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Department of the Treasury Internal Revenue Service

# **Return of Organization Exempt From Income Tax**

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047 2008 Open to Public Inspection

<u> </u>	For the 2008 ca	alendar year, or tax year beginning 7/01/08, and ending 6/30/09		
	Check if applicate	l ind	INC.	Employer identification number
$\equiv$	-	label of Company Asserting		73-0688645
一	Name change		-	Telephone number
닏	Initial return	See P.O. BOX 18424		405-427-2461
Ц	Termination	Instruc City or town, state or country, and ZIP + 4	<b>G</b> Gro	oss receipts 1,580,882
$\bigsqcup$	Amended return	tions. OKLAHOMA CITY OK 73154-0424		
	Application pend	Name and address of principal officer	H(a)	Is this a group return for
		DANA MCCRORY		affiliates? Yes X No
		P.O. BOX 18424 OKLAHOMA CITY OK 73154-0424		included? Yes No
1	Tax-exempt state			If "No," attach a list (see instructions)
		WWW.ZOOFRIENDS.COM	H(c)	Group exemption num <b>s</b> r <b>N/A</b>
		<del></del>	ar of formatio 1954	
P	art I S	ummary		
	1 Briefly d	escribe the organization's mission or most significant activities		
æ	SUP	PORT THE OKLAHOMA CITY ZOO		
and				
/eru	l			
Activities & Governance			of its assets	3   46
ර		of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b)	טטטן -	3 46 4 46
įŧį		mber of employees (Part V, line 2a)	m ├-	5 17
Ęį	į.	mber of volunteers (estimate if necessary)	61-149 FEB (	6 100
⋖		oss unrelated business revenue from Part VIII, line 12, column (C)		7a
		elated business taxable income from Form 990-T, line 34	J KFC	7b 0
			Prior Year	Current Year
9		utions and grants (Part VIII, line 1h)	229,8	<del></del>
Revenue	_	n service revenue (Part VIII, line 2g)	965,2 31,0	
æ		ent income (Part VIII, column (A), lines 3, 4, and 7d) evenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	287,1	
		venue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	1,513,2	
		and similar amounts paid (Part IX, column (A), lines 1-3)	696,4	
	14 Benefits	paid to or for members (Part IX, column (A), line 4)	-	
ç	15 Salaries	, other compensation, employee benefits (Part IX, column (A), lines 5–10)	311,5	38 328,844
penses	16a Professi	onal fundraising fees (Part IX, column (A), line 11e)		
Expe		ndraising expenses (Part IX, column (D), line 25)   70,700		2 1 221 252
ш		kpenses (Part IX, column (A), lines 11a-11d, 11f-24f)	295,9	
		penses Add lines 13-17 (must equal Part IX, column (A), line 25)	1,303,8	
sp.	19 Revenu	e less expenses Subtract line 18 from line 12	209,3 Beginning of Ye	
Vet Assets brund Balances	20 Total as	sets (Part X, line 16)	1,267,6	<del></del>
id B	21 Total lia	bilities (Part X, line 26)	111,3	
<u>چ</u> کے	22 Net asse	ets or fund balances Subtract line 21 from line 20	1,156,2	54 998,714
<u>} P</u>	art II S	ignature Block		
2	Ur	nder penalties of perjury, I declare that I have examined this return, including accompanying schedules and s id belief, it strue, correct, and complete. Declaration of preparer (other than officer) is based on all informati		
ş Şiş	, a	in belief, in gaude, correct, and complete bedaration of preparer (other trial officer) is based on all information	l l	as any knowledge
		Walla 1. Molsory	<u>l</u> .	
He	re	Signature of officer  DANA R. MCCRORY EXECUTIVE DIRECT		2-1-2010
]		Type or print name and title	TOR	2-1-2016
<del>, -</del>	<del>  '-</del>	Dotat /	. Check if	Preparer's identifying numbe
Pa	14	32	self-	(see instructions) P00177237
Pre	eparer's	COLE & REED P.C.	employed	. 72-1212422 \
	e Only	F31 COLICII DD TVE CLITTE 200	EI	hone A
	,	dress, and ZIP + 4 OKLAHOMA CITY, OK 73102-2251	l Pi	. 405-220-7061 U
		ss this return with the preparer shown above? (see instructions)		Yes No
DAA		Act and Paperwork Reduction Act Notice, see the separate instructions.		Form <b>990</b> (2008)

4d Other program services (Describe in Schedule O) including grants of \$ ) (Revenue \$ 1,464,783 (Must equal Part IX, Line 25, column (B)) 4e Total program service expenses

Part IV Checklist of Required Schedules

			Yes	No
1	*Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	4	x	
2	complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	-		
,	candidates for public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete	-		
•	Schedule C, Part II	4		x
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e)		-	
	notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any accounts where donors have the right to	Ť		
•	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete			
	Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		X
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part			
	X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	Did the organization report an amount in Part X, lines 10, 12, 13, 15, or 25? If "Yes," complete Schedule D,			
	Parts VI, VIII, VIII, IX, or X as applicable	11	X	
12	Did the organization receive an audited financial statement for the year for which it is completing this return			
	that was prepared in accordance with GAAP? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the US?	14a		Х
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising,	١ ا		₹.
	business, and program service activities outside the U S ? If "Yes," complete Schedule F, Part I	14b		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	4-		x
4.0	organization or entity located outside the United States? If "Yes," complete Schedule F, Part II	15		
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance	46		x
47	to individuals located outside the United States? If "Yes," complete Schedule F, Part III  Did the organization report more than \$15,000 on Part IX, column (A), line 11e? If "Yes," complete Schedule G, Part I	16 17		X
17 18	Did the organization report more than \$15,000 total on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		X
19	Did the organization report more than \$15,000 on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		X
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		X
21	Did the organization report more than \$5,000 on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		x
22	Did the organization report more than \$5,000 on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5? If "Yes," complete			
	Schedule J	23		X
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions			
	24b-24d and complete Schedule K If "No," go to question 25	24a		X
b	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		<u> </u>
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		<u> </u>
25a	Section 501(c)(3) and 501(c)(4) 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		<u> </u>
b	Did the organization become aware that it had engaged in an excess benefit transaction with a disqualified			
	person from a prior year? If "Yes," complete Schedule L, Part I	25b		X_
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or			٠,,
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, or			•
	substantial contributor, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27	900	(2008)
		rorm	・コブリ	(2008)

Part IV Checklist of Required Schedules (continued)

			Yes	No
28	During the tax year, did any person who is a current or former officer, director, trustee, or key employee			ĺ
а	Have a direct business relationship with the organization (other than as an officer, director, trustee, or			ĺ
	employee), or an indirect business relationship through ownership of more than 35% in another entity			l
	(individually or collectively with other person(s) listed in Part VII, Section A)? If "Yes," complete Schedule L,			l
	Part IV	28a		X
b	Have a family member who had a direct or indirect business relationship with the organization? If "Yes,"			1
	complete Schedule L, Part IV	28b		X
С	Serve as an officer, director, trustee, key employee, partner, or member of an entity (or a shareholder of a			1
	professional corporation) doing business with the organization? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N,			
	Part I	_31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,			
	III, IV, and V, line 1	34		X
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete			
	Schedule R, Part V, line 2	35		X
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related			
	organization? If "Yes," complete Schedule R, Part V, line 2	36		X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part			
	VI	37		x

Form 990 (2008)

Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance					
					Yes	No
1a	*Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of	1 1				
	U.S. Information Returns. Enter -0- if not applicable	1a	0	_		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0	_		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and report	table		1		
	gaming (gambling) winnings to prize winners?		•	1c	X	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax					
	Statements, filed for the calendar year ending with or within the year covered by this return	2a	_17	_		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns	?		2b	X	
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see					
	instructions)					
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year covered to	ру				
	this return?			3a		_X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other aut	•				
	over, a financial account in a foreign country (such as a bank account, securities account, or other finan	cıal		1.		77
	account)?			_4a	-	X
b	If "Yes," enter the name of the foreign country					
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreign Ba	nĸ				
<b>.</b> .	and Financial Accounts					x
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	<b>-</b> 2		5a 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction if "Yes," to question 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity	117		30		
С	Regarding Prohibited Tax Shelter Transaction?			5c		
6a	Did the organization solicit any contributions that were not tax deductible?			6a		x
b	If "Yes," did the organization include with every solicitation an express statement that such contributions	or		- 52		
-	gifts were not tax deductible?	•		6ь		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization provide goods or services in exchange for any quid pro quo contribution of more th	an		-		
	\$75?			7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	required to file Form 8282?		_	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal transfer of the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal transfer or the organization.	onal				
	benefit contract?			7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract	?		7f		X
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as required?			7g		X
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C a	S				
	required?			7h		X
8	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds and sect					
	509(a)(3) supporting organizations. Did the supporting organization, or a fund maintained by a spons	oring				₹.
_	organization, have excess business holdings at any time during the year?			8		<u>X</u>
9	Section 501(c)(3) and other sponsoring organizations maintaining donor advised funds.					х
a	Did the organization make any taxable distributions under section 4966?			9a		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?			<u>9b</u>		
10	Section 501(c)(7) organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12	10a				
a b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10a		7		
11	Section 501(c)(12) organizations. Enter	ַנוטו		-		
''	Gross income from members or shareholders	11a	]			
a b	Gross income from other sources (Do not net amounts due or paid to other sources against	""		7		
IJ	amounts due or received from them )	11b			1	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1		L	12a	1	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
	The state of the s			Form	990	(2008)

Governance, Management, and Disclosure (Sections A, B, and C request information about policies not Part VI ' required by the Internal Revenue Code.)

<u>Sec</u>	tion A. Governing Body and Management			<del></del> .			
						Yes	No
	For each "Yes" response to lines 2–7b below, and for a "No" response to lines 8 or 9b below, describe the	е					
	circumstances, processes, or changes in Schedule O See instructions						
1a	Enter the number of voting members of the governing body	1a	46	<u></u>			
b	Enter the number of voting members that are independent	1b	46	_			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship will	h					
	any other officer, director, trustee, or key employee?				2	X	<u> </u>
3	Did the organization delegate control over management duties customarily performed by or under the direction	ect					
	supervision of officers, directors or trustees, or key employees to a management company or other person	กว			3	<u> </u>	X
4	Did the organization make any significant changes to its organizational documents since the prior Form 9	90 wa:	s filed?		4		X
5	Did the organization become aware during the year of a material diversion of the organization's assets?				5	ļ	Х
6	Does the organization have members or stockholders?				6		Х
7a	Does the organization have members, stockholders, or other persons who may elect one or more members	ers			i		
	of the governing body?				7a	<u> </u>	X
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons	?			7b	<u> </u>	X
8	Did the organization contemporaneously document the meetings held or written actions undertaken during	g				j	1
	the year by the following						1
а	The governing body?				8a	X	<u> </u>
b	Each committee with authority to act on behalf of the governing body?				8b	X	
9a	Does the organization have local chapters, branches, or affiliates?				9a		X
b	If "Yes," does the organization have written policies and procedures governing the activities of such chap	ters,					
	affiliates, and branches to ensure their operations are consistent with those of the organization?				9b		
10	Was a copy of the Form 990 provided to the organization's governing body before it was filed? All organization	zations					
	must describe in Schedule O the process, if any, the organization uses to review the Form 990				10	X	
11	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who cannot be reach	ed at					
	the organization's mailing address? If "Yes," provide the names and addresses in Schedule O				11		X
Sec	tion B. Policies						
						Yes	No
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13				12a	X	<u> </u>
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could gi	ve					
	rise to conflicts?				12b	X	<u> </u>
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,	n					
	describe in Schedule O how this is done				12c	X	
13	Does the organization have a written whistleblower policy?				13	X	
14	Does the organization have a written document retention and destruction policy?				14	X	L
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 de-	cision					
а	The organization's CEO, Executive Director, or top management official?				15a	X	L
b	Other officers or key employees of the organization?				15b	X	
	Describe the process in Schedule O (see instructions)					1	
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement						
	with a taxable entity during the year?				16a		x
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate						
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safegu	ard					1
	the organization's exempt status with respect to such arrangements?				16b		
Sec	tion C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed   OK						
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (50	1(c)(3)	s ontv)				
	available for public inspection. Indicate how you make these available. Check all that apply	//	,,				
	Own website X Another's website X Upon request						
10	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, confl	ict of "	nterest				
19	policy, and financial statements available to the public	, J. J. II	norest				
20	State the name, physical address, and telephone number of the person who possesses the books and re	corde	of the				
20	organization ♦ OKLAHOMA ZOOLOGICAL SOCIETY PO BOX 18424		or are				
٥.			3154.	-0424	405-42	7-2	461
_01	KLAHOMA CITY O	<u>~`                                    </u>	<u> </u>	<u> </u>	300-32		. T U I

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

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

- 1a Complete this table for all persons required to be listed. Use Schedule J-2 if additional space is needed
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if the or	ganization did not compe	nsate a	any o	office	r, dı	recto	r, tru	stee, or key employee		
(A)	(B)			((				(D)	(E)	(F)
Name and Title	Average hours per week			Officer		rat ap emplo		Reportable compensation from the	Reportable compensation from related organizations	Estimated amount of other compensation
		Individual trustee or director	Institutional trustee	, ii	Key employee	Highest compensated employee	er	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization and related organizations
CRAIG STORY										
DIRECTOR	1	x						0	0	0
JIMMIE C. TH	OMAS									
DIRECTOR	1	X				l '		0	0	0
JON TRUDGEON	•	İ								
DIRECTOR	1	X	<u> </u>	<u> </u>	L_	<u> </u>		0	0	0
KENT WILLIAM						ļ				_
DIRECTOR	1	X						0	0	0
KIM WILLIAMS										_
DIRECTOR	1	X						0	0	0
BRIAN GAGE										_
DIRECTOR	1	X			_	<u> </u>		0	0	0
COREY HYDE E					ĺ		ļ			_
DIRECTOR	1	X				<u> </u>	<u> </u>	0	0	0
CARLOS JOHNS					i					_
DIRECTOR	1	X	_			ļ		0	0	0
DARRYL SCHMI										
DIRECTOR	1	X			<u> </u>	<b>└</b>		0	0	0
MARK SULLIVA	1	1								
DIRECTOR	1	X	ļ					0	0	0
DON T ZACHRI										
DIRECTOR	1	X		<u> </u>		ļ	_	0	0	0
BILL DOCKUM	_				ŀ					_
DIRECTOR	11	_ X	_		ļ	<u> </u>	<u> </u>	0	0	0
DANA ZEIGLEF	l .									
DIRECTOR	1	X	<u> </u>	ļ	_	<b> </b>		0	0	0
CRAIG ABBOTT										
DIRECTOR	1	X	_	<u> </u>	<u> </u>	<u> </u>	_	0	0	0
PETAR ALAUPO				1					_	_
DIRECTOR	1	X			_	_		0	0	0
SANDRA BAILE			ŀ						_	
DIRECTOR	1	X	<u> </u>	L_	<u> </u>	<del> </del>		0	0	0
DICK BESHEAF			ĺ						_	_
DIRECTOR	1	X	<u></u>	<u>L</u> .		1	<u>L_</u>	0	0	0 Form <b>990</b> (2008)

