DLN: 93493301002099 OMB No 1545-0047 Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) ▶ Do not enter social security numbers on this form as it may be made public Open to Public Department of the ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Treasury Inspection Internal Revenue Service For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018 D Employer identification number B Check if applicable ZOOLOGICĂL SOCIETY OF PITTSBURGH □ Address change 25-1418766 ☐ Name change Doing business as PITTSBURGH ZOO & PPG AQUARIUM ☐ Initial return ☐ Final return/terminated Number and street (or P O box if mail is not delivered to street address) Room/suite ONE WILD PLACE E Telephone number ☐ Amended return ☐ Application pending (412) 665-3639 City or town, state or province, country, and ZIP or foreign postal code PITTSBURGH, PA $\,$ 152061178 $\,$ G Gross receipts \$ 19,516,377 Name and address of principal officer H(a) Is this a group return for DR BARBARA BAKER ☐Yes **☑**No subordinates? ONE WILD PLACE H(b) Are all subordinates PITTSBURGH, PA 15206 ☐ Yes ☐No ıncluded? **☑** 501(c)(3) **☐** 501(c)() **◄** (Insert no) 4947(a)(1) or If "No," attach a list (see instructions) **H(c)** Group exemption number ▶ Website: ► WWW PITTSBURGHZOO ORG L Year of formation 1994 M State of legal domicile PA **K** Form of organization lacktriangle Corporation lacktriangle Trust lacktriangle Association lacktriangle Other Summary 1 Briefly describe the organization's mission or most significant activities TO BE A LEADER AND CONTRIBUTOR TO THE CONSERVATION OF ENDANGERED AND THREATENED SPECIES Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets 3 Number of voting members of the governing body (Part VI, line 1a) . 46 4 4 Number of independent voting members of the governing body (Part VI, line 1b) . Total number of individuals employed in calendar year 2018 (Part V, line 2a) 416 **6** Total number of volunteers (estimate if necessary) 6 200 Total unrelated business revenue from Part VIII, column (C), line 12 0 **b** Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 10,470,766 10,268,963 Ravenua 11,326,441 8,768,892 9 Program service revenue (Part VIII, line 2g) . 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) . 2,500 1,890 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 58,253 150,554 21,857,960 19,190,299 12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12) 13 Grants and similar amounts paid (Part IX, column (A), lines 1-3). 94,378 75,988 **14** Benefits paid to or for members (Part IX, column (A), line 4) 15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10) 10,602,269 11,089,906 Expenses 16a Professional fundraising fees (Part IX, column (A), line 11e) . 8,100 b Total fundraising expenses (Part IX, column (D), line 25) ▶624,184 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 9,540,197 9,393,371 20,244,944 20,559,265 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 . 1,613,016 -1,368,966 Net Assets or Fund Balances Beginning of Current Year End of Year 65,474,313 66,405,301 20 Total assets (Part X, line 16) . 21 Total liabilities (Part X, line 26) . 2,982,874 3,420,852 22 Net assets or fund balances Subtract line 21 from line 20 . 63,422,427 62,053,461 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge 2019-10-18 Signature of officer Sign Here DR BARBARA BAKER PRESIDENT/CEO Type or print name and title Print/Type preparer's name Preparer's signature Check 🔲 ıf P00227231 Paid self-employed Firm's name > SCHNEIDER DOWNS & CO INC Firm's EIN ► 25-1408703 Preparer Use Only Firm's address ► ONE PPG PLACE SUITE 1700 Phone no (412) 261-3644 PITTSBURGH, PA 15222 ✓ Yes □ No May the IRS discuss this return with the preparer shown above? (see instructions) . For Paperwork Reduction Act Notice, see the separate instructions. Cat No 11282Y Form 990 (2018)

Form	990 (2018)					Page 2				
Pa	rt III 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/ RESP	NGERED 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.	UNDERSTANDING,				
2	Did the organization	undertake any significa	ant program ser	vices during the year w	hich were not listed on					
	the prior Form 990 or 990-EZ?									
	•									
3	Did the organization	cease conducting, or m	nake significant	changes in how it cond	ucts, any program					
	services?					🗌 Yes 🗹 No				
	If "Yes," describe the	se changes on Schedu	e O							
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 \$	5,595,557	ıncludıng grants of \$	75,988) (Revenue \$	4,921,362 }				
	See Additional Data									
4b	(Code) (Expenses \$	5,595,557	including grants of \$) (Revenue \$)				
	See Additional Data									
4c	(Code) (Expenses \$	5,595,557	ıncludıng grants of \$) (Revenue \$	3,847,530)				
	See Additional Data									
4d	Other program service	ces (Describe in Schedi	ıle O)							
	(Expenses \$	ıncl	uding grants of	\$) (Revenue \$)				
4e	Total program serv	rice expenses ▶	16,786,6	71						

	990 (2018)			Page 3
Par	Checklist of Required Schedules	1	Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 2	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Yes	
5	Is the organization a section $501(c)(4)$, $501(c)(5)$, or $501(c)(6)$ organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III \footnote{S}	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	Yes	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8	Yes	
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10	Yes	
	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX 2	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🥦	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 2	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section $170(b)(1)(A)(1)$? If "Yes," complete Schedule E	13		No
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	Yes	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Yes	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19 202	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
		20a		No
ь 21	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic	20b 21	Yes	
22	government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	22		

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

Form	990 (2018)			Page 4
Pai	Checklist of Required Schedules (continued)			
			Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	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 complete Schedule K If "No," go to line 25a	24a		No
Ь	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
Ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🐒	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197 Note.	20	Yes	

38

81

0

1a

1b

Yes

No

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Part V

1a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable .

b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable

Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V $\,$.

 ${f c}$ Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

9a Did the sponsoring organization make any taxable distributions under section 4966? . . .

b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . . .

12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?

Note. See the instructions for additional information the organization must report on Schedule O

14a Did the organization receive any payments for indoor tanning services during the tax year?

b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.

Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess

parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N

Is the organization an educational institution subject to the section 4968 excise tax on net investment income?

Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Did 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

If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form

Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during

d If "Yes," indicate the number of Forms 8282 filed during the year

Sponsoring organizations maintaining donor advised funds.

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

b If "Yes," enter the amount of tax-exempt interest received or accrued during the year

a Is the organization licensed to issue qualified health plans in more than one state?

Enter the amount of reserves the organization is required to maintain by the states in

Section 501(c)(29) qualified nonprofit health insurance issuers.

Section 501(c)(7) organizations. Enter

Section 501(c)(12) organizations. Entera Gross income from members or shareholders .

7с

7e

7f

7g

7h

8

9a

9h

12a

13a

14a

14b

15

No

No

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7d |

10a

10b

11a

11b

12b

13b

13c

Nο

No

No

Section C. Disclosure

19

20

List the States with which a copy of this Form 990 is required to be filed▶

policy, and financial statements available to the public during the tax year

16b

Form 990 (2018)

Par	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O See instructions Check if Schedule O contains a response or note to any line in this Part VI			lines
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 46			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b	Enter the number of voting members included in line 1a, above, who are independent 1b 46			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person? •	3		No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? .	4		No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6	Did the organization have members or stockholders?	6		No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7 b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
Ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ction B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code	e.)	
			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
ь	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent			

persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official . . . 15a Yes Other officers or key employees of the organization . . . 15b Nο If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a 16a Nο b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest

State the name, address, and telephone number of the person who possesses the organization's books and records

only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)

▶JACQUELINE VINCUNAS ONE WILD PLACE PITTSBURGH, PA 152061178 (412) 365-2510

101111 330 (2	010)										Page /
Part VII	Compensation of Officer and Independent Contra		Truste	es,	Key	En	nploy	ees	, Highest Comp	ensated Employ	ees,
	Check if Schedule O contains a	response or no	te to an	y line	≘ ın t	hıs	Part VI	١.			🗆
Section	A. Officers, Directors, Tru	ıstees, Key E	mploy	ees	, an	d F	lighe	st (Compensated En	nployees	
year .	this table for all persons requir of the organization's current of		·						, ,		•
of compensa	tion Enter -0- in columns (D), (if the organization's current key	E), and (F) if no	compe	nsatı	on w	vas į	paid		- ,,		
• List the who received	organization's five current high direportable compensation (Box and any related organizations	est compensate	d emplo	yees	(oth	ner t	than a	n off	icer, director, truste	e or key employee)	1
• List all o	of the organization's former office compensation from the organization						pensat	ed e	employees who rece	ived more than \$10	0,000
	f the organization's former dir e , more than \$10,000 of reportat										e
compensated	in the following order individual demployees, and former such p	ersons									
☐ Check tl	nis box if neither the organization	n nor any relate	ed organ	nizatio	on co	omp	ensate	d ar	ny current officer, di	rector, or trustee	Т
	(A) Name and Title	(B) Average hours per week (list any hours for related	than o	one bo oth a direct	ox, un off tor/t	t cho unles ficer rust	and a	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	2/1099-MI3C)	(W- 2/1099- MISC)	related organizations
See Additiona	al Data Table										

Form 990 (2018) Page 8 Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) Part VII (B) (C) (E) (D) (F) Name and Title Average Position (do not check more Reportable Reportable Estimated hours per than one box, unless person compensation compensation amount of other week (list is both an officer and a from the from related compensation any hours director/trustee) organization (Worganizations (Wfrom the for related 2/1099-MISC) 2/1099-MISC) organization and Highest compensatempleyee Officer Individual trustee organizations related Institutional director. below dotted organizations employee line) Trustee

						à					
See Additional Data Table											
1b Sub-Total						>					
c rotal from continuation sheets to h	c Total from continuation sheets to Part VII, Section A ▶										

line 1a? If "Yes," complete Schedule J for such individual

services rendered to the organization? If "Yes," complete Schedule J for such person .

