efile GRAPHIC print - DO NOT PROCESS As Filed Data -

Return of Organization Exempt From Income Tax

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

DLN: 93493310022328 OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service

▶ Do not enter social security numbers on this form as it may be made public ▶ Information about Form 990 and its instructions is at www.irs.gov/form990

Inspection

Λ -	or +L	o 2017 ~	alendar vear or toy year b	eginning 01-01-2017 , and endi	ing 12 2:	1-2017					
	Check if applicable ☐ Address change ☐ Name change		C Name of organization		my 1∠-3.	1-701/	D Employ	er identif	ıcatıon number		
□ Ad	dress	change	ZOOLOGICĂL SOCIETY OF PIT	TSBURGH			25-141				
	me ch tıal ret	_	Doing business as				-	-,			
		n/terminated	PITTŠBURGH ZOO & PPG AQUA	ARIUM							
		d return	Number and street (or P O bo ONE WILD PLACE	x if mail is not delivered to street address)	Room/sui	ite	E Telephor				
⊔ Ар	plication	on pending		, country, and ZIP or foreign postal code			(412) 6	65-3639			
			PITTSBURGH, PA 152061178	, country, and 211 of foreign postal code			G Gross re	ceipts \$ 2	2.044.360		
			F Name and address of pri	ncıpal officer		H(a) Is th	us a group re	•	· ·		
			DR BARBARA BAKER ONE WILD PLACE			subo	ordinates?		□Yes ☑No		
			PITTSBURGH, PA 15206				all subordinat ided?	tes	☐ Yes ☐No		
I Ta	x-exer	mpt status	☑ 501(c)(3) ☐ 501(c)() ◀ (insert no)	J 527	l	lo," attach a	list (see	instructions)		
J W	ebsit	te:► WW	/W PITTSBURGHZOO ORG			H(c) Grou	ıp exemption	number	>		
						L Year of form	nation 1994	M State	of legal domicile PA		
K Forr	n of or	rganization	Corporation Trust	Association ☐ Other ►							
Pa		Sum	.								
				ion or most significant activities O THE CONSERVATION OF ENDANGE	ERED AND	THREATEN	D SPECIES				
nce	-										
E E	-										
Governance	2	Check thi	s box 🕨 🗌 if the organization	on discontinued its operations or disp	osed of m	ore than 25	% of its net a	ssets			
	l		-	erning body (Part VI, line 1a)			•	3	53		
~ √	l		,	ers of the governing body (Part VI, lir			•	4	53		
Ě	l		. ,	ın calendar year 2017 (Part V, line 2	•		•	5	420		
Activities &	l		•	If necessary)				6 7a	200		
	l			e from Form 990-T, line 34				7a 7b	0		
	-	Tier ame.	area sasmess taxasic mesime			Р	rior Year	1.2	Current Year		
O.	8	Contribut	nons and grants (Part VIII, lir	ne 1h)			17,265,	819	10,470,766		
Ě	9	Program	service revenue (Part VIII, lir	ne 2g)	•		8,848,	673	11,326,441		
Rəvenue	10	Investme	nt income (Part VIII, column	(A), lines 3, 4, and 7d)			1,	185	2,500		
_	11	Other rev	venue (Part VIII, column (A),	lines 5, 6d, 8c, 9c, 10c, and 11e)			318,		58,253		
	_			(must equal Part VIII, column (A), I	-		26,434,		21,857,960		
	ı		• •	IX, column (A), lines 1–3)			78,	498	94,378		
	ı			IX, column (A), line 4) ee benefits (Part IX, column (A), line			10,335,	0	10,602,269		
Expenses	l	-	inal fundraising fees (Part IX,	, , , , , , , , , , , , , , , , , , , ,	5 5-10)			400	8,100		
8	١.		raising expenses (Part IX, column	, ,,	•		32,	100	0,100		
₫	l		penses (Part IX, column (A),	· · · · · · · · · · · · · · · · · · ·	_		8,119,	374	9,540,197		
	18	Total exp	enses Add lines 13-17 (mus	t equal Part IX, column (A), line 25)			18,566,	100	20,244,944		
	19	Revenue	less expenses Subtract line	18 from line 12			7,868,	472	1,613,016		
Net Assets or Fund Balances						Beginnın	g of Current Y	'ear	End of Year		
sets	20	Total asse	ets (Part X, line 16)		_		68,029,	773	66,405,301		
A As	l		ilities (Part X, line 26)				6,220,		2,982,874		
ξĒ	22	Net asset	s or fund balances Subtract	line 21 from line 20			61,809,	411	63,422,427		
Pai			ature Block			'		•			
				examined this return, including accon plete Declaration of preparer (other							
any k											
		*****	*			20	18-11-05				
Sign		Signati	ure of officer			Da	ate				
Here	•		RBARA BAKER PRESIDENT/CEO								
		17	r print name and title	Decrees de constituir	Ls	-+-		DTIN			
Dai-	4		rint/Type preparer's name UGENE J LOGAN	Preparer's signature EUGENE J LOGAN	ا ا		neck 📙 ıf 📗	PTIN P0022723:	L		
Paid Pre		_{sr} ├	ırm's name ► SCHNEIDER DOW	/NS & CO INC					f-employed		
Use		^{ਫ਼} । ├ _ट	ırm's address ▶ ONE PPG PLACE S				none no (412)				
	U II	٠-٠	PITTSBURGH, PA	15222							
May t	he IR	S discuss	this return with the preparer	shown above? (see instructions) .				✓ Y	es 🗆 No		
For P	aper	work Red	duction Act Notice, see the	separate instructions.		Cat No	11282Y		Form 990 (2017)		

Form	990 (2017)					Page 2				
Par	t IIII Statement	of Program Service	e Accomplis	hments						
	Check if Sched	dule O contains a respo	onse or note to	any line in this Part III		🗸				
1	Briefly describe the o			,						
END/ RESF	ANGERED AND THREAT	ENED SPECIES THE S ON FOR WILDLIFE THE	OCIETY PROVID	ES AN ENJOYABLE FAN	D SIGNIFICANT CONTRIBUTOR TO MILY EXPERIENCE THAT FOSTERS ILY FROM INDIVIDUALS, CORPOR	ÚNDERSTANDING,				
2	3	, ,	. 5	<i>,</i>	hich were not listed on	☐ Yes ☑ No				
						⊔ Yes ⊻ No				
_	•	se new services on Scl								
3	-		nake significant	changes in how it cond	ucts, any program	□ Yes ☑ No				
	services?					∟ Yes ⊻ No				
	If "Yes," describe these changes on Schedule O Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses									
4	Section 501(c)(3) and		ons are required	to report the amount	largest program services, as mea of grants and allocations to others					
4a	(Code) (Expenses \$	5,603,047	including grants of \$	94,378) (Revenue \$	6,177,795)				
	See Addıtıonal Data									
4b	(Code) (Expenses \$	5,603,046	ıncludıng grants of \$) (Revenue \$)				
	See Additional Data									
4c	(Code) (Expenses \$	5,603,046	ıncludıng grants of \$) (Revenue \$	5,148,646)				
	See Additional Data									
4d	Other program service	ces (Describe in Sched	ule O)							
	(Expenses \$	ınc	luding grants of	\$) (Revenue \$)				
<u>4e</u>	Total program serv	vice expenses >	16.809.1	39						

or X as applicable

Checklist of Required Schedules

1

Page 3

No

1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete

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

Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments,

c Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its

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

Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D. Part X 🔧

Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses

the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X 🛸

If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional 🕏

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any

Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

ın Part X, lıne 16? *If "Yes," complete Schedule D, Part IX* 😼

b Was the organization included in consolidated, independent audited financial statements for the tax year?

Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E

14a Did the organization maintain an office, employees, or agents outside of the United States? . . .

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)

b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments

valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV

b Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total

permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 🕏 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX,

assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🛸

a Did the organization report an amount for land, buildings, and equipment in Part X, line 10?

12a Did the organization obtain separate, independent audited financial statements for the tax year?

foreign organization? If "Yes," complete Schedule F, Parts II and IV

or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV . . .

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Nο

Nο

Nο

Nο

Nο

No

No

Nο

Νo

Nο

Form **990** (2017)

R

9

10

11a

11b

11c

11d

11e

11f

12a

13

14a

14b

15

16

17

18

19

29

No

Page 4

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.

instructions for applicable filing thresholds, conditions, and exceptions)

Part IV Checklist of Required Schedules (continued) 20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H . . .

government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX.

Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's

current and former officers, directors, trustees, key employees, and highest compensated employees, If "Yes,"

24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and

b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? . . .

c Did the organization maintain an escrow account other than a refunding escrow at any time during the year

d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? . . .

that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV

Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets?

within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . .

is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI

35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes,"

b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and

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?

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

Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part

An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an

Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation

Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections

Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related

Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that

Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . .

column (A), line 2? If "Yes," complete Schedule I, Parts I and III

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a 20b Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic Yes 21

22

23

24a

24b

24c

24d

25a

25b

26

27

28a

28b

28c

29

30

31

32

33

34

35a

35h

36

37

Yes

Form 990 (2017)

Yes

Yes

Yes

Nο Νo

Nο Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Nο

Νo

Nο

Check of Schedule O contains a response or note to any line in this Part V. 18. Einser the number reported in Box 3 of Form 1096 Enter-0- in not applicable 10 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	orm	990 (2017)			Page 5
Ensert the number reported in Box 3 of form 1096 Enter-0-if not applicable 1a 99	Par	t V Statements Regarding Other IRS Filings and Tax Compliance			
18. There the number recorded in Box 3 of form 1.056 Enter-0- into applicable 18 19 10 10 10 10 10 10 10		Check if Schedule O contains a response or note to any line in this Part V			
be finite the number of Forms W-2G anduded in line 1a Enter-O-P in oat applicable C particles of the company of				Yes	No
to the day compared non-comply with backing withholding rules for responsible payments to vendors and reportable garning (gambling) without provided the compared payment of the provided payment of					
(aganbling) winnings to prize winners? 2					
Tax statements, filed for the calendar year ending with or within the year covered by 2a 429 b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the unif of line 1 and 2 all is greater than 250, you may be required to effect eith instructions? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 3 a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over a financial account; or the authority such as a bank account, securities account, or other financial account; or the authority over a financial account; or the authority such as a bank account, securities account, or other financial account; or the authority over a financial account; or the authority such as a bank account, securities account, or other financial account; or the authority such as a bank account, securities account, or other financial account; or the authority such as a bank account, securities account, or other financial account; or the authority such as a bank account, securities account, or other financial account; or the authority such as a bank account, securities account, or other authority over a financial account; or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account, or other authority such as a bank account, securities account such as a such account account account accounts accounts accounts accounts accounts accounts accounts	С		1c	Yes	
b) If all least one is reported on line 2a, did the organization field all incurred federal employment tax returns? Note, if the sum of fines 1a and 2a signater than 130, you may be required to effice emistructions? 3a Did the organization have unrelated business gross income of \$1,000 or more during the year? 4a At any time during the calendar year, old the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 4a At any time during the calendar year, old the organization have an interest in, or a signature or other authority over, a financial account in a foreign country. 4a If "it'es," either the name of the foreign country. 5b If "it'es," the the name of the foreign country. 5c Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a Was the organization aparty to a prohibited tax shelter transaction at any time during the tax year? 5b If "it'es," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? 6b Does the organization nave annual gross receipts that are normally greeter than \$100,000, and did the organization self-tary contributions that were not tax deductible as charatale contributions? 6c Does the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 6c Organization start may receive deductible contributions under section \$70(c). 7c Organization that may receive a payment in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 7c Organization that may receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7d Organization receive a payment in excess of \$75 made partly as a contribution of the system of the payor and the payor? 7d If the organization receive a payment in ex	2a	Tax Statements, filed for the calendar year ending with or within the year covered by			
Note. If the sum of lines Is and 2 is greeter than 250, you may be recurred to effel (see instructions) 3a	L			Yes	
b If "Yes," has it field a Form 990-T for this year? If "No" to fine 3b, provide an explanation in Schedule C . 4. A ray time during the calendar year, dic the organization have an interest in, or a signature or other automotive ver, a financial account? (such as a flash account, sectives account, or other financial accounts?) 5. If "Yes," either the name of the foreign country See instructions for filing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . 5. If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? . 5. If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . 5. If "Yes," to line 5a or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? . 5. If "Yes," to line 5a or 5b, did the organization file Form 8886-T? . 5. If "Yes," to line 5a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were rot tax deductible as charitable contributions. 7. Organizations that may receive deductible contributions under section 170(c). 8. Did the organization necesive a payment in excess of \$75 made party as a contribution and party for goods and services provided to the piper? 7. Ves. If it was required to the piper? 7. Did the organization sell, exchange, or otherwise dispose of taniple personal property for which it was required to file Form 8282 filed during the year. 8. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7. The production of the piper? 7. Did the organization may be year, pay premiums, directly or indirectly, on a personal benefit contract? 7. The production of the propers of the propersonal propersonal propersonal propersonal propersonal propersona	U			103	
4a A arm time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securries account, or other financial account)? b If "res," enter the name of the fireign country b If "res," enter the name of the fireign country See instructions for filing requirements for FINCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) 5a Was the organization a party to a prohibited tax she ter transaction at any time during the tax year? 5a Was the organization as party to a prohibited tax she ter transaction at any time during the tax year? 5b 0 5c 1F"es," to line 5a or 5b, did the organization file Form 8866-T? 6a Does the organization hold the organization file Form 8866-T? 6b 1F"es," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible as dinartable contributions? 7 0 1F"es," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible. 7 0 1F"es," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible. 7 0 1F"es, "indications that may receive deductible contributions under section 170(c). 8 1F"es," did the organization necessor of the value of the goods or services provided? 9 1F"es," indicate the number of Forms 0282 filed during the year. 2 0 1F"es," indicate the number of Forms 0282 filed during the year. 9 1F"es," indicate the number of Forms 0282 filed during the year. 9 1 1F"es," indicate the number of Forms 0282 filed during the year. 9 1 1F"es, "indicate the number of Forms 0282 filed during the year. 9 1 1 1 1 1 1 1 1 1	3a	Did the organization have unrelated business gross income of $$1,000$ or more during the year?	3a		No
financial account; in a foreign country (auch as a bank account, secuntes account, or other financial account;) If "Ves," enter the name of the foreign country See instructions for filing requirements for FinEEN form 114, Report of Foreign Bank and Financial Accounts (FBAR) Sa	b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
See instructions for filling requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) Sa Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5a In the same of the s	4a		4a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? 5 If "Yes," to line 5a or 5b, did the organization file Form 886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions student were not tax deductible as charitable contributions? 5 If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7 If Yes," did the organization notify the donor of the value of the goods or services provided? 7 Did the organization on the payor? 8 Did the organization of Forms 8262 filed during the year. 9 Did the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file a Form 1986-C? 9 Did the organization make any taxable distributions under section 4966? 9 Did the organization make any taxable distributions under section 4966? 9 Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Did the sponsoring organizations included on Part VIII, line 12, for public use of club facilities 6 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 9 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10 Did Section 501(c)(2) qualified nonprofit health insurance issuers. 1 Is that on 6474(a)(1) none-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 10417 1 If the organization	b	If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)			
to If "Yes," to line 5a or 5b, did the organization file Form 8896-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solict any contributions that were not tax deductible as charitable contributions? 5c 5c 5c 5c 5c 5c 5c 5c	5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		No
to If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization by If "Yes," did the organization include with very solicitation an express statement that such contributions or gifts were not tax deductibles as charitable contributions? 7b If "Yes," did the organization receive deductible contributions under section 170(c). 8b Ut the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8b If "Yes," did the organization notify the donor of the value of the goods or services provided? 9c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form \$252? 9c Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 9c Did the organization during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9c Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9c Did the organization received a contribution of cars, boats, arrylanes, or other vehicles, did the organization file Form 8599 as required? 9c Did the sponsoring organizations maintaining donor advised funds. 9c Did the sponsoring organization make any taxable distributions under section 4966? 9c Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9c Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9c Did the sponsoring organizations. Enter a linitation fees and capital contributions included on Part VIII, line 12 10b Did the organization members or shareholders 11a	b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		No
be been been organization have annual gross receipts that are normally greater than \$100,000, and did the organization of the viction of the value on the substance of the payor? 7 Organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 8 Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 9 Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form \$282? 9 Did the organization of Forms \$282 filed during the year 9 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 9 If the organization received a contribution of qualified intellectual property, did the organization file Form \$899 as required? 10 Did the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1088 c.C. 9 Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the sponsoring organization make a distribution of the sponsoring organization full of the sponsoring organization in secure of the sponsoring organization	c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
solicit any contributions that were not tax deductible as charitable contributions? If "Yes," idd the organization include with every solicitation an express statement that such contributions or gifts were tax deductible? Organizations that may receive deductible contributions under section 170(c). Organizations that may receive deductible contributions under section 170(c). Organizations that may receive deductible contributions under section 170(c). If "Yes," idd the organization notify the donor of the value of the goods or services provided? If "Yes," indicate the number of Forms 8282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? If the organization make any taxable distributions under section 4966? Did the sponsoring organization make any taxable distributions under section 4966? Base of the sponsoring organization make any taxable distributions under section 4966? Section 501(c)(7) organizations. Enter Initiation fees and captal contributions included on Part VIII, line 12 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them 1). Section 501(c)(12) organizations. Enter Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them 1). Section 501(c)(12) organizations. Enter If "Yes," enter the amount of tax-exempt interest received or accrued during the year additional information			5c		
not tax deductible? 7 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7 If Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7 If Did the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7 If Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Sponsoring organization make any taxable distributions under section 4966? Did the sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 8 Did the sponsoring organization make any taxable distributions under section 4966? 9 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 8 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9 Did the Sponsoring organization section form 900 miles of form 1041? 10a	6a		6 a		No
Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services by 16 "Yes," did the organization notify the donor of the value of the goods or services provided? 7b Yes or Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year 7d		not tax deductible 7	6b		
b If "Yes," idd the organization notify the donor of the value of the goods or services provided? Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file form 8282? If "Yes," indicate the number of Forms 8282 filed during the year. Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To be the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To be the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To be the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? To be the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? Sponsoring organizations make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization make any taxable distributions under section 4966? Pau Did the sponsoring organization members or shareholder the section 501(c)(c) organ					
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year .	а		7a	Yes	
Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7f 7f 7f 7f 7f 7f 7f 7f 7			7b	Yes	
Put the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7e 1 Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7f 7f 7f 7f 7f 7g 1 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 7g 1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9a Did the sponsoring organization make any taxable distributions under section 4966? 9a 9b Did the sponsoring organization make any taxable distributions under section 4966? 9a 9b Did the sponsoring organization make any taxable distribution to a donor, donor advisor, or related person? 9b Organization fees and capital contributions included on Part VIII, line 12 10a 10b 10b 11c 10c 10b 11c 11c 10c 11d 10b 11d 11d 11d 11d 11d 11d		Form 8282?	7 c		No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	d	If "Yes," indicate the number of Forms 8282 filed during the year			
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? Th 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? B 2 Did the sponsoring organization make any taxable distributions under section 4966? D 2 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? D 3 Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? D 3 Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 D 3 Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities D 4 Gross income from members or shareholders B 5 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) D 6 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) D 6 Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) D 7 Did 10 Did	е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No
required? 7g 1 If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9a Did the sponsoring organization make any taxable distributions under section 4966? 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		No
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9a Did the sponsoring organization make any taxable distributions under section 4966? 9b Did the sponsoring organization make any taxable distributions under section 4966? 9c Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12 b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 1 In the organization licensed to issue qualified health plans in more than one state?Note. See the instructions for additional information the organization must report on Schedule O 1 In the organization is licensed to issue qualified health plans in more than one state?Note. See the instructions for additional information the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans c Enter the amount of reserves on hand c Enter the amount of reserves any payments for indoor tanning services during the tax year? 14a Did the organization receive any payments for indoor tanning services during the tax year?	g		7a		
Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form			
9a Did the sponsoring organization make any taxable distributions under section 4966?	8	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during	8		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9a	Did the sponsoring organization make any taxable distributions under section 4966?			
Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12		,			
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
a Gross income from members or shareholders	а	Initiation fees and capital contributions included on Part VIII, line 12 10a			
a Gross income from members or shareholders	b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11	Section 501(c)(12) organizations. Enter			
against amounts due or received from them)	а	Gross income from members or shareholders			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0 b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b				
13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule 0 b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans			12a		
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b				
additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
which the organization is licensed to issue qualified health plans		additional information the organization must report on Schedule O	13a		
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a		which the organization is licensed to issue qualified health plans			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b					No
Form 990 (b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O			0 (22:5

