>4,335,548</u>	<u>324,462</u>

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Depreciation Adjustment Report

FYE: 6/30/2017

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
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There are no assets that meet the criteria of this report

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
Other Depreciation:					
7	CONCESSION/GIFT BUILDING	7/30/75	36,256	0	0
9	ANIMAL COMMISSARY	7/30/75	13,812	0	0
15	NORTH MAIN EXHIBIT AREA	7/31/75	29,700	0	0
16	S.E. MAIN EXHIBIT AREA	7/31/75	29,700	0	0
17	WEST MAIN EXHIBIT AREA	7/31/75	29,700	0	0
20	SM CROCODILIANS EXHIBIT	7/31/75	1,500	0	0
25	WISHING WELL PAVILION	12/30/76	3,850	0	0
26	QUARANTINE AREA	12/31/76	2,000	0	0
29	GASOLINE TANK 500 GAL	8/30/77	438	0	0
30	DIESEL TANK 500 GAL	8/30/77	438	0	0
31	AMERICAN ALLIGATOR EXHIBI	8/31/77	2,500	0	0
33	ADMINISTRATIVE BUILDING	6/30/78	32,000	800	0
34	MEDICAL TREATMENT BLDG	6/30/78	19,886	497	0
45	AMERICAN ALLIGATOR	3/29/81	500	0	0
46	AMERICAN ALLIGATOR	3/29/81	400	0	0
48	AMERICAN CROCODILE EXHIBI	6/30/81	3,391	0	0
49	BLACKHANDED SPIDER MONKEY	1/16/82	750	0	0
50	BLACKHANDED SPIDER MONKEY	2/22/82	750	0	0
52	RED-FRONTED MACAW	12/02/82	750	0	0
53	RED-FRONTED MACAW	12/02/82	750	0	0
54	RED-LORED AMAZON	12/21/82	250	7	0
57	SULPHUR-CRESTED COCKATOO	1/26/83	600	17	0
58	TOCO TOUCAN	9/08/83	1,500	0	0
59	GOFFIN'S COCKATOO	10/06/83	500	0	0
61	REPTILE EXHIBIT BUILDING	6/30/84	53,000	0	0
62	CONC/GIFT/ADMISS ROOF REP	6/30/84	4,828	0	0
67	PERIMETER FENCE ADDITION	8/30/85	7,170	0	0
71	ANIMAL COMMISSARY	2/28/86	2,127	53	0
73	BLACKHANDED SPIDER MONKEY	8/22/86	500	0	0
104	EAST AFRICAN GREEN MAMBA	4/04/88	450	0	0
105	EAST AFRICAN GREEN MAMBA	4/04/88	450	0	0
106	CONCESSIONS DRAIN FIELD	5/30/88	2,675	0	0
107	MAINTENANCE POLE BARN	10/30/88	1,500	0	0
110	THE PAVILION	11/30/88	84,458	2,815	0
113	AMERICAN CROCODILE	1/16/89	2,000	0	0
114	BLACK HOWLER MONKEY	2/20/89	750	0	0
115	MACAW ISOLATION CAGES	2/28/89	1,250	0	0
116	EAST AFRICAN GREEN MAMBA	4/01/89	450	0	0
117	RED-TAILED HAWK	6/30/89	670	0	0
118	GREY PARROT	7/03/89	400	11	0
120	SPIRAL WISHING WELL	7/31/89	800	0	0
121	RIDGENOSE RATTLESNAKE	8/14/89	400	0	0
122	RIDGENOSE RATTLESNAKE	8/14/89	400	0	0
123	RIDGENOSE RATTLESNAKE	8/14/89	400	0	0
124	LESSER SPOT-NOSED GUENON	8/21/89	750	0	0
126	SPOT-NOSE GUENON RENOVATE	11/30/89	400	0	0
128	ADMIN OFFICE ADDITION	12/30/89	32,000	0	0
129	RHINOCEROS IGUANA	1/29/90	1,500	50	0
130	CROCODILLAN EXHIBITS (3)	2/28/90	6,103	0	0
132	TOUCAN EXHIBIT	3/31/90	3,058	0	0
133	LILAC-CROWNED AMAZON	5/18/90	300	9	0
135	GIANT KINGFISHER	6/28/90	200	0	0
136	PREHENSILE-TAILED SKINK	6/29/90	150	0	0
137	ISOLATION AVARIES	6/30/90	4,970	0	0
138	ADMIN OFFICE ADDITION	6/30/90	1,540	0	0
140	KOOKABURRA EXHIBIT	6/30/90	747	0	0
141	GIANT KINGFISHER	8/21/90	200	0	0
147	PREHENSILE-TAILED SKINK	2/10/91	150	0	0
148	SALMON-CRESTED COCKATOO	2/19/91	600	19	0
156	CROCODILE MONITOR	7/19/91	750	28	0
157	KOOKABURRA EXHIBIT ADD'L	7/31/91	3,032	0	0
158	MEA-DRAINFIELD	8/15/91	1,750	0	0
159	GREEN-WINGED MACAW	8/22/91	1,000	36	0
164	ANIMAL ADVENTURE EXHIBIT	11/30/91	32,576	543	0