(A)

Name and business address

For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for

from the organization Report compensation for the calendar year ending with or within the organization's tax year

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

Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation

4

5

1

individual .

HARRIS MASONRY INC.

420 GREENTREE ROAD PITTSBURGH, PA 15220 HHR CONTRUCTION & EXCAVATION

204 SPARTZ DRIVE JEFFERSON HILLS, PA 15025

422 PRESTLEY STREET CARNEGIE, PA 15106

Section B. Independent Contractors

JOSEPH TESTA CONCRETE CONTRACTING INC

compensation from the organization ▶ 3

c '	Sub-Total	art VII , Section	Α.		*		573,987		0		90,706
2	Total number of individuals (including of reportable compensation from the	but not limited	to thos		e) who	rece	eived more than	\$100,000			
3	Did the organization list any former of	55								Yes	No

1b Sub-Total												
c Total from continuation sheets to Part VII, Section A ▶												
d Total (add lines 1b and 1c)	•	573,987	0		90,706							
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization ▶ 3												
				Yes	No							

	ub-Total						>			•			
d T	otal (add lines 1b and 1c)	<u> </u>		<u></u>			•		573,987		0		90,706
!	Total number of individuals (including of reportable compensation from the o			e liste	ed al	bove	e) who	rece	eived more than	\$100,000)		
												Yes	No
,	Did the examination list any former	officer director	or truct	ىا مە		مامص		- h.	hact campanes	tad ampla			

3

4

5

(B)

Description of services

CONSTRUCTION

CONSTRUCTION

CONSTRUCTION

Yes

Nο

Nο

209,422

198,790

142,200

(C)

Compensation

Form 990 (2018)

Page **9**

		Check if Schedu					(,	A) evenue	Rela ex fur	(B) ated or empt action	(C) Unrelated business revenue	(D) Revenuexcluded tax under s	from ections
	14 -	a Federated campaig	inc	4-	I	37,550			rev	/enue		512 - 5	14
at st		· -	•	1a	<u> </u> 								
rar		b Membership dues		1b	<u> </u>	,395,514							
%. G A m		c Fundraising events		1c	<u> </u> 	163,689							
善		 d Related organization e Government grants (c 		1d	1 .	005.745							
S, (iii			•	1e	4 	,885,715							
Contributions, Gifts, Grants and Other Similar Amounts		f All other contributions and similar amounts r above Noncash contributi	not included	1f	2	,786,495							
들을		in lines 1a - 1f \$ _	Ons included	1,0	048,971								
ತ್		h Total. Add lines 1a	n-1f			>	:	10,268,963					
_						Busines							
THE.	2 a	ADMISSIONS					900099	6,3	90,023	6,39	0,023		
٠ <u>٠</u>	b	VISITOR SERVICES					900099	1,3	05,036	1,30	5,036		
Service Revenue	c	EDUCATION					900099	1,0	73,833	1,07	3,833		
ervi													
S	e e	•											
Program	_	All other program se	ervice revenue										
6		Total. Add lines 2a-2			_	8,	768,892						
		Investment income (i			Interest 3	nd other	1		1				
		similar amounts) .			iliterest, a	ina otner	<u> </u>	1,890					1,890
	4	Income from investm	ent of tax-exe	mpt b	ond proce	eds i	•						
	5	Royalties					•						
	6-	Gross rents	(ı) Rea		(II) Pe	ersonal	4						
	va	dioss lents		22,435									
	Ŀ) Less rental expenses		0									
	,	Rental income or		22,435			\dashv						
		(loss)		ŕ			_						
	C	Net rental income o				•		22,435	5				22,435
	7-	Gross amount	(ı) Securit	ies	(11) (Other	-						
	/ d	from sales of assets other											
		than inventory											
	Ŀ	Less cost or											
		other basis and sales expenses											
		Gain or (loss)					_						
		d Net gain or (loss) Gross income from f				<u> </u>	_						
<u>a</u>	U.	(not including \$	163,689										
en r		contributions reporte See Part IV, line 18	ed on line 1c)	а	}	454,19	7						
ev	Ŀ	Less direct expense		ь		326,078	_						
er F		Net income or (loss)		sing ev	ents .	. •		128,119	9				128,119
Other Revenue	9a	Gross income from		es									
0		See Part IV, line 19		а	}								
	Ŀ	Less direct expense	es	b			+						
		Net income or (loss)		actıvıt	ies	•							
	10	a Gross sales of inven returns and allowan											
		Less cost of goods		a b									
	C	Net income or (loss) Miscellaneous		ınvent		ss Code							
	11		Revenue		Dusine	ss code	+						
	Ŀ	<u> </u>			-								
									-				
		-											
		d All other revenue					_		-				
	_	a All other revenue . • Total. Add lines 11a				•	1		+				
					• •	F*	-		-				
	12	2 Total revenue. See	= IIISU UCUONS	• •	• •	• •		19,190,299	ə	8,768,892	:	0	152,444
												Form 990	12018

20 Interest .

23 Insurance .

a SUPPLIES

21 Payments to affiliates .

expenses on Schedule O)

b ANIMAL EXPENSES

c DINO EXPENSES

e All other expenses

d EQUIPMENT

22 Depreciation, depletion, and amortization .

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

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)

Form 990 (2018)				Page 10
Part IX Statement of Functional Expenses Section 501(c)(3) and 501(c)(4) organizations must complete all c	olumns. All other orga	unizations must comm	olete column (A)	
Check if Schedule O contains a response or note to any	-			🗆
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	49,000	49,000		
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	26,988	26,988		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	494,184	283,936	139,264	70,984
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	7,537,065	6,141,115	1,059,556	336,394
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	650,216	395,261	239,426	15,529
9 Other employee benefits	1,763,548	1,037,953	691,885	33,710
10 Payroll taxes	644,893	523,653	91,575	29,665
11 Fees for services (non-employees)				
a Management				
b Legal	1,148		1,148	
c Accounting	78,398		78,398	
d Lobbying	29,028		29,028	
e Professional fundraising services See Part IV, line 17				
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	304,211	185,745	115,102	3,364
12 Advertising and promotion	736,853	718,651	597	17,605
13 Office expenses	320,852	76,958	238,211	5,683
14 Information technology				
15 Royalties				
16 Occupancy	1,692,845	1,558,442	134,403	
17 Travel	146,373	96,086	40,937	9,350
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings				

64,775

3,248,298

446,667

609,194

589,956

370,800

268,247

485,726

20,559,265

29,525

3,151,819

446,667

588,344

589,956

370,800

145,108

370,664

16,786,671

35,250

86,831

9,589

119,590

37,620

3,148,410

9,648

11,261

3,549

77,442

624,184

Form 990 (2018)

Form	990	(2018)					Page 11	
P	art X	Balance Sheet						
		Check if Schedule O contains a response or not	e to an	y line in this Part IX			🗆	
		·		,	(A) Beginning of year		(B) End of year	
	1	Cash-non-interest-bearing			37,144	1	21,390	
	2	Savings and temporary cash investments			372,832	2	1,592,413	
	3	Pledges and grants receivable, net			1,266,959	3	1,057,175	
	4	Accounts receivable, net				4	88,380	
	5 6	Loans and other receivables from current and for trustees, key employees, and highest compensa Part II of Schedule L	ited en fied pe	nployees Complete rsons (as defined under		5		
ste	7	contributing employers and sponsoring organizations of voluntary employees' beneficiary organizations of Part II of Schedule L	itions d (see in	of section 501(c)(9) structions) Complete		6		
Assets	8	Inventories for sale or use		_		8		
	9	Prepaid expenses and deferred charges						
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	96,983,652				
	ь	Less accumulated depreciation	10 b	34,408,417	64,574,540	10c	62,575,235	
	11	Investments—publicly traded securities .				11		
	12	Investments—other securities See Part IV, line		12				
	13	Investments—program-related See Part IV, line	.		13			
	14	Intangible assets	[14			
	15	Other assets See Part IV, line 11				15		
	16	Total assets.Add lines 1 through 15 (must equ	al line	34)	66,405,301	16	65,474,313	
	17	Accounts payable and accrued expenses			1,390,081	17	1,683,234	
	18	Grants payable				18		
	19	Deferred revenue				19		
	20	Tax-exempt bond liabilities				20		
Š	21	Escrow or custodial account liability Complete F	Part IV	of Schedule D		21		
Liabilities	22	Loans and other payables to current and former key employees, highest compensated employee						
<u>a</u>		persons Complete Part II of Schedule L				22		
_	23	Secured mortgages and notes payable to unrela	ted thi	rd parties	1,592,793	23	1,737,618	
	24	Unsecured notes and loans payable to unrelated	l thırd ı	parties		24		
	25	Other liabilities (including federal income tax, pa and other liabilities not included on lines 17 - 24 Complete Part X of Schedule D		to related third parties,		25		
	26	Total liabilities. Add lines 17 through 25			2,982,874	26	3,420,852	
Balances	27	Organizations that follow SFAS 117 (ASC 9) complete lines 27 through 29, and lines 33 Unrestricted net assets			62,178,052	27	59,520,587	
Ba	28	Temporarily restricted net assets		[1,189,885	28	2,478,384	