OHIII	990 (2	2017)					Page o
Par	t VI	Governance, Management, and Disclosure For each "Yes" response to lines 2 a 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Sched			o" respo	nse to l	ines
		Check if Schedule O contains a response or note to any line in this Part VI					✓
Se	ction	A. Governing Body and Management					
			_			Yes	No
1a	Enter	the number of voting members of the governing body at the end of the tax year	1a	53	3		
	body,	re are material differences in voting rights among members of the governing or if the governing body delegated broad authority to an executive committee or ir committee, explain in Schedule O					
b	Enter	the number of voting members included in line 1a, above, who are independent	1b	53	3		
2		ny officer, director, trustee, or key employee have a family relationship or a busine r, director, trustee, or key employee?	ss rela	ationship with any other	2		No
3		ne organization delegate control over management duties customarily performed b icers, directors or trustees, or key employees to a management company or other			n 3		No
4	Did th	ne organization make any significant changes to its governing documents since the	prior l	Form 990 was filed?	4		No
5	Did th	ne organization become aware during the year of a significant diversion of the orga	nızatıo	n's assets?	5		No
6	Did th	ne organization have members or stockholders?			6		No
7a		ne organization have members, stockholders, or other persons who had the power pers of the governing body?	to elec	t or appoint one or more	7a		No
b	Are a	ny governance decisions of the organization reserved to (or subject to approval by ns other than the governing body?) mem	bers, stockholders, or	7b		No
8		ne organization contemporaneously document the meetings held or written actions illowing	under	taken during the year by			
а	The g	overning body?			8a	Yes	
b	Each	committee with authority to act on behalf of the governing body?			8b	Yes	
9		ere any officer, director, trustee, or key employee listed in Part VII, Section A, who dization's mailing address? If "Yes," provide the names and addresses in Schedule C		t be reached at the	9		No
Se	ction	B. Policies (This Section B requests information about policies not requ	iired b	ov the Internal Revenu	ie Code	e.)	
		,		•		Yes	No
10a	Did th	ne organization have local chapters, branches, or affiliates?			10a		No
b		s," did the organization have written policies and procedures governing the activiti ranches to ensure their operations are consistent with the organization's exempt p			10b		
11a	Has tl	he organization provided a complete copy of this Form 990 to all members of its go	vernın •	ng body before filing the	11a	Yes	
b	Descr	ribe in Schedule O the process, if any, used by the organization to review this Form	990				
12a	Did th	ne organization have a written conflict of interest policy? If "No," go to line 13.			12a	Yes	
b	Were	officers, directors, or trustees, and key employees required to disclose annually in	terests	that could give rise to	12b	Yes	
С		ne organization regularly and consistently monitor and enforce compliance with the	policy	? If "Yes," describe in	12c	Yes	
13	Did th	ne organization have a written whistleblower policy?			13	Yes	
14		ne organization have a written document retention and destruction policy?			14	Yes	
15	Did th	ne process for determining compensation of the following persons include a review ns, comparability data, and contemporaneous substantiation of the deliberation an	and ap				
а	The o	rganization's CEO, Executive Director, or top management official			15a	Yes	
b	Other	officers or key employees of the organization			15b		No
	If "Ye	s" to line 15a or 15b, describe the process in Schedule O (see instructions)					
16a		ne organization invest in, contribute assets to, or participate in a joint venture or si le entity during the year?	mılar a	arrangement with a	16a		No
b	ın joir	s," did the organization follow a written policy or procedure requiring the organizat nt venture arrangements under applicable federal tax law, and take steps to safegus s with respect to such arrangements?	ard th				
_		<u> </u>			16b		
<u>5e</u> 17		C. Disclosure ne States with which a copy of this Form 990 is required to be filed▶					
- /	LISEU	PA					
18		on 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 99 ible for public inspection Indicate how you made these available. Check all that ap		990-T (501(c)(3)s only)			
19		Own website $oxtimes$ Another's website $oxtimes$ Upon request $oxtimes$ Other (explain in Sciber in Schedule O whether (and if so, how) the organization made its governing do		•			
20	policy State	, and financial statements available to the public during the tax year the name, address, and telephone number of the person who possesses the organ	ıızatıor	·			
		QUELINE VINCUNAS ONE WILD PLACE PITTSBURGH, PA 152061178 (412) 365-2					<u> </u>
						orm 99	0 (2017)

orm 990 (2	017)										Page 7
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	ıploy	ees	, Highest Comp	ensated Employ	rees,
	Check if Schedule O contains a	response or no	te to an	y line	ın t	his	Part V	Ι.			<u> </u>
Section	A. Officers, Directors, Tru	stees, Key E	mploy	ees	, an	d H	lighe	st C	Compensated En	nployees	
ear	e this table for all persons require										-
of compensa	of the organization's current off tion Enter -0- in columns (D), (E), and (F) if no	compe	nsatı	on v	vas į	paid			-	
	of the organization's current key		•								
vho received organization	organization's five current high d reportable compensation (Box and any related organizations	5 of Form W-2	and/or E	Зох 7	of F	orm	1099	-MIS	SC) of more than \$1	00,000 from the	
of reportable	of the organization's former office compensation from the organiz	ation and any r	elated o	rganı	zatı	ons	-				
List all operation	of the organization's former dire , more than \$10,000 of reportab	ectors or trust le compensation	ees that n from t	t rece the or	gan	l, ın ızatı	the ca	paci any	ty as a former direc v related organization	tor or trustee of the ons	9
	in the following order individua d employees, and former such p		ectors, i	ınstıtı	utior	nal t	rustee	s, of	ficers, key employe	es, highest	
☐ Check t	his box if neither the organizatio	n nor any relate	ed orgar	nizatio	on c	omp	ensate	d ar	ny current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per week (list any hours for related		ne b	ox, ι n of or/t	t che unles ficer rust	s pers and a ee)	on	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization and
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	related organizations
See Additiona	al Data Table										

Page **8**

	990 (2017)														Page 8
Part	t VIII Section A. Officers, Direc	tors, Trustees	, Key	Emp	loye	es,	and	High	hest Con	npens	ate	d Employee:	s (con	ntınued)	
	(A) Name and Title	(B) Average hours per week (list any hours for related	than c	one b	ox, t an off tor/t	t che unles ficer rust	,	son	Repo compe	n the ation (\	۸- l	(E) Reportable compensati from relate organizations 2/1099-MIS	ion ed ∈(W-	Estim amount of compen from	ated of other sation the
		organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1095	9-M13C	,	2/1099-MIS	,,,	organizal relai organiz	ed
See A	Addıtıonal Data Table														
				_	\vdash		_	_							
					\vdash										
				igspace	igdash										
				\vdash	\vdash	_	_	\vdash							
					\vdash										
	Sub-Total			•			 								
	Fotal (add lines 1b and 1c)	•		΄.	٠.	•	•		5	86,769			0		94,384
2	Total number of individuals (includin of reportable compensation from the			e list	ed a	bove	e) who	rece	eıved mor	e than	\$10	0,000			
3	Did the organization list any former line 1a? If "Yes," complete Schedule			:ee, k			oyee,	or hi	ghest com	npensa	ted (employee on		Yes	No
4	For any individual listed on line 1a, i organization and related organization individual	s the sum of rep	ortable (comp	ensa	ation	n and d					the	3		No
5	Did any person listed on line 1a rece services rendered to the organization									ion or	ndıv	dual for	4		
Se	ection B. Independent Contrac	, ,	ete stri	edule	: 5 10	<i>n</i> Su	———	15011	• • •		_	• • •	5	i	No
1	Complete this table for your five high from the organization Report compe												ompe	nsation	
	Name	(A) and business addre	255							D	escri	(B) ption of services	5	Compe	C) nsation
	ELL GAMES LLC								Ş			ERVICES			661,825
ITTS	WEST STATION SQUARE DR STE 200 SBURGH, PA 15219 SWOOD WELDING & FABRICATION INC								C	CONSTR	UCTI	ON			181,222
	SOUTH EDGEWOOD AVENUE ERSET, PA 15501														
ISLE	ER LANDSCAPES INC NEW CASTLE ROAD					-			L	ANDSC	APIN	G			141,618
ROSE	PECT, PA 16052 CONTRUCTION & EXCAVATION								C	CONSTR	UCTI	ON			130,990
	SPARTZ DRIVE SRSON, PA 15025														
	M DEVELOPMENT LLC DENNY EST									CONSTR	UCTI	ON			123,487
PITTS	SBURGH, PA 15238 Total number of independent contractors	ors (including but	not lim	uted i	to th	ose	listed	abov	ve) who re	eceived	mo	re than \$100	000 പ	f	

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 ▶ 6

Part \		I Statement of	Revenue										rage 3
		Check if Schedul		a respo	onse or i	note to any	y line in th	ıs Part VII	Ι				🗆
							(<i>A</i> Total re	١)	Reli ex fui	(B) ated or empt action venue	Un bu	(C) related siness venue	(D) Revenue excluded from tax under sections 512-514
(4)	12	a Federated campaig	ns	1a		48,228		l	10	venue	<u> </u>		J12 31+
unts	ı	b Membership dues		1 b		2,728,406							
Gra mo	,	c Fundraising events		1c		124,938							
fş. P. A.	,	d Related organizatio	ns	1d									
ii či	١,	e Government grants (co	ontributions)	1e		4,196,513							
ins,	1	f All other contributions,	, gıfts, grants,										
tributions, Gifts, Grants Other Similar Amounts		and similar amounts no above	ot included	1f		3,372,681							
Contributions, Giffs, Grants and Other Similar Amounts	,	g Noncash contribution in lines 1a-1f \$		1.0	27 664								
Cont and	 -	Total.Add lines 1a-1											
		i iotaliadu iiries 1a-1		• •		Busines		470,766					
IZ.	2-	ADMISSIONS				Dusines	900099	8 1	505,039	8 50	05,039		
- 12 - 12 - 12	_	VISITOR SERVICES					900099		792,254		92,254		
رد 1		EDUCATION					900099	1,0	029,148	1,0	29,148		
Service Revenue	d	1											
S E	е	· 		_									
Program	f	All other program se	rvice revenue				226 444						
Ě	g	Total. Add lines 2a-2f	·		>	11,	,326,441						
		Investment income (ii similar amounts)			ınterest,	and other		2,50	0				2,500
		Income from investme			ond prod	eeds l	<u> </u>	•					<u> </u>
	5	Royalties				. 1	▶[
			(ı) Rea	l	(11)	Personal							
	6a	(1) Rea			, ,								
	b	Less rental expenses		, 0			1						
	,	: Rental income or		22,018	1		-						
		(loss)											
	C	Net rental income o						22,01	8				22,018
	7a	Gross amount from sales of assets other than inventory	(ı) Securit	ies	(11)) Other							
		Less cost or other basis and sales expenses											
		Gain or (loss) Net gain or (loss)					\dashv						
		Gross income from fi		ents		<u> </u>							
Other Revenue		contributions reporte See Part IV, line 18				222,63	_						
ğ		Less direct expense: Net income or (loss)		b una ev		186,40	<u> </u>	36,23	5				36,235
the		Gross income from g			Terres :	• •	1		1				33,233
0		See Part IV, line 19		a									
	b	Less direct expense	s	a b			\dashv						
		: Net income or (loss)				· •							
	10	Gross sales of invent returns and allowand	cory, less	a									
	b	Less cost of goods s	sold	b									
-	C	Net income or (loss)		inven									
-	11	Miscellaneous	Revenue		Busir	ess Code	4						
	-11	.d											
	b												
			_										
	c												
	٠	All other revenue .			-				+		-		
		Total. Add lines 11a			L	•			+				+
		: Total revenue, See							+		+		+
								21,857,96	0	11,326,44	-1		0 60,753 Form 990 (2017)