187	RHINOCEROS IGUANA	3/09/92	1,500	45	0
192	PANAMA YELLOW-CRND AMAZON	9/01/92	250	0	0
194	EAGLE EXHIBIT	10/31/92	12,655	0	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
195	REPTILE BOARDWALK	10/31/92	0	0	0
196	RHINOCEROS HORNBILL EXHIB	10/31/92	7,995	0	0
197	BOARDWALK-PHASE II	10/31/92	7,566	0	0
198	KIOSK	10/31/92	2,961	0	0
202	ENTRANCE ZOO SIGNS (2)	3/31/93	6,990	0	0
208	STAR TORTOISE	4/02/93	400	0	0
212	TREK BOARDWALK	7/31/93	45,026	0	0
213	CLOUDED LEOPARD EXHIBIT	7/31/93	16,704	0	0
214	LIZARD EXHIBIT	7/31/93	4,186	0	0
226	CROCODILE ENCLOSURE	12/31/93	813	0	0
227	BLACK FOOTED CAT EXHIBIT	2/28/94	6,856	0	0
228	RED-TAILED HAWK	2/28/94	188	0	0
230	AMERICAN ALLIGATOR	3/24/94	100	0	0
231	ARUBA ISLAND RATTLESNAKE	4/23/94	250	0	0
232	ARUBA ISLAND RATTLESNAKE	4/23/94	250	0	0
233	SPIDER MONKEY	4/25/94	500	0	0
234	RUFFED LEMUR	4/27/94	500	0	0
235	RUFFED LEMUR	4/27/94	500	0	0
237	TAWNY FROGMOUTH	5/04/94	200	0	0
239	SAND GOANNA	6/23/94	250	0	0
240	SAND GOANNA	6/23/94	250	0	0
244	GREY MONITOR	8/24/94	500	0	0
245	GREY MONITOR	8/24/94	500	0	0
246	GREY MONITOR	8/24/94	500	0	0
247	GREY MONITOR	8/24/94	500	0	0
248	MAGPIE JAY	8/31/94	3,926	0	0
250	WISHING WELL RENOVATION	8/31/94	3,280	0	0
252	ZOO ENTRANCE SIGN	8/31/94	2,200	0	0
256	WISHING WELL RENOV/LABOR	9/30/94	2,760	0	0
257	GOFFIN'S COCKATOO/LABOR	9/30/94	1,380	0	0
259	ELEPHANT BARN SLAB	11/30/94	4,414	0	0
261	WREATHED HORNBILL	12/22/94	5,000	0	0
262	WWREATHED HORNBILL	12/22/94	5,000	0	0
263	BRIDGE B'WALK	12/31/94	6,603	0	0
264	EDUC BLDG RENOVATION	12/31/94	2,307	0	0
266	CROCODILE MONITOR	2/16/95	650	0	0
270	MAGPIE JAY	7/03/95	700	0	0
271	COLLARED ARACARI	7/03/95	600	0	0
272	COLLARED ARACARI	7/03/95	600	0	0
274	1995 JOHN DEER GATOR	8/31/95	4,650	0	0
275	HFCF RESTROOMS	9/30/95	76,829	3,073	0
276	HOOFSTOCK/CHEETAH EXHIBIT	9/30/95	60,799	0	0
277	RESTROOM DECK	9/30/95	8,880	0	0
278	HFCF RESTROOMS (final pmt	10/31/95	24,490	979	0
285	CRESTED PORCUPINE	11/27/95	1,000	0	0
286	CRESTED PORCUPINE	11/27/95	1,000	0	0
303	RADIATED TORTOISE	2/29/96	500	0	0
305	SPIDER MONKEY	3/30/96	500	0	0
308	HYACINTH MACAW	5/17/96	5,000	167	0
309	SILVERY-CHEEKED HORNBILL	6/11/96	600	0	0
310	AWNING F/EDUC BUILDING	7/31/96	3,500	0	0
313	RED-SHOULDERED HAWK	8/23/96	100	0	0
342	PRIMATE EXHIBIT UPGRADE	11/30/96	603	0	0
344	RHINOCEROS IGUANA	12/20/96	150	4	0
345	SPACE MASTER TRAILER	12/31/96	46,468	0	0
346	RESTROOM DECK	12/31/96	2,779	0	0
347	AA PHASE II WIP	12/31/96	2,703	0	0
352	CARPET F/HERPETARIUM	1/31/97	2,001	0	0
357	CRESTED PORCUPINE	2/17/97	500	0	0
358	PORCUPINE EXHIBIT	2/28/97	6,102	0	0
363	HYACINTH MACAW	5/26/97	6,000	120	0
370	FLOOR TILE F/COMMISSARY	7/31/97	1,266	0	0
377	MADAGASCAR TREE BOA	8/03/97	500	0	0
378	HYACINTH MACAW	8/21/97	8,000	200	0
379	SILVERY-CHEEKED HORNBILL	8/26/97	800	27	0
382	DRAIN FIELD-TOP OF HILL	9/30/97	5,304	0	0
383	BLACK HOWLER MONKEY	9/30/97	400	0	0
404	LESSER SPOT-NOSED GUENON	10/08/97	500	0	0
415	JOHN DEERE AMT 626	3/31/98	1,500	0	0
417	RED-BILLED HORNBILL	4/30/98	223	0	0
418	KUBOTA TRACTOR L2500	6/30/98	18,500	0	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