Permanently restricted net assets

Total liabilities and net assets/fund balances

34

54,490 29

66,405,301

34

54,490

65,474,313 Form **990** (2018)

No

Form 990 (2018)

3b

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

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

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

Additional Data

Software ID:

Software Version:

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Form 990 (2018)

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 THOSE 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 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-JOB 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 NEARLY 3,000 HOURS OF TRAINING FOR TWO INTERNATIONAL STUDENTS AND EIGHT 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 STUDENTS OF ALL AGES ENJOY THE ZOO'S POPULAR EDUCATION PROGRAMS, CLASSES, AND TEACHER WORKSHOPS THESE

Form 990, Part III, Line 4b:

PROJECTS WHILE ENGAGING AND SUPPORTING STAKEHOLDERS ON WILDLIFE CONSERVATION DIRECTIVES. BY DEVELOPING NOVEL APPROACHES TO PRESSING ISSUES. 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 FIVE OCEANS THE PPG CONSERVATION & SUSTAINABILITY FUND WAS ESTABLISHED THROUGH A PARTNERSHIP BETWEEN PPG AND THE ZOO. THIS FUND IS DESIGNED TO ADVANCE THE

CONSERVATION & RESEARCHTHE PITTSBURGH ZOO & PPG AQUARIUM'S SCIENCE AND CONSERVATION PROGRAM LOOKS TO CONDUCT PROGRESSIVE AND INNOVATIVE

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 240 PROJECTS HAVE RECEIVED GRANTS THROUGH THIS PROGRAM THERE'S MORE GOING ON AT THE PITTSBURGH ZOO THAN MEETS THE

EYE, ESPECIALLY WHEN IT COMES TO ANIMAL CONSERVATION. THE INTERNATIONAL 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 AOUARIUM 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 AQUARIUM, THE ONLY NORTH AMERICAN FACILITY HOUSING ELEPHANT SEALS. REHABILITATES AND CARES FOR ANIMALS LIKE COOLID. 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 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, 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 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 PROGRAM COMPLIMENTS OTHER RECYCLING PROGRAMS AT THE ZOO, INCLUDING WATER, CARDBOARD, BATTERIES, CANS, BOTTLES, PAPER, AND CELL PHONES WHETHER FUNDING OR PARTICIPATING IN PROJECTS

IN THE WILD, CONDUCTING RESEARCH WITH OUR OWN RESIDENT ANIMALS, OR IMPLEMENTING ECO-FRIENDLY PRACTICES THAT MAKE AN ENVIRONMENTAL IMPACT.

CONSERVATION AND RESEARCH IS AN ESSENTIAL PIECE OF EVERYTHING WE DO AT THE ZOO

Form 990, Part III, Line 4c:

EVENTS FOR COMMUNITY AND REGIONAL GROUPS WITH FULLY ADA-ACCESSIBLE FACILITIES, THE PROVISION OF OPEN SPACE FOR PUBLIC RECREATION, SEVERAL HISTORICALLY PRESERVED PUBLIC LANDMARKS, AND 9,000 ANIMALS REPRESENTING MORE THAN 900 SPECIES ALONG WITH FOLIAGE FROM EVERY CORNER OF THE 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, 830,440 INDIVIDUALS VISITED THE ZOO IN 2018 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 LEVELS AND INTERESTS THESE EVENTS INCLUDE DIVERSE THEMES SUCH AS NEW BABY CELEBRATIONS, ANIMAL-CENTRIC EVENTS THAT FOCUS ON INDIVIDUAL SPECIES, A 5K RACE CALLED ZOOZILLA, ADULT-ONLY EVENING ENGAGEMENTS, AND HOLIDAY-THEMED EXTRAVAGANZAS SUCH AS A HALLOWEEN-THEMED EVENT CALLED ZOOBOO DREAM

RECREATIONOPEN THROUGHOUT THE YEAR WITH THE EXCEPTIONS OF THANKSGIVING DAY, CHRISTMAS DAY, AND NEW YEAR'S DAY, THE ZOO HOSTS NUMEROUS

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 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

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

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 FACILITATES WHILE

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

	any hours	and	a dır	recto	or/tr	ustee))	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	
LEONARD F BACH DIRECTOR	1 00	×						0	0	0	
JOSEPH BAILEY DIRECTOR	1 00	×						0	0	0	
GLENN E BOST II DIRECTOR (EXITED 12/31/18)	1 00	×						0	0	0	
DODOTHY BOYER	1 00										

0

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0

JOSEPH BAILEY	1 00	1			0	
DIRECTOR		^				
GLENN E BOST II	1 00	×			0	
DIRECTOR (EXITED 12/31/18)		^				
DOROTHY BOYER	1 00	v			0	
DIRECTOR		_ ^				

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and Independent Contractors

HOWARD BRUSCHI

KENNETH P CHENG MD

..........

ROSALIND CHOW

G HENRY COOK

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JACK DEMOS

LINDA DICKERSON

......

(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 week (list person is both an officer from the from related compensation

	any hours		a dır			ustee))	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
COLETTE DUGAN DIRECTOR	1 00	×						0	0	0
JOAN ELLENBOGEN DIRECTOR	5 00	x						0	0	0
BEVERLYNN ELLIOTT	3 00	×						0	0	0

DIRECTOR						
JOAN ELLENBOGEN	5 00	l 🗸			9	
DIRECTOR		_ ^				
BEVERLYNN ELLIOTT	3 00	l			0	
DIRECTOR		^				
WILLIAM FALLON	3 00					
		I v	 I	I	Ι	

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and Independent Contractors

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DEBORAH GROSS

DAVID GRUBMAN

ANDREW W HASLEY

AMANDA GREEN-HAWKINS

KAREN ROCHE GALEY

DEBORAH BERGREN GARLOCK

(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 and a director/trustee\ any hours organizations from the organization

and Independent Contractors

......

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

JOHN MICLOT

THOMAS M KUBLACK

MICHAEL C LAROCCO

KRISTINE MCGINLEY

PEGGY MCKNIGHT

	any hours	and	a dir	ecto	r/tr	ustee))	organization	organizations	from the
	for related organizations below dotted line)		Institutional Trustee	Officer	key employee	Highest compensated	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations
JULIUS JONES DIRECTOR (DECEASED 4/4/18)	1 00	×						0	0	0
RICHARD D KALSON ESQ DIRECTOR	1 00	×						0	0	0
JUSTIN KAUFMAN DIRECTOR	1 00	×						0	0	0

0

0

0

RICHARD D KALSON ESQ		l x			0	
DIRECTOR						
JUSTIN KAUFMAN	1 00	,			0	
DIRECTOR		, x			Ū	
REBECCA P KEEVICAN	1 00	l ↓			0	
DIRECTOR (EXITED 5/7/18)		_ ^			U	
ROBERT KRIZNER	1 00					

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(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

	any nours	and	a dir	ecto	or/tr	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	
JENNIFER TIS MIHOK DIRECTOR	1 00	×						0	0	0	
RYAN NEUPAVER DIRECTOR	1 00	×						0	0	0	
DAVID NEWELL DIRECTOR	1 00	×						0	0	0	
JOHN T PAYNE	1 00										

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DAVID NEWELL	
DIRECTOR	
JOHN T PAYNE	
DIRECTOR	
MAYOR WILLIAM PEDUTO	ĺ

......

DIRECTOR

DIRECTOR

DIRECTOR

DIRECTOR

PETER RUSS

SARA SCAIFE

DIRECTOR

J ERIC RENNER

DONALD E RHOTEN

DIANA MRVOS RATH

.......

DIRECTOR (ENTERED 5/17/18)

and Independent Contractors

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

	arry riours	4114	a un	ecte)	uscee		Organización	organizacions	l monitule .
	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
JANEL SKELLEY DIRECTOR	1 00	x						0	0	0
MORTON D STANFIELD JR DIRECTOR	3 00	x						0	0	0
DOUGLAS STIRLING DIRECTOR	1 00	x						0	0	0
BECKY TORBIN	1 00	1						0	0	0

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DIRECTOR
BECKY TORBIN
DIRECTOR
SALLY WIGGIN

DIRECTOR

DIRECTOR

CHAIR

EDWARD GONCZ

STUART T WISE

ROBERT T WOODINGS III

VICE CHAIR (EXITED 7/1/18)

DONNA K HUDSON DIRECTOR

GREGORY A WEINGART

TREASURER

THRU 6/18, VICE CHAIR AS OF 7/18

and Independent Contractors

and Independent Contractors (A) (B) (C) (D) (E) Name and Title Reportable Reportable Average Position (do not check more Estimated than one box, unless amount of other compensation compensation

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101,144

156,665

(F)

30,820

19,503

	week (list any hours					office ustee		from the organization	from related organizations	compensation from the	
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	organization and related organizations	
JEANNE MINNICKS	3 00	l		\ ,					0		
SECRETARY		×		×					0	0	
BARBARA BAKER	40 00			x				316,178	0	40,383	
PRESIDENT/CEO								310,170	0	+0,303	
JACQUELINE VINCUNAS	40 00										