Form 990 (2017)				Page 10
Part IX Statement of Functional Expenses				
Section $501(c)(3)$ and $501(c)(4)$ organizations must complete all c	_	·	. ,	
Check if Schedule O contains a response or note to any	y line in this Part IX			<u> ⊔</u>
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) Fundraisingexpenses
Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	58,500	58,500		
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, line 15 and 16	35,878	35,878		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	506,609	385,975	94,225	26,409
6 Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7 Other salaries and wages	7,260,248	5,834,985	1,084,302	340,961
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	601,326		601,326	
9 Other employee benefits	1,645,753	1,350,446	232,066	63,241
10 Payroll taxes	588,333	478,609	85,014	24,710
11 Fees for services (non-employees)				
a Management				
b Legal	4,496		4,496	
c Accounting	39,161		39,161	
d Lobbying	29,028		29,028	
e Professional fundraising services See Part IV, line 17	8,100			8,100
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0)	371,837	198,374	173,163	300
12 Advertising and promotion	703,753	702,686	521	546
13 Office expenses	1,118,832	843,181	262,542	13,109
14 Information technology				
15 Royalties				
16 Occupancy	1,833,347	1,815,522	17,414	411
17 Travel	127,289	77,091	48,812	1,386
18 Payments of travel or entertainment expenses for any federal, state, or local public officials •				
19 Conferences, conventions, and meetings				
20 Interest	34,378	5,263	29,115	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	3,046,476	3,021,504	14,983	9,989
23 Insurance	519,560	516,560	3,000	_
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 EXPENSES	567,705	567,705		
b DINO EXPENES	508,959	508,959		
c EQUIPMENT	281,857	178,472	98,502	4,883
d REFUSE EXPENSES	92,167	92,167		

261,352

20,244,944

137,262

16,809,139

107,928

2,925,598

16,162

510,207

Form **990** (2017)

e All other expenses

25 Total functional expenses. Add lines 1 through 24e

26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation

Check here ▶ ☐ If following SOP 98-2 (ASC 958-720)

14

15

16

17

18

19

20

21

23

24

26

27

28

29

30

31

32

33

34

Liabilities 22

Fund Balances

Assets or

Net

Intangible assets

Grants payable . .

Deferred revenue .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities . . .

persons Complete Part II of Schedule L .

and other liabilities not included on lines 17-24)

complete lines 27 through 29, and lines 33 and 34.

Organizations that do not follow SFAS 117 (ASC 958),

check here > \quad \text{and complete lines 30 through 34.}

Capital stock or trust principal, or current funds . . .

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Total liabilities. Add lines 17 through 25 .

Complete Part X of Schedule D

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

Total liabilities and net assets/fund balances

Unrestricted net assets

Total assets. Add lines 1 through 15 (must equal line 34) .

Escrow or custodial account liability Complete Part IV of Schedule D

key employees, highest compensated employees, and disqualified

Secured mortgages and notes payable to unrelated third parties Unsecured notes and loans payable to unrelated third parties .

Loans and other payables to current and former officers, directors, trustees,

Other liabilities (including federal income tax, payables to related third parties,

Organizations that follow SFAS 117 (ASC 958), check here ▶ ✓ and

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

29

30

31 32

33

34

68,029,773

1,895,110

625,000

3,700,252

6,220,362

59.973.911

1,781,010

61,809,411

68.029.773

54.490

Page **11**

66,405,301

1,390,081

1.592.793

2,982,874

62,178,052

1.189.885

63,422,427

66.405.301

Form **990** (2017)

54.490

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

		beginning or year		End of year
1	Cash-non-interest-bearing	36,216	1	37,144
2	Savings and temporary cash investments	1,123,325	2	372,832
3	Pledges and grants receivable, net	1,976,924	3	1,266,959

2	Savings and temporary cash investments	1,123,325	2	3/2,8
3	Pledges and grants receivable, net	1,976,924	3	1,266,9
4	Accounts receivable, net	8,766	4	
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	

	4	Accounts receivable, net	8,766	4	0
	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	
S	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	
ائِد	7	Notes and loans receivable net		7	

ts	6	Loans and other receivables from other disqualif section 4958(f)(1)), persons described in section contributing employers and sponsoring organizations (part II of Schedule L	n 4958 tions o	(c)(3)(B), and f section 501(c)(9)		6	
ادة	'	Notes and loans receivable, net					
Assets	8	Inventories for sale or use				8	
⋖	9	Prepaid expenses and deferred charges			183,218	9	153,826
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	95,734,659			
	h	Less accumulated depressation	10h	31 160 119	64 701 324	100	64 574 540

ets	7	Part II of Schedule L		, ,		7	
SS	8	Inventories for sale or use		•		8	
۷	9	Prepaid expenses and deferred charges			183,218	9	153,826
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	95,734,659			
	b	Less accumulated depreciation	10 b	31,160,119	64,701,324	10c	64,574,540
	11	Investments—publicly traded securities .				11	
	12	Investments—other securities See Part IV, line	: 11 .			12	
	13	Investments—program-related See Part IV, lin	e 11 .	•		13	

☐ Cash ☑ Accrual ☐ Other

☐ Both consolidated and separate basis

☐ Both consolidated and separate basis

If the organization changed its method of accounting from a prior year or checked "Other," explain in

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight

audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate basis,

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

1 Accounting method used to prepare the Form 990

separate basis, consolidated basis, or both

Schedule O

☐ Separate basis

consolidated basis, or both ✓ Separate basis

Yes

2a

2b

3b

Yes

Form 990 (2017)

No

Nο

of the audit, review, or compilation of its financial statements and selection of an independent accountant? 2c Yes If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O 3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133? 3a No

Additional Data

Software ID:

Software Version:

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Form 990 (2017)

Form 990, Part III, Line 4a:

PROGRAMS ALLOW PARTICIPANTS TO CLOSELY IDENTIFY WITH WILDLIFE, PLANTS, AND NATURAL HABITATS, PROVIDING A FIRM UNDERSTANDING OF THE INTERCONNECTEDNESS OF ALL LIVING THINGS ZOO PROGRAMS IMPACT MEMBERS OF THE COMMUNITY WHO VISIT THE ZOO. AND ALSO WHO CANNOT MAKE IT TO THE PARK ITSELF ZOOMOBILES MADE NUMEROUS APPEARANCES AT SCHOOLS, NURSING HOMES, COMMUNITY FAIRS, MALLS, OUTLETS, LIBRARIES, AND GROUP GATHERINGS TO PROMOTE THE ZOO'S MANY CONSERVATION-EDUCATION PROGRAMS PARTNERING WITH LOCAL VENDORS HAS ALLOWED THE ZOO TO OFFER MANY ASSEMBLY PROGRAMS FREE OF CHARGE AND CREATE MORE WAYS TO SERVE MORE STUDENTS OUR POPULAR ZOO CAMP SUMMER PROGRAM CONTINUES TO SET RECORD-BREAKING ATTENDANCE LEVELS FOR CHILDREN AGES 2 TO 13. AND THE ZOO IS COMMITTED TO PROVIDING SUPPORT FOR THE CONTINUED GROWTH OF THIS PROGRAM SINCE 1999. THE KIDSCIENCE PROGRAM HAS PROVIDED PITTSBURGH AREA MIDDLE-SCHOOL STUDENTS WITH ENRICHING EDUCATIONAL OPPORTUNITIES DESIGNED TO PROPEL FUTURE SCIENTISTS INTO THE FOREFRONT OF REAL ANIMAL BEHAVIOR RESEARCH, KIDSCIENCE STUDENTS HAVE HAD A REAL AND MEANINGFUL IMPACT ON MANY OF THE ZOO'S RESEARCH PROJECTS, INCLUDING THE WORK THAT LED TO THE BIRTH OF OUR ELEPHANT CALVES FINANCIAL CONSTRAINTS DO NOT IMPACT PARTICIPATION AND THE ZOO HAS AWARDED OVER 260 NEED-BASED SCHOLARSHIPS TO QUALIFIED STUDENTS SINCE ITS INCEPTION FOR MANY DECADES. THE ZOO TEEN PROGRAM HAS BEEN PROVIDING OPPORTUNITIES FOR TEENS AGES 14 TO 17 TO WORK AT THE ZOO DURING THE SUMMER AND LEARN MORE ABOUT ANIMALS WHILE GAINING THEIR FIRST WORK EXPERIENCES PROGRAMS SUCH AS PIZZA WITH THE KEEPERS INTRODUCE HIGH SCHOOL-AGED YOUTH TO WHAT WORKING AT A ZOO AND WITH ANIMALS IS REALLY LIKE. POTENTIALLY SPRING-BOARDING THEM INTO REWARDING LIFELONG CAREERS EDUCATION AT THE ZOO REACHES BEYOND WHAT CAN BE TAUGHT IN A CLASSROOM SETTING AS ONE OF THE LARGEST YOUTH EMPLOYERS IN THE REGION, THE ZOO WORKS WITH A HOST OF COMMUNITY PARTNERS AND LOCAL SCHOOLS TO PROVIDE AT-RISK YOUTH AN OPPORTUNITY TO GAIN FIRSTHAND KNOWLEDGE AND ON-THE-10B LEARNING IN VIABLE POSITIONS AT THE ZOO THE ZOO OFFERS INTERNSHIPS IN ALL AREAS OF THE FACILITY, INCLUDING THE MARKETING, ANIMAL HUSBANDRY, EDUCATION, CONSERVATION RESEARCH. VETERINARY, AND HORTICULTURE DEPARTMENTS THE ANIMAL HEALTH DEPARTMENT ALONE PROVIDED MORE THAN 3,120 HOURS OF TRAINING FOR THREE INTERNATIONAL STUDENTS AND NINE AMERICAN STUDENTS THROUGH INTERNSHIPS OUTSIDE OF FORMAL CLASSES, PROGRAMS, EMPLOYMENT, AND INTERNSHIPS, MEMBERS OF THE GENERAL PUBLIC ARE EDUCATED WITH EVERY VISIT TO THE ZOO WHETHER READING ON-GROUNDS SIGNAGE ABOUT THEIR FAVORITE ANIMALS, EXPLORING CONTENT IN THE ZOO'S APP. LEARNING MORE THROUGH THE ONE DEGREE OF CHANGE INITIATIVE THAT EDUCATES GUESTS ABOUT THE IMPACT OF THEIR ACTIONS ON THE ENVIRONMENT WHILE ENCOURAGING SMALL LIFESTYLE CHANGES, OR GAINING AWARENESS ABOUT GREEN PRACTICES THROUGH EXPOSURE TO WIND TURBINES, SOLAR PANELS, RAIN GARDENS, AND GREEN ROOFS, THE ZOO STRIVES TO ENRICH THE KNOWLEDGE OF EVERY VISITOR THROUGH ITS OFFERINGS

EDUCATIONANNUALLY, NEARLY 400,000 LEARNERS OF ALL AGES ENJOY THE ZOO'S POPULAR EDUCATION PROGRAMS, CLASSES, AND TEACHER WORKSHOPS. THESE

Form 990, Part III, Line 4b:

THE PROGRAM CONTINUES TO SUCCESSFULLY INCORPORATE LOCAL COMMUNITIES FOR LONG-TERM SUSTAINABILITY OF CRITICAL CONSERVATION EFFORTS. THE ZOO HAS PARTICIPATED IN AND FUNDED CONSERVATION RESEARCH PROGRAMS REGIONALLY, ON ALL SEVEN CONTINENTS, AND IN ALL FOUR OCEANS THE PPG CONSERVATION & SUSTAINABILITY FUND WAS ESTABLISHED THROUGH A PARTNERSHIP BETWEEN PPG INDUSTRIES AND THE ZOO. THIS FUND IS DESIGNED TO ADVANCE THE MISSION OF THE ZOO BY AWARDING GRANTS BETWEEN \$1,000 AND \$3,000 TO CONSERVATION-ORIENTED PROJECTS BOTH LOCALLY AND AROUND THE WORLD OVER THE PAST DECADE MORE THAN 160 PROJECTS IN 54 COUNTRIES AND TWO OCEANS HAVE RECEIVED GRANTS THROUGH THIS PROGRAM THERE'S MORE GOING ON AT THE PITTSBURGH ZOO & PPG AOUARIUM THAN MEETS THE EYE, ESPECIALLY WHEN IT COMES TO ANIMAL CONSERVATION. THE INTERNATIONAL

CONSERVATION & RESEARCHTHE PITTSBURGH ZOO & PPG AQUARIUM'S SCIENCE AND CONSERVATION PROGRAM LOOKS TO CONDUCT PROGRESSIVE AND INNOVATIVE PROJECTS WHILE ENGAGING AND SUPPORTING STAKEHOLDERS ON WILDLIFE CONSERVATION DIRECTIVES BY DEVELOPING NOVEL APPROACHES TO PRESSING ISSUES,

CONSERVATION CENTER, OFTEN REFERRED TO AS THE ICC, IS OPERATED UNDER THE AUSPICES OF THE ZOO IT SITS ON 1,000 ACRES OF ROLLING HILLS IN SOMERSET

COUNTY, PENNSYLVANIA. THE ICC IS NORTH AMERICA'S PREMIERE FACILITY FOR AFRICAN ELEPHANT CONSERVATION, EDUCATION, TRAINING, BREEDING, AND RESEARCH THROUGH THE SEA TURTLE SECOND CHANCE PROGRAM. THE ZOO ACCEPTS INJURED SEA TURTLES AND HATCHLINGS WHO DIDN'T MAKE IT INTO GULF STREAM WATERS AND CARES FOR THEM UNTIL THEY ARE HEALTHY ENOUGH TO BE RELEASED BACK INTO THE WILD THE ZOO IS AN IMPORTANT PARTICIPANT IN THIS PROGRAM BECAUSE IT IS AN INLAND INSTITUTION MOST OF THE AQUARIUMS PARTICIPATING IN THE STSCP ARE LOCATED ALONG THE COAST. WHICH ALLOWS THEM TO TAKE IN TURTLES WHO CAN MAKE A SPEEDY RECOVERY SOME HATCHLINGS AND INJURED TURTLES NEED LONG-TERM REHABILITATION THESE ANIMALS ARE TRANSPORTED TO THE PITTSBURGH ZOO & PPG AQUARIUM FOR THEIR EXTENDED RECOVERY TIME, FREEING UP SPACE FOR FASTER RECOVERING TURTLES AT THE INSTITUTIONS ALONG THE COAST AND ALLOWING MANY MORE TURTLES TO BE REHABILITATED IN THE PROGRAM. THROUGH EDUCATIONAL DISPLAYS AND MEET-THE-KEEPER SESSIONS, VISITORS HAVE THE OPPORTUNITY TO LEARN ABOUT SEA TURTLES, AND HOW THEY CAN IMPACT THEIR CARE AND SURVIVAL IN THE WILD SECORE

