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143 860969840

SCANNED APR 1 5 2015

Form **990**

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)

(except black lung benefit trust or private foundation)
 ► The organization may have to use a copy of this return to satisfy state reporting requirements.

2009

Open to Public Inspection

	For	the 2009 calen	dar year,	or tax year beginnin	g	, 2009,	, and endir	ng			,		
В	Check	if applicable		C Name of organization	NIC 7	HES			D Employ	rer ide	ntification Nu	mber	
	11	Address change	Please use IRS label	St. Louis Zoo E			oo Asso	ciatio	n 43-	172	7309		
	1 1	lame change	or print or type.			ot delivered to street a:			E Telepho				
	1 1	=	See	One Courses	ma Delina	4			/21	41	781-090	١.0	
	1 1	nibal return	specific Instruc-	One Governme		Cinia	ZIP code + 4		1-131	*/	701-030	,,,	
		Termination	tions.					•	I.				
	X/	Amended return		Saint Louis		MO	63110	,			\$ 28,32	<u>5,082.</u>	.
	\sqcup'	Application pending	F Name	and address of principal off	hcer				is a group retur			-	X Mo
			Jeffrey	Bonner One Govern	ment Drive Sai	nt Louis MC	63110		all affiliates inci o, atlach a list.			Yes	∐ No
1	Ta	x-exempt statu	ıs 🛛 501	(c) (3), (in	sert no.)	4947(a)(1) or	527	l "'`	, gasari a 113c	(SCE A	1130 (00.00) (3)		
J	W	ebsite: ► ww	w.stl	coo.org				H(c) Grou	ip exemption nu	ımber	▶		
ĸ		m of organization	X Corpor		ssociation Other	► L.	Year of Forma				f legal domici	e MO	
	irt I	Summ											
L	1			janization's mission i	or most singifical	at activities. Th	le purpo	se of	the St 1	.Ou i	9 700 F	ounda	tion
	'	is to su	nnart	the Zoo and	enhance zo	ological n	roursme in Farba	res	enerch	200	d ineti	tuti	OD C
ဦ	ĺ	in the	t Loui	is region and	throughou	t Missouri	tor c	Marita	ple pin		2		. <u>71</u> 12_
Ē				facilities, f			_ror_ci	TOTTO	Die ba	. 00.			
٤	,			if the organization di					50' of its or				
ဗိ	3			bers of the governing							199		
-6	4			t voting members of						4	99		
	5			yees (Part V, line 2a	-					5	0		
Activities & Governance	6			eers (estimate if nec						6	10		
₹) 7a			ousiness revenue from						78			0.
		Net unrelated	business	taxable income fron	n Form 990-10-10	JAE HNIT				7t			0.
_					- KE	LEIVELD		T	Prior Year			ent Yea	
	8	Contributions	and aran	te /Pad VIII Ima 1h\					0,530,2	21		822,	
5	9	Program con	uca ravan	ts (Part VIII, line 1h) ue (Part VIII, line 2g)		AA BAAr		·· } 1	0,330,2	0.		069,	
Revenue	10			art VIII, column (A), li				· 	1,125,9		·	-25,	
å	11							··	1,123,3	0.	+		$\frac{792.}{165.}$
	12	Total revenue	e (rait vi	II, column (A), lines : nes 8 through 11 (mu	st on at Part (ill	BRANCH	. 10\	·· 	1,656,2		14	866,	
_	+	Occasio and a	- agg m	ounts paid (Part IX, o	ast equal trait and	CIDEN	= 12)	- 					
	13							··	352,9		1	421,	1/3.
	14			members (Part IX, co						_0.	├		
2				isation, employee be	•		-	·	637,9	<u>37,</u>	1,	548,	<u>718.</u>
Ž	16a	Professional :	fundraisin	g fees (Part IX, colui	mn (A), line 11e)			··l	151,9		1		962.
Expenses	Ł	Total fundrais	sing exper	nses (Part IX, column	n (D), line 25) ►	69	0,190.	Jan Style	是其情報的	1.30			1.5
W				X, column (A), lines					1,645,2			920,8	
	18			nes 13-17 (must equa					2,787,9			976,	
	19			s. Subtract line 18 fro					8,868,2			890,1	
		Trevenue less	expense.	3. Subdact line To Ite	JIII III 12		• • • • • • • • • • • • • • • • • • • •	\neg					
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32	21	Total liabilitie	s (Part X,	line 26)		•••••		·· ├ ──	8,323,2	06.		310,	
26	22			inces. Subtract line 2	1 from line 20		<u> </u>	1 1	0,054,7	04.	35,	290,5	521.
Pa	1111	Signate	ure Bloc	<u>:k</u>									
		Under penaline	of persury.	I declare that I have examin Declaration of preparer (o	ned this return, includ	ng accompanying sche	dules and stat	lements, an	nd to the best of	f my kı	nowledge and	belief, it is	5
			X Complete	. Declaration of prepares (o	THE WAIT ORIGINAL IS DO	ised out an automation of	or wrach prepa	arer nas an	y knowledge.	v Iv			
Sig	jn	1 - W/							3/ U	1/	15.		
He	re	Signature	of officer					C	ate				
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On	ıy	employed), address, and		Bronze Pointe			· · · · · · · · · · · · · · · · · · ·		EIN -	<u> </u>	<u> </u>	10 1º	以
	. 45	ZIP + 4		leville, IL					Phone no P	IO I	5-255	-14	<u> </u>
				nth the preparer show			· · · · ·		· · · · · · · · · · · · · · · · · · ·		X Yes		No
BA	4 Fo	r Privacy Act a	and Paper	work Reduction Act	Notice, see the	eparate instruction	ons.		TLEA0101	07/2	o <u>vo9</u> For	m 990 ((2009)

OGDEN, UT

6/11-010

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	1930 (2009) St. Louis Zoo Foundation DAS St. Louis Zoo Association 43 172730			agc
Pa	rt IV Checklist of Required Schedules		Yes	No
			162	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	_X_	
2	Is the organization required to complete Schedule B, Schedule of Contributors?	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations Did the organization engage in lobbying activities? If 'Yes,' complete Schedule C, Part II	4	Х	
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 similar funds or accounts where 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		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		х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		х
	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		х
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		х
11	Is the organization's answer to any of the following questions 'Yes'? If so, complete Schedule D, Parts VI, VIII, IX, or X as applicable	11	_X	
	 Did the organization report an amount for land, buildings and equipment in Part X, line 10⁹ If 'Yes,' complete Schedule D, Part VI 			
1	• 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			:
	• 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			
	• 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			
,	• Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	:		
	 Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If 'Yes,' complete Schedule D, Part X 			
12	Did the organization obtain separate, independent audited financial statement for the tax year? If 'Yes,' complete Schedule D, Parts XI, XII, and XIII	12	Х	
12.	A Was the organization included in consolidated, independent audited financial statement for the tax year? If 'Yes,' completing Schedule D, Parts XI, XII, and XIII is optional 12 A X			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		х
14	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
ı	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If 'Yes,' complete Schedule F, Part I	14b	х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If 'Yes,' complete Schedule F, Part II	15	х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If 'Yes,' complete Schedule F, Part III	16	х	
17		17	х	
18		18	х	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		х

20 Did the organization operate one or more hospitals? If 'Yes,' complete Schedule H

X

19

20

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If 'Yes,' complete Schedule I, Parts I and III	22		х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If 'Yes,' complete Schedule J</i>	23	х	
24 a	a 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, and that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No,'go to line 25	24a		x
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
c	I Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	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		х
ı	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		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If 'Yes,' complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection comittee member, or to a person related to such an individual? If 'Yes,' complete Schedule L, Part III	27		x
28	Was the organization a party to a business transation with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
á	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		X
ı	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		х
	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		Х
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		х
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	х	
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		х
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		х
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		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	х	

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Form 990 (2009)

Page 5

		Yes	No
1a Enter the number reported in Box 3 of form 1096, Annual Summary and Transmittal of U S Information Returns Enter -0- if not applicable 1a		ì	
b Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable			
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1 c		
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 C			
2b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2ь		
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 by this return?	3a		Х
b If 'Yes' has it filed a Form 990-T for this year? <i>If 'No,' provide an explanation in Schedule O</i>	3b		
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		х
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 Bank and Financial Accounts			
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b		Х
c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?	5с		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?	6a		х
b If 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not deductible?	6b		
7 Organizations that may receive deductible contributions under section 170(c).			
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	-	x
b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7с		х
d If 'Yes,' indicate the number of Forms 8282 filed during the year e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		х
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Х
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required?	7 g		
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?	7h		
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			
	8	-	Х
9 Sponsoring organizations maintaining donor advised funds.a Did the organization make any taxable distributions under section 4966?	9a	-	v
b Did the organization make any distribution to a donor, donor advisor, or related person?	9b		<u> </u>
10 Section 501(c)(7) organizations. Enter	30		^
a Initiation fees and capital contributions included on Part VIII, line 12			
b Gross Receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b	-		
11 Section 501(c)(12) organizations. Enter:			
a Gross income from other members or shareholders			
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them) 11b			
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year 12b			

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Form 990 (2009)

Section A. Governing Body and Management

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

					Yes	No
1 a	Enter the number of voting members of the governing body	1 a	99			
b	Enter the number of voting members that are independent	1 b	99	!		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationer, director, trustee or key employee?	ationsl	nip with any other	2		X
3	Did the organization delegate control over management duties customarily performed by or un of officers, directors or trustees, or key employees to a management company or other person	ider th	e direct supervision	3		х
4	Did the organization make any significant changes to its organizational documents			4	X	
	since the prior Form 990 was filed?					
5	Did the organization become aware during the year of a material diversion of the organization	's asse	ets?	5		X
6	Does the organization have members or stockholders?			6		<u>x</u> _
7 a	Does the organization have members, stockholders, or other persons who may elect one or m governing body?	ore m	embers of the	7a 7b		X
b Are any decisions of the governing body subject to approval by members, stockholders, or other persons?						
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following.						
a	The governing body?			8a	х	<u></u>
E	Each committee with authority to act on behalf of the governing body?			8 b	Х	
9	Is there any officer, director or trustee, or key employee listed in Part VII, Section A, who can organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O	not be	reached at the	9		x
Sec	tion B. Policies (This Section B requests information about policies not	requ	red by the Interi	nal .		
Reve	enue Code.)					
					Yes	No
10 a	Does the organization have local chapters, branches, or affiliates?			10 a		Х
t	If 'Yes,' does the organization have written policies and procedures governing the activities of and branches to ensure their operations are consistent with those of the organization?	such (chapters, affiliates,	10Ь		
11	Has the organization provided a copy of this Form 990 to all members of its governing body be	efore f	iling the form?	11	Х	
11 /	ADescribe in Schedule O the process, if any, used by the organization to review this Form 990					
12 a	Does the organization have a written conflict of interest policy? If 'No,' go to line 13			12a	Х	
t	Are officers, directors or trustees, and key employees required to disclose annually interests to conflicts?	hat co	uld give rise	12b	х	
c	Does the organization regularly and consistently monitor and enforce compliance with the poli Schedule O how this is done	cy? If	'Yes,' describe in	12c	×	
13	Does the organization have a written whistleblower policy?			13	Х	
14	Does the organization have a written document retention and destruction policy?			14	х	
15	Did the process for determining compensation of the following persons include a review and a persons, comparability data, and contemporaneous substantiation of the deliberation and deci	pprova	al by independent			
a	The organization's CEO, Executive Director, or top management official			15a	х	
	Other officers of key employees of the organization			15b	Х	
	If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)				l	
16 a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar a entity during the year?	arrang	ement with a taxable	16a		x
t	olf 'Yes,' has the organization adopted a written policy or procedure requiring the organization to in joint venture arrangements under applicable federal tax law, and taken steps to safeguard t	o eval	luate its participation janization's exempt	r		
<u></u>	status with respect to such arrangements?		· · · · · · · · · · · · · · · · · · ·	16b		<u></u>
	tion C. Disclosures					
	List the states with which a copy of this Form 990 is required to be filed					
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, an inspection. Indicate how you make these available. Check all that apply	d 990	-T (501(c)(3)s only) a	₃vaılable	for pu	blic
19	Own website Another's website X Upon request Describe in Schedule O whether (and if so, how) the organization makes its governing docume	ents, c	onflict of interest pol	licy, and	fınanc	al
	statements available to the public			-		
	State the name, physical address, and telephone number of the person who possesses the bo					
•	Dr. Jeffrey Bonner, Ph.D One Government Drive Saint Louis M	ι <u>ο</u>	63110	(314)_6	46-	1619