	THOMA ZOOLOGIC						_	INC. $73-068$			Page 8
· · · · · · · · · · · · · · · · · · ·	1	stees	, Ke			yees	, and	d Highest Compensated E	mployees (continued)		
(A)	(B)				C)			(D)	(E)	(F)	
Name and title	Average	Posi	tion (		all th	nat ap		Reportable	Reportable	Estimat	ed
•	hours per	일	l Ing	Officer	<u>₹</u>	먪	Former	compensation	compensation	amount	
	week	Individual trustee or director	Institutional truste	g	Key employee	bes	mer	from the	from related organizations	other compensa	
		호를	Sa		흥	88		organization	(W-2/1099-MISC)	from th	
		rust	1 <del>2</del>		)ee	#g		(W-2/1099-MISC)	,	organiza	
		8	stee		Ì	Highest compensated employee				and rela	
			"			ē				organizat	ions
WILLIAM BLAI	K										
DIRECTOR	1	x						0	0		0
JAMES COLE											
DIRECTOR	1	X					}	0	0		0
DARREN DERRY	BERRY										
DIRECTOR	1	X						0	0		0
ROBERT FITZE	ATRICK										
DIRECTOR	1	X	ļ	ľ				0	0		0
BYRON GAMBUI	os										
DIRECTOR	1	x		ŀ	ļ		ļ	0:	ol		0
JULIE HALL											-
DIRECTOR	1	X		ŀ				0	ol		0
BOB HAMMACK		1				İ				<del> </del>	
DIRECTOR	1	x					ŀ	0	ol		0
STAN STACK		1									
DIRECTOR	1	x		İ			•	0	ol		0
ANDRIA KAPLA		†	<b>†</b>			t					
DIRECTOR	1	x						0	ol		0
DIANA KENNED		+==	<b>-</b>				-				<u>_</u>
DIRECTOR	1	x				ŀ		0	ol		0
DOTTIE LAMME		1									<del>_</del>
DIRECTOR	1	x		}				0	ol		0
JIM LANGE	-	+		$\vdash$		$\vdash$	$\vdash$		-		
DIRECTOR	1	x						0	o		0
KATHERINE LI		T					-			<del></del>	
DIRECTOR	1	x						0	ol		0
1b Total					_		•				
	viduals (including those in 1	a) w	ho re	ceiv	ed m	ore !	han	\$100,000 in reportable com	pensation from the		
organization ◆ 0		•						. , ,	•		
											Yes No
3 Did the organization	list any former officer, dire	ctor o	or tru	stee	, key	emp	oloye	ee, or highest compensated			
employee on line 1a	? If "Yes," complete Schedu	ule J	for s	uch i	ndıv	idual	-			3	X
								and other compensation from			
_	related organizations great	ter th	an \$	150,0	0007	If "Y	'es,"	complete Schedule J for su	ıch	4	x
individual 5 Did any person listed	d on line 1a receive or accri		mne	nest	ıon f	rom ·	י עמב	unrelated organization for		1	<del></del>
	the organization? If "Yes,"									5	x
Section B. Independent						'		F :			
1 Complete this table t	for your five highest compe	nsate	ed inc	depe	nder	nt cor	ntrac	ctors that received more that	n \$100,000 of		
compensation from t	the organization									·—	
	(A) Name and business addres	ss						Descri	(B) ption of services	Cor	(C) mpensation
		•									
							T				
							t	<del></del>			
							T				<del></del>
										l	
2 Total number of inde	ependent contractors (include	dina t	hose	ın 1	) wh	n rer		nore than \$100 000 in			
compensation from t		aniy i		, ,,, 1	, ****	IC	~146	sa more man wroo,000 m			
DAA	and organization •										990 (2008)
											,,

<u> Pa</u>	<u> </u>	in Statement of Rev	venue_			(A) Total revenue	(B) Related or exempt	(C) Unrelated business	(D) Revenue excluded from tax
							function revenue	revenue	under sections 512, 513, or 514
st st	1a	Federated campaigns	1a						
Program Service Reven and other similar amounts	b	Membership dues	1b						
ts, c am	С	Fundraising events	1c						
igi	d	Related organizations	1d						
ns,	е	Government grants (contribution	s) 1e						
utio er s	f	All other contributions, gifts, gran			ł				
ë		and similar amounts not included	above	3	64,591				
Rat	g	Noncash contributions included in	ın lınes <b>\$</b> a-1	f	ļ				
땿	<u>h</u>	Total. Add lines 1a-1f			•	364,591		,	·
eve					Busn. Code				
e R	2a	MEMBERSHIP DUES				1,006,681	1,006,681		
Vic.	b								
Ser	С								
E	ď								
gra	0	A.W							<del></del>
50	Ť	All other program service rev	enue			1 006 601			
		Total. Add lines 2a–2f		<del></del>		1,006,681		<del></del>	
	3	Investment income (including	g dividends	s, interes	t, and	8,702			8,702
	4	other similar amounts) Income from investment of ta	avomnt	hand are	acceds A	8,702			0,702
	4		ax-exempt	bona pro	ceeds				
	5	Royalties (i) Rea	, 1	(n) P	ersonal				<u> </u>
	6a		4,821	(,	ersenar -				
	b	Less rental exps	-,022						
	c		4,821					j	
	d	Net rental income or (loss)	-,		•	74,821			74,821
		Gross amount from (i) Securi	ties	(11)	Other	,-,-			, - ,
		other than inventory							
	ь	Less cost or other							
		basis & sales exps							
	С	Gain or (loss)							
	d	Net gain or (loss)			•				
	8a	Gross income from fundrais	sing event	s			,		
ine		(not includin§							
/en		of contributions reported or	line 1c)						
Re		See Part IV, line 18	a						
Other Reven	b	Less. direct expenses	ь						
ŏ	С	Net income or (loss) from fur		vents	•				
	9a	Gross income from gaming	activities						
		See Part IV, line 19	a						
		Less direct expenses	ь						····
		Net income or (loss) from ga		ities	•				
	10a	Gross sales of inventory, less	s						
		returns and allowances	a _						
		Less cost of goods sold	b_						
	С	Net income or (loss) from sa		ntory	•				
		Miscellaneous Rever	nue		Busn. Code	50.004	50.004		
	11a	ZOOBILIATION			<del> </del>	58,894	58,894		FB 000
	b	OTHER FUNDRAISING R				57,898			57,898
	C	OSTRICH EGG BREAKFAS	ST		<b></b>	9,295	9,295		
	d	All other revenue			L	106.005			
	е	Total. Add lines 11a–11d		<b>.</b>	•	126,087			
	12	Total Revenue. Add lines 1h	n, 2g, 3, 4,	5, 6d, 7d		1 500 000	1 074 055	ا م	1 4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
		9c, 10c, and 11e			<u> </u>	1,580,882	1,074,870	0	141,421

### Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

	All other organizations must				
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments	and	<u> </u>		<u> </u>
	organizations in the U.S. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the U.S. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	U.S. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
	trustees, and key employees	90,518	21,495	39,599	29,424
6	Compensation not included above, to disqual	, , , , , , , , , , , , , , , , , , , ,			-
	persons (as defined under section 4958(f)(1))	and			
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	186,230	93,115	93,115	
8	Pension plan contributions (include section 40	1(k)			
	and section 403(b) employer contributions)				
9	Other employee benefits	30,190	15,095	15,095	
10	Payroll taxes	21,906	11,016	10,890	
11	Fees for services (non-employees)				
а	Management				
b	Legal	1,625		1,625	
С	Accounting	14,400		14,400	
d	Lobbying				
е	Professional fundraising services See Part IV	/, line 17			
f	Investment management fees				<del></del>
g	Other				<del></del>
12	Advertising and promotion				
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel				<del></del>
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		-		
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates	12,621	12,621		
22	Depreciation, depletion, and amortization	12,021	12,621		
23	Insurance				<del></del>
24	Other expenses Itemize expenses not				
24	covered above. (Expenses grouped together				
	and labeled miscellaneous may not exceed				
	5% of total expenses shown on line 25 below )				
_	OK ZOO PROGRAM EXPENSES	1,104,454	1,104,454		
a b	PROMOTIONAL AND MEMBERSHI	83,128	83,128		
C	OTHER PROGRAM EXPENSES	55,300	55,300		
ď	POSTAGE	46,369	46,369		
e	BOWLING FOR RHINOS	19,430			19,430
f	All other expenses	44,036	22,190		21,846
	Total functional expenses. Add lines 1 thr		1,464,783	174,724	70,700
26	Joint Costs. Check here				
	SOP 98-2 Complete this line only if the			Ì	
	organization reported in column (8) joint costs				
	from a combined educational campaign and fundraising solicitation				
DAA	The state of the s	-	<del></del>		Form 990 (2008)

_P	art X	C Balance Sheet								
		•		(A) Beginning of year		(B) End of				
	`1	Cash—non-interest bearing		996,102	1	8	43,	233		
	2	Savings and temporary cash investments	[		2		10,			
	3	Pledges and grants receivable, net		27,935	3		26,			
	4	Accounts receivable, net	Ī	· · · · · ·	4		16,			
	5	Receivables from current and former officers, directors, tru	ustees, key							
		employees, or other related parties. Complete Part II of Sc	·		5					
	6	Receivables from other disqualified persons (as defined up	F							
		4958(f)(1)) and persons described in section 4958(c)(3)(B								
		Part II of Schedule L	,		6					
S	7	Notes and loans receivable, net	Ţ.		7					
šet	8	Inventories for sale or use	ļ ,		8					
Assets	9	Prepaid expenses and deferred charges	ŀ		9		4.	133		
1	10a		10a 151,397							
		Less accumulated depreciation Complete	100							
	~	Part VI of Schedule D	10b 107,545	51,360	10c		43,	852		
	11	Investments—publicly traded securities	105 20 7 9 20	32/300	11		<u> </u>			
	12	Investments—other securities See Part IV, line 11	<u> </u>		12					
	13	Investments—program-related See Part IV, line 11	<u> </u>		13					
	14	Intangible assets	F		14					
	15	Other assets See Part IV, line 11	ŀ	192,241	15	1'	78,	943		
	16	Total assets. Add lines 1 through 15 (must equal line 34)	<u> </u>	1,267,638	_	1,1				
	17	Accounts payable and accrued expenses		59,260			65,			
	18	Grants payable	<u> </u>	35,200	18	·	55,	<u> </u>		
	19									
	20	Tax-exempt bond liabilities	<u> </u>	32,124	20	-	59,	<del>555</del>		
Ś	21	Escrow account liability Complete Part IV of Schedule D	l l		21	<u> </u>				
ij	22	Payables to current and former officers, directors, trustees	kov		21					
Liabilities	**	employees, highest compensated employees, and disqual	· •			İ				
Ë		persons Complete Part II of Schedule L	illed		22					
	persons Complete Part II of Schedule L  23 Secured mortgages and notes payable to unrelated third parties  24 Unsecured notes and loans payable  24 25									
	25	Other liabilities Complete Part X of Schedule D	ŀ		25					
	26	Total liabilities. Add lines 17 through 25	<u>†</u>	111,384	$\overline{}$	1:	24,	412		
·/	20	Organizations that follow SFAS 117, check here	and	•	20					
or Fund Balances		complete lines 27 through 29, and lines 33 and 34.	and	•		1				
a	27	Unrestricted net assets	İ	856,924	27	7.	16,	342		
3al	28	Temporarily restricted net assets	ŀ	117,911	28		99,			
9	29	Permanently restricted net assets	ļ-	181,419			83,:			
Ē	23	Organizations that do not follow SFAS 117, check here	, <b>,</b> m	101,415	25		<del>55,</del>			
F		and complete lines 30 through 34.	* ·			1				
	30	Capital stock or trust principal, or current funds			30	İ				
ets	31	Paid-in or capital surplus, or land, building, or equipment fu	und		31					
SS	32	Retained earnings, endowment, accumulated income, or of			32					
Ā		Total net assets or fund balances	iner lanas	1,156,254		9,	98,	714		
Net Assets	33	Total liabilities and net assets/fund balances	<b> </b>	1,267,638		1,12				
	art X			1,201,000	34		<u> </u>			
	ait A	I mancial Statements and Reporting					Yes	No.		
4	۸۵	counting method used to prepare the Form 990 C	ash 🕱 Accrual 🗍 Ott	nor		r	162	No		
1		ere the organization's financial statements compiled or revie				20		х		
28			· · · · · · · · · · · · · · · · · · ·	۱ <b>۰</b>		2a   2b	x			
t		ere the organization's financial statements audited by an indi-		avaraight of		20				
(		Yes" to lines 2a or 2b, does the organization have a commit		-		1 25		х		
•		e audit, review, or compilation of its financial statements and	·			2c				
38		a result of a federal award, was the organization required to Single Audit Act and OMB Circular A-133?	oundergo an addit of addits as set	iOrui III		1		X		
		-	.to?			3a				
t	וו יי	Yes," did the organization undergo the required audit or aud	IIS /							

# SCHEDULE A

(Form 990 or 990-EZ)

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

To be completed by all section 501(c)(3) organizations and section 4947(a)(1) nonexempt charitable trusts.

◆ Attach to Form 990 or Form 990-EZ. ◆ See separate instructions.

Reason for Public Charity Status (All organizations must complete this part.) (see instructions)

OMB No 1545-0047

2008

Open to Public Inspection

Employer identification number

73-0688645

Schedule A (Form 990 or 990-EZ) 2008

Department of the Treasury Internal Revenue Service Name of the organization

Part I

DAA

OKLAHOMA ZOOLOGICAL SOCIETY, INC.