(SEXUAL CORAL REPRODUCTION) IS A GLOBAL NETWORK OF SCIENTISTS AND AQUARIUM PROFESSIONALS DEDICATED TO RESTORING AND CONSERVING CORAL REEF ECOSYSTEMS IN MEXICO. THE CARIBBEAN, AND THE PACIFIC OCEAN THROUGH RESEARCH AND EDUCATION, AMONG OTHER TASKS, A CRUCIAL COMPONENT OF THE NONPROFIT, COLLABORATIVE PROGRAM IS HELPING CORAL REPRODUCE. THEREBY ENSURING NEW POPULATIONS OF GENETICALLY DIVERSE CORAL JOIN THE EXISTING ECOSYSTEMS THE ZOO SUPPORTS SECORE SCIENTIFICALLY AND TECHNICALLY, AND PLAYS A KEY ROLE IN THE PHOTOGRAPHY AND VIDEOGRAPHY OF SECORE ACTIVITIES BEYOND SPECIES-SPECIFIC PROGRAMS, SEVERAL ZOO RESIDENTS OFFER VALUABLE OPPORTUNITIES FOR RESEARCH THAT CAN BE APPLIED TO THEIR WILD COUNTERPARTS COOLIO, A NORTHERN ELEPHANT SEAL, WAS FOUND BEACHED IN CALIFORNIA AND DEEMED TO BE UNRELEASABLE BY THE U.S. FISH AND WILDLIFE

SERVICE BECAUSE OF HIS INJURIES THE PITTSBURGH ZOO & PPG AOUARIUM REHABILITATES AND CARES FOR ANIMALS LIKE COOLIO. WHO HAPPENS TO BE THE ONLY NORTHERN ELEPHANT SEAL IN CAPTIVITY IN NORTH AMERICA, WHILE ALSO RESEARCHING THEIR BEHAVIOR THIS ALLOWS FOR VALUABLE INFORMATION TO BE COLLECTED THAT MAY NOT BE AVAILABLE THROUGH RESEARCH IN THE WILD ALONE THE ZOO'S OPERATIONS ALSO SUPPORT CONSERVATION. SINCE 1995, VOLUNTEERS FROM THE PITTSBURGH ZOO & PPG AOUARIUM HAVE ADOPTED TWO MILES OF BUTLER STREET FROM THE RD FLEMING BRIDGE TO SLIGHTLY BEYOND THE HIGHLAND PARK BRIDGE AS A RESULT OF EVERY SCHEDULED CLEANING, ZOO EMPLOYEES FILL APPROXIMATELY 50 TRASH BAGS WITH GARBAGE SUCH AS CIGARETTE BUTTS, SODA BOTTLES, AND FOOD WRAPPERS CLEANING THIS ROADWAY JUST TWICE EACH YEAR, WE REMOVE APPROXIMATELY 1 5 TONS OF TRASH THE PITTSBURGH ZOO & PPG

AQUARIUM'S GREEN TEAM COMMITTEE TAKES CONSERVATION AND ENVIRONMENTALLY FRIENDLY PRACTICES TO A NEW LEVEL. THE GREEN TEAM'S MISSION IS TO RESEARCH AND RECOMMEND HOW TO USE RESOURCES AND MANAGE WASTE EFFICIENTLY AND SUSTAINABLY WHILE OPERATING THE ZOO. THE TEAM STRIVES TO

CREATE A CULTURE OF CONSERVATION FOR ZOO STAFF AND FOR THE VISITING PUBLIC. IMPROVEMENTS MADE BY THE GREEN TEAM INCLUDE UPGRADING TO ALL GREEN CLEANING PRACTICES IN ZOO FACILITIES. ADVOCATING FOR ENERGY-EFFICIENT INFRASTRUCTURE AND GREEN BUILDING DESIGN. IMPLEMENTING ADDITIONAL COMPOSTING AND RECYCLING OPTIONS SUCH AS BIODEGRADABLE PLATES AND UTENSILS IN THE ZOO'S EATERIES. AND ESTABLISHING GREEN PARTNERSHIPS WITH

THE DAVID L LAWRENCE CONVENTION CENTER, PHIPPS CONSERVATORY AND BOTANICAL GARDENS, THE NATIONAL AVIARY, GREENSTAR RECYCLING COMPANY, PPG

PAINTS ARENA, AND THE CHILDREN'S MUSEUM OF PITTSBURGH AT THE ZOO, MOST OF THE ORGANIC WASTE IS RECYCLED INTO COMPOST AND USED IN LANDSCAPING

THROUGHOUT THE PARK THIS KEEPS THE WASTE OUT OF LANDFILLS SO THAT IT DOES NOT GENERATE CLIMATE-WARMING GASES AS IT WOULD IF IT WERE THROWN

PHONES WHETHER FUNDING OR PARTICIPATING IN PROJECTS IN THE WILD, CONDUCTING RESEARCH WITH OUR RESIDENT ANIMALS, OR IMPLEMENTING ECO-FRIENDLY

PROGRAM COMPLIMENTS OTHER RECYCLING PROGRAMS AT THE ZOO, INCLUDING WATER, CARDBOARD, BATTERIES, CANS, BOTTLES, PAPER, AND CELL

PRACTICES THAT MAKE AN ENVIRONMENTAL IMPACT, CONSERVATION AND RESEARCH IS AN ESSENTIAL PIECE OF EVERYTHING WE DO AT THE ZOO

AWAY WITH OTHER GARBAGE, AND IT ALSO HELPS US TO PLANT AND MAINTAIN A BEAUTIFUL LANDSCAPE THE COMPOST-ENRICHED SOIL REDUCES EROSION.

ALLEVIATES SOIL COMPACTION, PROVIDES NUTRIENTS THAT HELP PLANTS GROW, AND CONTROLS DISEASE AND PEST INFESTATION IN PLANTS THE COMPOSTING

Form 990, Part III, Line 4c: RECREATIONOPEN THROUGHOUT THE YEAR WITH THE EXCEPTIONS OF THANKSGIVING DAY, CHRISTMAS DAY, AND NEW YEAR'S DAY, THE ZOO HOSTS NUMEROUS EVENTS FOR COMMUNITY AND REGIONAL GROUPS WITH FULLY ADA-ACCESSIBLE FACILITIES, THE PROVISION OF OPEN SPACE FOR PUBLIC RECREATION, SEVERAL

EARTH, THE ZOO OFFERS SOMETHING SPECIAL FOR EVERY UNIQUE INTEREST OF EACH OF THE HUNDREDS OF THOUSANDS OF VISITORS FROM ALL BACKGROUNDS WHO ENJOY TRIPS TO THE ZOO ANNUALLY FOR EXAMPLE, 1,010,183 INDIVIDUALS VISITED THE ZOO IN 2017 TO INCREASE COMMUNITY INVOLVEMENT. HUNDREDS OF SPECIAL EVENTS AND PROMOTIONS GEARED TOWARDS THE GENERAL PUBLIC. FAMILIES, SPECIAL NEEDS GROUPS, COMMUNITY AND REGIONAL GROUPS, AND ZOO MEMBERS ARE CONDUCTED THROUGHOUT THE YEAR SPECIAL EVENTS HELD DURING THE DAYTIME AND EVENING ARE DESIGNED TO ENGAGE VISITORS OF VARYING

HISTORICALLY PRESERVED PUBLIC LANDMARKS, AND 9,000 ANIMALS REPRESENTING MORE THAN 900 SPECIES ALONG WITH FOLIAGE FROM EVERY CORNER OF THE

LEVELS AND INTERESTS THESE EVENTS INCLUDE DIVERSE THEMES SUCH AS NEW BABY CELEBRATIONS, ANIMAL-CENTRIC EVENTS THAT FOCUS ON INDIVIDUAL

FACILITATES WHILE EXPLORING NEW WAYS TO SUPPORT AND ENRICH THE COMMUNITY THAT IT SERVES AND OF WHICH IT IS AN ICONIC PART

SPECIES, A 5K RACE CALLED ZOOZILLA, ADULT-ONLY EVENING ENGAGEMENTS, AND HOLIDAY-THEMED EXTRAVAGANZAS SUCH AS A HALLOWEEN-THEMED EVENT CALLED ZOOBOO DREAM NIGHT, AN INVITE-ONLY SPECIAL EVENT, WAS STARTED IN 2006 THROUGH A PARTNERSHIP WITH CHILDREN'S HOSPITAL OF PITTSBURGH THIS EVENT INVITES CHILDREN WITH DISABILITIES AND CHRONIC HEALTHCARE NEEDS ALONG WITH THEIR FAMILIES ENJOY A PRIVATE ZOO VISIT AFTER HOURS FREE OF CHARGE THE ROBUST PLETHORA OF PROGRAMS CURRENTLY OFFERED IS EXPECTED TO CONTINUE AND GROW IN THE COMING YEARS IN ORDER TO ENSURE ACCESSIBILITY FOR

EVERYONE REGARDLESS OF FINANCIAL MEANS. THE ZOO DESIGNATES OPPORTUNITIES FOR FREE VISITS THROUGHOUT THE YEAR. INCLUDING A DAY WHERE ALL

VISITORS RECEIVE FREE ADMISSION THERE ARE VARIOUS OTHER SPECIAL PROMOTIONS OFFERING DISCOUNTED ADMISSION AS WELL MILITARY VETERANS. ACTIVE

DUTY MILITARY MEMBERS, AND RESERVISTS RECEIVE FREE ADMISSION EVERY DAY PHYSICALLY, MENTALLY, OR EMOTIONALLY CHALLENGED PERSONS ARE GRANTED FREE ADMISSION ANY TIME THROUGHOUT THE YEAR, AS ARE GROUPS SERVING THE DISADVANTAGED, WHICH RECEIVE FREE ADMISSION THROUGH OUR SCHOLARSHIP

PROGRAM THE ZOO DONATES A SUBSTANTIAL PORTION OF ITS SERVICES TO BENEFIT THE LOCAL AND REGIONAL COMMUNITY, WHERE THE VAST MAJORITY OF ITS

VISITORS RESIDE OPERATIONS ARE ENTIRELY FREE FROM PROFIT MOTIVE, WHICH ALLOWS THE ZOO TO CONTINUE TO EXPAND THE POSITIVE INITIATIVES IT

(A) (D) (B) (C) (E) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated than one box, unless compensation hours per compensation amount of other person is both an officer from related week (list from the compensation

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours				ustee)		organization	organizations	from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
LEONARD F BACH DIRECTOR	0 50	x					0	0	0	
JOSEPH BAILEY DIRECTOR	0 50	х					0	0	0	
COURTNEY B BORNTRAEGER DIRECTOR (EXITED 1/17)	0 50	x					0	0	0	
GLENN E BOST II DIRECTOR	0 50	х					0	0	0	
DOROTHY BOYER	0 50									

0

0

0

0

Х

Χ

Χ

Х

Х

Х

0 50

0 50

0 50

0 50

0 50

......

......

......

COOKTHET B BOKKTKAEGEK
DIRECTOR (EXITED 1/17)
GLENN E BOST II
DIRECTOR
DOROTHY BOYER

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

LOUISE R BROWN

HOWARD BRUSCHI

ROSALIND CHOW

G HENRY COOK

KENNETH P CHENG MD

DIRECTOR (ENTERED 11/17)

DIRECTOR (EXITED 5/17)

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other week (list person is both an officer from the from related compensation any hours and a director/trustee) organization organizations from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any nours	l and	a dir	ecto		ustee)	organization	organizations	from the	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JACK DEMOS DIRECTOR	0 50	х						0	0	0	
LINDA DICKERSON DIRECTOR	0 50	х						0	0	0	
COLETTE DUGAN DIRECTOR	0 50	x						0	0	0	
JOAN ELLENBOGEN DIRECTOR	0 50	x						0	0	0	
BEVERLYNN ELLIOTT	0 50										

0

0

0

0

0

0

0

0

Х

Χ

Х

Х

Х

Х

0 50

0 50

0 50

0 50

0 50

......

......

......

DIRECTOR
JOAN ELLENBOGEN
DIRECTOR
BEVERLYNN ELLIOTT
DIRECTOR
WILLIAM FALLON

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DEBORAH GROSS

DAVID GRUBMAN

KAREN ROCHE GALEY

..........

DEBORAH BERGREN GARLOCK

(A) (D) (E) (B) (C) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated amount of other than one box, unless compensation hours per compensation person is both an officer week (list from the from related compensation any hours and a director/trustee) from the

organization

0

0

0

0

organizations

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

		""	and a an ector, trastee,			′	01941112441011	(14/ 3/4 300	overnment and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	ee voldme Highest compensated	Former	(W- 2/1099- MISC)	(Ŵ- 2/1099- MISC)	organization and related organizations
ANDREW W HASLEY DIRECTOR	0 50	x						0	0	0
AMANDA GREEN HAWKINS DIRECTOR	0 50	x						0	0	0
FRANK HORRIGAN DIRECTOR	0 50	x						0	0	0
DONNA K HUDSON DIRECTOR	0 50	x						0	0	0

0 50

0 50

0 50

0 50

0 50

0 50

......

......

Х

Χ

Х

Х

Х

Х

DIRECTOR
DONNA K HUDSON
DIRECTOR
SUSAN JACKSON
DIRECTOR (EXITED 9/17)

JULIUS JONES

RICHARD D KALSON ESQ

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JUSTIN KAUFMAN

ROBERT KRIZNER

REBECCA P KEEVICAN

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours		a dir	recto		ustee))	organization	organizations	from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
THOMAS M KUBLACK DIRECTOR	0 50	×						0	0	0
MICHAEL C LAROCCO DIRECTOR	0 50	x						0	0	0
KENNETH C MCCRORY DIRECTOR	0 50	x						0	0	0
KRISTINE MCGINLEY DIRECTOR	0 50	х						0	0	0

PEGGY MCKNIGHT DIRECTOR

......

JOHN MICLOT

JENNIFER TIS MIHOK

HENRY MORDOH

RYAN NEUPAVER

DAVID NEWELL

DIRECTOR (ENTERED 11/17)

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

and Independent Contractors

0 50

0 50

0 50

0 50

0 50

0 50

......

Х

Χ

Х

Х

Х

Х

0

0

......

......

(A) (D) (E) (B) (C) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation hours per compensation amount of other person is both an officer week (list from the from related compensation from the

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	any hours	and	. a dir	ecto		rustee)		organization	organizations	from the	
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JOHN T PAYNE DIRECTOR	0 50	1 1						0	0	0	
MAYOR WILLIAM PEDUTO DIRECTOR	0 50	1 1						0	0	0	
DIANA MRVOS RATH DIRECTOR	0 50	1 1						0	0	0	
J ERIC RENNER DIRECTOR	0 50							0	0	0	
DONALD E RHOTEN	0 50						\Box				

0

0

ol

0

0

.....

......

......

......

......

0 50

0 50

0 50

0 50

0 50

Х

Χ

Х

Х

Х

Х

DIRECTOR
J ERIC RENNER
DIRECTOR
DONALD E RHOTEN
DIRECTOR

......