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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

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organizations's tax year. 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. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees. See instructions for definition of 'key employees.'
- 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

(A)	(B)			-	c)			(D)	(E)	(F)
Name and Title	Average hours per week	or director	anstitutional trustee	Offirer	a key amployee	High est compensated employee	·	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
Michael Abbene, Jr.	0.00	>						0.		0
Director Joseph T. Ambrose	0.00	X						0.	0.	U
Director	0.00	x						0.	0.	0
Barbara C. Archer	- 0.00							Ŭ.		
Director	0.00	х						o.	0.	0
Robert L. Bagby							T			
Director	0.00	х						0.	0.	0
Jacqueline N. Baker										
Director	0.00	Х					<u> </u>	0.	0.	0
Andrew S. Baur	_									
Director	0.00	Х					_	0.	0.	0
Galen D. Bingham	_									
Director	0.00	Х						0.	0.	. 0
F. William Bonan II	_									
Director	0.00	Х						0.	0.	0
<u>Patricia M. Brandt</u>	-									
Director	0.00	X						0.	0.	0
Virginia M. Busch								_		
Director	0.00	X			-			0.	0.	0
Mary B. Campbell	-			 						_
Vice President	0.00	Х		Х				0.	0.	0
W. Thomas Chulick Director	-	v								•
Bert Condie	0.00	Х	-			_		0.	0.	0
Director	0.00	v						o.	0.	0
Parker B. Condie	1 0.00		\vdash			-		0.	U.	0
Director	- 0.00	y						0.	0.	0
S. Bryan Cook	1 0.00	A		-	-					
Director	0.00	х						0.	0.	0
Sander H. Coovert II	1 3333				-					
Director	0.00	х						0.	0.	0
Ida H. Early	1									
Director	0.00	х						0.	0.	0
BAA	, -,		TEFA	0107	11	/10/09	'	,	3.1	Form 990 (20

Part VII Section A. Officers, Directors, Trus	T	ley	EII	ibic		es,	anı	(D)	(E)	loyees	(F)	11.)	
(A) Name and Title	(B) Average	Posi	tion (-	-	hat ar	(vlaa	(D) Reportable	Reportable	F	timated		
Name and Title	hours per week			Officer		Highest compensated employee	-	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amoi com fr org an	int of ot pensation om the anization d relate anization	her on n d	
Sharon D. Fiehler													
Director	0.00	х						0.	0.			0.	
Steven_Finerty,_JD,_CFP	-			l					•			•	
Treasurer	0.00	X	-	X				0.	0.			0.	
Robert N. Fox Director	0.00	x						٥.	0.			0.	
G. Andrew Franz	0.00	,			 	-			· · ·			- •	
Director	10.00	х						0.	0.			0.	
Christopher J. Gaia								,					
Director	0.00	Х						0.	0.			0.	
Walter J. Galvin	-							_	_			_	
President	0.00	X		Х		\vdash		0.	0,	-		0.	
Marquerite P. Garrick	0.00	l,						0.	0.			0.	
Director Catherine Gidcumb	10.00	┼≏				\vdash	-	0.				0.	
Director	0.00	x						0.	٥.			Ο.	
Janis G. Goldstein													
Director	0.00	x						0.	0.	_			
Jesse F. Graftenreed													
Director	0.00	X						0.	0.	0.			
Constance Gully	-	l		l									
Secretary	0.00	X	-	X				0.	0.		0		
August W. Hager III	0.00	V.						0.	0.			0.	
Gary A. Halls	10.00	T^	-		\vdash			.				<u> </u>	
Director	10.00	x) o.	0.			0.	
1 b Total							•	0.	1,611,008.	2	16,	606.	
2 Total number of individuals (including but not limited	d to thos	e lıs	ted	abov	ve) v	who	rece	eived more than \$	100,000 in reportab	le comp	ensatı	on	
from the organization 0											1	١	
											Yes	No	
3 Did the organization list any former officer, director on line 1a? If 'Yes,' complete Schedule J for such ir			еу є	mpl	oye	e, or	hig	hest compensated	l employee	3	х		
4 For any individual listed on line 1a, is the sum of rei	portable	com	pen	satio	on a	nd c	othei	r compensation fro	om	<u> </u>			
the organization and related organizations greater the individual	nan \$150	0,000	j? //	f 'Ye	s'c	omp	lete	Schedule J for su	ch	4	x	1	
5 Did any person listed on line 1a receive or accrue or	ompensa	ation	froi	m ar	ny u	nrela	ated	organization for s	services				
rendered to the organization? If 'Yes,' complete Sch	nedule J	for s	uch	per.	son					5		X	
Section B. Independent Contractors 1 Complete this table for your five highest compensate	ed inden	ende	ent d	cont	racto	ors t	hat	received more tha	n \$100 000 of				
compensation from the organization								1					
(A) (B) Name and business address Description of Services Com							Compe	C) ensatio	on				
													
						_						-	
2 Total number of independent contractors (including	but not l	ımıte	ed to	the	se I	ister	d ab	ove) who received	I more than				
\$100.000 in compensation from the organization	_							1.5, 10001700					

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Pa	t VIII Statement of Revenue				
		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
CONTRIBUTIONS, GIFTS, GRANTS AND OTHER SIMILAR AMOUNTS	the Membership dues b Membership dues c Fundraising events d Related organizations e Government grants (contributions) f All other contributions, gifts, grants, and similar amounts not included above g Noncash contribus included above g Noncash contribus included in lns 1a-1f. 1 a 1 b 1,388,701. 1 c 1,189,751. 1 b 1 10,244,324. 1 10,244,324.	-			
	h Total. Add lines 1a-1f Business Code	12,822,776.			
8		1		^	1 000 170
Ĕ	2a Membership 900099	1,882,179.		0.	1,882,179.
Ä	b Parent Program 900099	187,813.	0.	0.	187,813.
₹	c				
SE	d				
Ϋ́	e				
PROGRAM SERVICE REVENUE	f All other program service revenue				_
ž	g Total. Add lines 2a-2f	2,069,992.	,		
	3 Investment income (including dividends, interest and other similar amounts) 4 Income from investment of tax-exempt hand proceeds	648,937.	0.	0.	648,937.
	The most in the state of the state of the process				<u>.</u>
	5 Royalties	1		 	
	(i) Real (ii) Personal	-[
	6a Gross Rents	_			
	b Less rental expenses	_			
	c Rental income or (loss)				
	d Net rental income or (loss)	-			
	(v) Cocurities (v) Other				
	7a Gross amount from sales of assets other than inventory 12,783,542.	-			
	b Less cost or other basis and sales expenses 13,458,271.				
	c Gain or (loss) -674,729.]			į
	d Net gain or (loss)	-674,729.	0.	0.	-674,729.
EVENUE	8a Gross income from fundraising events (not including \$ 1,189,751.				
	of contributions reported on line 1c).				
OTHER R	See Part IV, line 18	-			
듣	b Less direct expenses b	<u> </u>			
_	c Net income or (loss) from fundraising events				
	9a Gross income from gaming activities See Part IV, line 19				
	b Less: direct expenses b	_			
	c Net income or (loss) from gaming activities				
	10a Gross sales of inventory, less returns and allowances	-			
	b Less. cost of goods sold b	-			
	c Net income or (loss) from sales of inventory	<u> </u>			
	Miscellaneous Revenue Business Code	,			
	11a Loss on CGA Funds 900099	-13,348.	0.	0.	-13,348.
	b Miscellaneous 900099	13,183.	0.	0.	13,183.
	c				
	d All other revenue				
	e Total. Add lines 11a-11d	-165.			
	12 Total revenue. See instructions	14,866,811.	0.	0.	2,044,035.
	Total feverine. See manuclions	1 + 4 , 0 0 0 , 0 1 1 .		<u> </u>	5 000 (0000)

Part IX | Statement of Functional Expenses

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

	All other organizations must comp	lete column (A) but are	not required to comple	te columns (B), (C), and	(D).
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21	1,421,173.	1,421,173.		
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 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1) and persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	1,241,307.	796,834.	311,131.	133,342.
8	Pension plan contributions (include section 401(k) and section 403(b) employer	100 403	70 700	24 025	14 020
_	contributions)	129,493.	79,729.	34,835.	14,929.
	Other employee benefits	88,489.	61,243.	19,072.	8,174.
	Payroll taxes	89,429.	58,354.	21,753.	9,322.
	Fees for services (non-employees)	4 704	0.	4,784.	0.
	a Management	4,784. 882.	0.	882.	0.
	b Legal		0.	1,825.	0.
	Accounting	1,825.	0.		0.
	d Lobbying	104,057.	U.	104,057.	85,962.
	e Prof fundraising svcs See Part IV, In 17	85,962.	0.	39,660.	0.
	Investment management fees	39,660. 1,250.	0.	1,250.	0.
	g Other	118,154.	73,907.	30,973.	13,274.
	Advertising and promotion	64,385.	73,907.	64,385.	13,2/4.
	Office expenses	04,303.	U.	64,363.	<u></u>
14 15	Information technology Royalties				
	Occupancy				
16	Travel	21,900.	1,793.	7,671.	12,436.
18		21,900.	1,793.	7,071.	12,430.
19	Conferences, conventions, and meetings	112,375.	0.	78,418.	33,957.
20	Interest	0.	0.	0.	0.
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,025.	0.	1,418.	607.
	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
	Pledge Discount Expense	-143,402.	0.	0.	-143,402.
	Donor Cultivation	117,037.	0.	0.	117,037.
1	Supplies	682,915.	155,292.	369,336.	158,287.
	Printing & Graphics	235,931.	60,431.	122,850.	52,650.
1	Postage	163,314.	74,969.	52,193.	36,152.
	All other expenses	393,745.	68,466.	167,816.	157,463.
25	Total functional expenses Add lines 1 through 24f	4,976,690.	2,852,191.	1,434,309.	690,190.
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				
BAA		······································			Form 990 (2009)