The organization is not a private foundation because it is (Please check only one organization)

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

A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). (Attach Schedule H) A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, 4 city, and state An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II) X 9 An organization that normally receives (1) more than 33 1/3 % of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3 % of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See section 509(a)(2). (Complete Part III) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4), (see instructions) An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h b Type II c Type III–Functionally Integrated Type III-Other By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the a following persons? Yes (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) 11g(i) and (iii) below, the governing body of the supported organization? (ii) A family member of a person described in (i) above? |11g(ii) (iii) A 35% controlled entity of a person described in (i) or (ii) above? |11q(ii h Provide the following information about the organizations the organization supports (vii) Amount of (II) EIN (III) Type of organization (iv) Is the organization(v) Did you notify (vi) Is the (i) Name of supported (described on lines 1-9 in col (i) listed in youthe organization prganization in col support organization above or IRC section governing document? col (i) of your (i) organized in the US2 (see instructions)) support? Yes Yes No No Yes No

	person (other than a governmental unit of publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)								
6	Public support. Subtract line 5 from line	4							_
Sec	tion B. Total Support	7	1						_
	lendar year (or fiscal year beginning	h) ◆(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 200	8	(f) Total	
7	Amounts from line 4								
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources								
9	Net income from unrelated business activities, whether or not the business is regularly carried on					_			
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)								
11 12	Total support. Add lines 7 through 10 Gross receipts from related activities, etc. (					<u> </u>	12		—
13	First five years. If the Form 990 is for the c	•	second third fourth	or fifth tay year a	s a section 501/c)/	3)	12		
15	organization, check this box and stop here	=	secona, uma, nan	i, or murtax year a	s a section so r(c)(	3)		•	$\Box$
Sec	tion C. Computation of Public Su		tage						
14	Public support percentage for 2008 (line 6,	• • •		f))		•	14		%
15	Public support percentage from 2007 Sche		-	"			15		%
16a	33 1/3 % support test-2008. If the organi	zation did not ched	k the box on line 13	, and line 14 is 33	1/3 % or more, che	ck this box			_
	and stop here. The organization qualifies a	s a publicly suppo	rted organization					<b>&gt;</b>	
b	33 1/3 % support test—2007. If the organi	zation did not chec	k a box on line 13 o	r 16a, and line 15 i	s 33 1/3 % or more	, check this			_
	box and stop here. The organization qualif	ies as a publicly su	ipported organizatio	n				<b>•</b>	$\sqcup$
17a	10%-facts-and-circumstances test—2008	3. If the organization	n did not check a be	ox on line 13, 16a,	or 16b, and line 14	ıs 10% or			
	more, and if the organization meets the "fac	cts-and-circumstan	ces" test, check this	box and stop her	e. Explain in Part I'	√ how the			_
	organization meets the "facts-and-circumst	ances" test. The or	ganızatıon qualıfies	as a publicly suppo	orted organization			<b>&gt;</b>	Ш
b	10%-facts-and-circumstances test—2003	•					or		
	more, and if the organization meets the "fac		•	•	•	√ how the			_
	organization meets the "facts-and-circumst	ances" test. The or	ganızatıon qualifies	as a publicly suppo	orted organization				Ш

Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions

18

(b) 2005

1,124,316

(c) 2006

1,210,790

(d) 2007

1,195,095

(e) 2008

1,371,272

(f) Total

5,916,258

Support Schedule for Organizations Described in Section 509(a)(2) (Complete only if you checked the box on line 9 of Part I.)

1,014,785

Section A. Public Support

any "unusual grants ")

Calendar year (or fiscal year beginning in) ◆(a) 2004

Gifts, grants, contributions, and membership fees received (Do not include

2	Gross receipts from admissions, merchal sold or services performed, or facilities furnished in any activity that is related to organization's tax-exempt purpose						
3	Gross receipts from activities that are not unrelated trade or business under section						
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1-5	1,014,785	1,124,316	1,210,790	1,195,095	1,371,272	5,916,258
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 1% of the total of lines 9, 10c, 11, and 12 for the year or \$5,000 Add lines 7a and 7b						
8	Public support (Subtract line 7c from	1,014,785	1,124,316	1,210,790	1,195,095	1,371,272	
·	line 6)	1,014,703	1,124,510	1,210,730	1,193,093	1,3,1,2,2	5,916,258
Sec	tion B. Total Support				<u> </u>		
Ca	lendar year (or fiscal year beginning i	n) 🔷(a) 2004	(b) 2005	(c) 2006	(d) 2007	(e) 2008	(f) Total
9	Amounts from line 6	1,014,785	1,124,316	1,210,790	1,195,095	1,371,272	5,916,258
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	47,952	75,658	96,559	105,824	83,523	409,516
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
С	Add lines 10a and 10b	47,952	75,658	96,559	105,824	83,523	409,516
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)		81,258	35,963	95,103	126,087	338,411
13	Total support. (Add lines 9, 10c, 11,	1,062,737	1,281,232	1,343,312	1,396,022	1,580,882	
	and 12)						6,664,185
14	First five years. If the Form 990 is for the o	rganization's first, s	econd, third, fourth	, or fifth tax year as	a section 501(c)(3	)	, n
500	organization, check this box and stop here tion C. Computation of Public Su	nnort Boroonte		<del> </del>			▶
				···	<del></del>		
15	Public support percentage for 2008 (line 8,		-	))		15	88.7769 %
16 Sec	Public support percentage from 2007 Sched tion D. Computation of Investmen					16	92.1347 %
	Investment income percentage for 2008 (lin			lump (f)	<del>-</del> :-	17	6.1450 %
17 10	Investment income percentage for 2006 (iii)		=	numin (1))		18	5.3099 %
18 19a	33 1/3 % support tests—2008. If the organ			1 and line 15 is mor	e than 33 1/3 %		3.3033 76
130	17 is not more than 33 1/3 %, check this bo						► X
b	33 1/3 % support tests—2007. If the organ				• •		
	line 18 is not more than 33 1/3 %, check this						▶ □
20	Private foundation. If the organization did						▶ H
DAA			7	,		Schedule A (Form 99)	0 or 990-EZ) 2008
					_		-,

Schedule A (Form 990 or 990-EZ) 2008 OKLAHOMA ZOOLOGICAL SOCIETY, INC. 73-0688645

Part IV Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. (see instructions)

PART III, LINE 12 - OTHER INCOME DETAIL

OTHER INCOME

\$ 338,411

Page 4

#### SCHEDULE D (Form 990).

Department of the Treasury Internal Revenue Service

### **Supplemental Financial Statements**

◆ Attach to Form 990. To be completed by organizations that answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.

OMB No 1545-0047

Open to Public Inspection

Name of the organization Employer identification number 73-0688645 OKLAHOMA ZOOLOGICAL SOCIETY, INC. Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if Part I the organization answered "Yes" to Form 990, Part IV, line 6 (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate contributions to (during year) Aggregate 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? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for chantable purposes and not for the benefit of the donor or donor advisor or other impermissible private benefit? Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically important land area Protection of natural habitat Preservation of certified historic structure Preservation of open space Complete lines 2a-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 a Total number of conservation easements 2a Total acreage restricted by conservation easements 2b c Number of conservation easements on a certified historic structure included in (a) 2c d Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year • Number of states where property subject to conservation easement is located Does the organization have a written policy regarding the periodic monitoring, inspection, violations, and enforcement of the conservation easements it holds? Staff or volunteer hours devoted to monitoring, inspecting, and enforcing easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and section 170(h)(4)(B)(ıı)? In Part XIV, 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" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116, 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 XIV, the text of the footnote to its financial statements that describes these items b If the organization elected, as permitted under SFAS 116, 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) Revenues included in 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 relating to these items Revenues included in Form 990, Part VIII, line 1 b Assets included in Form 990, Part X