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40 00

CHIEF FINANCIAL OFFICER

DIRECTOR OF CONSTRUCTION MGMT

BRADLEY SMITH

efil	e GR/	APHIC pri	nt - DO NOT PROCESS	As Filed Data -			DLN: 9	3493301002099			
SCI	HED	ULE A	Public	Charity Statu	s and Dul	olic Supp	ort	OMB No 1545-0047			
	m 990			organization is a sect 4947(a)(1) nonexe Attach to Form	ion 501(c)(3) empt charitable	organization o	I	2018			
		the Treasury	► Go to	www.irs.gov/Form	<u>990</u> for the late	st information	•	Open to Public Inspection			
Nam	e of th	ne organiza SOCIETY OF F					Employer identific	ation number			
							25-1418766				
	rt I		for Public Charity State a private foundation becaus				See instructions.				
1			onvention of churches, or a	•	•		(A)(i).				
2		•	scribed in section 170(b)								
3			or a cooperative hospital se		,	, ,					
4		·	esearch organization opera	-			•	nter the hospital's			
	Ш	name, city,									
5			ation operated for the bene (iv). (Complete Part II)	fit of a college or unive	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170			
6			tate, or local government o	or governmental unit de	scribed in sectio	on 170(b)(1)(A	۱)(v).				
7	✓	_	ation that normally receives (O(b)(1)(A)(vi). (Complet		s support from a	governmental u	ınıt or from the gener	al public described in			
8		A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)									
9			ural research organization of rant college of agriculture					ege or university or a			
10		from activit	ation that normally receives ties related to its exempt fu income and unrelated busi see section 509(a)(2). (C	inctions—subject to cer iness taxable income (le	tain exceptions,	and (2) no more	than 331/3% of its si	ipport from gross			
11		An organiza	ation organized and operate	ed exclusively to test fo	r public safety S	ee section 509	(a)(4).				
12		more public	ation organized and operate ly supported organizations through 12d that describe	described in section 5	09(a)(1) or sec	ction 509(a)(2). See section 509(a				
a		Type I. A s organizatio	supporting organization open(s) the power to regularly Part IV, Sections A and E	erated, supervised, or co appoint or elect a majo	ontrolled by its s	upported organi	zation(s), typically by				
b		manageme	supporting organization su nt of the supporting organi plete Part IV, Sections A	zation vested in the sar				_			
c			unctionally integrated. A					ited with, its			
d		Type III n	organization(s) (see instructionally integrate integrated The organization You must complete Pa	ed. A supporting organ on generally must satis	Ization operated fy a distribution	in connection wi requirement and	th its supported orgai	1. 4			
e		Check this	box if the organization rece or Type III non-functionall	eived a written determir	nation from the I		pe I, Type II, Type II	I functionally			
f	Enter		of supported organizations								
g			ing information about the s	T' -	T'		T				
	(i) N	lame of supp organization		(iii) Type of organization (described on lines 1- 10 above (see instructions))	(iv) Is the org in your govern	anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)			
					Yes	No					
			,								
Tota	1										
		vork Reduc	tion Act Notice, see the I	Instructions for	Cat No 11285	<u>I</u> 5F :	 Schedule A (Form 9	⊥ 90 or 990-EZ) 2018			

Page 2

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv), 170(b)(1)(A)(vi), and 170 (Complete only if you checked the box on line 5, 7, 8, or 9 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.) Section A. Public Support Calendar year (f) Total (a) 2014 **(b)** 2015 (c) 2016 (d) 2017 (e) 2018 (or fiscal year beginning in) ▶ Gifts, grants, contributions, and 12,017,893 14,817,539 17,265,819 10,470,766 10,268,963 64,840,980 membership fees received (Do not include any "unusual grant") Tax revenues levied for the organization's benefit and either paid to or expended on its behalf 3 The value of services or facilities furnished by a governmental unit to the organization without charge 12,017,894 14,817,540 17,265,820 10,470,767 10,268,964 Total. Add lines 1 through 3 64,840,985 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on 15,284,691 line 1 that exceeds 2% of the amount shown on line 11, column (f) Public support. Subtract line 5 49,556,294 from line 4 Section B. Total Support Calendar year (a)2014 (b)2015 (c)2016 (d)2017 (e)2018 (f)Total (or fiscal year beginning in) ▶ 12,017,894 14,817,540 10,470,767 10,268,964 Amounts from line 4 17,265,820 64,840,985 Gross income from interest, dividends, payments received on 12,876 20,313 22,797 24,518 24,325 104,829 securities loans, rents, royalties and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) 11 **Total support.** Add lines 7 through 64,945,814 12 Gross receipts from related activities, etc. (see instructions) 12 47,451,031 13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, Section C. Computation of Public Support Percentage Public support percentage for 2018 (line 6, column (f) divided by line 11, column (f)) 14 76 300 % 15 Public support percentage for 2017 Schedule A, Part II, line 14 15 75 450 % 16a 33 1/3% support test-2018. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box ▶ ☑ and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support test-2017. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test-2018. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported ▶□ organization h 10%-facts-and-circumstances test-2017. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here.

Р	Support Schedule for						
	(Complete only if you c						ler Part II. If
- C	the organization fails to ection A. Public Support	quality under t	ne tests listed	pelow, please co	omplete Part II.)	
30	Calendar year		43.50.5		413.004-		(0) =
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not include any "unusual grants")						
2	Gross receipts from admissions,						
_	merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
_	organization's tax-exempt purpose Gross receipts from activities that are						
3	not an unrelated trade or business						
	under section 513						
4	Tax revenues levied for the						
	organization's benefit and either paid						
_	to or expended on its behalf The value of services or facilities						
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and						
_	3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified						
	persons that exceed the greater of						
	\$5,000 or 1% of the amount on line						
	13 for the year						
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c						
	from line 6)						
36	ection B. Total Support Calendar year		I	I	1		1
	(or fiscal year beginning in) ▶	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total
9	Amounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and						
b	income from similar sources Unrelated business taxable income						
D	(less section 511 taxes) from						
	businesses acquired after June 30,						
	1975						
C	Add lines 10a and 10b						
11	Net income from unrelated business						
	activities not included in line 10b,						
	whether or not the business is regularly carried on						
12							
	loss from the sale of capital assets						
	(Explain in Part VI)						
13	Total support. (Add lines 9, 10c, 11, and 12)						
14	First five years. If the Form 990 is for	r the organization	ı 's fırst, second, tl	nird, fourth, or fift	:h tax vear as a se	ction 501(c)(3) c	rganization.
	check this box and stop here	,	, ,	, ,	,	(), ()	• □
Se	ection C. Computation of Public	Support Perce	ntage				<u> </u>
15	Public support percentage for 2018 (lin			column (f))		15	
16	Public support percentage from 2017 S					16	
	ection D. Computation of Investi					1 1	
17	Investment income percentage for 201			line 13, column (f	·))	17	
18	Investment income percentage from 2	•			••	18	
	331/3% support tests—2018. If the		•	on line 14, and lin	ne 15 is more than		ne 17 is not
							► □
	more than 33 1/3%, check this box and s 33 1/3% support tests—2017. If the						
b	• •	-			•		_
	not more than 33 1/3%, check this box	and stop here.	The organization	qualifies as a publ	icly supported org	anization	▶⊔_
20	Private foundation. If the organization	on did not check a	box on line 14, 1	.9a, or 19b, check	this box and see	instructions	▶ □

Schedule A (Form 990 or 990-EZ) 2018 Page 4 Part IV Supporting Organizations (Complete only if you checked a box on line 12 of Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of

Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V) Section A. All Supporting Organizations

Yes No Are all of the organization's supported organizations listed by name in the organization's governing documents? 1 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 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)2 Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below

3а 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 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 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 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 4b supervised by or in connection with its supported organizations

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 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 5a

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

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

5b 5c Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other

than (1) its supported organizations. (ii) individuals that are part of the charitable class benefited by one or more of its

6

7

8

answer line 10b below

the organization had excess business holdings)

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. 6

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)

7 Did 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 Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes,"

provide detail in Part VI.

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

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

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

9b which the supporting organization also had an interest? If "Yes," provide detail in Part VI.

9с

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

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

10a certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes,"

10a

10b

Schedule A (Form 990 or 990-EZ) 2018

P	art IV	Supporting Organizations (continued)			
				Yes	No
11	. Has tl	ne organization accepted a gift or contribution from any of the following persons?			
а		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the ning body of a supported organization?	11a		
b	A fam	ully member of a person described in (a) above?	11b		
		6 controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI	11c		
		B. Type I Supporting Organizations			
		/1 11 3 3		Yes	No
1	elect VI ho organ truste	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part in the supported organization of activities of the inverted organization of activities of the invation had more than one supported organization, describe how the powers to appoint and/or remove directors or the invation had more than one supported organizations and what conditions or restrictions, if any, applied to such its supported organizations and what conditions or restrictions, if any, applied to such its supported organizations.			
_	Б. 4 44		1		
2	opera <i>carrie</i>	ne organization operate for the benefit of any supported organization other than the supported organization(s) that ted, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit d out the purposes of the supported organization(s) that operated, supervised or controlled the supporting ization	2		
_	costion	C. Type II Supporting Organizations			
	ection	c. Type 11 Supporting Organizations		Yes	No
1		a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the		163	140
	suppo	orting organization was vested in the same persons that controlled or managed the supported organization(s)	1		
S	Section	D. All Type III Supporting Organizations			
				Yes	No
1	tax ye Form	ne organization provide to each of its supported organizations, by the last day of the fifth month of the organization's ear, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing nents in effect on the date of notification, to the extent not previously provided?			
			1		
2	(s) or	any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization rained a close and continuous working relationship with the supported organization(s)			
			2		
3	organ	ason of the relationship described in (2), did the organization's supported organizations have a significant voice in the lization's investment policies and in directing the use of the organization's income or assets at all times during the tax If "Yes," describe in Part VI the role the organization's supported organizations played in this regard	3		
9	Section	E. Type III Functionally-Integrated Supporting Organizations		l	
1		the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instruction)	ons)		
	a 🖂	The organization satisfied the Activities Test Complete line 2 below	•		
	ь 🗆	The organization is the parent of each of its supported organizations. Complete line 3 below			
	c 🗆	The organization supported a governmental entity Describe in Part VI how you supported a government entity (see	ınstru	ctions)	
2	Activi	ties Test Answer (a) and (b) below.		Yes	No
	suppo orgai respo	ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the orted organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was nsive to those supported organizations, and how the organization determined that these activities constituted antially all of its activities	2a		
	organ <i>organ</i>	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of the ization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the ization's position that its supported organization(s) would have engaged in these activities but for the organization's rement	21		
3		t of Supported Organizations Answer (a) and (b) below.	2b		
د	a Did th	ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of	3a		
	b Did th	reported organizations? Provide details in Part VI. The organization exercise a substantial degree of direction over the policies, programs and activities of each of its			
	suppo	orted organizations? If "Yes." describe in Part VI. the role played by the organization in this regard		ı ——	