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

Total net assets or fund balances

Total liabilities and net assets/fund balances

Retained earnings, endowment, accumulated income, or other funds

Balance Sheet Part X (A) Beginning of year End of year 5,176,777 1 8,110,149. Cash - non-interest-bearing 3,530,523 2 162,287. 2 Savings and temporary cash investments 8,362,769. 3 14,217,076. 3 Pledges and grants receivable, net 773,134. 0. 4 4 Accounts receivable, net Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L 5 6 Receivables from other disqualified persons (as defined under section 4958(f)(1)) 6 and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L 7 Notes and loans receivable, net 47,450. 8 Inventories for sale or use 0. 8 100,059. 9 Prepaid expenses and deferred charges 54. 9 10a Land, buildings, and equipment cost or other basis 10a 108,156. Complete Part VI of Schedule D 0. b Less accumulated depreciation 10b 108,156 0. 10 c 11 Investments - publicly-traded securities 1,032,638. 11 27,625,356. 238,387. 12 Investments - other securities See Part IV, line 11 12 259,663. 13 Investments - program-related See Part IV, line 11 13 14 Intangible assets 14 15 Other assets. See Part IV, line 11 36,762. 15 306,139. 16 Total assets Add lines 1 through 15 (must equal line 34) 18,377,910. 16 51. 601,313. 17 Accounts payable and accrued expenses 47,982. 17 392,638. 18 Grants payable 18 19 Deferred revenue 0. 19 701,670. 20 20 Tax-exempt bond liabilities 21 Escrow or custodial account liability Complete Part IV of Schedule D Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities Complete Part X of Schedule D 8,275,224. 25 15,216,484. Total liabilities. Add lines 17 through 25 8,323,206. 26 16,310,792. X and complete lines Organizations that follow SFAS 117, check here > 27 through 29 and lines 33 and 34. -1,144,444. Unrestricted net assets 27 16,108,915. 11,199,148. 28 Temporarily restricted net assets 28 19,181,606. Permanently restricted net assets 29 P Organizations that do not follow SFAS 117, check here and complete lines 30 through 34. FUND DXD Capital stock or trust principal, or current funds 30

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33

34

BALANCES 32

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51,601,313. Form 990 (2009)

35,290,521.

31

32

33

34

10,054,704

18,377,910.

3-1	72	7309	Page	12

Form 990 (2009) St. Louis Zoo Foundation DBA St. Louis Zoo Association

Part XI Financial Statements and Reporting Yes No Cash X Accrual Other 1 Accounting method used to prepare the Form 990. If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O 2a Were the organization's financial statements compiled or reviewed by an independent accountant? Х b Were the organization's financial statements audited by an independent accountant? 2b Х c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? Х 2c If the organization changed either its oversight process or selection process during the tax year, explain ın Schedule O. d If 'Yes' to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both. Consolidated basis X Both consolidated and separate basis Separate basis 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 Х 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 3ь

BAA

Form 990 (2009)

SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

2009

Open to Public Inspection

Name o	f the	organization							Employe	r identificat	tion number		
St.	Lo			. Louis Zoo Ass						727309			
Par	: I	Reason for Pu	blic Charity Statu	s (All organizations	must c	omple	te this	part.)	See ii	<u>nstruct</u>	ions		
The c	rgar	nization is not a priv	ate foundation becaus	e it is (For lines 1 throug	gh 11, ch	ieck onl	y one bo) (x					
1		A church, convention	on of churches or asso	ciation of churches descr	ibed in s	section	170(b)(1)(A)(i).					
2		A school described	ın section 170(b)(1)(A)(ii). (Attach Schedule E)								
3		A hospital or coope	rative hospital service	organization described in	n sectio	n 170(b)	(1)(A)(iii	i).					
4		A medical research	organization operated	in conjunction with a ho	spital de	scribed	ın secti	on 1 70 (b)(1)(A)((in) Ente	er the hospit	al's	
		name, city, and sta	te										
5		170(b)(1)(A)(ıv). (C	Complete Part II)	of a college or university of			_		nental u	nıt descr	ribed in sect	ion	
6 7	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				70(b)(1)(A)(vi). (Complete	e Part II)							
9		from activities relat	ed to its éxempt functi	1) more than 33-1/3 % of ions — subject to certain is taxable income (less si	exceptio	ns, and	(2) no r	nore tha	an 33-1/3	3 % of it:	s support fro	om grós	s s
		June 30, 1975 See	section 509(a)(2). (Co	omplete Part III)					•	d by the	organizatio	ii aitei	
10	Ы		'	exclusively to test for pub		•		1					
11	Ш	more publicly supp	orted organizations de	exclusively for the benefit escribed in section 509(a) ation and complete lines)(1) or s	ection 5	09(a)(2)	ions of, See s e	or carry ection 5	out the 09(a)(3).	purposes of Check the	one or box tha	t
	_	a Type I	b Type II	с 🗌 Туре III	– Func	tionally	ıntegrate	ed		d	Type III—	Other	
е		By checking this both than foundation ma 509(a)(2)	ox, I certify that the org inagers and other than	ganization is not controlle a one or more publicly sup	d directl pported	y or indi organiza	rectly by	y one or escribed	more d in secti	isqualifie on 509(a	ed persons a)(1) or sect	other ion	
f		If the organization is check this box	received a written dete	ermination from the IRS th	hat is a	Туре I, Т	Гуре II о	r Type I	II suppo	rting org	janization,		
g			006, has the organizat	ion accepted any gift or	contribu	tion fror	n any of	the foll	owing p	ersons?	_		
												Yes I	No
				ontrols, either alone or to apported organization?	ogether v	with pers	sons des	scribed i	n (II) an	d (III)	11 g (i)		
			ber of a person describer								11 g (ii)		
		•	•	described in (i) or (ii) abo	ove?						11 g (iii)	_	
h			- '	ne supported organization							119()		
) Name of Supported	(ii) EIN	(iii) Type of organization		ls the	(A) Did v	ou notify	(41)	s the	(vii) Amount	of Suppo	
	v	Organization	(1)	(described on lines 1 9 above or IRC section (see instructions))	organizat (i) listed gove	ion in col d in your erning ment?	the organ	nization in (i) of upport?	organizat (i) organi	ion in col zed in the S ?	(III)	. От Сорро	
					Yes	No	Yes	No	Yes	No			
					<u> </u>								
					 		<u> </u>				· · · · · ·		
								ļ					
Total													

Sche	dule A (Form 990 or 990-EZ) 200 t II Support Schedule for	9 St. Louis Z	oo Foundation I	DBA St. Louis Z	oo Association	43-17273	309 Page 2
ı aı	(Complete only if you checke	_					
Sec	tion A. Public Support	<u>, a 110 DON ON INTO</u>	<u> </u>	.,			
Cale	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	4,585,104.	3,783,094.	2,850,831.	10,530,231.	12,822,77	6. 34,572,036.
2	Tax revenues levied for the organization's benefit and either paid to it or expended on its behalf						
3	The value of services or facilities furnished to the organization by a governmental unit without charge. Do not include the value of services or facilities generally furnished to the public without charge.						
4	Total. Add lines 1-through 3	4,585,104.	3,783,094.	2,850,831.	10,530,231.	12,822,77	6. 34,572,036.
5	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						2,260,794.
	Public support. Subtract line 5 from line 4						32,311,242.
Sec	tion B. Total Support	т	<u> </u>	·			
	ndar year (or fiscal year nning in) ►	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7	Amounts from line 4	4,585,104.	3,783,094.	2,850,831.	10,530,231.	12,822,77	6. 34,572,036.
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources	1,652,181.	1,466,741.	6,110,493.	1,125,972.	-39,14	0. 10,316,247.
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	Total support. Add lines 7 through 10						44,888,283.
12	Gross receipts from related activ	ities, etc (see ins	tructions)			<u> 1</u>	12
	First five years. If the Form 990 organization, check this box and	stop here	·	d, third, fourth, o	r fifth tax year as	a section 501(c	c)(3) ► □
<u>Sec</u>	tion C. Computation of Pu	blic Support P	ercentage				
14	Public support percentage for 20		• •	e 11, column (f)		h	71.98%
15	Public support percentage from 2	2008 Schedule A,	Part II, line 14				39.62%
16 a	33-1/3 support test — 2009. If the and stop here. The organization	e organization did qualifies as a pub	not check the box licly supported or	on line 13, and ganization	the line 14 is 33-1	/3 % or more,	check this box
b	33-1/3 support test — 2008. If the and stop here. The organization	e organization did qualifies as a pub	not check a box of licly supported or	on line 13, or 16a, ganization.	and line 15 is 33	-1/3% or more,	check this box ►
17 a	10%-facts-and-circumstances to or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	' test, check this b	oox and stop here	. Explain in Pai	rt IV how
b	10%-facts-and-circumstances to or more, and if the organization organization meets the 'facts-and	meets the 'facts-ai	nd-circumstances'	' test, check this b	oox and stop here	. Explain in Pai	rt IV how the

_		ked the box on lin	10 3 011 01(1)				
	tion A. Public Support		<u> </u>		T		
Cale	ndar year (or fiscal yr beginning in) Gifts, grants, contributions and membership fees received (Do not include 'unusual grants')	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
3	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in a activity that is related to the organization's tax-exempt purpose Gross receipts from activities that are not an unrelated trade or business						
4	under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
	Total. Add lines 1 through 5 Amounts included on lines 1, 2, 3 received from disqualified persons						
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of 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)						
Sec	tion B. Total Support						
Cale	ndar year (or fiscal yr beginning in) 🕨	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
	Amounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income form similar sources						
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b Net income from unrelated business activities not included inline 10b,	<u> </u>					
	whether or not the business is regularly carried on				į		
12							
13	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12)	s for the organiza	tion's first, second	f, third, fourth, or	r fifth tax year as a	a section 501(c)(3)	→ □
13 14	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and			I, third, fourth, or	r fifth tax year as a	a section 501(c)(3)	<u> </u>
13 14 Sec	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put	olic Support P	ercentage		r fifth tax year as a		
13 14 Sec 15	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put Public support percentage for 200	olic Support P 9 (line 8, column	ercentage (f) divided by line		r fifth tax year as a	15	%
13 14 Sec 15 16	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put Public support percentage for 200 Public support percentage from 2	plic Support P 19 (line 8, column 1008 Schedule A, I	Percentage (f) divided by line Part III, line 15	13, column (f))	r fifth tax year as a		
13 14 Sec 15 16 Sec	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 2 tion D. Computation of Investigation.	Dlic Support P 19 (line 8, column 1008 Schedule A, l 1008 estment Incor	Percentage (f) divided by line Part III, line 15 ne Percentage	13, column (f))		15 16	%
13 14 Sec 15 16 Sec 17	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put Public support percentage for 200 Public support percentage from 2 tion D. Computation of Investment income percentage for	polic Support P 19 (line 8, column 2008 Schedule A, l 2009 (line 10c, c	Percentage (f) divided by line Part III, line 15 ne Percentage column (f) divided	13, column (f))		15 16	% %
13 14 Sec 15 16 Sec 17	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put Public support percentage for 200 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for	polic Support P 19 (line 8, column 2008 Schedule A, l estment Incor 2009 (line 10c, com 2008 Schedule	Percentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1	t 13, column (f)) by line 13, column	nn (f))	15 16 17 18	% % %
13 14 Sec 15 16 Sec 17	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add lns 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Public support percentage for 200 Public support percentage from 2 tion D. Computation of Investment income percentage for 33-1/3 support tests — 2009. If the	polic Support P (Ine 8, column (108 Schedule A, I (108 Schedule A, I (109 Schedule 10c, o (109 Schedule (Percentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1	by line 13, column (f)) by line 13, column 7	nn (f))	15 16 17 18	% % %
13 14 Sec 15 16 Sec 17 18 19a	regularly carried on Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.) Total support. (add Ins 9, 10c, 11, and 12) First five years. If the Form 990 is organization, check this box and stion C. Computation of Put Public support percentage for 200 Public support percentage from 2 tion D. Computation of Investment income percentage for Investment income percentage for	polic Support P 19 (line 8, column 1008 Schedule A, lestment Incor 17 2009 (line 10c, com 18 2008 Schedule 19 corganization dic 18 x and stop here.	Percentage (f) divided by line Part III, line 15 ne Percentage column (f) divided e A, Part III, line 1 I not check the bo The organization	this to the state of the state	nn (f)) I line 15 is more th	15 16 17 18 an 33-1/3%, and panization	% % %