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Asset	Description	Date In Service	Cost	Tax	AMT
424	PORCUPINE	8/20/98	319	0	0
428	ZOOFARI OUTPOST	9/30/98	56,715	2,836	0
429	PAVILION RENOVATION	9/30/98	53,103	0	0
435	ROCK IGUANA	9/30/98	192	0	0
436	CROC MONITOR	9/30/98	192	0	0
443	GIANT GECKO	12/16/98	150	0	0
446	ADMISSIONS RENOVATION	1/01/99	12,965	0	0
449	WELL CONSTRUCTION	1/01/99	3,165	0	0
454	BLACK HOWLER MONKEY	2/04/99	200	0	0
465	MAGPIE JAY	4/22/99	700	0	0
482	PREHEN TAIL PORCUPINE EXH	7/01/99	1,962	0	0
486	REPTILE EGG INCUBATOR	7/26/99	675	0	0
487	PAINTING-ADMISSIONS AREA	7/30/99	4,160	0	0
488	SPIDER MONKEY	7/30/99	350	0	0
492	LESSER SPOT NOSED GUENON	8/18/99	250	0	0
494	KING VULTURE	9/27/99	600	0	0
513	GREEN WINGED MACAW	1/01/00	600	0	0
518	SEPTIC IMPROVEMENTS	2/08/00	6,441	0	0
519	EXHIBIT IMPROVEMENTS	2/17/00	3,698	0	0
520	GREEN WINGED MACAW	2/26/00	500	0	0
521	GREEN WINGED MACAW	2/26/00	500	0	0
522	GREEN WINGED MACAW	3/15/00	600	0	0
526	GREEN WINGED MACAW	5/09/00	600	24	0
532	2000 FORD VAN	7/20/00	18,958	0	0
533	RED FRONTED MACAW	7/28/00	300	15	0
534	CRESTED PORCUPINE	8/02/00	300	0	0
535	CRESTED PORCUPINE	8/02/00	300	0	0
537	BIRD ENCLOSURE	8/31/00	600	0	0
538	BIRD ENCLOSURE	8/31/00	200	0	0
542	LAND-ADJACENT PROPERTY	9/26/00	80,000	0	0
548	MADAGASCAR TREE BOA	11/02/00	250	0	0
549	MADAGASCAR TREE BOA	11/02/00	250	0	0
550	AMUR LEOPARD EXHIBIT	12/31/00	46,536	0	0
551	BUTTERFLY SENSORY GARDEN	12/31/00	12,188	0	0
553	HYACINTH MACAW EXHIBIT	12/31/00	12,112	0	0
557	BLACK HOWLER MONKEY	1/01/01	300	0	0
558	RHINOCEROS VIPER	1/01/01	225	0	0
559	PUERTO RICAN CRESTED TOAD	1/01/01	78	0	0
578	ARUBA ISL RATTLESNAKE - F	3/27/01	100	0	0
579	ARUBA ISL RATTLESNAKE - F	3/27/01	100	0	0
582	WELL WORK	4/30/01	1,479	0	0
583	GREEN WINGED MACAW - UNK	5/11/01	600	0	0
585	GREEN WINGED MACAW - UNK	5/14/01	600	0	0
593	LESSER SPOT-NOSED GUENON	6/24/01	250	0	0
596	SILVERY-CHEEKED HORNBILL	7/14/01	500	0	0
598	CLOUDED LEOPARD - F	7/24/01	250	0	0
600	PALAWAN PEACOCK PHEASANT	7/29/01	200	0	0
601	PALAWAN PEACOCK PHEASANT	7/29/01	200	0	0
603	CROCODILE MONITOR	8/24/01	700	0	0
608	CHEETAH EXHIBIT - ADDNL	11/01/01	532	0	0
609	RETICULATE GILA MONSTER	11/01/01	200	0	0
621	WREATHED HORNBILL	3/14/02	1,500	0	0
624	STAR TORTOISE	5/31/02	200	10	0
625	STAR TORTOISE	5/31/02	200	10	0
626	STAR TORTOISE	5/31/02	200	10	0
631	AC ZOOFARI	11/12/02	5,775	0	0
632	SPIDER MONKEY EX REHAB	1/15/03	173	0	0
635	Roof-Concession Bldg	3/21/03	4,500	0	0
636	WREATHED HORNBILL	3/21/03	1,200	0	0
637	TUCUMAN AMAZON	3/29/03	500	0	0
640	SILVERY-CHEEKED HORNBILL	5/21/03	250	0	0
641	SILVERY-CHEEKED HORNBILL	5/23/03	250	0	0
643	PREHENS TAILED PORCUPINE	5/28/03	200	0	0
644	COTTON-TOP TAMARIN	6/06/03	100	0	0
645	KING VULTURE EXHIBIT	7/01/03	40,185	2,679	0
646	RED-FRONTED MACAW	7/25/03	200	0	0
647	King Vulture Exhibit	7/31/03	40,185	2,009	0
650	Black Howler	9/24/03	500	0	0
653	Cougar Exhibit	11/01/03	58,887	2,945	0
654	COUGAR EXHIBIT	11/01/03	58,887	3,926	0
657	DUCT WORK - ZOOFARI	11/05/03	2,925	0	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
658	Lesser Spot-Nosed Guenon	11/06/03	500	0	0
665	GRAVEL-PARKING LOT	1/31/04	700	0	0
673	2000 DODGE RAM PICKUP	3/31/04	9,882	0	0
674	CROCODILE MONITOR	3/31/04	400	0	0
675	CROCODILE MONITOR	3/31/04	400	0	0
677	CROCODILE MONITOR	3/31/04	300	0	0
691	AFRICAN CRESTED PORCUPINE	4/05/04	550	0	0
692	AFRICAN CRESTED PORCUPINE	4/05/04	550	0	0
693	RUFFED LEMUR	4/05/04	500	0	0
695	BLUE-BELLIED ROLLER	4/16/04	300	0	0
696	BLUE-BELLIED ROLLER	4/16/04	300	0	0
697	SPLENDID GLOSSY STARLING	4/16/04	175	0	0
698	SPLENDID GLOSSY STARLING	4/16/04	175	0	0
706	COMMISSARY FREEZER	5/27/04	1,937	0	0
712	Prehensile tail porcupine	8/31/04	973	0	0
714	BLACK HOWLER	9/01/04	500	0	0
715	MAGPIE JAY	9/01/04	350	0	0
716	RED-FRONTED MACAW	9/01/04	300	15	0
717	RED-FRONTED MACAW	9/01/04	300	15	0
720	Used Horse Trailer	12/01/04	800	0	0
721	Lesser Spot Nosed Guenon	12/01/04	500	33	0
723	Madagascar Tree Boa	12/01/04	250	0	0
724	Madagascar Tree Boa	12/01/04	250	0	0
725	Madagascar Tree Boa	12/01/04	250	0	0
726	Madagascar Tree Boa	12/01/04	250	0	0
729	Discovery Island items	12/31/04	14,732	0	0
734	WMD Discovery Center	12/01/05	4,075,409	81,508	0
735	childrens python	5/01/05	500	0	0
737	education van	7/31/05	11,722	0	0
743	Herp Renovation	1/01/06	40,528	2,026	0
744	Insect Zoo	1/01/06	55,434	2,772	0
746	Black Howler Exhibit	1/01/06	11,994	799	0
747	Macaw Exhibit	1/01/06	20,593	1,373	0