Sche	lule A (Form 990 or 990-EZ) 2018			Page 6
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting O	rgani	zations	
1	Check here if the organization satisfied the Integral Part Test as a qualifying tru instructions. All other Type III non-functionally integrated supporting organizations.			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		

•	income or for management, conservation, or maintenance of property held for production of income (see instructions)			
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
ē	Average monthly value of securities	1a		
Ŀ	Average monthly cash balances	1 b		
	: Fair market value of other non-exempt-use assets	1c		
	Total (add lines 1a, 1b, and 1c)	1d		
•	Discount claimed for blockage or other factors (explain in detail in Part VI)			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see			

			(optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1	
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1 b	
С	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
е	Discount claimed for blockage or other factors (explain in detail in Part VI)		
2	Acquisition indebtedness applicable to non-exempt use assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 035	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	
	Section C - Distributable Amount		Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	

Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions) 7

5 Remaining underdistributions for years prior to 2018, 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 2018 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 2019. Add lines 31 and 4c

8 Breakdown of line 7 a Excess from 2014.

b Excess from 2015. c Excess from 2016.

d Excess from 2017. e Excess from 2018.

Schedule A (Form 990 or 990-EZ) (2018)

Additional Data

Software ID:

Software Version: EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Page 8

Schedule A (Form 990 or 990-EZ) 2018

Part VI Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part

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

Facts And Circumstances Test

SCHEDULE C

Political Campaign and Lobbying Activities

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

DLN: 93493301002099

2018

OMB No 1545-0047

EZ)

(Form 990 or 990-

	ment of the Treasury al Revenue Service		the organization is described belo to <u>www.irs.gov/Form990</u> for instr				Z.	Open to Inspe	
• Se	ection 501(c)(3) on Section 501(c) (other Section 527 organization ans Section 501(c)(3) on Forganization ans Corganization ans Cy Tax) (see sepai	ganizations Corer than section 5 zations Complet swered "Yes" or rganizations that rganizations that rwered "Yes" or rate instruction	n Form 990, Part IV, Line 4, or Form have filed Form 5768 (election under have NOT filed Form 5768 (election in Form 990, Part IV, Line 5 (Proxy Ta	te Part I-C ts I-A and C below 990-EZ, Part VI, III section 501(h)) Counder section 501(h)	Do not co ne 47 (Lob omplete Pa i)) Comple	mplete Part I-E bying Activiti rt II-A Do not ste Part II-B Do	es), 1 comp	then plete Part II-E complete Pa	3 art II-A
Nan	ne of the organizat LOGICAL SOCIETY OF	ion				Employer ide 25-1418766	entif	ication num	nber
Pari	I-A Complet	te if the orga	nization is exempt under secti	on 501(c) or is	a sectio		nizat	tion.	
1	Provide a descript	tion of the organ	ization's direct and indirect political ca	ampaign activities in	n Part IV (s	see instructions	for	definition of	
2			itures (see instructions)			>	\$_		
3	Volunteer hours f	or political camp	aign activities (see instructions)						
Part	Complet	te if the orga	nization is exempt under secti	ion 501(c)(3).					
1	Enter the amount	of any excise ta	ıx ıncurred by the organization under	section 4955		>	\$		
2	Enter the amount	of any excise ta	ix incurred by organization managers	under section 4955		>	\$		
3	If the organizatio	n incurred a sect	ion 4955 tax, did it file Form 4720 for	this year?			_	☐ Yes	□ No
4a	Was a correction	made?						☐ Yes	□ No
ь	If "Yes," describe								
Par	II-C Complet	te if the orga	nization is exempt under secti	on 501(c), exce	ept secti	on 501(c)(3	3).		
1	Enter the amount	directly expend	ed by the filing organization for sectio	n 527 exempt funct	ion activiti	es 🕨	\$_		
2	Enter the amount function activities		anızatıon's funds contributed to other	organizations for se	ection 527	exempt •	\$_		
3	Total exempt fund	ction expenditure	es Add lines 1 and 2 Enter here and	on Form 1120-POL,	lıne 17b	>	¢		
4	Did the filing orga	anızatıon file For	m 1120-POL for this year?				Ψ_	П.,	
5	Enter the names, organization mad of political contrib	addresses and e e payments For outions received	employer identification number (EIN) of each organization listed, enter the ar that were promptly and directly delive see (PAC) If additional space is needed	nount paid from the ered to a separate p	filing orga olitical org	anızatıon's fund anızatıon, such	ls Al	lso enter the	amount
	(a) Nam	e	(b) Address	(c) EIN	filing	ount paid from organization's If none, enter -0-		(e) Amount of contributions and promp directly deliv separate p organization enter -	received otly and rered to a political If none,
1									
2									
3									
4									
5									

a	Other exempt purpose expenditures		20,836,31:	<u> </u>
е	Total exempt purpose expenditures (add lines 1c and	l 1d)	20,885,343	3
f	Lobbying nontaxable amount Enter the amount from columns	the following table in both	1,000,000	0
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
				•
g	Grassroots nontaxable amount (enter 25% of line 1f)	250,000	
h	Subtract line 1g from line 1a If zero or less, enter -0)-		ס

i Subtract line 1f from line 1c If zero or less, enter -0-

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting ☐ Yes ☐ No section 4911 tax for this year?

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

(a) 2015

1,000,000

29,125

250,000

(b) 2016

1,000,000

29,028

250,000

(c) 2017

1,000,000

29,028

250,000

(d) 2018

1,000,000

29,028

250,000

Schedule C (Form 990 or 990-EZ) 2018

(e) Total

4,000,000

6,000,000

116,209

1,000,000

1,500,000

Calendar year (or fiscal year

beginning in)

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

2a

activity

Part IV

PART II-A LINE 1B

Return Reference

Supplemental Information

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

THROUGH DCED

(b)

Amount

(a)

No

Yes

During the year, did the filing organization attempt to influence foreign, national, state or local legislation, 1 including any attempt to influence public opinion on a legislative matter or referendum, through the use of Volunteers? Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? Media advertisements? Mailings to members, legislators, or the public? d Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body? Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means? Other activities? 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)? If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year? Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6). Yes No 1 1 Were substantially all (90% or more) dues received nondeductible by members? 2 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? Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6)Part III-B and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members 1 2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid). 2a Current year 2b b Carryover from last year 2c c Total 3 3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year? 4 5 5 Taxable amount of lobbying and political expenditures (see instructions)

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 REPRESENTATION IN HARRISBURG AS PART OF AN AGREEMENT

WITH THE PA ZOO COUNCIL NYOUIST PROVIDES ASSISTANCE WITH STATE GOVERNMENT FUNDING

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

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

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

Supplemental Financial Statements

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

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

OMB No 1545-0047

DLN: 93493301002099

Open to Public Inspection

Department of the Treasury Internal Revenue Service

(Form 990)

2

5

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 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 1 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 7/25/06, 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 > 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 Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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 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