Schedule A	(Form 990 or	990-EZ) 20	09st.	Louis Zoo	Foundat	ion DBA	St. Lou	is Zoo	Association	43-1727309	Page 4
Part IV	Supplemer	ntal Infor	mation.	Complete	this pa	rt to pro	vide th	е ехр	lanations red	uired by Part I	I, line 10;
	Part II, line	17a or 1	17b; and	Part III,	line 12.	Provide	any ot	her ac	Iditional info	43-1727309 quired by Part I rmation. See in	structions.
							- -				
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SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

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

► Complete if the organization is described below.

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

2009

Open to Public Inspection

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part VI, line 46 (Political Campaign Activities), then

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

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

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

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax), then

• 5	Section 501(c)(4), (5), or (6) or	rganizations Complete Part III			
	of organization			Employer identific	ation number
St.	. Louis Zoo Foundat	ion DBA St. Louis Zoo Asso	ciation	43-172730	
		rganization is exempt under section			zation.
	· ·	organization's direct and indirect political ca	mpaign activities in F		
2	Political expenditures			► \$	
	Volunteer hours				
		rganization is exempt under section			
_	•	se tax incurred by the organization under s		► \$	
2	-	se tax incurred by organization managers i		► \$	<u> </u>
3		section 4955 tax, did it file Form 4720 for t	his year?		Yes No
	a Was a correction made?				∐ Yes ☐ No
_	b If 'Yes,' describe in Part IV	manipation is assessed and assessed		1 t' F01(-\/2\	
		rganization is exempt under section or section for section or section for sect			
1	Enter the amount directly exp	bended by the filing organization for section	527 exempt function	activities ► \$	· · · · · · · · · · · · · · · · · · ·
2	Enter the amount of the filing function activities	g organization's funds contributed to other o	rganizations for section	on 527 exempt ► \$	3
3	Total of exempt function expeline 17b	enditures. Add lines 1 and 2. Enter here and	d on Form 1120-POL,	► \$	i
4	Did the filing organization file	Form 1120-POL for this year?			Yes No
5	made. For each organization contributions received that wi	and employer identification number (EIN) o listed, enter the amount paid from the filing ere promptly and directly delivered to a sep e (PAC). If additional space is needed, pro-	j organizātion's funds arate political organiz	. Also enter the amount ation, such as a separa	of political
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds If none, enter 0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0
					

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

Schedule C (Form 990 or 990-EZ) 2009

Schedule C (Form 990 or 990 EZ) 2009 St. Louis Zoo Foundation DBA St. Louis Zoo Association 43-1727309 Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)). Α if the filing organization belongs to an affiliated group Check if the filing organization checked box A and 'limited control' provisions apply **B** Check Limits on Lobbying Expenditures — (The term 'expenditures' means amounts paid or incurred.) (a) Filing organization's totals (b) Affiliated group totals 40,307 1a Total lobbying expenditures to influence public opinion (grass roots lobbying) **b** Total lobbying expenditures to influence a legislative body (direct lobbying) 63,750. 104,057. c Total lobbying expenditures (add lines 1a and 1b) 4,182,443. d Other exempt purpose expenditures e Total exempt purpose expenditures (add lines 1c and 1d) 4,286,500 f Lobbying nontaxable amount. Enter the amount from the following table in 364,325 The lobbying nontaxable amount is If the amount on line 1e, column (a) or (b) 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) 91,081 h Subtract line 1g from line 1a. If zero or less, enter -0-0. i Subtract line 1f from line 1c If zero or less, enter -0-0. j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? Yes No 4-Year Averaging Period Under Section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f.) Lobbying Expenditures During 4-Year Averaging Period Calendar year (or fiscal year beginning in) (a) 2006 **(b)** 2007 (c) 2008 (d) 2009 (e) Total 2a Lobbying non-taxable 346,000 amount 364,325 710,325. **b** Lobbying ceiling amount (150% of line 2a, column (e)) 1,065,488. c Total lobbying expenditures 19,250. 104,057 123,307. d Grassroots nontaxable 86,500 91,081 amount 177,581. e Grassroots ceiling amount (150% of line

2d, column (e))

f Grassroots lobbying expenditures

40,307.

266,372.

59,557.

19,250

Part II-B	Complete	if the orga	nization i	s exempl	l under s	ection 5	01(c)(3) a	nd has NC	T filed	Form !	5768
,	(election	under sect	on 501(h))).							

(cicotion unual section of (ti)))	(a)		(b)
	Yes	No	Amount
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a Volunteers?]	
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities? If 'Yes,' describe in Part IV			
j Total Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If 'Yes,' enter the amount of any tax incurred under section 4912			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5)	ors	ection 501(c)(6).
		•	
			Yes No
1 Were substantially all (90% or more) dues received nondeductible by members?			1
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2
3 Did the organization agree to carryover lobbying and political expenditures from the prior year?			3
Part III-B Complete if the organization is exempt under section 501(c)(4), section 501	c)(5)	, or s	ection 501(c)(6)
if BOTH Part III-A, questions 1 and 2 are answered 'No' OR if Part III-A, line 3	is a	nswe	red 'Yes.' ` ´ ´
1 Dues, assessments and similar amounts from members		1	
2 Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).			
a Current year		2a	
b Carryover from last year		2b	
c Total		2 c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political	al		
expenditure next year?		4	
5 Taxable amount of lobbying and political expenditures (see instructions)		5	
Part IV Supplemental Information			
Complete this part to provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; and Also, complete this part for any additional information	Part II	-B, line	e 1ı
2-2-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1		- 	
	-		
		-	

Part IV	Supplemental Information (continued)	rage 4
· aitiv	Toubliomental information (continued)	
		. – – –
		. – – –
- -		
		. – – –
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SCHEDULE D (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Financial Statements

► Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 6, 7, 8, 9, 10, 11, or 12. ► Attach to Form 990. ► See separate instructions

OMB No 1545 0047 2009

Open to Public Inspection Employer Identification number

St.	Louis Zoo Foundation DBA St	. Louis Zoo Associa	ation	43-1727309	
Par					e If
	the organization answered 'Yes' t	o Form 990, Part IV, line	e 6.	·	
		(a) Donor advised	funds (b)	Funds and other acc	ounts
1	Total number at end of year				· · · · ·
2	Aggregate contributions to (during year)				
3	Aggregate grants from (during year)				
4	Aggregate value at end of year				
5	Did the organization inform all donors and don funds are the organization's property, subject t	or advisors in writing that the a to the organization's exclusive	assets held in donor advised legal control?	Yes	No No
6	Did the organization inform all grantees, donor used only for charitable purposes and not for the purpose conferring impermissible private bene	he benefit of the donor or dono	g that grant funds may be or advisor or for any other	Yes	□No
Pai	t II Conservation Easements Comple		nswered 'Yes' to Form 9		7.
1					
	Preservation of land for public use (e.g., re	•	Preservation of an historic	ally important land a	area
	Protection of natural habitat	'	Preservation of certified hi	• •	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization last day of the tax year	on held a qualified conservation	n contribution in the form of a	conservation easem	ent on the
			ļ 	Held at the End o	f the Year
	Total number of conservation easements				
	Total acreage restricted by conservation easen		2b		
	Number of conservation easements on a certif		` '		
_	d Number of conservation easements included in	` ' '	2d		
3	Number of conservation easements modified, t	transferred, released, extinguis	shed, or terminated by the org	anization during the	tax
	year •				
4	Number of states where property subject to co-	nservation easement is located			
5	Does the organization have a written policy regard enforcement of the conservation easemen	it it holds?	•	tions, Yes	☐ No
6	Staff and volunteer hours devoted to monitorin during the year ►		<u>-</u>		
7	Amount of expenses incurred in monitoring, in during the year ►	specting, and enforcing conse	rvation easements \$		<u> </u>
8	Does each conservation easement reported on 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)?	line 2(d) above satisfy the red	quirements of section	Yes	☐ No
9	In Part XIV, describe how the organization rep include, if applicable, the text of the footnote to conservation easements	orts conservation easements i o the organization's financial s	n its revenue and expense sta tatements that describes the c	tement, and balance organization's accour	e sheet, and nting for
Pa	Complete if the organization ans	ections of Art, Historical wered 'Yes' to Form 990	Treasures, or Other Side Part IV, line 8.	milar Assets	
1:	a If the organization elected, as permitted under treasures, or other similar assets held for publ the text of the footnote to its financial statement	ic exhibition, education, or res	earch in furtherance of public		
i	b If the organization elected, as permitted under treasures, or other similar assets held for publ amounts relating to these items:	SFAS 116, to report in its revi ic exhibition, education, or res	enue statement and balance s earch in furtherance of public	heet works of art, hi service, provide the	storical following
	(i) Revenues included in Form 990, Part VIII,	line 1		► \$	
	(ii) Assets included in Form 990, Part X			► \$	
2	If the organization received or held works of ar amounts required to be reported under SFAS 1	rt, historical treasures, or other 116 relating to these items	r similar assets for financial ga	ain, provide the follo	wing
	a Revenues included in Form 990, Part VIII, line	1		► \$	
I	b Assets included in Form 990, Part X			► \$	