750	FF&E WMD	6/01/06	121,050	0	0
751	Concessions Repairs	6/01/06	28,576	0	0
753	Coqui Exhibit	9/01/06	3,491	233	0
754	Herp Repairs	9/01/06	8,338	139	0
755	Admin Roof	10/01/06	7,800	195	0
756	Aldabra Exhibit	12/01/06	4,181	279	0
757	Spider Monkey Exhibit	12/01/06	42,659	2,844	0
758	Birds	12/01/06	321	14	0
759	Zoolab	12/31/07	51,240	5,124	0
760	Splash Ground	1/01/07	475,000	23,750	0
761	Master Plan	12/01/07	200,000	20,000	0
762	Kangaroo Exhibit	1/01/07	37,917	1,896	0
763	Equipment	5/01/07	3,501	0	0
764	Equipment	6/01/07	2,034	0	0
766	Gazebo	9/01/07	5,944	594	0
767	Spec Events Deck	9/01/07	6,625	662	0
768	Gato Deck	9/01/07	28,495	2,849	0
769	Spiny Garden	9/01/07	4,818	482	0
770	Commissary Freezer	1/08/08	8,800	880	0
771	Admin Carpet	4/01/08	6,318	632	0
772	Scoterbugs	4/01/08	10,315	1,031	0
773	Concessions Repair	4/01/08	2,500	250	0
774	Concessions Equipment	5/01/08	3,712	0	0
775	Elephant Deck	6/01/08	10,955	1,096	0
776	WMD Repairs	6/01/08	16,952	1,695	0
777	Clouded Leopard Breeding	6/01/08	57,873	2,894	0
778	Black Footed Cat	6/01/08	4,874	244	0
779	Defibillators	8/01/08	3,998	0	0
782	Train	12/12/08	621,000	31,050	0
784	Log Cabin	12/31/09	173,660	3,473	0
785	Master Plan	12/01/09	300,000	12,000	0
786	Shed	2/01/09	1,600	0	0
787	Awning	2/01/09	1,950	0	0
792	Shed	4/01/09	2,000	0	0
793	POS system	6/01/09	26,722	0	0
794	Renovations	6/01/09	8,969	897	0
795	ZoomAir Bldgs	6/01/09	12,062	1,206	0
796	Concessions Renovations	6/01/09	21,956	1,098	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
797	Carousel Renovations	6/01/09	33,185	1,659	0
798	Changing Rooms	6/01/09	17,756	1,776	0
799	Splashground	6/01/09	35,723	1,786	0
800	Front Entrance	6/01/09	131,032	5,241	0
802	Amphibian House	6/01/09	21,515	1,076	0
803	Hillside Sidewalk	6/01/09	11,593	580	0
804	WMD Shed	6/01/09	5,756	0	0
805	Lemur Exhibit	6/01/09	20,988	699	0
806	Toucan Exhibit	6/01/09	5,269	176	0
807	Air Conditioner	9/01/09	4,941	494	0
809	Fryer	11/01/09	5,995	0	0
810	Parking Lot	1/01/10	217,630	10,881	0
811	Ticket Booth	1/01/10	66,518	2,218	0
812	Barn Renovations	1/01/10	100,465	5,023	0
813	Air Conditioner	4/01/10	2,200	220	0
814	Bird Isolation	4/01/10	3,166	316	0
815	Fencing	4/01/10	13,168	1,317	0
816	Backhoe	4/01/10	26,780	2,869	0
817	Maint Stoaage	4/01/10	8,500	911	0
818	Concessions Equipment	6/01/10	1,442	0	0
820	Bathroom Renovations	6/01/10	40,070	4,007	0
821	Butterfly Collection	9/01/10	5,000	0	0
822	Carpeting	9/01/10	4,000	0	0
823	Trucks	10/01/10	6,575	0	0
824	Master Plan	12/01/10	400,000	16,000	0
827	Awning	1/01/11	1,431	143	0
828	Electrical Upgrade	1/01/11	18,285	1,828	0
829	Fencing	1/01/11	10,477	1,047	0
830	2009 projects	1/01/11	21,752	0	0
831	2010 projects	1/01/11	15,587	0	0
832	Education Van	1/01/11	23,000	0	0
834	Charging Station	4/01/11	5,510	551	0
835	Camel Exhibit	6/01/11	12,000	1,200	0
836	Cistern Project	6/01/11	5,222	0	0
837	Kaboom project	6/01/11	9,642	0	0
838	2011 projects	12/01/11	50,865	4,239	0
840	Dell Server	9/01/11	13,397	0	0
842	Toro workman vehicle	11/01/11	20,307	0	0
843	Keller Outdoor	1/01/12	7,100	355	0
844	Ice Maker	1/01/12	1,199	0	0
845	Train Engine	1/01/12	1,950	195	0
846	Washer and Dryer	1/01/12	1,120	112	0
847	Butterfly garden renovations	3/01/12	44,355	4,435	0
848	barrons racer	4/01/12	358	36	0
850	Donor Perfect Software	6/01/12	25,979	0	0
852	Restaurant equipment	6/01/12	7,500	750	0
854	Commissary Freezers	6/01/12	1,950	195	0
855	Reptile quarantine	6/01/12	32,605	3,260	0
856	Otter Isolation	6/01/12	2,932	293	0
857	McCarty Projects	6/01/12	20,600	3,777	0
858	Electrical Upgrades	6/01/12	11,806	2,164	0
859	WMD AC Unit	7/01/12	3,500	350	0
860	WMD AC Unit Protech	7/01/12	12,345	1,235	0
861	Otter Exhibit	9/01/12	255,157	12,758	0
862	Otter Canopy	9/01/12	13,592	1,359	0
863	Otter Landscaping	9/01/12	1,141	228	0
865	Llama	9/01/12	2,200	220	0
866	Master Plan	12/01/12	300,000	12,000	0
867	Train grant	1/01/13	5,039	1,008	0
868	Camel exhibit	1/01/13	6,227	622	0
869	Computers	6/01/13	7,374	0	0
870	Commissary Equipment	6/01/13	1,712	342	0
871	Concessions stand	6/01/13	8,820	1,764	0
872	Boardwalk	6/01/13	2,407	241	0
873	Fire Inspection	6/01/13	5,779	1,155	0
874	Rhino exhibit	6/01/13	242,300	12,115	0
875	Otter exhibit	6/01/13	23,357	1,168	0
876	Spider Monkey exhibit	6/01/13	9,842	984	0
877	Caracal exhibit	6/01/13	5,059	506	0
878	Clouded Leopard exhibit	6/01/13	2,796	280	0
879	Fossa exhibit	6/01/13	1,226	123	0