<u>Sche</u>		ZOOLOGICAL SC				88645			Page 2
<u>Pa</u>	rt III · Organizations Maintaining	Collections of Art,	<u>Historical</u>	Treasures,	or Other S	Similar Ass	ets (cont	ınued)	
3	3 Using the organization's accession and other records, check any of the following that are a significant use of its collection stems (check all that apply)								
а	Public exhibition	d I loan o	or exchange o	programs					
b	Scholarly research	e Other	or exchange p	g.ue					
c	Preservation for future generations	<b>2</b>				· <del>-</del>	_		
,	_		. 6 46 - 46 -						
4	Provide a description of the organization's collect Part XIV	ctions and explain now the	ey turtner the	organization's	exempt purpo	se in			
5	During the year, did the organization solicit or reassets to be sold to raise funds rather than to be	e maintained as part of the	e organization	's collection?			Yes		No
Pa	rt IV Trust, Escrow and Custodia Part IV, line 9, or reported an	_	•	-	n answere	d "Yes" to F	orm 990	•	
1a	Is the organization an agent, trustee, custodian	<del></del>			not				
	included on Form 990, Part X?						Yes	لــا	No
b	If "Yes," explain the arrangement in Part XIV an	d complete the following t	able			<del></del>			
							Amo	ount	
С	Beginning balance					1c			
d	Additions during the year					1d			
е	Distributions during the year					10			
f	Ending balance					1f			
2a	Did the organization include an amount on Form	n 990, Part X, line 21?					Yes		No
	If "Yes," explain the arrangement in Part XIV								
<u>Pa</u>	rt V Endowment Funds. Comple	ete if organization ar	swered "Y	<u>'es" to Forr</u>	n 990, Par	<u>t IV, line 10.</u>	,		
	L	(a) Current year	(b) Pnor y	ear (c) T	wo years back	(d) Three years	back (e)	Four year	s back
1a	Beginning of year balance								
b	Contributions								
С	Investment earnings or losses								
d	Grants or scholarships								
е	Other expenditures for facilities								
	and programs								
f	Administrative expenses								
g	End of year balance								
2	Provide the estimated percentage of the year er	nd balance held as							
а	Board designated or quasi-endowment • _	%							
b	Permanent endowment • %								
С	Term endowment ◆ %								
3a	Are there endowment funds not in the possession	on of the organization that	are held and	administered t	for the				
	organization by							Yes	No
	(i) unrelated organizations						3a	(i)	
	(ii) related organizations						3a	(ii)	
b	If "Yes" to 3a(ii), are the related organizations lis	sted as required on Sched	lule R?					b	
4	Describe in Part XIV the intended uses of the or	rganization's endowment f	funds						
Pa	rt VI Investments—Land, Buildir			m 990. Par	X. line 10				
	Description of investment	(a) Cost or other basis		ost or other	T	preciation	(d) B	look value	
		(investment)	bas	ıs (other)					
	Land			· <u>-</u>					
	Buildings		1						
	Leasehold improvements		1						
	Equipment		1	151,39	7	107,545		4.3	852
	Other		+		<del>' </del>	,			
	Add lines 1a-1e (Column (d) should equal For	m 990. Part X. column (R)	line 10(c) )		1	_		43	852

Schedule D (Form 990) 2008

	dule D (Form 990) 2008 OKLAHOMA ZOOLOGICAL SOCIETY, I	_	73-068864	5	Page 4
Pa	rt XI Reconciliation of Change in Net Assets from Form 990 to F	inan	cial Statements		
1	Total revenue (Form 990, Part VIII, column (A), line 12)			1	1,580,882
2	Total expenses (Form 990, Part IX, column (A), line 25)			2	1,710,207
3	Excess or (deficit) for the year Subtract line 2 from line 1			3	129,325
4	Net unrealized gains (losses) on investments			4	-28,215
5	Donated services and use of facilities			_ 5	
6	Investment expenses			6	<del> </del>
7	Prior period adjustments			7	
8 9	Other (Describe in Part XIV) Total adjustments (net) Add lines 4-8			_ 8 9	-28,215
10	Excess or (deficit) for the year per financial statements. Combine lines 3 and 9			10	-157,540
	irt XII Reconciliation of Revenue per Audited Financial Statemen	ts W	ith Revenue ner Reti		137,340
1	Total revenue, gains, and other support per audited financial statements	13 11	itii Koveilae pei Kett	1	1,741,107
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12			•	
а	Net unrealized gains on investments	2a	-28,215		
b	Donated services and use of facilities	2b			
С	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIV)	2d	188,440		
е	Add lines 2a through 2d			2e	160,225
3	Subtract line 2e from line 1		,	3	1,580,882
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b			
_	Add lines 4a and 4b			4c	1 500 000
5	Total revenue Add lines 3 and 4c. (This should equal Form 990, Part 1, line 12)	4 - 14	WAL Francis D	5	1,580,882
	IT XIII Reconciliation of Expenses per Audited Financial Stateme	nts v	vitn Expenses per K		1,898,647
1 2	Total expenses and losses per audited financial statements  Amounts included on line 1 but not on Form 990, Part IX, line 25			1	1,090,047
a	Donated services and use of facilities	2a			
b		2b			
c	Losses reported on Form 990, Part IX, line 25	2c			
d	Other (Describe in Part XIV)	2d	188,440		
e	Add lines 2a through 2d			2e	188,440
3	Subtract line 2e from line 1			3	188,440 1,710,207
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:				
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a			
b	Other (Describe in Part XIV)	4b_			
С	Add lines 4a and 4b			4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)			5	1,710,207
	rt XIV Supplemental Information				
	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines		4, Part IV, lines 1b		
	tb, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and				
—,	PART XI, LINE_8RECONCILATION_OF CHANGES -	01	HER		- <b>-</b>
	SPECIAL EVENTS EXPENSE REPORTED ON LINE 9B		\$		37,476
Т.	TN_VIND DEVENUE				
—	IN-KIND_REVENUE	_			_ <u>150,964</u>
_:	SPECIAL_EVENTS EXPENSE REPORTED_ON LINE_9B _		\$		_ <u>-37,476</u>
	IN-KIND EXPENSES		\$		-150,964
		_			_ ===/==
_		<b>_</b>			
1	PART XII, LINE 2D - REVENUE AMOUNTS INCLUDED	IN	FINANCIALS -	OT	HER
_					

Schedule D (Form 990) 2008		ZOOLOGICAL	SOCIETY,	<u>INC.</u>	73-0688645	Page 5
Part XIV Supplemen	tal Information	(continued)				
_9PECIAL_EVENT	S EXPENSE	REPORTED_ON	LINE_9B	<b>-</b> -	\$ _	37,476
_IN-KIND_REVEN	<u>ue </u>				<b>.</b> _ <b>\$</b> _	_ 150,964
PART XIII, LI		PENSE AMOUN		 DED IN F	TINANCIALS -	 OTHER
_SPECIAL_EVENT	S EXPENSE	REPORTED_ON	LINE_9B		<b>\$</b> _	37,476
_IN-KIND_EXPEN	<u>ses</u>				\$ _	<u> 150,964</u>
					- <b></b>	
					·	
<del></del>						
					<b></b>	
					<del>_</del>	
					<del>-</del>	
		<b></b> -			-	
	<del>-</del> -	<b></b>		<b>-</b> -		
	<del>_</del>					
		<b></b>			<del></del>	
					- <b></b> -	
			<del>-</del>			
			<b></b>			

#### **SCHEDULE J-2** (Form 990).

**Continuation Sheet for Form 990** 

◆ Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a.