Schedule D (Form 990) 2009 St. Lo Part III Organizations Maintain	uis Zoo Foundat ining Collectio	ns of Art, Histo	is Zoo Association prical Treasures, or	43-172° Other Similar Ass		
Using the organization's acquisition items (check all that apply)						
a Public exhibition		d Loan	or exchange programs			
b Scholarly research		e Other				
c Preservation for future genera	ations					
4 Provide a description of the organ Part XIV.	nization's collection	ns and explain how	they further the organization	ation's exempt purpose	ın	
5 During the year, did the organizat assets to be sold to raise funds ra	ather than to be ma	aintained as part of	the organization's colle	ction?	Yes No	
Part IV Escrow and Custodia 9, or reported an amo	I Arrangement unt on Form 99	s Complete if o	rganization answer 21.	red 'Yes' to Form 99	90, Part IV, line	
1a Is the organization an agent, trusincluded on Form 990, Part X?				r assets not		
					∐ Yes	
b If 'Yes,' explain the arrangement	in Part XIV and co	mplete the followin	g table:		A	
					Amount	
c Beginning balance				1c		
d Additions during the year				1 d		
e Distributions during the year				1e		
f Ending balance				1f		
2a Did the organization include an ai		0, Part X, line 21?			∐ Yes ∐ No	
b If 'Yes,' explain the arrangement						
Part V Endowment Funds Co	mplete if organ	<u>nization answer</u>	ed 'Yes' to Form 99	<u> 90, Part IV, line 10.</u>		
	(a) Current year	(b) Prior yea	r (c) Two years bacl	k (d) Three years back	(e) Four years back	
1 a Beginning of year balance						
b Contributions						
c Net Investment earnings, gains, and losses						
d Grants or scholarships						
e Other expenditures for facilities and programs						
f Administrative expenses						
q End of year balance						
2 Provide the estimated percentage	of the year end b	alance held as				
a Board designated or quasi-endow	•	*				
b Permanent endowment ►		 				
c Term endowment ►						
3a Are there endowment funds not in	n the possession o	f the organization t	hat are held and admını	stered for the	Yes No	
organization by. (i) unrelated organizations					3a(i) 165 NO	
•						
(ii) related organizations b If 'Yes' to 3a(ii), are the related organizations listed as required on Schedule R? 3b						
• • •	_	•			3b	
4 Describe in Part XIV the intended	<u> </u>			lina 10		
Part VI Investments-Land, B					400	
Description of investment	(a) (Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated Depreciation	(d) Book Value	
1a Land	+	\	basis (other)	Doprodución		
	 					
b Buildings	 					

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

d Equipment

Schedule **D** (Form 990) 2009

0.

0.

108,156.

108,156.

Schedule D (Form 990) 2009 St. Louis Zoo Foundation	on DBA St. Louis Zoo	Association	43-1727309	Page 3
Part VII Investments—Other Securities See Fo	orm 990, Part X, III	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value		(c) Method of valuation or end-of-year market value	
Financial derivatives				
Closely-held equity interests				
Other				
Investments Held in Trust Agreement	259,663.	FMV		
	_			
Total (Column (b) must equal Form 990 Part X, col (B) line 12) ▶	259,663.			
Part VIII Investments-Program Related (See F		line 13)		
(a) Description of investment type	(b) Book value		(c) Method of valuation	_
		Cost	or end-of-year market value	
			·	
		<u> </u>		
				
Total (Column (b) must equal Form 990, Part X, Col (B) line 13)				
Part IX Other Assets (See Form 990, Part X,	line 15)			
	scription		(b) Book v	alue
Due From Affiliates			221	,718.
Accrued Interest			67	,976.
Cash Surrender Value			16	,445.
			-	
		-		
	 			
Total. (Column (b) must equal Form 990, Part X, col.(B), lin	e 15)		▶ 306	,139.
Part X Other Liabilities (See Form 990, Part)	X, line 25)			7
(a) Description of Liability	(b) Amount			
Federal Income Taxes				
Obligation under trust agreement	180,85	55.		
Due to Affiliates	13,757,64	 -		
Charitable Gift Annuity Contracts	629,41			
Other Liabilities	648,56			
	010,50			
		 		
				
	 			
		 		
		—		
Total (Column (h) must squal Form COO Dark V and CD Law CC)	15 016 11	_		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	15,216,48		About seconds About	h. l.t.
2. FIN 48 Footnote In Part XIV, provide the text of the footnot for uncertain tax positions under FIN 48	ne to the organization's	imanciai statements	ulai reports the organization's lia	DIIITY

	t XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements	1/2/	309 Tage 4
1	Total revenue (Form 990, Part VIII,column (A), line 12)		14,866,811.
2	Total expenses (Form 990, Part IX, column (A), line 25)	F	4,976,690.
3	Excess or (deficit) for the year. Subtract line 2 from line 1	-	9,890,121.
4	Net unrealized gains (losses) on investments	-	5,121,893.
5	Donated services and use of facilities		
6	Investment expenses		
7	Prior period adjustments		
8	Other (Describe in Part XIV)		931,488.
9	Total adjustments (net) Add lines 4 through 8		6,053,381.
	Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9		15,943,502.
Pai	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Re	turn	
1	Total revenue, gains, and other support per audited financial statements	1	22,031,038.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
	a Net unrealized gains on investments 2a 5,121,893.		
	Donated services and use of facilities		
	Recoveries of prior year grants 2c		
	d Other (Describe in Part XIV) 2d 2,042,335.	2.	7 164 220
3	e Add lines 2a through 2d Subtract line 2e from line 1	2e	7,164,228.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1	3	14,000,010.
	Investments expenses not included on Form 990, Part VIII, line 7b		
	O Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	14,866,810.
	t XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per	Retur	
1	Total expenses and losses per audited financial statements	1	6,087,536.
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
á	Donated services and use of facilities 2a		
ı	Prior year adjustments 2b		
	Other losses 2c		
(d Other (Describe in Part XIV) 2d 1,110,847.		
	e Add lines 2a through 2d	2e	1,110,847.
	Subtract line 2e from line 1	3	4,976,689.
	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	a Investments expenses not included on Form 990, Part VIII, line 7b		
	Other (Describe in Part XIV)		
	Add lines 4a and 4b	4c	4 076 600
	Total expenses Add lines 3 and 4c (This must equal Form 990, Part I, line 18) † XIV Supplemental Information	5	4,976,689.
Com	plete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, line; Part X, line 2, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part mation	nes 1b a to provi	and 2b; Part V, de any additional
<u>Pt</u> .	X Line 2 "The Association and the Endowment Trust have adopted	l	
	ASC 1740-10, 'Accounting for Uncertainty in Income Taxes	' <u>, as</u>	<u>it relates to</u>
	uncertain tax positions for the year ended December 3	<u>1, 2</u>	009 and has
	evaluated their tax positions taken for all open tax y	<u>ears</u>	Currently,
	the 2006 and subsequent tax years are open and subject to	<u>exam</u>	ination by the
	Internal Revenue Service for the Association (includi	ng f	ormer
	Foundation and Friends). However, the Association ar	<u>d</u> En	dowment Trust
BAA	are not currently under audit nor have they been contacted by TEEA3304 02/02/10	_	jurisdiction. ule D (Form 990) 2009

	St. Louis Zoo Foundation DBA St. Louis Zoo Association	43-1727309 Page 5
Part XIV Supplement	al Information (continued)	
	-	
	Based on the evaluation of the Association and	Endowment Trust
	tax positions, management believes all position	ns taken would be upheld
	under an examination. Therefore, no provision	for the effects
	of uncertain tax positions has been recorded f	or the year ended
	December 31, 2009."	
Pt_XI_Line_8	Effective April 30, 2009, the Saint Louiis Zoo Frience	ds Association wholly merged
	into the Saint Louis Zoo Foundation. The Zoo	Friends Association
	was not separately audited at 4/30/2009 when t	heir final 990 was
	filed. As a result, the 2009 audited financia	l_statements_include
	all Zoo Friends activity for the calendar year	y_while
	the 2009 Foundation 990 only includes Zoo Frie	ends_activity
	from 5/1/2009 through 12/31/2009. Net Zoo Fri	ends activity
	for 1/1/2009 through 4/30/2009 totals \$931,488	<u></u>
Pt_XII_Line_2d	Other revenue totaling \$2,042,335 represents r	revenue (\$1,900,882)
	and unrealized investment gains (\$141,453) pre	viously reported on
	the final Zoo Friends Association 990 covering	the period 1/1/2009
	through 4/30/2009. Please see the explaination	on for Schedule
	D, Pt XI Line 8 above.	
	Other expense totaling \$1,110,847 represents of	
	previously reported on the final Zoo Friends A	
	990 covering the period 1/1/2009 through 4/30/	
	Please see the explaination for Schedule D, Pt	XI Line 8 above.

Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990. ► See separate instructions.

OMB No 1545 0047 2009

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection

Employer identification number

St. Louis Zoo Founda	tion DBA St	Louis Zo	O ASSOCIALION	143-17273	
Part I General Informati to Form 990, Part	on on Activition IV, line 14b.	es Outside the	e United States. Complete	e if the organization	n answered 'Yes'
1 For grantmakers. Does the grantees' eligibility for the g	organization mair rants or assistanc	ntain records to si e, and the select	ubstantiate the amount of the groon criteria used to award the gr	ants or assistance, the ants or assistance?	X Yes No
2 For grantmakers. Describe	ın Part IV the orga	anızatıon's proced	dures for monitoring the use of o	grant funds outside the U	Jnited States
3 Activities per Region (Use	Schedule F-1 (For	m 990) if addition	nal space is needed)		
(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 in region
Sub-Saharan Africa	0	0	Grants to recipients in region		649,091.
Europe	0	0	Grants to recipients in region		28,334.
South America	0	0	Grants to recipients in region		25,000.
					-

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

Schedule F (Form 990) (2009)

702,425.

43-1727309

Page 2

St. Louis Zoo Foundation DBA St. Louis Zoo Association

Schedule **F** (Form 990) 2009

PartII

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. Check this box if no one recipient received more than \$5,000 Use Schedule F-1 (Form 990) if additional space is needed.