Cat No 52283D

Schedule D (Form 990) 2018

Par	1111	Organizations Ma	aintaining Col	lections of	Art, Histor	ical T	reası	ures, o	r Other	Similar As	sets (conti	nued)	
3		g the organization's acq s (check all that apply)	uisition, accessior	n, and other r	ecords, check	any of	the fo	ollowing	that are a	sıgnıfıcant u	ise of its coll	ection	
a	✓	Public exhibition			d	✓	Loan	or exch	nange prog	ırams			
b	✓	Scholarly research			e	✓	Othe	er CONS	SERVATION	N			
c		Preservation for future	e generations										
4	Provi Part :	de a description of the XIII	organızatıon's col	lections and e	explain how th	ey furt	her th	e organı	zation's ex	kempt purpo	se ın		
5		ng the year, did the orgits to be sold to raise fur								ıılar	☐ Yes	☑ N	0
Pai	rt IV	Escrow and Cust											
		Complete if the ord X, line 21.	ganization answ	vered "Yes"	on Form 990), Part	: IV,	ine 9, c	r reporte	ed an amou	int on Form	990,	Part
1a		e organization an agent ded on Form 990, Part I		an or other in	termediary fo	r contri	bution	ns or oth	er assets	not			
	mera	aca on romi 550, raic									☐ Yes	∐ N	0
ь	If "Ye	es," explain the arrange	ement in Part XIII	and complet	e the following	ı table				A	mount		_
c		nning balance				,			1c				_
d	_	tions during the year							1d				_
е		butions during the year	r						1e				_
f		ng balance							1f				_
2a	Dıd tl	he organization include	an amount on Fo	rm 990, Part	X, line 21, for	escrov	v or cu	ustodial	account lia	bility?	☐ Yes	□м	_ o
b		es," explain the arrange		·						•	_		
	rt V	Endowment Fund											
			· ·	(a)Current		Prior yea			years back			our year	s back
1 a	Beginn	ning of year balance .			54,490	5	4,490		54,490		54,490		54,490
b	Contril	butions											
c	Net inv	vestment earnings, gair	ns, and losses										
d	Grants	s or scholarships											
		expenditures for facilition	es										
f	Admın	istrative expenses .											
g	End of	year balance			54,490	5-	4,490		54,490		54,490		54,490
2 a		ide the estimated perce d designated or quasi-e	-	ent year end l	palance (line 1	g, colu	ımn (a	ı)) held a	as				
b	Perm	nanent endowment 🟲	100 000 %										
c	Temp	porarily restricted endov	wment ▶ 0	%									
	The p	percentages on lines 2a	, 2b, and 2c shou	ld equal 1009	%								
3а		here endowment funds	not in the posses	sion of the or	ganization tha	it are h	eld ar	nd admir	nistered fo	r the		V	N-
	_	nization by nrelated organizations									3a(i)	Yes	No No
	• •	related organizations .					•	•			3a(ii)		No
b		es" on $3a(\pi)$, are the rel		is listed as re	quired on Sch	 edule R	۲۶.	• •			3b		
4		ribe in Part XIII the inte											
Pai	rt VI	Land, Buildings,	and Equipmer	nt.									
		Complete if the or											
	Descr	ription of property	(a) Cost or oth (Investme		(b) Cost or othe	r basıs (other)	(c) Ac	cumulated o	lepreciation	(d) Bo	ok valu	e
1a	Land					2,2	81,143					2	2,281,143
	Buildin					70,5	11,301			24,087,671		46	,423,630
		hold improvements											
		nent				10,7	45,091			6,577,520		4	,167,571
						13,4	46,117			3,743,226		9	,702,891

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

62,575,235

Part VII	Investments—Other Securities. Complete if the See Form 990, Part X, line 12.				
	(a) Description of security or category (including name of security)		(b) Book value		Method of valuation end-of-year market value
	al derivatives				
	Tied equity interests	<u> </u>			
(A)					
[B)					
(C)					
(D)					
(E)					
F)					
(G)					
(H)					
Fotal. (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)	>			
Part VIII	Investments—Program Related. Complete if the organization answered 'Yes' on F	orm 990. Pa	art IV. line	11c. See Form	990. Part X. line 13.
	(a) Description of investment		ok value	(c)	Method of valuation end-of-year market value
(1)				Cost of	end-or-year market value
(2)					
(3)					
(4)					
5)					
6)					
(7)					
(8)					
(9)					
	nn (b) must equal Form 990, Part X, col (B) line 13)	•			
Γotal. (Colum	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Fotal. (Colum			n 990, Part	IV, line 11d See	Form 990, Part X, line 15 (b) Book value
Part IX	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Part IX 1)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Part IX 1) 2)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
1) 2) 3) 4) 5) 6) 7)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Total. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered		n 990, Part	IV, line 11d See	
Total. (Column Part IX 1) 1) 2) 3) 4) 5) 6) 7) 8) 9)	Other Assets. Complete if the organization answered (a) Description (b) must equal Form 990, Part X, col (B) line 15 Other Liabilities. Complete if the organization a				(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability			n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Must equal Form 990, Part X, col (B) line 15) Other Liabilities. Complete if the organization a See Form 990, Part X, line 25.		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) Fotal. (Column 1) 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Fotal. (Column 7) 8. 1) Federal (1) 2)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1) 2) 3)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) 9) Fotal. (Column Part X 1) Federal (1) 2) 3) 4)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X 1) Fotal. (Columnary) Part X 1) Federal (1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X 1) Fotal. (Columnary) Part X 1) Federal (1) 2) 3) 4) 5)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
1) 2) 3) 4) 5) 6) 7) 8) Part X 1) Fotal. (Columnary) Part X 1) Federal (1) 2) 3) 4) 5) 6)	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
(1) (2) (3) (4) (5) (6) (7) (8) (9) (1) (Columpart X	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value
Total. (Column Part IX	Other Assets. Complete if the organization answered (a) Description (a) Description (b) Description (c) Description (d) Description (e) Description (e) Description (f) Description (g) Description (g) Description of liability		es' on Forn	n 990, Part IV, I	(b) Book value

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Page 4

326,078

20,559,265

20.559.265

Schedule D (Form 990) 2018

Schedule D (Form 990) 2018

Other (Describe in Part XIII)

Supplemental Information

Add lines 2a through 2d

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

Add lines **4a** and **4b**

Part XI

d

3

4

b

5

Part XIII

See Additional Data Table

Return Reference

Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 19,190,299 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 20,885,343 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 Donated services and use of facilities . . . 2a

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

2b 2c c 2d

4a

4b

Explanation

326,078

2e

3

4c

5

Schedule D (Form 990) 2018	Page 5
Part XIII Supplemental Info	mation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2018

Additional Data

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

Supplemental Information

EIN: 25-1418766

Return Reference Explanation PART II, LINE 5

THE PITTSBURGH ZOO & PPG AQUARIUM CURRENTLY DOES NOT HAVE A WRITTEN POLICY REGARDING THE PERIODIC MONITORING, INSPECTION, VIOLATIONS, AND ENFORCEMENT OF THE CONSERVATION EASEMENTS 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: Software Version:

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 2018 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 RECOGNIZED 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 I N 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 FOREST PASSAGE NOW EXHIBITS IMPRESSIVE SPECIE S SUCH AS AMUR TIGERS, KOMODO DRAGONS, AND RED PANDAS IN IMMERSIVE HABITATS THE AFRICAN S AVANNA FOLLOWED, FEATURING SEVEN MAJOR EXHIBITS IN AN AFRICAN LANDSCAPE, OPENING IN 1987 IN 1991, THE ZOO OPENED THE TROPICAL FOREST, A FIVE-ACRE INDOOR RAINFOREST HOUSING 16 PRIM ATE SPECIES AND MORE THAN 150 TYPES OF TROPICAL PLANTS. IN JANUARY OF 1994, THE PITTSBURGH ZOO BECAME A PRIVATE NON-PROFIT ORGANIZATION, OWNED AND OPERATED BY THE ZOOLGICAL SOCIETY OF PITTSBURGH LATER THAT YEAR, THE ZOO'S EDUCATION COMPLEX WAS BUILT, CREATING SPACE FO R FIVE CLASSROOMS, A LIBRARY, AND A 300-SEAT LECTURE HALL, FURTHERING THE ZOO'S MISSION OF CONSERVATION AND EDUCATION OF THE DISCOVERY PAVILION IN 1997 A \$17 4 MILLION STATE-OF-T HEART ARE ADDITION OF THE DISCOVERY PAVILION IN 1997 A \$17 4 MILLION STATE-OF-T HEART ARE ADAID AS MODIFIED USING SEVERAL FIRSHING VILLAGE, OPENED IN 2000 CHEBRATED THE EXPANSION OF THE EDUCATION COMPLEX THE ROO'NAS RAISES AND A HOME IN THIS NEW FACI

Supplemental Information	
Return Reference	Explanation
PART III, LINE 1A	D THE WORLD, INCLUDING PHILIPPINE CROCODILES, ALDALORA TORTOISES, VISAYAN WARTY PIGS, SIAM ANGS, AND CLOUDED LEOPARDS, THE AREA ALSO OFFERS A BEACH WITH SAND, BEACH UMBRELLAS, AND A N OVERSIZED ADIRONDACK CHAIR IN 2017, THE ZOO OPENED JUNGLE ODYSSEY, FEATURING FIVE NEW A NIMAL EXHIBITS INCLUDING FOSSAS, CAPYBARAS, OCELOTS, GIANT ANTEATERS, AND A PYGMY HIPPO SE T 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 ZO O 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 PROFIT MOTIVE AND GIVING BACK TO THE ENTIRE COMMUNITY THROUGH EDUCATION, OUTREACH PROGRAMS, CONSE RVATION, RESEARCH, AND RECREATION OPPORTUNITIES, THE ZOO SUPPORTS THE REGION, PROVIDES AN INVALUABLE SERVICE TO THE RESIDENCE, AND SERVES AS AN ICONIC ESTABLISHMENT THAT ENRICHES T HE PITTSBURGH AREA TODAY'S VALUE PROPOSITION OF ZOOS AND AQUARIUMS IS SUBSTANTIAL INVESTMENT IN SPECIES CONSERVATION AND RESEARCH THE PITTSBURGH ZOO & PPG AQUARIUM IS A SAFE HAVE N FOR THE ANIMALS FOR WHOM IT IS HOME, AND PROVIDES VISITORS WITH A UNIQUE ZOO EXPERIENCE THE ZOO'S REMARKABLE GROWTH IN ATTENDANCE, EXHIBITS, RESEARCH, EDUCATION, AND 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

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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 THE SOCIETY HAS NOT IDENTIFIED ANY MATERIAL LINCERTAIN TAX POSITIONS REQUIRING AN ACCRUAL OR				

Supplemental Information

SOCIETY HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS REQUIRING AN ACCRUAL OR
DISCLOSURE IN THE FINANCIAL STATEMENTS THE SOCIETY IS NO LONGER SUBJECT TO EXAMINATIONS BY