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Future Depreciation Report**FYE: 6/30/18**

FYE: 6/30/2017

Form 990, Page 1

Asset	Description	Date In Service	Cost	Tax	AMT
880	Bug zoo enclosures	6/01/13	2,063	206	0
881	Warthog exhibit	6/01/13	23,993	2,399	0
882	Zebu exhibit	6/01/13	7,403	740	0
883	Educ van	6/01/13	27,046	5,410	0
884	Computers	6/01/13	4,240	0	0
885	Tractor	6/01/13	5,550	1,110	0
886	zims program	6/01/13	15,000	3,000	0
887	pygmy goats	6/01/13	225	45	0
888	servals	6/01/13	7,465	746	0
889	Boa	6/01/13	800	80	0
890	Computers	9/01/13	1,642	92	0
891	Displays	9/01/13	2,261	453	0
892	Scales	9/01/13	2,226	445	0
894	Animal Showcase	9/01/13	7,718	386	0
895	Cheetah exhibit	9/01/13	15,665	783	0
896	Truck	9/01/13	10,000	2,000	0
897	Overflow Parking	12/01/13	46,259	4,626	0
898	Master Plan	12/01/13	300,000	12,000	0
900	Herp exhibit	1/01/14	8,413	842	0
901	Alpaca	1/01/14	1,800	180	0
902	Cat compact skid loader	1/01/14	0	0	0
903	concessions tables	1/01/14	5,000	1,000	0
904	Ovations Equip	1/01/14	235,252	47,050	0
905	Concessions roof	2/01/14	2,350	235	0
906	Herp Roof	2/01/14	16,109	1,611	0
907	Giraffe Exhibit	3/01/14	170,164	17,016	0
908	Giraffes	3/01/14	18,500	1,850	0
909	Invert Boxes	3/01/14	2,063	413	0
910	dwarf goats	4/01/14	360	36	0
911	FGW Fencing	6/01/14	52,535	5,253	0
912	Splashground Upgrades	6/01/14	9,051	905	0
913	OCIC assets	6/01/14	4,046	810	0
914	Picnic tables	6/01/14	2,087	417	0
916	WMD elec upgrades	7/01/14	8,544	854	0
917	Goat Barn	7/01/14	1,099	220	0
918	Solar Panel Pad	8/01/14	3,877	388	0
919	WMD SOLAR PANELS	8/01/14	80,000	8,000	0
920	Animal Showcase	8/01/14	12,320	1,232	0
921	Jaquarundi	8/01/14	2,167	217	0
922	Billboard	10/01/14	4,800	960	0
923	New pig exhibit	10/01/14	2,005	401	0
924	Briighthouse van	10/01/14	4,500	1,500	0
925	kawasaki atv	10/01/14	4,000	800	0
926	Carousel shade	11/01/14	6,005	1,201	0
927	new warthog exhibit	11/01/14	2,867	573	0
928	Educ van wrap	11/01/14	3,200	1,066	0
929	Master Plan	12/01/14	294,985	11,800	0
930	Herp AC	12/01/14	14,402	1,440	0
931	OCIC CEF grant	12/01/14	34,786	3,478	0
932	Digital Media	12/01/14	15,000	3,000	0
933	CIP - Tigers	12/31/14	132,176	0	0
934	Loan Fees	12/31/15	9,755	1,084	0
935	8 Computers and Server- Admin	12/31/15	7,628	2,543	0
936	4 computers- Admin.	12/31/15	2,629	877	0
937	Childrens Garden Exhibit	12/31/15	27,381	2,738	0
938	Splash Ground Upgrade I	12/31/15	11,688	1,169	0
939	Splash Ground Upgrade II	12/31/15	46,830	4,683	0
940	Various Exhibit Upgrades	12/31/15	27,654	2,765	0
941	Giraffe Upgrade	12/31/15	5,494	549	0
942	Boardwalk	12/31/15	184,399	9,220	0
943	Fencing	12/31/15	19,384	1,939	0
944	Sidewalks	12/31/15	50,121	2,506	0
945	Commissary Bldg. upgrades	12/31/15	31,442	2,096	0
946	Electrical upgrades	12/31/15	18,648	1,243	0
947	Herpetarium Upgrades	12/31/15	7,417	742	0
948	Rhino Concession Upgrades	12/31/15	6,639	664	0
949	Vet Clinic Upgrades	12/31/15	14,275	1,427	0
950	Education Boards	12/31/15	4,412	1,471	0
951	Garbage/Recycling Containers	12/31/15	40,657	4,066	0
952	Toro Lawn Mower	12/31/15	10,524	2,105	0
953	Land Improvements FKA - Safari Park	12/31/14	17,841	0	0

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Future Depreciation Report FYE: 6/30/18