(i) Method of valuation (book, FMV, appraisal, other)												
(h) Description of non-cash assistance												or for which the
(g) Amount of non-cash assistance												301 341 114 1443
(f) Manner of cash disbursement	Wire transfer	Wire transfer	7,500. Wire transfer	68,299. Wire transfer	28,334. Wire transfer	25,000. Wire transfer						
(e) Amount of cash grant	10,000.	42,604.	7,500.	68,299.	28,334.	25,000.						1
(d) Purpose of grant	Wildlife Conser	Wildlife Conser	Wildlife Conser	Wildlife Conser	Wildlife Conser	Wildlife Conser						
(c) Region	Sub-Saharan Africa Wildlife Conser	Sub-Saharan Africa Wildlife Conser	Sub-Saharan Afrıca Wildlife Conser	Sub-Saharan Africa Wildlife Conser	Europe	South America Wildlife conser						
(b) IRS code section and EIN (if applicable)												
(a) Name of organization												
-												,

Schedule F (Form 990) 2009

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

³ Enter total number of other organizations or entities BAA

Page 3

Schedule F (Form 990) 2009 st. Louis Zoo Foundation DBA St. Louis Zoo Association

Part III | Grants and Other Assistance to Individuals Outside the United States. Complete If the organization answered 'Yes' to Form 990, Part IV, line 16. Use Schedule F-1 (Form 990) If additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other) Schedule F (Form 990) 2009 (g) Description of non-cash assistance (f) Amount of non-cash assistance 2,937. Wire transfer 427,751. Wire transfer (e) Manner of cash disbursement (d) Amount of cash grant (c) Number of recipients Field work - Madagascar Fauna Sub-Saharan Africa 2 Field Work - Sahara Conservation Sub-Saharan Africa 4 (b) Region (a) Type of grant or assistance BAA

	F (Form 990) 2009	St. Louis Zoo Foundation DBA St. Louis Zoo Association	43-1727309	Page 4
Part IV				
	Complete this par	t to provide the information required in Part I, line 2, and any additional inform	nation	
<u>Pt_I</u> .	Line 2	The Association serves as a "friends of" organ	nization that	
		facilitates support to specified foreign field conserv	ration organization in S	South
_ .		America, Europe, and Sub-Saharan Africa. The Assoc	iation received funds	<u>from</u>
		other partners and organizations for this purp	pose and periodicall	У
		sends the funds to the receiving organizations	via electronic trans	s <u>fer</u> .
		Typically, the Association serves in this capacit	y <u>for five organizati</u>	l <u>on</u> s:
		the Madagascar Fauna and Flora Group, Grevy's	Zebra Trust,	
		Northern Rangelands Trust, and the Humboldt Penquir	n Conservation Consort	t <u>ium.</u>
- -	-	The Madagagan Found and Flore Crown (MEC) is an		
-		The Madagascar Fauna and Flora Group (MFG) is an of zoos and related organizations that work co		
		_the Government of Madagascar's programs to cor		
		Grevy's Zebra Trust works in the Horn of Afric	ca to conserve Grevy	/ <u>'s</u> _
		zebra across its range in collaboration with l	ocal communities.	
		Northern Rangelands Trust's mission is to devel	Lope resilient commu	nity
		_conservancies which transform people's lives, secure peace,	and conserve natural resou	ırces.
			ports the operation	of_a
		field station in Punta San Juan, Peru, includi	ng_two_biologists_	-
		and a guard to assist with maintaining the wall	protecting the rese	erve.
		The mission of the Sahara Conservation Fund is	to conserve the	<u>-</u>
		wildlife, habitats and other natural resources of the Sahara and i	ts bordering Sahelian grass.	l <u>ands</u> .

See Schedule F - Part IV - Supplemental Information (Continuation Sheet)

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

2009

Open to Public

Department of the Treasury Internal Revenue Service Complete if the organization answered'Yes' to Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than \$15,000 on Form 990-EZ, line 6a.

Attach to Form990 or Form 990-EZ. See separate instructions.

Name of the organization Employer identification number 43-1727309 St. Louis Zoo Foundation DBA St. Louis Zoo Association Fundraising Activities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 17. Form 990EZ 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 X Solicitation of non-government grants X Internet and email solicitations Solicitation of government grants X Phone solicitations Special fundraising events In-person solicitations 2a Did the organization have 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? No **b** 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. (v) Amount paid to (i) Name of individual (ii) Activity (III) Did fundraiser (iv) Gross receipts (or retained by) (vi) Amount paid to or entity (fundraiser) have custody or control fundraiser listed in (or retained by) from activity of contributions? col (i) organization Yes No 10,128,881 10,048,881. Skystone Ryan, Inc Consultant Х 80,000 10,128,881. 80,000. 10,048,881. List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing Missouri

[Fai	t III	reported more than \$15,000 on F	orm 990-EZ, line 6	a. List events with	gross receipts grea	iter than S	\$5,00	0.	
R			(a) Event #1 ZOOFARI (event type)	(b) Event #2 Jammin' at the Zoo (event type)	(c) Other Events 6 (total number)	(d) Tota (Add col (col	Even	its	
REVEZUE	1	Gross receipts	809,756.	93,471.	286,524.	1,1	89,7	51.	
U E	2	Less Charitable contributions	0.	0.		•	_	0.	
	3	Gross income (line 1 minus line 2)	809,756.	93,471.	286,524.	1,1	89,7		
	4	Cash prizes							
	5	Noncash prizes							
D I RECT	6	Rent/facility costs							
Č	7	Food and beverages	22,816.	9,957.	26,931.	31. 59,			
E X P	8	Entertainment	148,307.	15,900.	9,499.	1	73,7	06.	
EXPENSES	9	Other direct expenses	141,124.	12,006.	209,893.	3	363,023.		
Š	10	Direct expense summary Add lines 4- th	5	596,433.					
	11 Net income summary. Combine lines 3, column (d) and line 10								
Pai	rt III	Gaming. Complete if the organiza \$15,000 on Form 990-EZ, line 6a	ation answered 'Ye	s' to Form 990, Pa	rt IV, line 19, or rej	oorted mo	re th	an	
REVENUE			(a) Bingo	(c) Other gaming	(Add col (al gaming (a) through			
U E									
	1	Gross revenue					•		
p X I P	2	Cash prizes					_		
DIRECT	3	Non-cash prizes					_		
S		Rent/facility costs							
	_5	Other direct expenses							
	6	Volunteer labor	Yes %	Yes%	Yes %				
	7	7 Direct expense summary. Add lines 2 through 5 in column (d)							
	8	Net gaming income summary Combine Ii	nes 1, column (d) and l	ine 7	•				
							YES	NO	
	Enter the state(s) in which the organization operates gaming activities. a Is the organization licensed to operate gaming activities in each of these states?								
b If 'No,' explain: 10 a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? b If 'Yes,' explain:									
11	Doe	s the organization operate gaming activitie	s with nonmembers?						
12	ls th	ne organization a grantor, beneficiary or tru		nber of a partnership or	other entity formed to	12			
	Juli	g	·						

Schedule G (Form 990 of 990-EZ) 2009 St. Louis 200 Foundation DBA St. Louis 200 Association 45-172/30			age 3			
		YES	NO			
13 Indicate the percentage of gaming activity operated in	i l					
a The organization's facility						
b An outside facility						
14 Enter the name and address of the person who prepares the organization's gaming/special events books and records	. 1					
	1 1					
Name. •						
Address· -						
15a Does the organization have a contact with a third party from whom the organization receives gaming revenue?	15a					
b If 'Yes,' enter the amount of gaming revenue received by the organization \$ and the amount	i İ					
of gaming revenue retained by the third party \$ c If 'Yes,' enter name and address of the third party						
c if Yes, enter name and address of the third party	1					
Name ▶	1 1					
Name •						
Address. ►	i l					
	i					
16 Gaming manager information	i l	l				
Name ►						
Gaming manager compensation ► \$						
	il	l				
Description of services provided						
☐ Director/officer ☐ Employee ☐ Independent contractor						
17 Mandatory distributions						
a is the organization required under state law to make charitable distributions from the gaming proceeds to retain the						
state gaming license?						
b Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year > \$						
organization's own exempt activities during the tax year						

Program suppor Educational Pr **%** □ (h) Purpose of grant or assistance Open to Public Inspection OMB No 1545 0047 2009 Part II | Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form Employer identification number X Yes 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use 43-1727309 (g) Description of non-cash assistance 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? (f) Method of valuation (book FMV, appraisal, other) Complete if the organization answered 'Yes,' to Form 990, Part IV, lines 21 or 22.

Attatch to Form 990. Grants and Other Assistance to Organizations, Governments and Individuals in the United States (e) Amount of non cash assistance 2. Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States 1,415,705. (d) Amount of cash grant 5,467 Part IV and Schedule I-1 (Form 990) if additional space is needed Louis Zoo Foundation DBA St. Louis Zoo Association (c) IRC section if applicable St. Louis Zoo Foundation DBA St. Louis Zoo Part | General Information on Grants and Assistance 20-0714717 43-1027364 (b) EIN Saint Louis Zoo_____One Government Drive____Saint Louis MO 63110 Saint_Louis_Zoo_Endowment One Government Drive Saint Louis MO 63110 1 (a) Name and address of organization or government -----11111 1 1 1 1 Department of the Treasury Internal Revenue Service Name of the organization SCHEDULE 1 (Form 990) 1 1

Schedule I (Form 990) 2009

TEEA3901 02/10/10

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

2 Enter total number of section 501(c)(3) and government organizations

3 Enter total number of other organizations

Page 2 Schedule I (Form 990) 2009 (Form 990) 2009 St. Louis Zoo Foundation DBA St. Louis Zoo Association 43-1727309 Grants and Other Assistance to Individuals in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 22. Use Part IV and Schedule I-1 (Form 990) if additional space is needed. (f) Description of non cash assistance Part IV | Supplemental Information. Complete this part to provide the information required in Part I, line 2, and any other additional information. ___office_determines_if_all_criteria_have_been_met_prior_to_transferring_any_funds. The Finance office monitors grant funds. Funds are transferred to the (e) Method of valuation (book, FMV, appraisal, other) relevant Zoo entity based on pre-determined criteria. The Finance (d) Amount of non cash assistance (c) Amount of cash grant (b) Number of recipients (a) Type of grant or assistance Schedule 1 (Form 990) 2009 Pt_I_Line_2 Pt_I_Line_2 Pt_I Line_2 Part III BAA

SCHEDULE J

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

2009

Department of the Treasury Internal Revenue Service

Name of the organization ► Complete if the organization answered 'Yes' to Form 990, Part IV, line 23.
 ► Attach to Form 990. ► See separate instructions.

Open to Public Inspection

Employer identification number

43-1727309 St. Louis Zoo Foundation DBA St. Louis Zoo Association Part I Questions Regarding Compensation No Yes 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Х Travel for companions Payments for business use of personal residence Х Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If 'No,' complete Part III to explain 1b Х 2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, 2 trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Х Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply. X X Compensation committee Written employment contract independent compensation consultant Compensation survey or study Approval by the board or compensation committee Form 990 of other organizations 4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filling organization or a related organization: a Receive a severance payment or change-of-control payment? 4ь Х b Participate in, or receive payment from, a supplemental nonqualified retirement plan? c Participate in, or receive payment from, an equity-based compensation arrangement? 4c Х If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of a The organization? 5a Х **b** Any related organization? 5ь Х If 'Yes' to line 5a or 5b, describe in Part III 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of a The organization? Х b Any related organization? 6b Х If 'Yes' to line 6a or 6b, describe in Part III For person listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If 'Yes,' describe in Part III 7 X Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If 'Yes,' describe in Part III 8 Х If 'Yes' to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?