CINDY DEAR RUSSELL

SARA SCAIFE

JANEL SKELLEY

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR (EXITED 2/17)

MORTON D STANFIELD JR

DOUGLAS STIRLING

(A) (D) (B) (C) (E) (F) Name and Title Position (do not check more Reportable Reportable Estimated Average than one box, unless compensation amount of other hours per compensation person is both an officer week (list from the from related compensation

and a director/trustee)

organization

0

331,960

102,339

152,470

0

0

0

0

41,550

29,112

23,722

organizations

from the

any hours

2 00

2 00

2 00

40 00

40 00

40 00

......

......

Х

Χ

Х

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees,

	£							/14/ 3/4000	(14/ 2/1000	avanniantion and	
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	10	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
BECKY TORBIN DIRECTOR	0 50	×						0	0	0	
SALLY WIGGIN DIRECTOR	0 50	х						0	0	0	
ROBERT T WOODINGS III DIRECTOR	0 50	x						0	0	0	
EDWARD GONCZ	4 00	x		х				0	0	0	

Χ

Χ

Х

Χ

Х

Х

CHAIR
STUART T WISE
VICE CHAIR
GREGORY A WEINGART
TREASURER

......

JEANNE MINNICKS

BARBARA BAKER

PRESIDENT/CEO

BRADLEY SMITH

JACQUELINE VINCUNAS

CHIEF FINANCIAL OFFICER

DIRECTOR OF CONSTRUCTION MGMT

SECRETARY

...........

efil	e GR/	APHIC pri	nt - DO NO	T PROCESS	As Filed Data -			DLN: 9:	3493310022328
SCI	H ED m 990	ULE A		Public (Charity Staturganization is a sect	ion 501(c)(3) d	organization or	ort	2017
Depart	lment of	the Treasury	▶ Infe	ormation abou	► Attach to Form to Schedule A (Form	990 or Form 99	0-EZ.	ictions is at	Open to Public Inspection
Nam	e of th	he organiza . SOCIETY OF F						Employer identific	ation number
					4.24			25-1418766	
	rt I				us (All organization : it is (For lines 1 thro			see instructions.	
1			•		sociation of churches	5 ,	,	(Δ)(i).	
2		•		•	1)(A)(ii). (Attach Sch				
3						•	• •		
_		·	•	·	vice organization desc			•	
4	Ш		esearch orga and state _	nization operate	ed in conjunction with	a hospital descri	bed in section :	170(b)(1)(A)(III). E	nter the hospital's
5		(b)(1)(A)	(iv). (Comple	ete Part II)	t of a college or unive				ped in section 170
6		A federal, s	tate, or local	government or	governmental unit de	scribed in sectio	on 170(b)(1)(A	()(v).	
7	\checkmark	_		mally receives (vi). (Complete	a substantial part of it Part II)	s support from a	governmental u	init or from the genera	al public described in
8		A communi	ty trust desc	ribed in section	170(b)(1)(A)(vi)	(Complete Part I	I)		
9					escribed in 170(b)(1) ee instructions Enter				ege or university or a
10		from activit	ies related to income and	its exempt fun unrelated busin	(1) more than 331/39 ctions—subject to cer ess taxable income (lemplete Part III)	taın exceptions, a	and (2) no more	than 331/3% of its su	
11		An organiza	ation organize	ed and operated	d exclusively to test fo	r public safety S	ee section 509	(a)(4).	
12		more public	ly supported	organizations of	d exclusively for the be described in section 5 the type of supporting	09(a)(1) or se d	ction 509(a)(2). See section 509(a	e purposes of one or)(3). Check the box
а		Type I. A so	supporting or n(s) the pow	ganızatıon oper	ated, supervised, or componit or elect a major	ontrolled by its s	upported organiz	zation(s), typically by	
b		Type II. A manageme	supporting on t of the sup	rganization sup	ervised or controlled i				
С		Type III f	unctionally i	integrated. A s	supporting organizatio ons) You must com				ted with, its
d		Type III n functionally	on-function integrated	ally integrated The organization	d. A supporting organi n generally must satis t IV, Sections A and	ization operated fy a distribution i	in connection wi requirement and	th its supported orgar	
e		Check this	box if the org	anızatıon receiv	ved a written determir	nation from the II		pe I, Type II, Type II	I functionally
f	Enter			ion-functionally l organizations	integrated supporting	organization			
g				_	ipported organization(5)			
		Name of supp organization	orted	(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 other support (see instructions) instructions			(vi) Amount of other support (see instructions)
						Yes	No		
Tota	l		tion Act Not					 Schedule A (Form 9	

Page 2

III If the organization fails to qualify under the tests listed below, please complete Part III.)

	III. II the organization is	ans to quanty un	der the tests ha	ted below, pieds	e complete rait	111./		
S	ection A. Public Support							
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2	2017	(f) Total
	(or fiscal year beginning in) ▶	· · · · · · · · · · · · · · · · · · ·	(-7	(-,	(-,			(-,
1	Gifts, grants, contributions, and membership fees received (Do not	8,775,377	12,017,893	14,817,539	17,265,819	1	0,470,766	63,347,39
	include any "unusual grant ")	0,773,377	12,017,693	14,017,339	17,203,819	1	3,470,700	03,347,33
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	1	1	1	1		1	
	the organization without charge							
4	Total. Add lines 1 through 3	8,775,378	12,017,894	14,817,540	17,265,820	1	0,470,767	63,347,39
5	The portion of total contributions by							
	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							15,481,30
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
5	Public support. Subtract line 5							47,866,09
_	from line 4							
3	Section B. Total Support Calendar year	Г	T	1	1			
	(or fiscal year beginning in) ▶	(a)2013	(b) 2014	(c)2015	(d) 2016	(e)2	2017	(f) Total
7	Amounts from line 4	8,775,378	12,017,894	14,817,540	17,265,820	1	0,470,767	63,347,39
8	Gross income from interest,		,,	- 1, 1, - 1 - 1			-,,.	//
•	dividends, payments received on	12.000	12.076	20.242	22.707		24.540	04.47
	securities loans, rents, royalties and	13,969	12,876	20,313	22,797		24,518	94,47
	income from similar sources							
9	Net income from unrelated business							
	activities, whether or not the							
	business is regularly carried on						\longrightarrow	
10	Other income Do not include gain or loss from the sale of capital							
	assets (Explain in Part VI)							
11								
	10					_		63,441,87
	Gross receipts from related activities,					12		47,110,59
13	First five years. If the Form 990 is for	-			•			nization,
	check this box and stop here						<u>▶⊔</u>	
	ection C. Computation of Publi							
	Public support percentage for 2017 (III			column (f))		14		75 450 %
	Public support percentage for 2016 Sc	·				15		77 710 %
16a	33 1/3% support test—2017. If the	e organization did r	not check the box	on line 13, and line	e 14 is 33 1/3% or	more, c	heck this b	_
	and stop here. The organization qual							▶ ✓
b	33 1/3% support test—2016. If th	ie organization did	not check a box o	n line 13 or 16a, a	and line 15 is 33 1/	′3% or m	nore, check	this
	box and stop here. The organization							▶□
17a	10%-facts-and-circumstances tes							
	is 10% or more, and if the organization							
	in Part VI how the organization meets	the "facts-and-cire	cumstances" test	The organization of	qualifies as a publi	cly supp	orted	_
	organization							▶□
b	10%-facts-and-circumstances tes	st—2016. If the or	rganization did not	check a box on li	ne 13, 16a, 16b, o	r 17a, aı	nd line	
	15 is 10% or more, and if the organiz	zation meets the "f	iacis-and-circumst	arices test, check	. unis pox and sto j	nere.		

ightharpoonssupported organization 18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions Schedule A (Form 990 or 990-EZ) 2017

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

Р	Support Schedule for						
	(Complete only if you cl the organization fails to						er Part II. If
Se	ection A. Public Support	quality under t	ine tests listed i	below, please co	ompiete Part II.,)	
	Calendar year	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
_	(or fiscal year beginning in) ▶	(a) 2013	(0) 2014	(6) 2015	(4) 2016	(e) 2017	(I) Iotai
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						
4	under section 513 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						
	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						
	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
S	from line 6) ection B. Total Support						
	Calendar year						
	(or fiscal year beginning in) ▶	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9							
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar sources						
ь	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						
12	regularly carried on Other income Do not include gain or						
12	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c,						
14	11, and 12) First five years. If the Form 990 is for	l r the organization	l 's first, second, th	L urd, fourth, or fift	l lax vear as a sec	ction 501(c)(3) o	l rganization.
	check this box and stop here			,,	,		▶ □
Se	ection C. Computation of Public S	Support Perce	ntage				
15	Public support percentage for 2017 (lin			column (f))		15	
16	Public support percentage from 2016 S	chedule A, Part II	II, line 15			16	
Se	ction D. Computation of Investr	nent Income	Percentage				
17	Investment income percentage for 201	7 (line 10c, colur	nn (f) divided by	lıne 13, column (f	·))	17	
18	Investment income percentage from 20	016 Schedule A, I	Part III, line 17			18	
	331/3% support tests—2017. If the	organization did n	ot check the box	on line 14, and lir	ne 15 is more than		e 17 is not
	more than 33 1/3%, check this box and s						ightharpoons
	33 1/3% support tests—2016. If the						. —
_	not more than 33 1/3%, check this box	-			· ·		ightharpoons
20	Private foundation. If the organization	-	-				ightharpoons

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

5b

5c

7

9a

9b

9с

10a

10b

Schedule A (Form 990 or 990-EZ) 2017

No

1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose,			
	describe the designation If historic and continuing relationship, explain	1	İ	
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509 (a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)			
	In Section 309(a)(1) or (2)			
3а	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c)			
	below	3a	İ	
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the			
	determination	3b		

b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the	·			
	determination				
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes?				
	If "Yes," explain in Part VI what controls the organization put in place to ensure such use				
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below				
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				

				3.
c	Did the organization ensure that all support to such organizations was used exclusively for section $170(c)(2)(B)$ purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use	-		
		3с		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you			
	checked 12a or 12b in Part I, answer (b) and (c) below			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported			
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or		$\overline{}$	
	supervised by or in connection with its supported organizations			
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections			
	501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support			
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes	4c	$\overline{}$	
	to the foleigh supported organization has ased exclusively for section 170(e)(2) purposes			
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and			

			, ,		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you				
	checked 12a or 12b in Part I, answer (b) and (c) below	4a			
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported				
	organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations				
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support				
	to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes				
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (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)				

6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyon han (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of it supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing				
	organization's supported organizations? If "Yes," provide detail in Part VI.				
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a				
	substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)				

Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the

Substitutions only. Was the substitution the result of an event beyond the organization's control?

which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

organization's organizing document?

provide detail in Part VI.

answer line 10b below

10a

organization had an interest? If "Yes," provide detail in Part VI.

the organization had excess business holdings)

8	Old the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"		
	complete Part I of Schedule L (Form 990 or 990-EZ)	8	
9 a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"		

Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting

Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in

Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

Pa	rt IV Supporting Organizations (continued)			-9	
			Yes	No	
11	Has the organization accepted a gift or contribution from any of the following persons?				
а	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a			
b	A family member of a person described in (a) above?	11b			
	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			
	ection 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			
5	ection C. Type II Supporting Organizations				
	cetion c. Type 11 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			
S	ection D. All Type III Supporting Organizations				
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?		Yes	No	
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			
s	ection 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 instruct The organization satisfied the Activities Test. Complete line 2 below The organization is the parent of each of its supported organizations. Complete line 3 below The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see		ctions)		
2	Activities Test Answer (a) and (b) below.		Yes	No	
	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? <i>Provide details in Part VI</i> .	3a			
	b Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? <i>If "Yes," describe in Part VI.</i> the role played by the organization in this regard	3b			

Schedule A (Form 990 or 990-EZ) 2017

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations 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 (A) Prior Year (B) Current Year Section A - Adjusted Net Income (optional)

Page 6

Schedule A (Form 990 or 990-F7) 2017

1 Net short-term capital gain 1 Recoveries of prior-year distributions 2 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3 Depreciation and depletion 5 5 Portion of operating expenses paid or incurred for production or collection of gross 6 income or for management, conservation, or maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions)

Adjusted Net Income (subtract lines 5, 6 and 7 from line 4) 8 (A) Prior Year (B) Current Year Section B - Minimum Asset Amount (optional) Aggregate fair market value of all non-exempt-use assets (see instructions for short 1 tax year or assets held for part of year) a Average monthly value of securities 1a **b** Average monthly cash balances **1**b c Fair market value of other non-exempt-use assets 1c 1d d Total (add lines 1a, 1b, and 1c) e Discount claimed for blockage or other factors (explain in detail in Part VI)

2 2 Acquisition indebtedness applicable to non-exempt use assets 3 Subtract line 2 from line 1d 3 Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see 4 instructions) 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 6 6 Multiply line 5 by 035 7 Recoveries of prior-year distributions 7 Minimum Asset Amount (add line 7 to line 6) 8 8

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

2 4 5 Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions)

3	Administrative expenses paid to accomplish exempt purposes of supported organizations	<u> </u>
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 2017 from Section C, line 6	
10	Line 8 amount divided by Line 9 amount	

8	Distributions to attentive supported organizations to wh details in Part VI) See instructions			
9	Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			

details in Part VI) See instructions						
(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017				
	(i)	(i) (ii) Underdistributions				

9 Distributable amount for 2017 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-2017	(iii) Distributable Amount for 2017
Distributable amount for 2017 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2017 (reasonable cause required explain in Part VI) See instructions			
3 Excess distributions carryover, if any, to 2017			
a			
b From 2013			
c From 2014			
d From 2015			

e From 2016. f Total of lines 3a through e

instructions)

g Applied to underdistributions of prior years h Applied to 2017 distributable amount i Carryover from 2012 not applied (see

j Remainder Subtract lines 3g, 3h, and 3i from 3f 4 Distributions for 2017 from Section D, line 7

a Applied to underdistributions of prior years

c Excess from 2015. d Excess from 2016. e Excess from 2017.

b Applied to 2017 distributable amount		
c Remainder Subtract lines 4a and 4b from 4		
5 Remaining underdistributions for years prior to 2017, if any Subtract lines 3g and 4a from line 2 If the amount is greater than zero, explain in Part VI See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		
7 Excess distributions carryover to 2018. Add lines		

See instructions		
6 Remaining underdistributions for 2017 Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		
7 Excess distributions carryover to 2018. Add lines 3 ₁ and 4c		
8 Breakdown of line 7		
a Excess from 2013		
b Excess from 2014		

Schedule A (Form 990 or 990-EZ) (2017)

Additional Data

Software ID: Software Version:

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Schedule A (Form 990 or 990-EZ) 2017

Page 8

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

instruct	ons)		
		Facts And Circumstances Test	

SCHEDULE C

• Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

Political Campaign and Lobbying Activities

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

OMB No 1545-0047

DLN: 93493310022328

Open to Public

Department of the Treasury Internal Revenue Service

EZ)