OMB No 1545-0047 2008 Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

OKLAHOMA ZOOLOGICAL SOCIETY, INC.

Employer Identification number

73-0688645 Part I Continuation of Officers, Directors, Trustees, Key Employees, and Highest Compensated **Employees** (A) (C) (B) (D) (E) (F) Average hours Position (check all that apply) Reportable Reportable Estimated Name and Title per week compensation compensation amount of Individual trustee or director Institutional Highest from from related other nployee compensation the organizations employee organization (W-2/1099-MISC) from the compensated (W-2/1099-MISC) organization and related trustee organizations DONNA MCCAMPBELL X 0 0 DIRECTOR 1 0 SAMUEL MOORE DIRECTOR x 0 0 MARY ODOM X 0 0 DIRECTOR LARRY OTTAWAY 0 DIRECTOR 1 X 0 MORTON PAYNE, III X 0 0 0 DIRECTOR 1 KEVIN SCOTT PERRY 0 DIRECTOR 1 X 0 0 PAT POTTS 0 DIRECTOR 1 X 0 LISA PRICE DIRECTOR 1 X 0 0 0 H.E. RAINBOLT X 0 0 0 DIRECTOR LESLIE RAINBOLT-FORBES 0 DIRECTOR X 0 0 DONALD ROWLETT X 0 0 DIRECTOR 1 LEE ALLAN SMITH X 0 0 DIRECTOR 1 0 MARTHA JO STEFFAN DIRECTOR X 0 0 0 KRISTI MATHIS-MIKAWA PAST PRES 0 0 1 X 0 VINCE WHITE 0 0 1 X PRESIDENT 0 ALICE PIPPIN PRES ELECT 1 X 0 0 0 RICHARD CLEMENTS X 0 0 1 TREASURER CINDY BATT VICE PRES 1 X 0 0 VICKI HOWARD 1 X 0 0 SECRETARY

## SCHEDULE O

(Form 990)

**Supplemental Information to Form 990** 

 Attach to Form 990. To be completed by organizations to provide additional information for responses to specific questions for the Form 990 or to provide any additional information. 2008 Open to Public

Inspection

OMB No 1545-0047

Internal Revenue Service

Name of the organization

Department of the Treasury

OKLAHOMA ZOOLOGICAL SOCIETY, INC.

Employer identification number 73-0688645

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

EACH YEAR THE OKLAHOMA ZOOLOGICAL SOCIETY FUNDS SPECIAL

PROJECTS AND PROGRAMS FOR THE ZOO SUCH AS THE

VETERINARIAN RESIDENCY, MEDICAL EQUIPMENT FOR THE ANIMAL

HOSPITAL, SCULPTURES, A NEW PICNIC PAVILION, EXTRA FUNDS

FOR ANIMAL CARE, BENCHES FOR THE PARK, FUNDING FOR THE

ZOO'S CONSERVATION PROJECTS, EDUCATIONAL GRAPHIC

MATERIALS FOR ANIMAL EXHIBITS, NEW PADDLEBOATS FOR ZOO

LAKE, AND MATERIALS FOR THE EDUCATION DEPARTMENT.

THE OKLAHOMA ZOOLOGICAL SOCIETY ALSO PROVIDES A QUARTERLY

NEWSLETTER (ZOOSOUNDS) TO THE 17,000+ HOUSEHOLD

ZOOFRIENDS MEMBERS, A CALENDAR OF COLOR PHOTOS OF THE

ZOO'S ANIMALS AND MAINTAINS A FREQUENTLY UPDATED WEBSITE

FOR PUBLIC ACCESS.

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

THE PRIMARY PURPOSE OF THE OKLAHOMA ZOOLOGICAL SOCIETY IS

TO SUPPORT THE OKLAHOMA CITY ZOOLOGICAL PARK AND ITS

PROGRAMS OF EDUCATION, RECREATION, CONSERVATION AND

RESEARCH.

ALL OF THE PROGRAM FUNDS RAISED GO DIRECTLY TO SUPPORT EXHIBITS, ANIMAL CARE, EDUCATION PROGRAMS, CONSERVATION PROGRAMS, ZOO ENHANCEMENTS AND ZOO FUND FOR KIDS. ZOO FUNDS FOR KIDS PROVIDES GRANTS TO SCHOOLS AND ORGANIZATIONS OF CHILDREN BELOW POVERTY LINE TO

Employer identification number

73-0688645

PARTICIPATE IN EDUCATIONAL CLASSES AND PROGRAMS AT THE ZOO.

EACH YEAR THE OKLAHOMA ZOOLOGICAL SOCIETY FUNDS SPECIAL PROJECTS AND PROGRAMS FOR THE ZOO SUCH AS THE VETERINARIAN RESIDENCY, MEDICAL EQUIPMENT FOR THE ANIMAL HOSPITAL, SCULPTURES, A NEW PICNIC PAVILION, EXTRA FUNDS FOR ANIMAL CARE, BENCHES FOR THE PARK, FUNDING FOR THE ZOO'S CONSERVATION PROJECTS, EDUCATIONAL GRAPHIC MATERIALS FOR ANIMAL EXHIBITS, NEW PADDLEBOATS FOR ZOO LAKE, AND MATERIALS FOR THE EDUCATION DEPARTMENT. THE OKLAHOMA ZOOLOGICAL SOCIETY ALSO PROVIDES A QUARTERLY NEWSLETTER (ZOOSOUNDS) TO THE 17,000+ HOUSEHOLD ZOOFRIENDS MEMBERS, A CALENDAR OF COLOR PHOTOS OF THE ZOO'S ANIMALS AND MAINTAINS A FREQUENTLY UPDATED WEBSITE FOR PUBLIC ACCESS.

FORM 990, PART VI, LINE 2 - RELATED PARTY INFORMATION AMONG OFFICERS
GENE RAINBOLT

DIRECTOR

**FATHER** 

LESLIE RAINBOLT-FORBES

DIRECTOR

DAUGHTER

FORM 990, PART VI, LINE 8A - DOCUMENTATION BY GOVERNING BODY EXPLANATION THE ORGANIZATION DOCUMENTS MINUTES FOR ALL BOARD OF DIRECTOR'S MEETINGS.

Employer identification number

73-0688645

FORM 990, PART VI, LINE 8B - DOCUMENTATION BY COMMITTEE EXPLANATION
THE ORGANIZATION DOCUMENTS MINUTES FOR ALL EXECUTIVE BOARD MEETINGS.

FORM 990, PART VI, LINE 10 - ORGANIZATION'S PROCESS USED TO REVIEW FORM 990

A COPY OF THE FORM 990 IS PRESENTED TO THE FINANCE COMMITTEE FOR REVIEW.

ONCE APPROVED, THE FORM IS SUBMITTED TO BE FILED.

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

ALL BOARD MEMEBERS AND KEY EMPLOYEES SIGN A CONFLICT OF INTEREST FORM

ANNUALLY WHICH DISCLOSES ANY INTEREST THAT COULD GIVE RISE TO CONFLICTS.

THE POLICY IS MONITORED AND ENFORCED FOR COMPLIANCE.

FORM 990, PART VI, LINE 15A - COMPENSATION PROCESS FOR TOP OFFICIAL

FOR THE EXECUTIVE DIRECTOR, THE COMPENSATION AND BENEFITS COMMITTEE MEETS

TO DISCUSS NATIONAL AVERAGES AND PERFORMANCE.