TAXING AUTHORITIES IN ANY MAJOR TAX JURISDICTION FOR YEARS BEFORE DECEMBER 31, 2015

Supplemental Information	
Return Reference	Explanation
PART XI, LINE 2D - OTHER ADJUSTMENTS	EXPENSES RELATED TO SPECIAL EVENTS 326,078

S

Supplemental Information	
Return Reference	Explanation
PART XII, LINE 2D - OTHER ADJUSTMENTS	EXPENSES RELATED TO SPECIAL EVENTS 326,078

Sı

Supplemental Information Return Reference Explanation OTHER PROPERTY EXHIBITS AND IMPROVEMENTS 12,561,116 CONSTRUCTION IN PROGRESS 885,001 PART VI, LINE 1E TOTAL OTHER 13,446,117

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493301002099 OMB No 1545-0047 SCHEDULE F Statement of Activities Outside the United States (Form 990) 2018 ▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16. ▶ Attach to Form 990. **Open to Public** ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Department of the Treasury Inspection Internal Revenue Service Name of the organization **Employer identification number** ZOOLOGICAL SOCIETY OF PITTSBURGH 25-1418766 Part I General Information on Activities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and 1 other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? 2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed) (a) Region (b) Number of (c) Number of (d) Activities conducted in (e) If activity listed in (d) is a (f) Total expenditures offices in the employees, agents, region (by type) (e.g., program service, describe for and investments and independent fundraising, program specific type of in region region contractors in services, investments, grants service(s) in region region to recipients located in the region) See Add'l Data 26,988 3a Sub-total b Total from continuation sheets to Part I c Totals (add lines 3a and 3b) n 26,988 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50082W Schedule F (Form 990) 2018

Schedule F (Form 990) 20)18							Page 2	
	Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.								
organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)	
		BOTSWANA, BURKINA	2018 PPG CONSERVATION & SUSTAINABILITY GRANT	8,990	WIRE TRANSFER		ON/A	N/A	
		ICELAND & GREENLAND)	2018 PPG CONSERVATION & SUSTAINABILITY GRANT	5,848	WIRE TRANSFER		ON/A	N/A	
2 Enter total number exempt by the IRS,	•	organizations listed a h the grantee or coun		•			•	6	
3 Enter total number	of other org	anizations or entities					•	0	

Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other
2018 PPG CONSERVATION & SUSTAINABILITY GRANT	SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	2		WIRE TRANSFER		N/A	N/A
2018 PPG CONSERVATION & SUSTAINABILITY GRANT	SOUTH ASIA - AFGHANISTAN, BANGLADESH, BHUTAN, INDIA, MALDIVES, NEPAL,	1		WIRE TRANSFER	0	N/A	N/A
2018 PPG CONSERVATION & SUSTAINABILITY GRANT	EUROPE (INCLUDING ICELAND & GREENLAND)	2		WIRE TRANSFER	0	N/A	N/A
2018 PPG CONSERVATION & SUSTAINABILITY GRANT	SOUTH AMERICA	1	1,500	WIRE TRANSFER	0	N/A	N/A

Sche	dule F (Form 990) 2018		Page 4
Par	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, don't 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)		
	Corporations (See Instructions for Form 5471)	\square 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, don't file with Form 990)	☐ Yes	✓ No

	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).
990 Schedu	lle F, Supplemental Information
Return Reference	Explanation

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region
SUB-SAHARAN AFRICA - ANGOLA, BENIN, BOTSWANA, BURKINA FASO,	0	0		GRANTS TO RECIPIENTS LOCATED IN REGION	11,990

0 PROGRAM SERVICES

GRANTS TO RECIPIENTS

LOCATED IN REGION

1,500

Form 990 Schedule F Part I - Activities Outside The United States										
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region					
EUROPE (INCLUDING ICELAND & GREENLAND)	0	0		GRANTS TO RECIPIENTS LOCATED IN REGION	10,148					
SOUTH AMERICA	0	0		GRANTS TO RECIPIENTS LOCATED IN REGION	3,000					

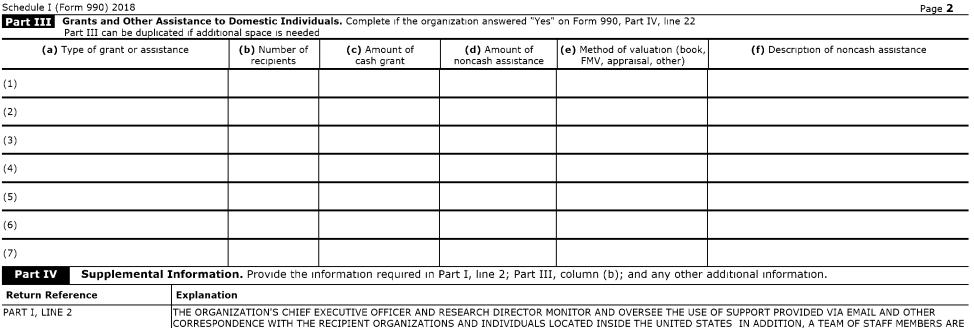
Form 990 Schedule F Part I - Activities Outside The United States (a) Region (b) Number of (c) Number of (e) If activity listed in (d) (d) Activities conducted (f) Total expenditures offices in the employees or ın region (by type) (i e , is a program service, for region describe specific type of agents in fundraising, program region services, grants to service(s) in region region recipients located in the region) 0 PROGRAM SERVICES GRANTS TO RECIPIENTS 350 FAST ASIA AND THE PACIFIC LOCATED IN REGION

DLN: 93493301002099 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 Go to www irs gov/Form990 for instructions and the latest information **Employer identification number** Name of the organization 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 Internet and email solicitations 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 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

che	dule G (Form 990 or 990-EZ) 2018					F	Page 3
.1	Does the organization conduct gaming	activities with nonmember	5?		☐ Yes	□Ne	
.2	Is the organization a grantor, beneficia formed to administer charitable gaming		member of a partnership or other entity		□Yes		
3	Indicate the percentage of gaming activ	vity conducted in					
а	The organization's facility			13a			%
b	An outside facility			13b			%
4	Enter the name and address of the pers	son who prepares the orga	nization's gaming/special events books and ri	ecords			
	Name ►						
	Address ►						
5a	Does the organization have a contract virevenue?	with a third party from who	om the organization receives gaming		□Yes	□No	
b	If "Yes," enter the amount of gaming re amount of gaming revenue retained by		anization ▶ \$ and th	ne			
С	If "Yes," enter name and address of the	e third party					
	Name ►						
	Address ▶						
6	Gaming manager information						
	Name ►						
	Gaming manager compensation ▶ \$						
	Description of services provided ▶						
	☐ Director/officer	☐ Employee	☐ Independent contractor				
7	Mandatory distributions						
а	Is the organization required under state retain the state gaming license?	e law to make charitable di	stributions from the gaming proceeds to		Yes	□No	
b	Enter the amount of distributions requirements in the organization's own exempt activities.		ated to other exempt organizations or spent		53		
Pai	t IV Supplemental Informatio	n. Provide the explanat	rions required by Part I, line 2b, column licable. Also provide any additional info				 S.
_	Return Reference		Explanation				

Schedule G (Form 990 or 990-EZ) 2018

DLN: 93493301002099 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No 1545-0047 Schedule I **Grants and Other Assistance to Organizations**, (Form 990) Governments and Individuals in the United States Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22. Open to Public ▶ Attach to Form 990. Department of the Inspection ▶ Go to www.irs.gov/Form990 for the latest information. Treasury Internal Revenue Service Name of the organization Employer identification number ZOOLOGICAL SOCIETY OF PITTSBURGH 25-1418766 Part I **General Information on Grants and Assistance** Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and 1 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Grants and Other Assistance to Domestic Organizations and Domestic Governments. Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than \$5,000 Part II can be duplicated if additional space is needed (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (q) Description of (h) Purpose of grant (if applicable) organization (book, FMV, appraisal, noncash assistance or assistance grant cash or government assistance other) (1) See Additional Data (4)(5)(6)(7)(8)(9)(10)(11)(12)Enter total number of section 501(c)(3) and government organizations listed in the line 1 table For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 50055P Schedule I (Form 990) 2018



PROGRESS REPORTS ON THE PROJECTS THAT RECEIVED FUNDING

Schedule I (Form 990) 2018

Additional Data

PO BOX 366 AZLE, TX 76098

PO BOX 23183

DUQUESNE UNIVERSITY

SAN DIEGO, CA 92193

Software ID: Software Version:

Form 990 Schedule T. Part TJ. Grants and Other Assistance to Domestic Organizations and Domestic Governments

501(C)(3)

EIN: 25-1418766

Name: ZOOLOGICAL SOCIETY OF PITTSBURGH

N/A

SUPPORT FOR

INITIATIVE

PANGOLIN GENETICS

0 N/A

98-6061293

form 990,3chedule 1, Fart 11, Grants and Other Assistance to Domestic Organizations and Domestic Governments.											
(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) Description of non-cash assistance	(h) Purpose of grant or assistance				
INTERNATIONAL ELEPHANT FOUNDATION	75-2815706	501(C)(3)	30,000	0	N/A	N/A	GENERAL SUPPORT				

5,500

Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) 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) 7.500 0 N/A IN/A SEA TO SHORE ALLIANCE IGENERAL SUPPORT 4411 BEE RIDGE RD 490 SARASOTA, FL 34233 AFRICAN AOUATIC 47-2592641 501(C)(3) 6.000 O N/A N/A GENERAL SUPPORT CONSERVATION FUND PO BOX 366