(Form 990 or 990-

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

Inspection

		527 organizations Complet							
			n Form 990, Part IV, Line 4, or Form 9 have filed Form 5768 (election under s)
			have NOT filed Form 5768 (election under s						
f the	e organ	iization answered "Yes" or	n Form 990, Part IV, Line 5 (Proxy Tax						
		(see separate instructions							
		501(c)(4), (5), or (6) organiz	ations Complete Part III			Employer id	enti	fication num	her
		L SOCIETY OF PITTSBURGH					Citti	neacion nun	ibei
_						25-1418766			
Par	t I-A		nization is exempt under sectio						
1		de a description of the organ ical campaign activities")	ızatıon's dırect and ındırect political cam	npaign activities in	n Part IV (s	see instruction	s for	definition of	
2	Politic	al campaign activity expend	itures (see instructions)			>	\$		
3		teer hours for political camp	aign activities (see instructions)						
Par	t I-B	Complete if the organ	nization is exempt under sectio	n 501(c)(3).					
1	Enter	the amount of any excise ta	x incurred by the organization under se	ction 4955		>	\$		
2	Enter	the amount of any excise ta	x incurred by organization managers ur	nder section 4955		>	\$		
3	If the	organization incurred a sect	ion 4955 tax, did it file Form 4720 for t	his year?				☐ Yes	□ No
4a		a correction made?						☐ Yes	□ No
		s," describe in Part IV				=047.37			
		-	nization is exempt under sectio						
1			ed by the filing organization for section	•			\$		
2		the amount of the filing orgon on activities	anızatıon's funds contributed to other o	rganızatıons for se	ection 527	exempt ▶	\$		
3	Total	exempt function expenditure	es Add lines 1 and 2 Enter here and or	Form 1120-POL,	lıne 17b	>	\$		
4	Did th	ne filing organization file For	m 1120-POL for this year?					☐ Yes	□ No
5	organ of pol	ization made payments For itical contributions received	employer identification number (EIN) of each organization listed, enter the amo that were promptly and directly delivere te (PAC) If additional space is needed,	ount paid from the ed to a separate p	filing orga olitical org	anızatıon's fun anızatıon, suc	ds A	Also enter the	
		(a) Name	(b) Address	(c) EIN	filing	ount paid from organization's If none, enter -0-		(e) Amount of contributions and promp directly delived separate programments or an enter-	received tly and ered to a political If none,
L									
2									
3									
1									
5									
5									
or D	anerwo	rk Reduction Act Notice see t	he instructions for Form 990 or 990-F7.		No. 500949	Schodule (C (Ea	rm 000 or 000	LE7\ 2017

1,000,000

29,028

250,000

2a

Lobbying nontaxable amount

(150% of line 2a, column(e))

Total lobbying expenditures

Grassroots ceiling amount

Grassroots nontaxable amount

(150% of line 2d, column (e))

Grassroots lobbying expenditures

Lobbying ceiling amount

1,000,000

29,125

250,000

1,000,000

29,028

250,000

1,000,000

29,028

250,000

Schedule C (Form 990 or 990-EZ) 2017

4,000,000

6,000,000

116,209

1,000,000

1,500,000

activity

Part IV

PART II-A LINE 1B

Return Reference

1

(b)

Amount

(a)

No

Yes

•	including any attempt to influence public opinion on a legislative matter or referendum, through the use of				
а	Volunteers?				
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
С	Media advertisements?				
d	Mailings to members, legislators, or the public?				
е	Publications, or published or broadcast statements?				
f	Grants to other organizations for lobbying purposes?				
g	Direct contact with legislators, their staffs, government officials, or a legislative body?				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
i	Other activities?				
j	Total Add lines 1c through 1i				
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
Ь	If "Yes," enter the amount of any tax incurred under section 4912				
С	If "Yes," enter the amount of any tax incurred by organization managers under section 4912				
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c) 501(c)(6).	(5), o	r sectio		
1	Were substantially all (90% or more) dues received nondeductible by members?			Yes	No
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 expenditures from the prior year?		3	3	<u> </u>
Par	Complete if the organization is exempt under section 501(c)(4), section 501(c) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part answered "Yes."				c)(6)
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).				
а	Current year	2a			
b	Carryover from last year	2b			
С	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			
		<u> </u>			

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

Explanation

THE ZOO ENGAGED LONG NYQUIST FOR REPRESENATION IN HARRISBURG AS PART OF AN AGREEMENT WITH THE PA ZOO COUNCIL NYQUIST PROVIDES ASSISTANCE WITH STATE GOVENMENT FUNDING

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

Taxable amount of lobbying and political expenditures (see instructions)

instructions), and Part II-B, line 1 Also, complete this part for any additional information

THROUGH DCED

Supplemental Information

During the year, did the filing organization attempt to influence foreign, national, state or local legislation,

5

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -SCHEDULE D

Supplemental Financial Statements

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

DLN: 93493310022328 OMB No 1545-0047

Inspection

(Form 990)

Open to Public ▶ Attach to Form 990. Department of the Treasury Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990. Internal Revenue Service Name of the organization **Employer identification number** ZOOLOGICAL SOCIETY OF PITTSBURGH 25-1418766 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 2 Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? 🗌 Yes 🗌 No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e g , recreation or education) Preservation of an historically important land area ☑ Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements Total acreage restricted by conservation easements 2b 724 00 Number of conservation easements on a certified historic structure included in (a) 2c 0 Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🕨 Number of states where property subject to conservation easement is located > 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(II)? In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the

For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 52283D Schedule D (Form 990) 2017

following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Par	t III	Organizations M	aintaining Col	ections o	f Art, Hi	istori	cal T	reası	ıres, o	r Other :	Similar A	ssets (con	tınued)	
3		g the organization's acq is (check all that apply)	uisition, accessior	, and other	records, o	check a	any of	the fo	llowing t	hat are a	significant	use of its co	llection	
а	✓	Public exhibition				d	✓			ange prog				
b	✓	Scholarly research				е	✓	Othe	r CONS	ERVATION	I			
С		Preservation for future	e generations											
4	Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII													
5		ng the year, did the org ts to be sold to raise fur									ılar	☐ Yes	 N	lo
Pa	rt IV	Escrow and Cust Complete if the ori X, line 21.			" on Forn	n 990	, Part	IV, lı	ne 9, o	r reporte	d an amo	unt on For	m 990,	Part
1a		ne organization an agent ided on Form 990, Part		an or other I	intermedia	ary for	contri	bution	s or othe	er assets i	not	Yes	□ N	lo
ь	If "Y	es," explain the arrange	ement in Part XIII	and comple	te the foll	owing	table				Δ	mount		_
c		nning balance								1c				_
d	_	tions during the year								1d				_
е	Dıstı	ributions during the year	r							1e				_
f	Endi	ng balance								1f				_
2 a		the organization include	an amount on Fo	rm 990, Par	t X, line 2	1, for	escrow	or cu	istodial a	ccount lia	ıbılıty?	☐ Yes	N	_ a
b	If "Y	es," explain the arrange												
Pa	irt V	Endowment Fun	ds. Complete ıf											
1-	Rogin	ning of year balance		(a)Curren	t year 54,490	(b) Pr	rior yea	r 1,490	(c) Two y	ears back 54,490	(d)Three ye	ars back (e 54,490)Four yea	rs back 54,490
	-	ning of year balance .			34,490		عد	1,490		34,490		34,490		34,490
		ibutions												
		ivestment earnings, gair												
		s or scholarships						_						
	and p	expenditures for facilities rograms	es											
		nistrative expenses .			E4.400		-	1 400		F4 400		F4 400		
g		f year balance			54,490			1,490		54,490		54,490		54,490
2		ride the estimated perce	-	•	balance (line 1g	g, colu	mn (a)) held a	S				
а		d designated or quasi-e		0 %										
b		nanent endowment 🟲	100 000 %											
С		porarily restricted endov		%										
3а	Are	percentages on lines 2a there endowment funds inization by				on that	are h	eld an	d admın	ıstered foı	r the			
	-	inrelated organizations										3a(i	Yes	No No
		related organizations						٠. ٠				3a(ii		No
b		'es" on $3a(11)$, are the re		s listed as r	equired or	. . n Sche	dule R	· .	• •			3b		<u> </u>
4		cribe in Part XIII the inte	-		•									
Pa	rt VI	Land, Buildings,	and Equipmer	ıt.										
		Complete of the or										•		
	Desci	ription of property	(a) Cost or oth (investme		(b) Cost o	r other	basis (other)	(c) Acc	umulated d	epreciation	(d)	Book valu	е
1 a	Land						2,28	31,143						2,281,143
b	Buildii	ngs					70,3	13,665			22,276,838		48	3,036,827
		hold improvements												
		ment					10,47	75,250			5,622,039			4,853,211

12,664,601

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c)) .

9,403,359

64,574,540

3,261,242

•

	See Form 990, Part X, line 12. (a) Description of security or category (including name of security)		(b) Book value		(c) Method of va or end-of-year	
	al derivatives					
2) Closely- 3)Other	held equity interests	_				
4)						
3)						
()						
))						
≣)						
·)						
G)						
٦)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	•				
art VIII	Investments—Program Related. Complete if the organization answered 'Yes' on Form 9	990, P	art IV, lı	ne 11c. See Fo	rm 990, Part)	(, line 13.
	·		ook value	•	(c) Method of va or end-of-year	aluation
L)					or cha or year	TIATROC VAIAC
2)						
3)						
4)						
5)						
5)						
7)						
B)						
9)						
otal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)					
Part IX	Other Assets. Complete if the organization answered 'Yes'	on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
	Other Assets. Complete if the organization answered 'Yes' (a) Description	on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	art X, line 15 (b) Book value
-)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
1)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
1) 2) 3)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
2)		on Form	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
2)		on For	m 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
2) 3) 1) 5)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(i) (i) (ii) (iii)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(i) (i) (ii) (ii) (iii)		on For	n 990, Pa	rt IV, line 11d S	ee Form 990, Pa	
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(a) Description		m 990, Pa			
1) 2) 3) 4) 5) 7) 33) 9)	imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer					(b) Book value
1) 2) 3) 4) 5) 7) 3) otal. (Colu	(a) Description		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) otal. (Colu	imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25.		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 8) Part X	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
2) 3) 5) 6) 7) 8) Part X) Federal (2)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 7) 7) 8) 7) 8) 8) 8)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 7) 7) 8) 7) 8) 8) 8)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 7) 6) 7) 7) 8) 8) 8) 8)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
2) 3) 4) 5) 6) 6) 7) 6) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 6) 7) 8) 6) 8) 8) 8) 8) 8) 8)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 6) 7) 6) 1) Federal 2) 3) 4) 5)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) otal. (Colu	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) otal. (Colu Part X 1) Federal 1 2) 3) 4) 5) 7)	(a) Description Imn (b) must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization answer See Form 990, Part X, line 25. (a) Description of liability		es' on Fo			(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

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

Amounts included on line 1 but not on Form 990, Part IX, line 25

Subtract line **2e** from line **1** Amounts included on Form 990, Part IX, line 25, but not on line 1:

Investment expenses not included on Form 990, Part VIII, line 7b . . .

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

XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information

Donated services and use of facilities

Other (Describe in Part XIII)

Supplemental Information

Other (Describe in Part XIII) .

Add lines 2a through 2d .

Add lines 4a and 4b . .

Return Reference

Page 4

186,400

20,244,944

20,244,944

Schedule D (Form 990) 2017

Schedule D (Form 990) 2017

Part XI

2

3

4

b

c 5

Part XIII

See Additional Data Table

а b

	· ·							
С	Add lines 4a and 4b	4c	0					
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	21,857,960					
Par	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	20,431,344					

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

2a

2b 2c

2d

4b

Explanation

186,400

2e

3

4c

5

Page 5		Schedule D (Form 990) 2017
	ormation (continued)	Part XIII Supplemental Info
	Explanation	Return Reference

Schedule D (Form 990) 2017

Additional Data

Software Version:

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Supplemental Information

Explanation

Return Reference

PART II, LINE 5 PERIODIC MONITORING, INSPECTION, VIOLATIONS, AND ENFORCEMENT OF THE CONSERVATION EASEMENTS

THE PITTSBURGH ZOO & PPG AOUARIUM CURRENTLY DOES NOT HAVE A WRITTEN POLICY REGARDING THE

IT HOLDS ON AN AS NEEDED BASIS, THE ORGANIZATION DOES REVIEW ANY PROGRAM CHANGE OR DEVELOPMENT ON THE PROPERTY DIRECTLY AND IMMEDIATELY WITH THE HOLDER OF THE CONSERVATION EASEMENT THE PROPERTY IS COMPLETELY ENCLOSED BY A PERIMETER FENCE AND IS USED EXCLUSIVELY BY

THE ZOO TO CONDUCT CONSERVATION ORIENTED PROGRAMMING

Software ID:

Supplemental Information	
Return Reference	Explanation
PART II, LINE 9	THE ZOOLOGICAL SOCIETY OF PITTSBURGH WITH AN ADDRESS AT ONE WILD PLACE, PITTSBURGH, PENNSYLVANIA 15206-1178 WAS GRANTED A RESTRICTIVE COVENANT AGAINST THE PROPERTY (PARCEL OF LAND IN SOMERSET COUNTY) IN THE FORM OF A PERPETUAL CONSERVATION EASEMENT THIS PROPERTY IS LOCATED IN SOMERSET COUNTY, COMMONWEALTH OF PENNSYLVANIA AND CONTAINS APPROXIMATELY 724 ACRES THERE IS ONLY ONE CONSERVATION EASEMENT WHICH WAS HELD AT THE BEGINNING OF THE YEAR AND THERE WERE NO ADDITIONS DURING THE COURSE OF 2017 THERE WERE MINIMAL STAFF HOURS AND NO LEGAL EXPENSES DEVOTED TO MONITORING AND ENFORCING THE EXISTING EASEMENT DURING THE TAX YEAR EXPENSES ARE CAPTURED UNDER ADMINISTRATIVE EXPENSES THE LAND THAT IS THE SUBJECT OF THE CONSERVATION EASEMENT IS RECORDED ON THE BALANCE SHEET OF THE ORGANIZATION'S FINANCIAL STATEMENTS

Supplemental Information	
Return Reference	Explanation
PART III, LINE 1A	ANIMAL AND HORTICULTURAL COLLECTION - COLLECTIONS ARE OWNED BY THE SOCIETY AND ARE NOT CAP ITALIZED COSTS OF PURCHASING COLLECTION ITEMS AND PROCEEDS FROM SALES ARE RECOGIZED IN THE YEAR OF ACQUISITION OR SALE PART III, LINE 4 EACH OF OUR EXCEPTIONAL RESIDENTS ACTS AS AN AMBASSADOR OF ITS SPECIES TO ALL WHO PASS THROUGH OUR GATES EVERY ANIMAL AMBASSADOR DOES A GREAT JOB OF WELCOMING, EDUCATING, AND CONNECTING WITH EVERY VISITOR, FOSTERING AN APPRECIATION FOR WILDLIFE WITH EACH VISITOR ZOOS ARE UNIQUE AS NO OTHER CULTURAL INSTITUT ION TRANSCENDS BARRIERS BY ATTRACTING ALL AGES, FINANCIAL LEVELS, ETHNIC GROUPS, RACES, AC ADEMIC BACKGROUNDS, AND SOCIAL STANDINGS THE ZOO BEGAN TAKING ITS CURRENT SHAPE IN THE 19 80S EXHIBITS EVOLVED INTO NATURALISTIC HABITATS, ENABLING ANIMALS TO ROAM AS THEY WOULD IN THE WILD WHILE PROVIDING A MORE PLEASANT AND INFORMATIVE EXPERIENCE FOR ZOO VISITORS THE ASIAN FOREST, WHICH OPENED IN 1983 AND IS NOW KNOWN AS FOREST PASSAGE, WAS THE FIRST ARE A OF THE ZOO TO UTILIZE THIS NEW PHILOSOPHY FORREST PASSAGE NOW EXHIBITS IMPRESSIVE SPECIES SUCH AS AMUR TIGERS, KOMODO DRAGONS, AND RED PANDAS IN IMMERSIVE HABITATS THE AFRICAN SAVANNA FOLLOWED, FEATURING SEVER MAJOR EXHIBITS IN AN AFRICAN LANDSCAPE, OPENING IN 1987 IN 1991, THE ZOO OPENED THE TROPICAL FOREST, A FIVE-ACRE INDOOR RAINFOREST HOUSING 16 PRI MATE SPECIES AND MORE THAN 150 TYPES OF TROPICAL PLANTS IN JANUARY OF 1994, THE PITTSBURG H ZOO BECAME A PRIVATE NON-PROFIT ORGANIZATION, OWNED AND OPERATED BY THE ZOO'S MISSION OF FOR PITTSBURGH LATER THAT YEAR, THE ZOO'S EDUCATION COMPLEX WAS BUILT, CREATING SPACE F OR FIVE CLASSROOMS, A LIBRARY, AND A 300-SEAT LECTURE HALL, FURTHERING THE ZOO'S MISSION OF FOR CONSERVATION AND EDUCATION THE ZOO'S ADMINISTRATION OFFICES ALSO FOUND A HOME IN THIS E DIFICE KIDS KINGDOM, THE COMPLETELY RENOVATED CHILDREN'S ZOO, OPENED IN 1995 AND WAS FURTHER ENHANCED BY THE ADDITION OF THE DISCOVERY PAVILION IN 1997 A \$174 MILLION STATE-OF-T HEART AGUARIUM OPENED IN 2000 AND WAS LATER OFFICIALLY NAMED THE PPG AQ