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

Schedule J (Form 990) 2009

Part II | Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space is needed. St. Louis Zoo Foundation DBA St. Louis Zoo Association Schedule J (Form 990) 2009

Page 2

43-1727309

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(I)-(III) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

	(B) Breakdown	(B) Breakdown of W-2 and/or 1099-MISC	099-MISC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
(A) Name	(f) Base compensation	(ii) Bonus and incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)·(D)	reported in prior Form 990 or Form 990-EZ
	0.0		0	0	0	0	0
Jeffrey Bonner (446,1	0		48,259.	4,41	8,8	506,29
	·0	0		l I	0	0	0
Cynthia Holter (186,86	0	00	19,938.	99	_	199,0
	0				0		0 1
Stephen E. Barth (172	0	0	19,417.	99	196,018.	185,39
	0 (0)				0		
Robert E. Miller ((ii) 151,750.	0	0	16,021.	99	171,765.	168
	.0	0	0	0	0	0	0
Wyndel E. Hill	133,57	0		14,312	99	1,8	0
	0.		0		0	0	0.
David McGuire (i	131,64	0		1	99	150,808.	
	0		0	.0	0	0	0
William J. Boever	13,199		0			3,19	36,500.
	0		0	0	0	0	0
Charles H. Hoessle		0				36	41,9(
	(0)						
D					i		
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	(II)						
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	1 1 1		1 1 1 1 1 1 1		1 1 1	1 1 1 1 1 1 1 1 1	
	(ii)						
ВАА			TEEA4102 0;	02/02/10		Sche	Schedule J (Form 990) 2009

Name of the Organization

Continuation Sheet for Form 990

OMB No 1545 0047

Open to Public Inspection

► Attach to Form 990 to list additional information for Form 990, Part VII, Section A, line 1a. ► See instructions for Form 990. Department of the Treasury Internal Revenue Service

Employler Identification number

Louis Zoo Foundation DBA St. Louis Zoo Association 43-1727309 Part I Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

(A)	(B)			•	C)			(D)	(E)	(F)
Name and Title	Average hours per week	Individual trustee or director	institutional trus	check Officer	≅ Key employee	A Highest compensated employee	Former	Reportable compensation from the organization (W 2/1099 MISC)	Reportable compensation from related organizations (W 2/1099 MISC)	Estimated amount of other compensation from the organization and related organizations
		stee	rustee		100	ensated				
John K. HandyDirector	0.00	x						0.	0.	0.
Judith A. Harris										
Director	0.00	х						0.	0.	0
Shaun R. Hayes Director	0.00	x						0.	0.	0 .
Keith W. Hazelwood										
Director	0.00	x _						0.	0.	0_
Robert R. Hermann, Jr.										
Director	0.00	X			<u> </u>	ļ		0.	0.	0
Douglas E. Hill										
Director	0.00_	X			ļ			0.	0.	0
William F. Holekamp					ĺ			_	_	_
Director	0.00	X_	 		1			0.	0.	00
David M. Hollo										_
Director	0.00	X_			١.			0.	0.	0
Janet_Holloway	l	١	ĺ							•
Director	0.00	_X_	├-		\vdash	-		0.	0.	0
Thomas R. Hughes	0.00	,,			İ				ا ا	0
Director Joseph F. Imbs, III	0.00	X	-		-			0.	0.	0
Director	0.00	x						0.	o.)	0
Don Imholz	0.00	<u> </u>		<u> </u>				<u> </u>		
Director	0.00	x						0.	0.	0
Joseph Impicciche		 ^-		 	-		\vdash			
Director	0.00	x			l			0.	0.	_ 0
Lawrence P. Katzenstein		 			T					
Director	0.00	x						0.	0.	0
Thierry Kennel										
Director	0.00	х		ĺ				0.	0.	0
Jerald_Kent										
Director	0.00	X						0.	o.	0
Deborah Koenemann										
Director	0.00_	х						0.	0.	0
Jeffrey Korn										
Director	0.00_	х				ļ		0.	0.	0
Todd J. Korte	!		İ	ĺ						
Director	0.00	X			_	ļ		0.	0.	0
Susan B. Krawll										
Director	0.00_	X	 		 	<u> </u>		0.	0.	0
Tom Kuypers]	}						
Director	0.00	X		L				0.	0.	0_

Continuation Sheet for Form 990

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

OMB No 1545 0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

St. Louis Zoo Foundation DBA St. Louis Zoo Association 43-1727309

Part | Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

Employler Identification number

Employees (A)	(B)			((C)			(D)	(E)	(F)
Name and Title	Average hours	Posi	ition (•	that appl	ly)	Reportable	Reportable	Estimated
	perweek	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
Toni E. Leidenfrost				}						
Director	0.00	X	_			-		0.	0.	0.
Doris Lichtenstein									_	
<u>Director</u>	0.00	X						0.	0.	0.
Martin_J. Lyons, Jr.	1]	Ì		Ì					
Director	0.00	X	_		L	ļ		0.	0.	0.
Thomas R. Martin										
Director	0.00	X	ļ					0.	0.	0.
Pam Moench	}		١					1		
Director	0.00	X_						0.	0.	0.
Miles D. Mooney										
Director	0.00	Х						0.	0.	0.
Patrick J. Moore	l		ļ	ļ	ļ	ļ	1			
Director	0.00	_X			_	į		0.	0.	0.
Don Imholz	1									
Director	0.00	X						0.	0.	0.
Kevin D. Mowbray										
Director	0.00	X	L		<u>.</u>			0.	0.	0.
Barbara Mungenast										
Director	0.00	X	L	<u> </u>	L		L_	0.	0.	0.
David C. Nichols	[ĺ							
Director	0.00	X				<u></u> .	<u> </u>	0.	0.	0.
Elizabeth E. Niedringhaus										
Director	0.00	X						0.	0.	0.
Lisa W. Nouss	ļ			ĺ	l					
Director	0.00	X		<u> </u>			<u> </u>	0.	0.	0.
James E. O'Donnell										
Director	0.00	Х						0.	0.	0.
Robert F. O'Loughlin						1				
Director	0.00	X		<u></u>				0.	0.	0.
Gilberto Pinela										
Director	0.00	X						0.	0.	0.
Cheryl D. Polk	İ									
Director	0.00	X				_		0.	0.	0.
Gregory Portell										
Director	0.00	X						0.	0.	0.
Kathleen W. Pratt										
Director	0.00	X		L		<u>L</u>		0.	0.	0.
John K. Pruellage										
Director	0.00	Х	L	L_	L	L	<u>L</u> .	0.	0.	0.
Winthrop B. Reed III										
Director	0.00	X		_			1	0.	0.	0.
	-						_			

Continuation Sheet for Form 990

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

OMB No 1545 0047

2009

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the Organization

St. Louis Zoo Foundation DBA St. Louis Zoo Association 43-1727309

Part L Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated

Employler Identification number

Employees (A)	(B)			((C)	-		(D)	(E)	(F)
Name and Title	Average hours	Pos	ition (hat appl	ly)	Reportable compensation from	Reportable compensation from	Estimated
	per week	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W 2/1099 MISC)	compensation from related organizations (W 2/1099 MISC)	amount of other compensation from the organization and related organizations
Peggy Ritter Director	0.00	х						0.	0.	0.
Steven C. Roberts Director	0.00	х						0.	0.	0.
Marsha_Rusnack Director	0.00	x						0.	0.	0.
Steven F. Schankman Director	0.00	x						0.	0.	_0.
John D. Schaperkotter Director	0.00	х						0.	0.	0.
Steven F. Schepman III Director	0.00	х						0.	0.	0.
Mark J. Schnuck Director	0.00	х						0.	0.	0.
John D. Simmons Director	0.00	Х						0.	0.	0.
Thad Simons Director	0.00	х						0.	0.	0.
Robert B. Smith III Director	0.00	х						0.	0.	0.
Kathy Snowden Director	0.00	х						0.	0.	0.
Richard A. Spradling Director	0.00	x						0.	0.	0.
Michael A. Staenberg Director	0.00	X	-	_				0.	0.	
Kenneth B. Steinback							-			0.
Director Julia J. Stupp	0.00	Х						0.	0.	0.
Director Warren G. Sullivan	0.00	X			 		_	0.	0.	0.
Director Debbie T. Thomas	0.00	Х						0.	0.	0.
Director Lawrence E. Thomas	0.00	Х	-		_			0.1	0.	0.
Director Virgil Van Trease	0.00	Х						0.	0.	0.
Director Richard B. Walsh, Jr.	0.00	Х		_				0.	0.	0.
Director Thomas G. Welch, Jr.	0.00	Х						0.	0.	0.
Director	0.00	x						0.	0.	0.

Continuation Sheet for Form 990

OMB No 1545 0047

Open to Public Inspection

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

Department of the Treasury Internal Revenue Service Name of the Organization

Employler Identification number

St. Louis Zoo Foundatio	n DBA St.	Lou	is	Zc	0	Assc	ci	ation	43-1727309	
Part I Continuation: Officers Employees	, Directors,	Trust	tees	s, K	ſеу	Emp	loy	ees, and Highest	Compensated	
(A)	(B)	l			C)			(D)	(E)	(F)
Name and Title	Average hours	Posi	tion (hat appl	ly)	Reportable	Reportable	Estimated
Name and The	per week	9 5	5	0	7	1 g I	77	compensation from	compensation from related organizations	amount of other compensation
		Individual trustee or director	Institutional trustee	Officer	Key employee	nplo	Former	(W 2/1099 MISC)	(W 2/1099 MISC)	from the organization
		ctal	tona	7	탏	ee g	"			and related organizations
		trust	al tru		yee	mpe				organization o
		8	stee		i	Highest compensated employee				
Richard M. Whiting					-	- 8	-			
Director	0.00	x		}	ļ	ļ		0.	0.	0.
Gerald E. Wiley	0.00						├-			
Director	0.00	x						0.	0.	0.
Consuelo H. Wilkins	0.00_	 ^- -					\vdash			<u>~·</u>
Director	0.00	x		1		•		٥.	0.	0.
Robert M. Williams, Jr.	0.00_		i —						- 0.	
Director	0.00	х						0.	0.	0.
Barbara J. Wilson	0.00				<u> </u>		┢			
Director	0.00	х						0.	0.	
Barbara Wright										
Director	0.00	х			ŀ			٥.	0.	0.
Jeffrey Bonner				-						
President & CEO	40.00			x				0.	446,179.	62,672.
Cynthia Holter				-						
	40.00				x			l o.	186,868.	23,932.
Stephen E. Barth										
VP, Business Operations	40.00			x				0.	172,607.	23,411.
Robert E. Miller										
Sr Vp, Director Zoological Ops	40.00			х		<u> </u>		0.	151,750.	20,015.
Wyndel E. Hill					I^{-}			_		-
VP, Internal Relations	40.00					Х		0.	133,578.	18,306.
David McGuire										
VP, Architecture & Planning	40.00					Х		0.	131,641.	19,167.
John M. Grisham					İ					
VP, Animal Collection	40.00		L			Х	L	0.	122,693.	18,189.
Cheryl S. Asa	<u> </u>									
Director of Research	40.00				_	Х		0.	111,334.	15,558.
Cassandra Brown-Ray				1	1					
Director of Finance	40.00					Х		0.	104,859.	<u>15,356.</u>
William J. Boever		1							ì	
Former Director	40.00			<u> </u>	ļ		X	0.	13,199.	0.
Charles H. Hoessle										
Former Director	40.00				ļ		X	0.	36,300.	0.
			<u> </u>	\vdash	 	 	\vdash			
							_			
				-			\vdash		 	
		1		ļ		ļ	1		l .	

Noncash Contributions

► Complete if the organizations answered 'Yes' on Form 990, Part IV, lines 29 or 30.