FYE: 6/30/2017

Form 990, Page 1

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
955	CIP - Other Proj BEAR Borrelli	12/31/15	153,113	0	0
957	CIP - Other	12/31/15	8,341	0	0
958	COMMISSARY EQUIP	12/31/15	6,611	1,322	0
959	Rhino Habitat	12/31/16	259,607	25,961	0
960	AZA Upgrades	12/31/16	133,896	13,389	0
961	POS System	12/31/16	5,942	1,981	0
962	Education Smartboard	12/31/16	15,168	5,056	0
963	Demo cost bldg near entrance	12/31/16	10,240	0	0
964	Water line Infrastructure Wal-Rose	12/31/16	66,768	1,669	0
965	Ground Fill - Parking Lot	12/31/16	42,000	0	0
966	OCIC Fencing/Well	12/31/16	5,407	541	0
967	Boardwalk	12/31/16	15,548	1,555	0
968	Ground Fill - bear exhibit	12/13/16	15,455	0	0
969	cip 2016	12/31/16	122,739	0	0
	Total Other Depreciation		<u>13,548,845</u>	<u>604,929</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>13,548,845</u>	<u>604,929</u>	<u>0</u>
	Grand Totals		<u>13,548,845</u>	<u>604,929</u>	<u>0</u>

Net Operating Loss Carryover Worksheet

Form **990-T**

2016

For calendar year 2016, or tax year beginning **01/01/17**, ending **06/30/17**

Name

CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.

Employer Identification Number
**** - ***7197**

Preceding Taxable Year	Prior Year			Current Year	Next Year Carryover
	Adj. To NOL Inc/(Loss) After Adj.	NOL Utilized (Income Offset)	Carryovers to Current Year	Income Offset By NOL Carryback / Carryover Utilized	
19th 06/29/98					
18th 06/29/99					
17th 06/30/00					
16th 06/30/01					
15th 06/30/02					
14th 06/30/03					
13th 06/30/04					
12th 06/30/05					
11th 06/30/06					
10th 06/30/07	-28,760		28,760		28,760
9th 06/30/08	-14,216		14,216		14,216
8th 06/30/09	-12,918		12,918		12,918
7th 06/30/10	-13,770		13,770		13,770
6th 06/30/11	-16,430		16,430		16,430
5th 06/30/12	-17,640		17,640		17,640
4th 06/30/13	-17,733		17,733		17,733
3rd 06/30/14	-25,038		25,038		25,038
2nd 06/30/15	-16,532		16,532		16,532
1st 06/30/16					
NOL carryover available to current year			163,037		
Current year	-7,350				7,350
NOL carryover available to next year					170,387

Form **990****Two Year Comparison Report****2015 & 2016**For calendar year 2016, or tax year beginning **01/01/17**, ending **06/30/17**

Name

Taxpayer Identification Number

**CENTRAL FLORIDA ZOOLOGICAL
SOCIETY, INC.****** - *** 7197**

		2015	2016	Differences
Revenue	1. Contributions, gifts, grants	554,882	214,670	-340,212
	2. Membership dues and assessments	554,355	318,946	-235,409
	3. Government contributions and grants	467,396	157,477	-309,919
	4. Program service revenue	2,841,203	1,802,614	-1,038,589
	5. Investment income	682	131,394	130,712
	6. Proceeds from tax exempt bonds			
	7. Net gain or (loss) from sale of assets other than inventory			
	8. Net income or (loss) from fundraising events	123,652	100,157	-23,495
	9. Net income or (loss) from gaming			
	10. Net gain or (loss) on sales of inventory	258,652	208,927	-49,725
	11. Other revenue	32,429	82,121	49,692
	12. Total revenue. Add lines 1 through 11	4,833,251	3,016,306	-1,816,945
Expenses	13. Grants and similar amounts paid			
	14. Benefits paid to or for members			
	15. Compensation of officers, directors, trustees, etc.	97,308		-97,308
	16. Salaries, other compensation, and employee benefits	2,327,535	1,348,900	-978,635
	17. Professional fundraising fees			
	18. Other professional fees	53,422	110,890	57,468
	19. Occupancy, rent, utilities, and maintenance	145,159	136,100	-9,059
	20. Depreciation and Depletion	622,374	266,880	-355,494
	21. Other expenses	1,484,014	802,710	-681,304
	22. Total expenses. Add lines 13 through 21	4,729,812	2,665,480	-2,064,332
	23. Excess or (Deficit). Subtract line 22 from line 12	103,439	350,826	247,387
Other Information	24. Total exempt revenue	4,833,251	3,016,306	-1,816,945
	25. Total unrelated revenue		29,310	29,310
	26. Total excludable revenue	3,132,966	2,195,746	-937,220
	27. Total assets	9,678,740	12,738,124	3,059,384
	28. Total liabilities	1,410,449	1,506,844	96,395
	29. Retained earnings	8,268,291	11,231,280	2,962,989
	30. Number of voting members of governing body	23	18	
31. Number of independent voting members of governing body	23	18		
32. Number of employees	137	153		
33. Number of volunteers	211	140		