CHILMARK, MA 02535

efil	e GRAPHIC pr	int - DO NOT PROCESS As	Filed Data	a -	DLN: 934	9330	1002	099
Sch	edule J	Com	pensati	ion Information	OM	IB No	1545-(0047
(For	n 990)	For certain Officers,	Directors, T	rustees, Key Employees, and Higl	nest			
		➤ Complete if the organi	Compensa zation answ	ited Employees ered "Yes" on Form 990, Part IV,	line 23.	20	18	₹
_			▶ Attach	to Form 990.			to Pul	
•	tment of the Treasury al Revenue Service	► Go to <u>www.irs.gov/F</u>	<u>огтээо</u> тог	instructions and the latest inforn	nation.		ectio	
	ne of the organiza				Employer identificat	ion nu	ımber	
200	DEOGICAL SOCIETY	OF PITTSBURGE			25-1418766			
Pa	rt I Questio	ons Regarding Compensation	1					
							Yes	No
1a				the following to or for a person listed y relevant information regarding thes				
		or charter travel		Housing allowance or residence for p				
	_	companions	님	Payments for business use of persor				
		nification and gross-up payments	H	Health or social club dues or initiation				
	□ Discretion	ary spending account	Ш	Personal services (e g , maid, chauf	reur, cher)			
b		kes in line 1a are checked, did the o ill of the expenses described above?		ollow a written policy regarding paym plete Part III to explain	ent or reimbursement	1 b		
2				or allowing expenses incurred by all	1-2	2		
	directors, truste	es, officers, including the CEO/Exec	utive Director	r, regarding the items checked in line	lar			
3				d to establish the compensation of th	e			
	_	EO/Executive Director Check all tha d organization to establish compens		not check any boxes for methods CEO/Executive Director, but explain ii	n Part III			
	✓ Compensa	tion committee	✓	Written empleyment contract				
	_ '	ation committee ent compensation consultant	✓	Written employment contract Compensation survey or study				
		of other organizations	✓	Approval by the board or compensation	tion committee			
4	During the year,	. did any person listed on Form 990,	Part VII, Se	ction A, line 1a, with respect to the fi				
	related organiza	tion						
а		ance payment or change-of-control				4a		No
b	•	receive payment from, a suppleme	•	•		4b		No
С		receive payment from, an equity-b		nsation arrangement? Ilicable amounts for each item in Part	III	4c		No_
	11 103 to dilly t	in the state, has the persons and pro	ovide the app	meable amounts for each reem in face	•••			
	Only 501(c)(3), 501(c)(4), and 501(c)(29) org	ganizations	must complete lines 5-9.				
5		ed on Form 990, Part VII, Section A, ontingent on the revenues of	line 1a, did	the organization pay or accrue any				
а	The organization	۱۶				5a		No
b	Any related orga					5b		No
_	•	5a or 5b, describe in Part III						
6		ed on Form 990, Part VII, Section A, ontingent on the net earnings of	line 1a, did	the organization pay or accrue any				
a	The organization					6a		No
Ь	Any related orga					6b		No_
7	•	6a or 6b, describe in Part III	المام المام	the eventual and section	ı			
7	payments not de	escribed in lines 5 and 6? If "Yes," d	escribe in Pa		I	7	Yes	
8		nts reported on Form 990, Part VII, litial contract exception described in		red pursuant to a contract that was section 53 4958-4(a)(3)? If "Yes," de	escribe	8		No
9	If "Yes" on line 8 53 4958-6(c)?	3, did the organization also follow th	e rebuttable	presumption procedure described in	Regulations section	9		110
For I	Danarwark Badu	ction Act Notice, see the Instru	tions for Ec	arm 990 Cat No. 5	0053T Schedule 1	(Form	990)	2018

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

Note. The sum of colur	nns (B)(ı)-(ııı) for each listed in	t are not listed on Form 99 dividual must equal the to	tal amount of Form 990,				
(A) Name and Title		(B) Breakdowr (i) Base compensation	of W-2 and/or 1099-MISO (ii) Bonus & incentive compensation	C compensation (iii) Other reportable compensation	(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(ı)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
1 BARBARA BAKER PRESIDENT/CEO	o ''			10,395	11,000	29,383	356,561	0
2 BRADLEY SMITH	(ii)	155,794	0	0	0	0	0	0
DIRECTOR OF CONSTRUCTION MGMT	(i) (ii)		0	871 	6,568 	12,935 	176,168 0	0
	(11)							

Schedule J (Form 990) 2018	Page 3						
Part III Supplemental Information							
Provide the information, explanation, or	rovide 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						
PART I. LINE 7	A SPECIAL AD HOC EXECUTIVE COMPENSATION REVIEW COMMITTEE REVIEWED THE CHIEF EXECUTIVE OFFICER'S PERFORMANCE AND RECOMMENDED TO THE						

EXECUTIVE COMMITTEE THAT INCENTIVE COMPENSATION BE AWARDED IN THE AMOUNT OF \$7,500

efile GRAPHIC print - DO NOT PROCESS As Filed Data -DLN: 93493301002099 SCHEDULE M OMB No 1545-0047 **Noncash Contributions** (Form 990) ▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ▶ Attach to Form 990. ▶Go to www.irs.gov/Form990 for the latest information. Open to Public Department of the Treasury Internal Revenue Service Inspection Name of the organization Employer identification number ZOOLOGICAL SOCIETY OF PITTSBURGH 25-1418766 Part I Types of Property (b) (a) (c) (d) Check if Number of contributions or Noncash contribution Method of determining applicable items contributed amounts reported on noncash contribution amounts Form 990, Part VIII, line 1g 1 Art-Works of art . . Art—Historical treasures Art—Fractional interests 4 Books and publications Clothing and household goods Cars and other vehicles **7** Boats and planes . . 8 Intellectual property . . . Securities—Publicly traded . Χ 1,048,971 FMV 10 Securities—Closely held stock . 11 Securities—Partnership, LLC, or trust interests 12 Securities—Miscellaneous . . 13 Qualified conservation contribution—Historic structures . . . Qualified conservation contribution—Other . Real estate—Residential . Real estate—Commercial . Real estate—Other . . 18 Collectibles Food inventory . . . 19 20 Drugs and medical supplies . 21 Taxidermy 22 Historical artifacts . 23 Scientific specimens . . 24 Archeological artifacts . . 25 Other ▶ (_____ Other ▶ (______) 26 27 Other ▶ (______) Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt 30a Nο b If "Yes," describe the arrangement in Part II Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions? 31 Yes 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash 32a Nο b If "Yes," describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, Schedule M (Form 990) (2018) For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat No 51227J

Schedule M (Form 990) (2018)	Page 2
I, column (b), the r	formation. ation required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part number of contributions, the number of items received, or a combination of both. Also 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 2018
	Schedule M (Form 990) (2018)

efile GRAPH	IIC print -	DO NOT	PROCESS	.	As Filed D	ata -					DLN:	93493301002099
SCHEDULE O (Form 990 or 990- EZ) Department of the Treasury Supplemental Information to Form 990 or 990-EZ Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or 990-EZ. Go to www.irs.qov/Form990 for the latest information.								OMB No 1545-0047 2018 Open to Public Inspection				
Namel Sftheiofganization Zoological society of Pittsburgh							Employer identification number					
990 Schedul	e O, Supp	lemental	Informa	tior	1							
Return Reference							Explana	ition				
FORM 990, PART VI,	ARD OF D	IRECTORS	, EXCEPT	TH	ALL HAVE AN OSE POWER:	S SPEC	CIFICALL	Y PROHIE	BITED BY S	TATUTE, T	HOSE R	

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

LINE 1

Return Explanation Reference

990 Schedule O, Supplemental Information

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

THE SOCIETY WILL SUBMIT A DRAFT TO SELECT MEMBERS OF THE FINANCE COMMITTEE FOR THEIR REVIE
W AND APPROVAL THE CFO PARTICIPATES IN THIS REVIEW THE BOARD PASSED A RESOLUTION TO APPR
OVE THE FORM 990 BASED ON THE FINANCE COMMITTEE'S REVIEW AND APPROVAL COPIES ARE MADE AVA
ILABLE TO ALL MEMBERS OF THE BOARD OF DIRECTORS BEFORE THE RETURN IS FILED WITH THE INTERN
AL REVENUE SERVICE

D - 4.....

Reference	Explanation
FORM 990,	THE BOARD OF DIRECTORS REVIEWS THE CONFLICT OF INTEREST POLICY AT THE FIRST MEETING OF EAC
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

Eunlandtion

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 THE PRESIDENT & CEO MEETS WITH HUMAN RESOURCES AND THE CFO TO REVIEW PERFORMANCE AND APPROVE COMPENSATION FOR THE ZOO'S OFFICERS AND KEY EMPLOYEES THEY REVIEW COMPARABLE COMPENSATION DATA FOR SIMILA RLY QUALIFIED PERSONS IN FUNCTIONALLY COMPARABLE POSITIONS AT SIMILARLY SITUATED ORGANIZAT IONS THEY ALSO USE COMPENSATION SURVEY DATA

Return Explanation

FORM 990, THE SOCIETY MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND FINANCIAL STATE MENTS AVAILABLE TO THE PUBLIC THROUGH SUBMISSIONS TO THE ALLEGHENY REGIONAL ASSET DISTRICT SECTION C, IN ANNUAL REPORTS AND OTHERWISE UPON REQUEST

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 PRIOR YEAR