Supplemental Information	
Return Reference	Explanation
PART III, LINE 1A	AROUND THE WORLD, INCLUDING PHILIPPINE CROCODILES, GALAPAGOS TORTOISES, VISAYAN WARTY PIGS, SIAMANGS, AND CLOUDED LEOPARDS, THE AREA ALSO OFFERS A BEACH WITH SAND, BEACH UMBRELLAS, AND AN OVERSIZED ADIRONDACK CHAIR IN 2017, THE ZOO OPENED JUNGLE ODYSSEY, FEATURING FIVE NEW ANIMAL EXHIBITS INCLUDING FOSSAS, CAPYBARAS, OCELOTS, GIANT ANTEATERS, AND A PYGMY HI PPO SET AMONGST JUNGLE FOLIAGE ACCORDING TO PRESIDENT & CEO DR BARBARA BAKER, THE ZOO'S GROWTH CAN BE TRACED TO ONE THING COMMITMENT THE ZOO IS DEEPLY COMMITTED TO MAKING SURE OUR ZOO NOT ONLY MAINTAINS THE STANDARDS ALREADY SET, BUT STRIVES TO IMPROVE THE EXHIBITS AND THE LIVES OF OUR RESIDENT ANIMALS EVERY DAY BY OPERATING ENTIRELY FREE FROM PRIVATE P ROFIT MOTIVE AND GIVING BACK TO THE ENTIRE COMMUNITY THROUGH EDUCATION, OUTREACH PROGRAMS, CONSERVATION, RESEARCH, AND RECREATION OPPORTUNITIES, THE ZOO SUPPORTS THE REGION, PROVID ES AN INVALUABLE SERVICE TO THE RESIDENTS, AND SERVES AS AN ICONIC ESTABLISHMENT THAT ENRI CHES THE PITTSBURGH AREA TODAY'S VALUE PROPOSITION OF ZOOS AND AQUARIUMS IS SUBSTANTIAL I NVESTMENT IN SPECIES CONSERVATION AND ANIMAL RESEARCH THE PITTSBURGH ZOO & PPG AQUARIUM I S A SAFE HAVEN FOR THE ANIMALS FOR WHOM IT IS HOME, AND PROVIDES VISITORS WITH A UNIQUE ZO O EXPERIENCE THE ZOO'S REMARKABLE GROWTH IN ATTENDANCE, EXHIBITS, RESEARCH, EDUCATION, AN D CONSERVATION EFFORTS ARE SENDING IT ROARING INTO THE FUTURE

Supplemental Information	
Return Reference	Explanation
PART V, LINE 4	THE \$50,000 PERMANENTLY RESTRICTED GRANT CAME FROM A DONOR IN MARCH OF 2005 AS A START UP GRANT TO FUND AN ENDOWMENT TO SUPPORT GENERAL OPERATIONS SPENDING

Ē

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2	THE SOCIETY HAS RECEIVED A DETERMINATION FROM THE INTERNAL REVENUE SERVICE STATING THAT IT IS EXEMPT FROM FEDERAL INCOME TAX UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE ACCORDINGLY, NO PROVISION FOR INCOME TAXES IS RECORDED IN THESE FINANCIAL STATEMENTS

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	EXPENSES RELATED TO SPECIAL EVENTS 186,400

S

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES RELATED TO SPECIAL EVENTS 186,400

Sı

Supplemental Information Return Reference Explanation OTHER PROPERTY EXHIBITS AND IMPROVEMENTS 12,428,500 CONSTRUCTION IN PROGRESS 236,101 PART VI, LINE 1E TOTAL OTHER 12,664,601

efile GRAPHIC print	- DO NOT F	PROCESS A	s Filed Data	-		DLN:	93493310022328	
SCHEDULE F	State	ment of A	Activities (Outside the Uni	ited Sta	tes	OMB No 1545-0047	
(Form 990)	► Compl	ete ıf the organız	nization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990.				2017	
Department of the Treasury Internal Revenue Service	▶ Informa	tion about Sched			ons is at www.irs.gov/form990. Open to Pul Inspection			
Name of the organization					E	mployer iden	tification number	
ZOOLOGICAL SOCIETY OF	PITTSBURGH				2!	5-1418766		
General In Form 990, F			Outside the U	Jnited States. Comple	te If the or	ganızatıon a	nswered "Yes" to	
1 For grantmakers.	Does the or	ganızatıon maır	ntain records to	substantiate the amount	t of its gran	ts and		
•	_	• ,	e grants or assis	stance, and the selection	criteria use	ed		
to award the grants	or assistant	ce?					☑ Yes 🗌 No	
2 For grantmakers. outside the United		Part V the orga	inization's proce	dures for monitoring the	use of its g	rants and otl	ner assistance	
3 Activites per Region	(The followin	g Part I, line 3 t	able can be dupli	cated if additional space is	needed)			
(a) Region		(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region		program sei specifi	listed in (d) is a rvice, describe c type of s) in region	(f) Total expenditures for and investments in region	
(1) See Add'l Data								
(2)								
(3)								
(4)								
(5)								
3a Sub-total b Total from continuation Part I	on sheets to	0	C				35,878 0	
	and 3b)	0	C				35,878	

Page 2

(heal, EMM)

Schedule F (Form 990) 2017

- -- J FTNI /.E

	and EIN (II				aisbursement	assistance	assistance	(DOOK, FMV,
	applicable)							appraisal, other)
(1)		SUB-SAHARAN AFRICA	2017 PPG	17,971	WIRE TRANSFER	0	N/A	N/A
		- ANGOLA, BENIN,	CONSERVATION &					
		BOTSWANA, BURKINA	SUSTAINABILITY					
		FASO,	GRANT					

	,						
(2)		2017 PPG CONSERVATION & SUSTAINABILITY GRANT	8,907	WIRE TRANSFER	0	N/A	N/A

(2)		CONSERVATION & SUSTAINABILITY GRANT	6,907	WIRE IRANSFER	o	IN/A	IV/A
(3)							

		GRANT			
(3)					
(4)					

(3)				
(4)				

、 - ,				
(4)				

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

Schedule F (Form 990) 2017 Schedule F (Form 990) 2017 Page 3 Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed. (c) Number of (a) Type of grant or assistance (b) Region (d) Amount of (e) Manner of cash (f) Amount of (g) Description (h) Method of recipients cash grant disbursement non-cash of non-cash valuation (book, FMV, assistance assistance appraisal, other) (1) 2017 PPG SUB-SAHARAN AFRICA 6,000 WIRE TRANSFER 0 N/A N/A **CONSERVATION &** ANGOLA, BENIN, SUSTAINABILITY GRANT BOTSWANA, BURKINA FASO, (2) 2017 PPG 3,000 WIRE TRANSFER 0 N/A SOUTH ASIA -N/A 1 **CONSERVATION &** AFGHANISTAN. SUSTAINABILITY GRANT BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL, (3) (4) (5) (6) (7) (8) (9) (11) (12) (13)

(10)

(14) (15)

(16) (17)

(18)

Sche	dule F (Form 990) 2017		Page 4
Pai	t IV Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If "Yes,"the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	☑ No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)	Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)	Yes	✓ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	□Yes	☑ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)	□Yes	☑ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)	☐Yes	✓ No
	Schedul	e F (Form 9	990) 2017

Schedule F (Fo	orm 990) 2017 Page 5
	Supplemental Information Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).
Return Reference	Explanation
PART I, LINE 2	THE ORGANIZATION'S CHIEF EXECUTIVE OFFICER AND RESEARCH DIRECTOR MONITOR AND OVERSEE THE USE OF SUPPORT PROVIDED VIA EMAIL AND OTHER CORRESPONDENCE WITH THE RECIPIENT ORGANIZATIONS AND INDIVIDUALS LOCATED OUTSIDE OF THE UNITED STATES THEY ALSO ADMINISTER THE BOARD APPROVED BUDGET ALLOCATION FOR CONSERVATION FUNDS IN ADDITION, A TEAM AND DIRECTOR OF DESCRIPTION FOR AND AND DIRECTOR OF DIR

AWARD ANNUAL GRANTS AS PART OF THE ANNUAL PROCESS, THE TEAM AND DIRECTOR OF RESEARCH REQUESTS FOLLOW UP PROGRESS REPORTS ON THE PROJECTS THAT RECEIVED FUNDING

Additional Data

SOUTH ASIA - AFGHANISTAN,

BANGLADESH, BHUTAN,

INDIA, MALDIVES, NEPAL,

Software ID: Software Version:

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

GRANTS TO RECIPIENTS

LOCATED IN REGION

11,907

Form 990 Schedule F Part I - Activities Outside The United States

(a) Region	offices in the region	employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	le if activity listed in (a) is a program service, describe specific type of service(s) in region	(r) lotal expenditures for region
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0		GRANTS TO RECIPIENTS LOCATED IN REGION	23,971

0 PROGRAM SERVICES

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493310022328 OMB No 1545-0047 SCHEDULE G **Supplemental Information Regarding** (Form 990 or 990-EZ) **Fundraising or Gaming Activities** Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a Open to Public Department of the Treasury Attach to Form 990 or Form 990-EZ. Inspection Internal Revenue Service ▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at www irs gov/form990. Name of the organization **Employer identification number** ZOOLOGICAL SOCIETY OF PITTSBURGH 25-1418766 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. Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations e Solicitation of non-government grants ☐ Solicitation of government grants Phone solicitations ☐ Special fundraising events In-person solicitations 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 If "Yes," list the ten 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 (ii) Activity (iii) Did (iv) Gross receipts (v) Amount paid to (vi) Amount paid to or entity (fundraiser) fundraiser have from activity (or retained by) (or retained by) custody or fundraiser listed in organization control of col (i) contributions? Yes No 1 8 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 For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Cat No 50083H Schedule G (Form 990 or 990-EZ) 2017

		(a)Event #1	(b) Event #2	(c)Other events	(d)
		2 ZOO BREWS (event type)	SUMMER SAFARI (event type)	(total number)	Total events (add col (a) through col (c))
Revenue					
ã	1 Gross receipts	222,138	125,435		347,573
	2 Less Contributions	105,780	19,158		124,938
	3 Gross income (line 1 minus line 2)	116,358	106,277		222,635
	4 Cash prizes				
တွ	5 Noncash prizes				
esue	6 Rent/facility costs	521	19,640		20,161
ន័	7 Food and beverages	115,976	30,241		146,217
Direct Expenses	8 Entertainment	2,125	5,250		7,375
Ō	9 Other direct expenses	4,846	7,801		12,647
	10 Direct expense summary Add lines 4	through 9 in column (d)		•	186,400
	11 Net income summary Subtract line 10			•	36,235
Pai	Gaming. Complete if the orgon Form 990-EZ, line 6a.	anization answered "Ye	es" on Form 990, Part I	V, line 19, or reported	more than \$15,000
Revenue		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
	1 Gross revenue				
Ses	2 Cash prizes				
Expenses	3 Noncash prizes				
	4 Rent/facility costs				
Direct					
_	5 Other direct expenses				
		☐ Yes%	☐ Yes %	☐ Yes %	
	6 Volunteer labor	∐ No	∐ No	∐ No	
	7 Direct expense summary Add lines 2	through 5 in column (d)		•	
			n (d)	•	
	8 Net gaming income summary Subtrac	t line 7 from line 1, colum	(u): : : : :		
9	Enter the state(s) in which the organizat	on conducts gaming activi	ities		
9 a b		on conducts gaming activi	ities		☐ Yes ☐ No
а	Enter the state(s) in which the organizat Is the organization licensed to conduct g If "No," explain	on conducts gaming activi	these states?		
a b 10a	Enter the state(s) in which the organization licensed to conduct g If "No," explain	on conducts gaming activities in each of	these states?		
a b	Enter the state(s) in which the organizat Is the organization licensed to conduct g If "No," explain	on conducts gaming activities in each of	these states?		

Sche	dule G (Form 990 or 990-EZ) 2017				F	Page 3
11	Does the organization conduct gaming	activities with nonmembers?		Yes	□No	
12	Is the organization a grantor, beneficial formed to administer charitable gaming	ry or trustee of a trust or a member of a partnership or other entit	ΣY	□Yes	□No	
13	Indicate the percentage of gaming acti	vity conducted in				
а	The organization's facility		13	a		%
b	An outside facility		13	ь		%
14	Enter the name and address of the per	son who prepares the organization's gaming/special events books	and record	s		
	Name ►					
	Address •					
15a	Does the organization have a contract revenue?	with a third party from whom the organization receives gaming		□Yes	□No	
Ь		evenue received by the organization ► \$ a the third party ► \$	and the			
c	If "Yes," enter name and address of the	e third party				
	Name •					
	Address ►					
16	Gaming manager information					
	Name ►					
	Gaming manager compensation ▶ \$	······································				
	Description of services provided ►					
	☐ Director/officer	☐ Employee ☐ Independent contractor				
17	Mandatory distributions					
а	Is the organization required under state retain the state gaming license?	e law to make charitable distributions from the gaming proceeds to)	□Yes	Пио	
b	Enter the amount of distributions requing the organization's own exempt activities.	red under state law distributed to other exempt organizations or spities during the tax year > \$	pent	63		
Pai		on. Provide the explanations required by Part I, line 2b, col 5c, 16, and 17b, as applicable. Also provide any additional				s).
	Return Reference	Explanation				

Schedule G (Form 990 or 990-EZ) 2017

efile GRAPHIC print - D	O NOT PROCESS	As Filed Data -					DLI	N: 934933100	22328
Schedule I (Form 990) Department of the Treasury	Co	Governments omplete if the organiz	Other Assistance to Organizations, and Individuals in the United States ation answered "Yes," on Form 990, Part IV, line 21 or 22. Attach to Form 990. Le I (Form 990) and its instructions is at www.irs.gov/form990 .					OMB No 1545-0047 2017 Open to Public Inspection	
Internal Revenue Service Name of the organization						Employ	er identific	ation number	
ZOOLOGICAL SOCIETY OF PIT	TSBURGH					25-14:	18766		
	mation on Grants								
the selection criteria use Describe in Part IV the c	ed to award the grants organization's procedu	or assistance? res for monitoring the u	se of grant funds in the U	nited States	for the grants or assistant		art IV June	✓ Yes	□ No
			ditional space is needed	ents. Complete il the o	rganization answered fes	on Form 990, P	art IV, iine	zi, for any recip	
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Descrip noncash ass		(h) Purpose o or assistance	f grant
(1) See Addıtıonal Data									
(2)									
(3)									
(4)									
(5)									
(6)									
(7)									
(8)									
(9)									
(10)									
(11)									
(12)									
		_	s listed in the line 1 table				•		4 0
For Paperwork Reduction Act No			<u> </u>	Cat No 50055			Schi	edule I (Form 990) 2017