Form 990	Tax Return History	2016
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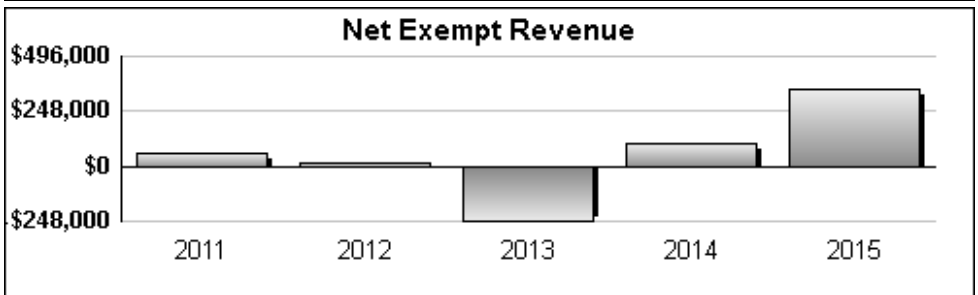
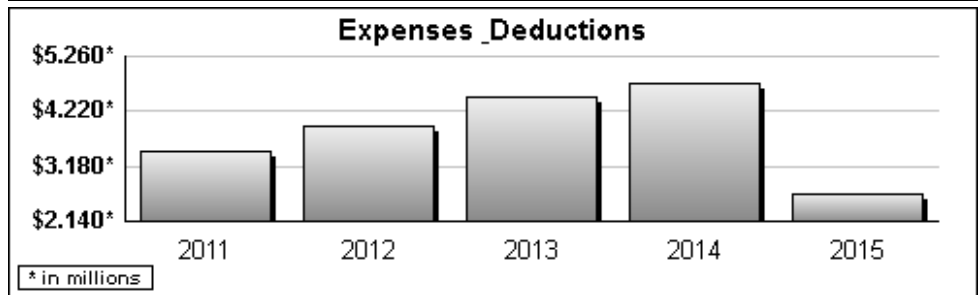
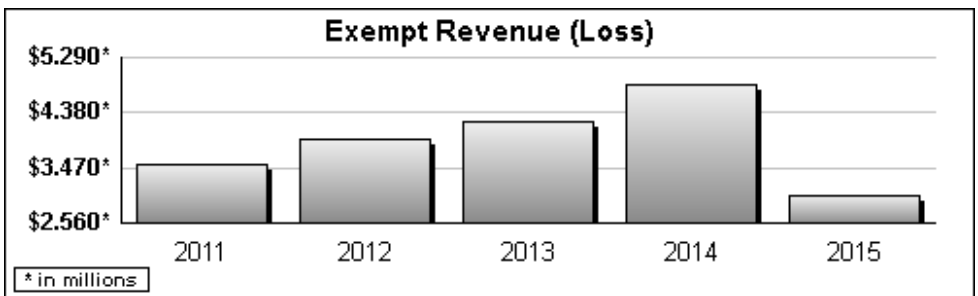
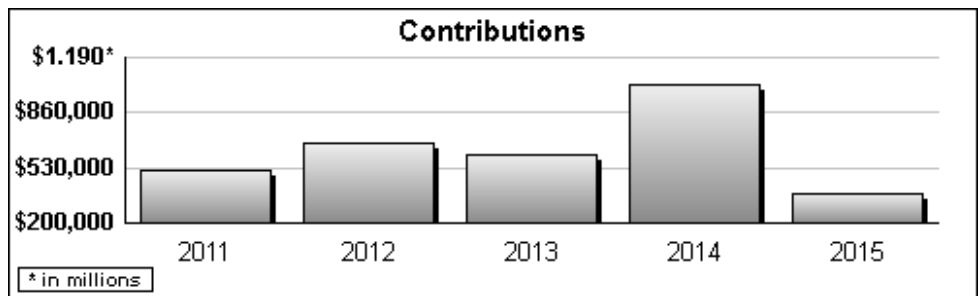
Name CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.	Employer Identification Number ** - ***7197
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	2012	2013	2014	2015	2016	2017
Contributions, gifts, grants	514,737	677,919	611,254	1,022,278	372,147	
Membership dues	383,177	451,155	524,412	554,355	318,946	
Program service revenue	2,227,821	2,528,437	2,721,608	2,841,203	1,802,614	
Capital gain or loss						
Investment income	1,000	921	562	682	131,394	
Fundraising revenue (income/loss)	120,983	71,548	128,215	123,652	100,157	
Gaming revenue (income/loss)						
Other revenue	264,684	213,989	238,783	291,081	291,048	
Total revenue	3,512,402	3,943,969	4,224,834	4,833,251	3,016,306	
Grants and similar amounts paid						
Benefits paid to or for members						
Compensation of officers, etc.	107,749	128,350		97,308		
Other compensation	1,850,977	1,929,433	2,332,818	2,327,535	1,348,900	
Professional fees		66,147	81,820	53,422	110,890	
Occupancy costs	101,728	114,221	147,707	145,159	136,100	
Depreciation and depletion	392,876	445,304	554,922	622,374	266,880	
Other expenses	998,249	1,245,056	1,356,178	1,484,014	802,710	
Total expenses	3,451,579	3,928,511	4,473,445	4,729,812	2,665,480	
Excess or (Deficit)	60,823	15,458	-248,611	103,439	350,826	
Total exempt revenue	3,512,402	3,943,969	4,224,834	4,833,251	3,016,306	
Total unrelated revenue	-17,733	-25,038	-16,532		29,310	
Total excludable revenue	3,530,135	2,839,933	3,105,700	3,132,966	2,195,746	
Total Assets	8,814,679	9,157,168	9,191,751	9,678,740	12,738,124	
Total Liabilities	416,674	743,705	1,026,899	1,410,449	1,506,844	
Net Fund Balances	8,398,005	8,413,463	8,164,852	8,268,291	11,231,280	

Form 990T	Tax Return History	2016
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Name CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.	Employer Identification Number ** - ***7197
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	2012	2013	2014	2015	2016	2017
Business activity profit/loss						
Capital gains/losses						
Partner and S Corp gain/loss						
Rental income*	-17,733	-25,038	-16,532		29,310	
Debt-financed income*						
Controlled organizations income/interest*						
Investment income, specific organizations*						
Exploited exempt activity income*						
Other income						
Total trade or business income.	-17,733	-25,038	-16,532		29,310	
Compensation of officers, ect.					7,428	
Other salaries and wages						
Repairs and maintenance						
Bad debts						
Interest						
Taxes and licenses						
Charitable contributions						
Depreciation and Depletion					18,808	
Deferred compensation plans						
Employee benefit programs						