FORM 990, PART VI, LINE 15B - COMPENSATION PROCESS FOR OFFICERS

THE EXECUTIVE DIRECTOR EVALUATES EACH KEY EMPLOYEE BASED ON INDIVIDUAL

GOALS AND OBJECTIVES. ANY PAY INCREASES AND PROMOTIONS ARE APPROVED BY THE

EXECUTIVE DIRECTOR AND EXECUTIVE BOARD.

**Special Events Schedule** Form .990 2008 6/30/09 7/01/08 , and ending For calendar year 2008, or tax year beginning Employer Identification Number Name\* OKLAHOMA ZOOLOGICAL SOCIETY, INC. 73-0688645 <sup>(A)</sup> 78,574 (C) Others Total (B) 0 0 27,186 105,760 Gross receipts 0 0 Less contributions 105,760 37,571 78,574 19,680 27,186 17,891 ō 0 Gross revenue 0 0 Less direct expenses 9,295 ō ō 68,189 58,894 Net income (loss) ZOOBILIATION Description (A) OSTRICH EGG BREAKFAST (B) (C) Others

Department of the Treasury Internal Revenue Service

# **Depreciation and Amortization**

(Including Information on Listed Property)

► See separate instructions. ► Attach to your tax return.

OMB No 1545-0172

Name(s) shown on return

OKIAHOMA ZOOLOGICAL SOCIETY TNC Identifying number

	OKLAHON	A ZOOLOGIC	CAL SOCIETY	, INC.		73-	068	8645
	ess or activity to which this form relates NDIRECT DEPRECIATI	ON						
	rt I Election To Expen		erty Under Sect	ion 179				
	Note: If you have a				complete Pa	<u>ırt I.</u>		
1	Maximum amount See the instruct	ions for a higher limit	for certain businesse	s			1_	250,000
2		Total cost of section 179 property placed in service (see instructions)						
3	Threshold cost of section 179 property	erty before reduction	in limitation (see instr	uctions)			3	800,000
4	Reduction in limitation Subtract line						4_	
_5	Dollar limitation for tax year Subt							
	(a) Description	n of property	(t	O) Cost (business use	only) (c)	Elected cost		
6		<del> </del>						{
	Listed assessed. Enter the amount of				-	-1		1
7 8	Listed property. Enter the amount for		un achuma (a) lunca 6	and 7	7		8	
9	Total elected cost of section 179 pr Tentative deduction Enter the sma	•	• •	anu /			9	
10	Carryover of disallowed deduction i						10	
11	Business income limitation Enter th	•		an zero) or line 5 (s	ee instructions)		11	
12	Section 179 expense deduction Ac		•		<b>,</b>		12	
13	Carryover of disallowed deduction t	•		•	13	.,		
Note	: Do not use Part II or Part III below							
Pa	rt II Special Depreciati	on Allowance a	nd Other Depre	ciation (Do no	t include liste	ed prope	rty.)	(See instructions.)
14	Special depreciation allowance for	qualified property (oth	ner than listed propert	y) placed in service	•			
	during the tax year (see instructions	s)					14	
15	Property subject to section 168(f)(1						15	10.00
<u>16</u>	Other depreciation (including ACRS						16	12,621
_Pa	rt III MACRS Depreciat	ion (Do not inclu			ctions.)			
	MAGDO de de de de de de de de de de de de de		Section	·			47	0
17	MACRS deductions for assets place	•	• •		wate check here		17	
18	If you are electing to group any assets pl  Section B—		ervice During 2008 To			ciation Sv	Lstem	
	(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreci (business/investment only-see instruction	ation (d) Recovery	(e) Convention	(f) Me		(g) Depreciation deduction
19a	3-year property	501100	only ded middledd	110)				
b	5-year property	1			-			
c	7-year property	1						
d	10-year property	1						
в	15-year property							
f	20-year property	]				ļ		
g	25-year property			25 yrs		S/L		
h	Residential rental			27 5 yrs	MM	S/L		
	property			27 5 yrs	MM	S/L		
i	Nonresidential real			39 yrs	MM	S/L		
	property	1			MM	S/L	_	
		ssets Placed in Sen	vice During 2008 Tax	Year Using the A	Alternative Depr	eciation S	ystem	<del>)</del>
<u>20a</u>	Class life	_	·		<u> </u>	S/L		
	12-year	<del> </del>		12 yrs		S/L		
$\overline{}$	40-year Summan (See inc	tructions \	<u> </u>	40 yrs	MM	S/L	-	<u> </u>
	Irt IV Summary (See ins						24	
21	Listed property Enter amount from		nee 10 and 20 in colum	nn (a) and line 24			21	<del>                                     </del>
22	Total. Add amounts from line 12, lii Enter here and on the appropriate l	lines of your return P	artnerships and S cor	·-·	str	····	22	12,621
23	For assets shown above and place enter the portion of the basis attribute.	_	•		23			

Department of the Treasury

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Internal Revenue	Service						
If you are to	iling for an Automatic 3-Month Extension, complete only Part I and check this box		<b>▶</b> X				
• If you are f	iling for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form	).					
Do not compl	ete Part II unless you have already been granted an automatic 3-month extension on a previously filed For	n 8868					
्रिक्त्य <i>ि</i>	Automatic 3-Month Extension of Time. Only submit original (no copies needed).						
A corporation r	required to file Form 990-T and requesting an automatic 6-month extension—check this box and complete						
Part I only			▶ 📙				
	rations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extensione tax returns.	sion of					
Electronic Fili	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension of time	ne to file					
one of the retu	rns noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 886	68					
electronically it	f (1) you want the additional (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870,	group					
returns, or a co	emposite or consolidated Form 990-T. Instead, you must submit the fully completed and signed page 2 (Part	II) of For	n				
8868. For more	e details on the electronic filing of this form, visit www.irs.gov/efile and click on e-file for Charities & Nonprofi	ts.					
Туре ог	Name of Exempt Organization	Employe	er identification number				
print							
File by the	OKLAHOMA ZOOLOGICAL SOCIETY, INC.	73-0	688645				
due date for filing your	Number, street, and room or suite no. If a P.O. box, see instructions.  P.O. BOX 18424						
return. See instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions OKLAHOMA CITY OK 73154-0424						
Telephone  If the orga  If this is fo	Form 990-T (sec 401(a) or 408(a) trust) Form 990-T (trust other than above) Form 1041-A  Solution are in the care of No. No. No. No. No. No. No. No. No. No.	 If this is	Form 4720 Form 5227 Form 6069 Form 8870				
a list with the r	names and EINs of all members the extension will cover.						
1 I reques	t an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time 2/15/10 , to file the exempt organization return for the organization named above. The extension is organization's return for:  calendar year or tax year beginning 7/01/08 , and ending 6/30/09.	in account	ing period				
		1 3					
• • • • • • •	pplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax,		•				
	nonrefundable credits. See instructions.	3a	\$				
•	optication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax						
-	ts made. Include any prior year overpayment allowed as a credit.	3b	\$				
c Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,							
•	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment						
	See instructions.	3c	\$				
•	u are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-	EO					
for payment in	structions						
For Privacy A	ct and Paperwork Reduction Act Notice, see Instructions.		Form <b>8868</b> (Rev. 4-2009)				

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.