OMB No 1545 0047

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization

► Attach to Form 990.

Open To Public Inspection

	Louis Zoo Foundation DBA St. 1	Louis Zoo	Association	43-	172730	9		
Par	t I Types of Property							
		(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	Meth	od of c rever	letermın	ıng
1	Art-Works of art							
2	Art—Historical treasures			<u> </u>				
3	Art—Fractional interests							
4	Books and publications				1			
5	Clothing and household goods							
6	Cars and other vehicles	x	1	7,500.	Ouote	/Reta	ail P	rice
7	Boats and planes			.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
8	Intellectual property						-	
9	Securities—Publicly traded	X	7	1,037,679.	Fair N	Mark	et Va	lue
10	Securities—Closely held stock		· · · · · ·	2700170751		1021		
11	Securities—Partnership, LLC, or trust interests							
	Securities—Miscellaneous							
13	Qualified conservation contribution— Historic structures							
14	Qualified conservation contribution—Other							
15	Real estate-Residential							
16	Real estate-Commercial							
17	Real estate-Other							
18	Collectibles							
19	Food inventory					_		
20	Drugs and medical supplies							
21	Taxidermy							
	Historical artifacts		·					
	Scientific specimens							
24	Archeological artifacts							
25	Other ► ()							
26	Other ► ()	 			l			
27	Other ► (
	Other ► (
		n during the	lov voor for contribution	no for which the			_	
23	Number of Forms 8283 received by the organization organization completed Form 8283, Part IV, Dones	e Acknowledg	ement	is for which the	29			
							Yes	No
30 a	During the year, did the organization receive by co hold for at least three years from the date of the in purposes for the entire holding period?	ontribution any nitial contribut	property reported in F ion, and which is not re	Part I, lines 1-28 that it equired to be used for e	must exempt	30 a		X
b	If 'Yes,' describe the arrangement in Part II.							
31	Does the organization have a gift acceptance police	cy that require	s the review of any noi	n-standard contribution	s?	31		Х_
	Does the organization hire or use third parties or r noncash contributions?	elated organiz	zations to solicit, proce	ss, or sell		32a		х
	If 'Yes,' describe in Part II							
33	If the organization did not report revenues in colur	nn (c) for a ty	pe of property for whic	h column (a) is checke	d,			
	describe in Part II.					1		

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

Schedule M (Form 990) 2009

Schedule I	(Form 990) 200	09 St. Loui	s Zoo Fou	ndation	DBA St. 1	Louis Zoo	Associati	on 43-1727 <u>309</u>	Page 2
Part II	Supplementa and 33. Also	I Information complete this	. Complete part for ar	this part ny additio	to provide	the infornation.	nation requir	on 43-1727309 red by Part I, line	s 30b, 32b,
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Supplemental Information to Form 990

OMB No 1545 0047

Department of the Treasury Internal Revenue Service

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

• Attach to Form 990.

Open to Public Inspection

St. Louis Zoo Fou	ndation DBA St. Louis Zoo Association	43-1727309
Pt_III_ Line 2	The St. Louis Zoo Friends merged into the St. L	ouis Zoo Foundation
	on April 30, 2009. The Foundation has taken ov	er_operations
	of the Membership Program and Parent Program.	
Pt_VI-A, Line 4	The St. Louis Zoo Friends Association merged in	to the
	St. Louis Zoo Foundation on April 30, 2009. Th	e_articles
	of merger have been attached to this return.	
Pt_VI-B, Line 11A	The organization emails a copy of the 990 to all members of the	e Audit Committee. Each member
	reviews the return, at which point the return i	s_emailed_to
	all members of the board for their review. It	<u>is</u>
	discussed at an annual board meeting.	
	The officers of the Saint Louis Zoo are required by the N	
	to complete a "personal financial disclosure st	atement" each year.
	This form documents other sources of income that	could create a conflict
	of interest for their employment here at the Zo	<u>o.</u>
Pt VI-B, Line 15	The Chief Executive Officer (CEO) of the Saint	Louis Zoo has his
	compensation reviewed annually. The occurence and/or	degree of any change in the
	renumeration is the final decision of the chairman of the Zoologic	cal Park Subdistrict Commission.
	The determination of compensation for the other of	ficers and key employees
	is a multi-step process. After a full time position	on becomes available, the
	opening is graded at a certain level and then ma	tched within a specific
	salary range. The rate of pay for each candida	te will take into
	consideration their experience level, education	, current salary,

Department of the Treasury Internal Revenue Service

Name of the organization

Related Organizations and Unrelated Partnerships

Louis Zoo Association

St. Louis Zoo Foundation DBA St.

2009

OMB No 1545 0047

Open to Public Inspection

43-1727309

Employer identification number ► Complete if the organization answered 'Yes' to Form 990, Part IV, lines 33, 34, 35, 36, or 37.

► Attach to Form 990. ► See separate instructions.

(F)
Direct controlling
entity (E) End-of-year assets Part I Identification of Disregarded Entities (Complete of the organization answered 'Yes' to Form 990, Part IV, line 33.) (**D)** Total income (C) Legal domicile (state or foreign country) (B) Primary activity (A) Name, address, and EIN of disregarded entity

(F)
Direct controlling
entity Identification of Related Tax-Exempt Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.) Line 11 Type 1 Line 11 Type II (E)
Public charity status (if section 501(c)(3)) Governmental Unit (**D)** Exempt Code section 501(c)(3)501 (c) 3 (C) Legal domicile (state or foreign country) through management & research | MO for advancement of the Zoo MO Saint Louis Zoo Friends Association 43-0788060 ro help the st Louis Zoologic One Government Drive, Saint Louis MO 63110 through financial support MO Saint Louis Zoo Endowment Trust 20-0714717 Holds & manages financial ass To conserve animals & their h Primary activity One Government Drive, Saint Louis MO 63110 One Government Drive, Saint Louis MO 63110 (A) Name, address, and EIN of related organization Saint_Louis_Zoo_43-1027364 Part II

Schedule R (Form 990) (2009)

TEEA5001 02/05/10

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

Page 2

Schedule R (Form 990) 2009 St. Louis Zoo Foundation DBA St. Louis Zoo Association

43-1727309 Fart III | Identification of Related Organizations Taxable as a Partnership (Complete of the organization answered 'Yes' to Form 990, Part IV, line 34 because of had one or more related organizations treated as a partnership during the tax year.)

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	(B) Primary Activity	<u>.</u>	6	(E)	(F) Share of total incom	(G) Share of end-of-vear	(H)	Code V-UBI	(J) General or
		domicile	controlling entity	income (related,		assets	tionate	10	managing
	_	(state or		unrelated, excluded			locations?	20 of Schedule	partner?
		toreign country)		from tax under sections 512-514)			Yes No	K-1 (Form 1065)	Yes
1									
	-								
							. <u>-</u> .		
		•							
			•						

ırt IV,	(H) Percentage ownership	l:				
es' to Form 990, Pa	(G) Share of end-of-year assets					
ation answered 'Ye tax year.)	Incom					
if the organizations	(E) Type of entity (C corp. S corp, or trust)					
ible as a Corporation or Trust (Complete if the organization answiganizations treated as a corporation or trust during the tax year.)	(D) Direct controlling entity		_		1	
rporation or Ti	(C) Legal domicile (state or foreign country)					
axable as a Co ld organizations	(B) Primary Activity					
Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)	(A) Name, address, and EIN of related organization					

Schedule R (Form 990) (2009)

TEEA5002 02/05/10

BAA

Page 3

43-1727309

Part V | Transactions With Related Organizations (Complete if the organization answered 'Yes' to Form 990, Part IV, line 34, 35, or 36.)

			ł	
Note Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule			Yes	2
1 During the tax year did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV		(>
Gift, grant, or capital contribution to other organization(s)		- -	×	4
c Gift, grant, or capital contribution from other organization(s)		10		×
d Loans or loan guarantees to or for other organization(s)		1 d		×
e Loans or loan guarantees by other organization(s)		1e		×
f Color of seconds to other property and the seconds of		-		>
				٠
g Furchase of assets from other organization(s)		6 J		⊹ ;
		_	1	×
i Lease of facilities, equipment, or other assets to other organization(s)		=		×
i Lease of facilities, equipment, or other assets from other organization(s)		=		×
k Performance of services or membership or fundraising solicitations for other organization(s)		, <u>+</u>		×
l Performance of services or membership or fundraising solicitations by other organization(s)		=		×
m Sharing of facilities, equipment, mailing lists, or other assets		=	×	
n Sharing of paid employees		-L	×	
o Reimbursement paid to other organization for expenses		9	×	
p Reimbursement paid by other organization for expenses		d d	+	×
				:
q Other transfer of cash or property to other organization(s)		5	1	×
r Other transfer of cash or property from other organization(s)]r	1	×
2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	and transaction threshold	S		
(A) Name of other organization	(B) Transaction type (a-r)	(C) Amount involved) nvolve	g l
(1) Saint Louis Zoo	В	1,415,		705.
(2) Saint Louis Zoo	0	1,54	548,718	18.
(3) Saint Louis Zoo Endowment Trust	а		5,4	467.
(5)				
(9)				
BAA TEEA5003 02/05/10	Schedul	Schedule R (Form 990) (2009)	3) (2	(6002

Schedule R (Form 990) 2009_St. Louis Zoo Foundation DBA St. Louis Zoo Association

Part VI Unrelated Organizations Taxable as a Partnership (Complete if the organization answered 'Yes' to Form 990, Part IV, line 37.)

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total asset or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(A) Name, address, and EIN of entity	(B) Primary activity	(C) Are all programment (C) Are all programment (State or foreign 501(c) country)	Are all partners section 501(c)(3) organizations?	(E) Share of end-of-year assets	(F) Disproportionate allocations?	Code V-UBI amount in box 20 of Schedule K-1 Form (1065)	(H) General or managing partner?
			Yes No		Yes No		Yes No
				'			
			_				
							-
ВАА		TEEA5004 02/05/10				Schedule R (Form 990) (2009)	n 990) (2009)

Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 1 (continued)
Briefly describe the organization's mission' in the St Louis region and throughout Missouri for charitable purposes by providing facilities, funds, and advice.
Schedule O (Form 990), Supplemental Information to Form 990 Form 990, Page 2, Part III, Line 4d (continued)
4d Describe the exempt purpose achievements for each of the organization's other program services. Section 501(c)(3) and (4) organizations and 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported. Code. Description: Parent Program - This program allows for direct expenses 90,000. compensation to the Zoo's commissary budget to offset the costs of feeding the animals. This program also creates educational opportunities for it's donors. Animal fact sheets are offered to donors and an annual Zoo Parents celebration is held where donors are welcome to visit the commisary and veterinary hospital.
Schedule F (Form 990) - Part IV - Supplemental Information (continued) Schedule F - Part IV - Supplemental Information (Continuation Sheet)
Part IV Supplemental Information
Since the Association serves as a "friends of" entity for these funds, nothing has been reported on its financial statement or on Form 990 Part IX line 3 since it was not treated as an expense. This

information has been included on Schedule F in the interest of full disclosure.