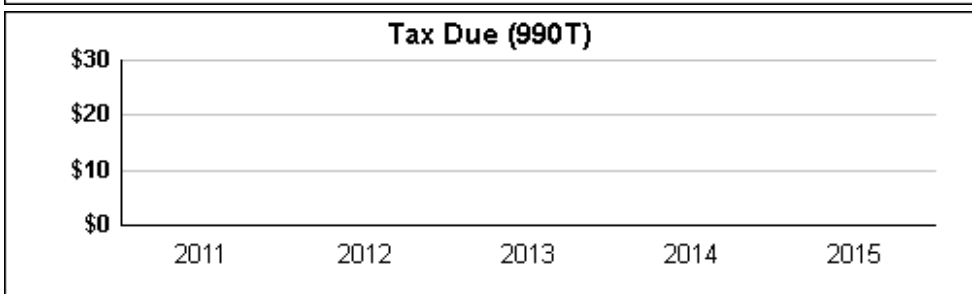
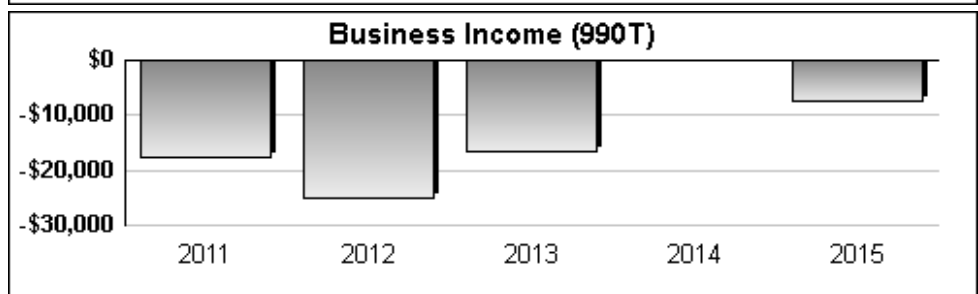
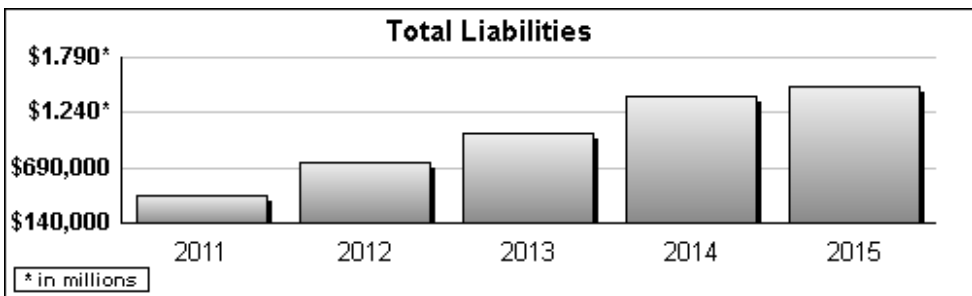
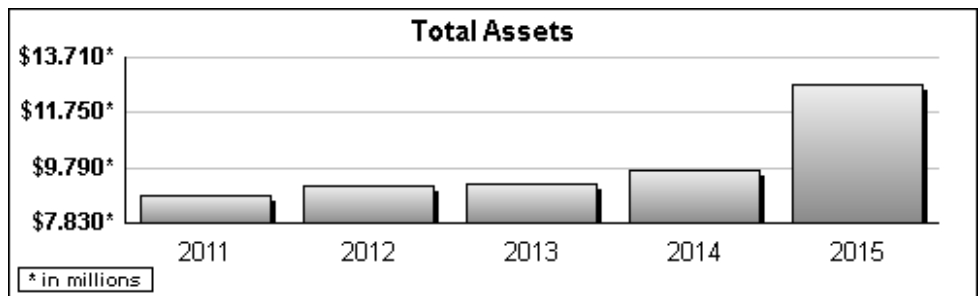


Form 990T	Tax Return History	2016
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Name CENTRAL FLORIDA ZOOLOGICAL SOCIETY, INC.	Employer Identification Number **-***7197
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	2012	2013	2014	2015	2016	2017
Other deductions					10,424	
Net operating loss deduction						
Specific deduction						
Income after expense and deductions	-17,733	-25,038	-16,532		-7,350	
Income tax (corporate or trust)						
Other taxes						
Total taxes						
General business credit						
Other credits						
Net tax after credits						
Estimated tax payments						
Other payments						
Balance due/Overpayment						

* Income shown net of expenses



Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
INTEREST	\$ <u>136</u>			14		
TOTAL	\$ <u><u>136</u></u>					

Federal Statements**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

Description	Total Expenses	Program Service	Management & General	Fund Raising
ACCREDITATION	\$ 3,213	\$ 3,213	\$	\$
SUBCONTRACTOR FEES	11,160	11,160	\$	\$
SUBCONTRACTOR FEES	50,460	50,460	\$	\$
TOTAL	<u>\$ 64,833</u>	<u>\$ 64,833</u>	<u>\$ 0</u>	<u>\$ 0</u>

Form 990, Part IX, Line 24e - All Other Expenses

Description	Total Expenses	Program Service	Management & General	Fund Raising
SUPPLIES	\$ 45,680	\$ 35,530	\$ 8,720	\$ 1,430
CREDIT CARD FEES	44,050	42,780	\$	1,270
EMPLOYEE RELATIONS	12,180	8,520	2,890	770
TOTAL	<u>\$ 101,910</u>	<u>\$ 86,830</u>	<u>\$ 11,610</u>	<u>\$ 3,470</u>

Federal Statements

Schedule A, Part II, Line 9(e)

Description	Amount
CONFERENCE HALL RENTAL	\$ 29,310
LESS: DEDUCTIONS	<u>-37,660</u>
TOTAL	<u><u>\$ -8,350</u></u>

-*7197

Federal Statements

FYE: 6/30/2017

Form 990-T - Other Deductions Not Taken Elsewhere

<u>Description</u>	<u>Amount</u>
ADVERTISING	\$ 280
INSURANCE	1,356
SUPPLIES	1,636
REPAIRS	1,380
OTHER EXPENSES	5,772
TOTAL	\$ <u>10,424</u>