Schedule I (Form 990) 2017						Page 2
Part III Grants and Other Ass Part III can be duplicat				anization answered "Yes"	" on Form 990, Part IV, line 22	
(a) Type of grant or assista		(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)						
(2)						
(3)						
(4)						
(5)						
(6)						
(7)			1			
Part IV Supplemental I	Information	on. Provide the in	formation required in	Part I, line 2; Part III	I, column (b); and any other a	additional information.
Return Reference	Explanation	on		_		
	THE ORGANIZATION'S CHIEF EXECUTIVE OFFICER AND RESEARCH DIRECTOR MONITOR AND OVERSEE THE USE OF SUPPORT PROVIDED VIA EMAIL AND OTHER CORRESPONDENCE WITH THE RECIPIENT ORGANIZATIONS AND INDIVIDUALS LOCATED INSIDE THE UNITED STATES IN ADDITION, A TEAM OF STAFF MEMBERS ARE ASSIGNED TO REVIEW AND AWARD ANNUAL GRANTS AS PART OF THE ANNUAL PROCESS, THE TEAM AND DIRECTOR OF RESEARCH REQUESTS FOLLOW UP PROGRESS REPORTS ON THE PROJECTS THAT RECEIVED FUNDING					

Schedule I (Form 990) 2017

Additional Data

INTERNATIONAL ELEPHANT

VICTORIA FALLS WILDLIFE

SAN DIEGO, CA 92193

FOUNDATION

AZLE, TX 76098

PO BOX 23183

PO BOX 366

FUND

Software ID: Software Version:

75-2815706

98-6061293

EIN: 25-1418766 Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

(a) Name and address of	(b) EIN	(c) IRC section	(d) Amount of cash	(e) Amount of non-	(f) Method of valuation
organization		ıf applıcable	grant	cash	(book, FMV, appraisal,
or government				assistance	other)

Form 990, Schedule I, Part	II, Grants and	Other Assistance to	Domestic Organiza	tions and Domest	ic Governments.
(a) Name and address of organization	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non- cash	(f) Method of valuati (book, FMV, appraisa
or government				assistance	other)

0 N/A

(h) Purpose of grant or assistance

TO SUPPORT RESEARCH

TO SUPPORT RESEARCH

AND CONSERVATION

AND CONSERVATION

EFFORTS

EFFORTS

501(C)(3)

501(C)(3)

non-cash assistance

(q) Description of

IN/A

N/A

30,000 0 N/A

10,000

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant organization ıf applıcable grant cash (book, FMV, appraisal, non-cash assistance or assistance other) or government assistance 26-2568737 501(C)(3) 12.500 O N/A IN/A SEA TO SHORE ALLIANCE TO SUPPORT RESEARCH 4411 BEE RIDGE RD 490 AND CONSERVATION

SARASOTA, FL 34233 EFFORTS AFRICAN AOUATIC 47-2592641 6,000 O N/A N/A

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

CHILMARK, MA 02535

501(C)(3) TO SUPPORT RESEARCH CONSERVATION FUND AND CONVERVATION PO BOX 366 EFFORTS

efil	e GRAPHIC pr	int - DO NOT PROCESS	As Filed Data	a -	DLN: 934	9331	0022	328
Sch	edule J	Col	mpensati	ion Information	МО	IB No	1545-0	0047
(Form 990)		For certain Officers, Directors, Trustees, Key Employees, and Highest					1 =	
		Compensated Employees ► Complete if the organization answered "Yes" on Form 990, Part IV, line 23.					2017	
Denar	tment of the Treasury	▶ Information abo		to Form 990. (Form 990) and its instructions i	s at C	pen i	to Pul	olic
Intern	al Revenue Service			gov/form990.		Insp	ectio	n
	me of the organiza DLOGICAL SOCIETY (Employer identificat	ion nu	ımber	
					25-1418766			
Pa	rt I Questi	ons Regarding Compensati	on					
1a				the following to or for a person listed y relevant information regarding thes			Yes	No
	☐ First-class	or charter travel		Housing allowance or residence for p	personal use			
	☐ Travel for	companions		Payments for business use of persor	nal residence			
	Tax idemi	nification and gross-up payments		Health or social club dues or initiation	n fees			
	Discretion	ary spending account		Personal services (e g , maid, chaufi	feur, chef)			
b		kes in line 1a are checked, did the		ollow a written policy regarding paym plete Part III to explain	ent or reimbursement	1 b		
2				or allowing expenses incurred by all		2		
	directors, truste	es, officers, including the CEO/Ex	ecutive Director	r, regarding the items checked in line	la?			
3				d to establish the compensation of th	e			
		EO/Executive Director Check all t d organization to establish compe		not check any boxes for methods CEO/Executive Director, but explain in	n Part III			
	✓ Compens		✓	Western amales we are a setup of				
	_ '	ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	.	Approval by the board or compensat	tion committee			
4	During the year	did any person listed on Form 99	90, Part VII, Se	ction A, line 1a, with respect to the fil				
	related organiza							
a		ance payment or change-of-control				4a 4b		No
b	•	r receive payment from, a supplemental nonqualified retirement plan?						No No
·	c Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III					4c		110
_), 501(c)(4), and 501(c)(29) o	_	-				
5		on Form 990, Part VII, Section on the revenues of		the organization pay or accrue any				
а	The organization	٦٦				5a		No
b	Any related orga					5b		No
	-	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section ontingent on the net earnings of	A, line 1a, did i	the organization pay or accrue any				
a	The organization					6a		No
b	Any related orga					6b		No
7	•	6a or 6b, describe in Part III	A lunc to did i	the organization provide any nonfixed	ı			
,		ed on Form 990, Part VII, Section escribed in lines 5 and 6? If "Yes,			ı	7	Yes	<u> </u>
8				red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8		No
9	If "Yes" on line 5 53 4958-6(c)?	3, did the organization also follow	the rebuttable	presumption procedure described in l	Regulations section	9		
For I	Danerwork Pedi	ction Act Notice, see the Instr	uctions for Fo	rm 990 Cat No 5	0053T Schedule 1	(Form	990)	2017

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

Note. The sum of columns (B (A) Name and Title			of W-2 and/or 1099-MIS		(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation in	
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(1)-(D)	column (B) reported as deferred on prior Form 990	
1 BARBARA BAKER PRESIDENT/CEO	(i)	295,368	32,500	4,092	13,800	27,750	373,510	0	
·	(ii)	0	0	0	0	0	0	0	
2 BRADLEY SMITH DIRECTOR OF	(i)	149,034	3,000	436	6,025	17,697	176,192	0	
CONSTRUCTION MGMT	(ii)	0	0	0	0	0	0	0	

Schedule J (Form 990) 2017 Page 3 Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation A SPECIAL AD HOC EXECUTIVE COMPENSATION REVIEW COMMITTEE REVIEWED THE CHIEF EXECUTIVE OFFICER'S PERFORMANCE AND RECOMMENDED TO THE PART I. LINE 7 EXECUTIVE COMMITTEE THAT INCENTIVE COMPENSATION BE AWARDED IN THE AMOUNT OF \$32,500 INCENTIVE COMPENSATION WAS AWARDED IN THE AMOUNT OF \$3,000 TO THE CFO AND \$3,000 TO THE CONSTRUCTION MANAGER

Schedule J (Form 990) 2017

efil	e GRAPHIC pr	int - DO NOT PR	OCESS	As Filed Data -		DLN:	9349331	.0022	2328
	EDULE M			loncash Contri	hutione		OMB No 1	.545-0	047
(For	m 990)		1	ioncasii contii	Dutions		20	17	7
▶Complete if the		organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.				20	1/	'	
		► Attach to Form							
•	tment of the Treasury	▶Information abo	ut Schedu	ıle M (Form 990) and its i	nstructions is at <u>www.ir</u>	s.gov/form990	Open to		
	al Revenue Service e of the organizat	lon				Employer ident	Inspe ification n		
	OGICAL SOCIETY OF					Linployer ident	incation ii	umbe	
						25-1418766			
Pa	rt I Types	of Property		I		T			
			(a)	(b) Number of contributions or	(c) Noncash contribution	Method	(d) of determine	aina	
			applicable		amounts reported on	noncash co			ts
					Form 990, Part VIII, line 1g				
1	Art—Works of art	t			<u> </u>				
2	Art—Historical tr	easures .							
3	Art—Fractional in	nterests							
4	Books and public	ations							
5	Clothing and hou	ısehold							
_	goods					+			
6 7	Cars and other v Boats and planes								
	Intellectual prope								
	Securities—Public	•	X	9	1,937,66	4 FM\/			
	Securities—Close				1,337,00				
	Securities—Partr	•							
	or trust interest								
	Securities—Misce								
13	Qualified conserv								
	contribution—Historic structures								
14	Qualified conserv								
	contribution—Of								
	Real estate—Res								
	Real estate—Cor								
17	Real estate—Oth								
18 19	Collectibles . Food inventory								
20	Drugs and medic								
21	Taxidermy .								
	Historical artifact	ts							
23	Scientific specim	ens							
24	Archeological art	ifacts							
	Other ▶ (-				
	Other ▶ (
27	Other ► (•							
	Other ▶ (<u> </u>							
29				ation during the tax year for 3, Part IV, Donee Acknowled		29			0
	Tor willer the org	jumzación completea	101111 020	s, rait iv, bonee removied	gement			Yes	No
30a	During the year	. did the organization	n receive b	y contribution any property i	reported in Part I, lines 1 th	rough 28, that it		103	110
	must hold for at	least three years fro	om the date	e of the initial contribution, a	and which is not required to	be used for exem	npt		
	purposes for the	e entire holding perio	od?				30a		No
b	If "Yes." describ	e the arrangement II	n Part II						
31	•	_		alicy that requires the record	v of any nonetandard contr	ibutions?	31	Yes	\
	_	-		olicy that requires the review	,		31	162	
32a				or related organizations to s		ash • • • -	32a		 _{N'} -
Ь	If "Yes," describ		- •			·			No_
	•		amount in	column (c) for a type of pro	perty for which column (a)	is checked			
	describe in Part			(2) isi a 2) pe oi pio	r ,	,			
For D		on Act Notice, see the	Instruction	as for Form 990	Cat No. 512271	Schad	ule M (Form	000)	(2017)

Schedule M (Form 990) (2017)						
I, column (b), the r	ormation. Ition required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part Communication of Land Communication of Land Complete ditional information.					
Return Reference	Explanation					
PART I, COLUMN (B)	THE NUMBER SHOWN IN COLUMN (B) REPRESENTS THE NUMBER OF DONORS WHO MADE CONTRIBUTIONS IN CALENDAR YEAR 2017					
	Schedule M (Form 990) (2017)					

efile GRAPH	DLN:	LN: 93493310022328		
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury		Supplemental Information to Form 990 or 95 Complete to provide information for responses to specific question Form 990 or 990-EZ or to provide any additional information Attach to Form 990 or 990-EZ. Information about Schedule O (Form 990 or 990-EZ) and its instruction www.irs.gov/form990.	2017 Open to Public Inspection	
Name of the org ZOOLOGICAL SOCI	IETY OF PIT	TSBURGH	Employer identi 25-1418766	fication number
Return Reference		Explanation		
FORM 990, PART VI, SECTION A,	ARD OF	ECUTIVE COMMITTEE SHALL HAVE AND MAY EXERCISE ALL THE POWERS AD DIRECTORS, EXCEPT THOSE POWERS SPECIFICALLY PROHIBITED BY STATED TO ANY THE FULL BOARD AND/OR THOSE EXCLUSIVELY GRANTED TO ANY	ATUTE, THOSE R	ESERVED E

BOARD FIVE MEMBERS OF THE FULL EXECUTIVE COMMITTEE SHALL CONSTITUTE A QUORUM

LINE 1

Explanation Return Reference

FORM 990. THE SOCIETY WILL SUBMIT A DRAFT TO SELECT MEMBERS OF THE FINANCE COMMITTEE FOR THEIR REVIE. PART VI. W AND APPROVAL THE CFO PARTICIPATES IN THIS REVIEW THE BOARD PASSED A RESOLUTION TO APPR SECTION B. OVE THE FORM 990 BASED ON THE FINANCE COMMITTEE'S REVIEW AND APPROVAL COPIES ARE MADE AVA LINE 11B II ABLE TO ALL MEMBERS OF THE BOARD OF DIRECTORS BEFORE THE RETURN IS FILED WITH THE INTERN

AL REVENUE SERVICE

990 Schedule O, Supplemental Information Return Explanation

Reference

FORM 990. THE BOARD OF DIRECTORS REVIEWS THE CONFLICT OF INTEREST POLICY AT THE FIRST MEETING OF FAC PART VI. H YEAR BOARD MEMBERS ARE TO DISCLOSE TO THE BOARD CHAIR POTENTIAL OR ACTUAL CONFLICTS. TH SECTION B. E FINANCE DEPARTMENT IDENTIFIES POTENTIAL CONFLICTS BY REVIEWING VENDOR LISTS AND SUBMITS LINE 12C THE RESULTS OF THEIR REVIEW TO THE CHAIR OF THE FINANCE COMMITTEE FOR FURTHER REVIEW UPON REVIEW BY THE FINANCE CHAIR. POTENTIAL CONFLICTS ARE DISCLOSED TO THE BOARD CHAIR. THE CH AIR WILL DETERMINE WHETHER TO (A) TAKE NO ACTION, (B) ASSURE FULL DISCLOSURE. (C) ASK THE PERSON TO RECUSE HIMSELF OR HERSELF FROM PARTICIPATION IN RELATED DISCUSSIONS OR DECISION S. OR (D) ASK THE PERSON TO RESIGN FROM HIS OR HER POSITION

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	A SPECIAL INDEPENDENT AD HOC EXECUTIVE COMPENSATION REVIEW COMMITTEE MEETS TO REVIEW THE P ERFORMANCE AND APPROVE COMPENSATION FOR THE ZOO'S CEO THE COMMITTEE UTILIZES COMPARABLE C OMPENSATION DATA FOR SIMILARLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT S IMILARLY SITUATED ORGANIZATIONS THE COMMITTEE DOCUMENTS DECISIONS REGARDING THE COMPENSAT ION AND REPORTS THEIR RESULTS TO THE EXECUTIVE COMMITTEE, HUMAN RESOURCES AND THE CFO THE EXECUTIVE COMMITTEE AND THE BOARD CHAIR APPROVE THE CEO'S COMPENSATION AFTER REVIEW AND R ECOMMENDATION FROM THE AD HOC EXECUTIVE COMPENSATION REVIEW COMMITTEE

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19

Return Reference	Explanation
FORM 990, PART XII, LINE 2C, FINANCIAL STATEMENTS AND REPORTING	THE FINANCE COMMITTEE IS APPOINTED BY THE BOARD OF DIRECTORS AND REVIEWS THE FINANCIAL STA TEMENTS REGULARLY THROUGHOUT THE YEAR, AT BOARD MEETINGS AND AT EACH OF 5 COMMITTEE MEETIN GS PER YEAR ONE OF THESE MEETINGS IS DEDICATED TO AUDIT REVIEW WHERE THE COMMITTEE MEETS WITH THE AUDITORS WITHOUT MANAGEMENT PRESENT THE SELECTION OF THE INDEPENDENT AUDITORS IS REVIEWED BY THE FINANCE/AUDIT COMMITTEE AS NEEDED THIS PROCESS DID NOT CHANGE FROM THE P RIOR YEAR