PUBLIC INSPECTION COPY

Form **990**

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

► Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information.

Α	For the	2018 calend	dar year, or tax year begin	ning	, 2018, ai	na enaing				,	
В	Check if ap	oplicable:	С					D Employ	er ident	ification number	
	Addre	ss change	Houston Zoo, Inc					74-	1590	271	
	Name	change	1513 Cambridge					E Telepho			
	-	return	Houston, TX 7703	0				713	-533	-6501	
	-						ŀ	113	555	0301	
		eturn/terminated						C a		¢ 110 404 7FI	-
	—	ded return	F N	1. 17		lu.	- le this s	group retur		\$ 118,484,75	
	Applic	cation pending	F Name and address of principa	officer: Lee Ehmke						163	No
			Same As C Above			'''	If "No,"	subordinates attach a list	included . (see ins	d? Yes Yes	No
<u> </u>	Tax-exe	mpt status:	X 501(c)(3) 501(c) ()◀ (insert no.) 49	947(a)(1) or	527					
J	Websi	ite: ► ww	w.houstonzoo.org			H	(c) Group 6	exemption nu	umber 🕨	-	
K	Form of	organization:	X Corporation Trust	Association Other ►	L Yea	ar of formation	: 1920) M s	State of I	egal domicile: TX	
Pa	art I	Summar	v	<u> </u>				<u> </u>			
		iefly descri	be the organization's missi	on or most significant activ	vities:We s	trive 1	o be	a zoo	tha	t practices	
4				elivers an outsta							
ဋ	W			respect and teamw							
шa	a a			areness, and insp.							
Š	2 Cr			n discontinued its operation					net as	sets.	
ၓ	3 Nu			ning body (Part VI, line 1a					3		33
•მ •ი	4 Nu			s of the governing body (Pa					4		33
<u>ë</u>	5 To			calendar year 2018 (Part '	•				5	6	72
Activities & Governance	6 To		•	necessary)					6	1,3	00
Ą	l l			Part VIII, column (C), line 1					7a		0.
	b Ne	et unrelated	I business taxable income	from Form 990-T, line 38					7b	38,55	6.
								rior Year		Current Year	
Φ				1h)				,435,5		65,803,52	
ű				2g)			37	,212,1		36,675,60	
Revenue	l l			A), lines 3, 4, and 7d)				682,4		838,34	
Œ				nes 5, 6d, 8c, 9c, 10c, and					203.	-89,08	
				(must equal Part VIII, colu				,339,2		103,228,38	
				X, column (A), lines 1-3)			2	,473,6	63.	2,950,49	7.
			to or for members (Part I)								
Ø	15 Sa	alaries, othe	er compensation, employee	e benefits (Part IX, column	(A), lines 5	-10)	26	,105,6	593.	26,052,08	3.
Se	16a Pr	ofessional	fundraising fees (Part IX, o	column (A), line 11e)				77,0	00.	85,28	2.
Expenses	h To	ntal fundrais	sing expenses (Part IX col	umn (D), line 25) ►	3,756	737		<u>, , , , , , , , , , , , , , , , , , , </u>		, i	
Ä	17 Ot			nes 11a-11d, 11f-24e)			1.0	020 0) O E	20 770 22	2
								,939,9		20,770,32	
				equal Part IX, column (A),				,596,2		49,858,18	
		evenue less	expenses. Subtract line I	8 from line 12				,743,0		53,370,20	1.
s or			(D 1)/ 1' 10					g of Currer		End of Year	
Net Assets Fund Baland	20 To		• •					,437,2		226,345,78	<u>9.</u>
A As	21 To		,				5	,114,3	306.	9,395,13	5.
		et assets or	fund balances. Subtract li	ne 21 from line 20			168	,322,9	910.	216,950,65	4.
Pa	art II	Signatur	e Block								
Und	er penalties	of perjury, I de	eclare that I have examined this retu	irn, including accompanying schedul all information of which preparer has	es and stateme	nts, and to the	best of m	y knowledge	and beli	ef, it is true, correct, and	
com	piete. Decia	aration of prepa	irer (other than officer) is based on	all information of which preparer has	s any knowledge	e. 					
		► Ele	ctronically File	<u>ed</u>							
Sig	gn	Signatu	re of officer				Dat	te			
He	ere		Ehmke				Presi	dent 8	CE(0	
		,,	print name and title			-	· · · · ·				
		Print/Type p	reparer's name	Preparer's signature		Date		Check	if	PTIN	
Pa	id	Barbar	ra Murphy	Barbara Murp	hy I	11/14	119	self-employ	ed	P01386215	
	eparer	Firm's name							ı		
	e Only	Firm's addre						Firm's EIN	► 76-	-0269860	
	•			77027-5132				Phone no.	(713		
Ma	v the IRS	discuss th	is return with the preparer		ctions)				(/ 1)	X Yes N	

43,248,916.

4 e Total program service expenses

Form 990 (2018) Houston Zoo, Inc. Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1	Х	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	Χ	
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, or have a section 501(h) election in effect during the tax year? If 'Yes,' complete Schedule C, Part II	4		Х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5		Х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		Х
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	
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV.	9	X	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10	Х	
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.			
a	a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If 'Yes,' complete Schedule D, Part VI</i>	11 a	Х	
t	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.	11 b		Х
c	Did the organization report an amount for investments – program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII.	11 c		Х
c	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.	11 d		Х
6	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e		Χ
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f		Х
12 a	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI and XII	12a	Х	
Ł	Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		Х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		Χ
14 a	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		Х
k	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV.	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15	Х	
	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV.	16	Х	
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17	Х	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II.	18	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
20a	Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20a		Х
b	If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If 'Yes,' complete Schedule I, Parts I and II.	21	Χ	

Form 990 (2018) Houston Zoo, Inc. Part IV Checklist of Required Schedules (continued)

,			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? 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 Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K. If 'No, 'go to line 25a	24a		Х
	b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
•	c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
	d 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), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		Х
1	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	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If 'Yes,' complete Schedule L, Part II.	26		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L. Part III.	27		Х
28				
;	a A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
I	b A family member of a current or former officer, director, trustee, or key employee? <i>If 'Yes,' complete Schedule L, Part IV</i>	28b		Х
•	c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If 'Yes,' complete Schedule M</i>	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, Part II, III, or IV, and Part V, line 1.	34		Х
35	a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		X
	b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If 'Yes,' complete Schedule R, Part V, line 2</i>	36		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? <i>If 'Yes,' complete Schedule R, Part VI</i>	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O.	38	Х	
Pa	rt V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
1	a Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		Yes	No
	a Enter the number reported in Box 3 of Form 1096. 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 с	Х	
BAA	TEEA0104L 08/03/18	Form	990	(2018)

Form 990 (2018) Houston Zoo, Inc.

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

			Yes	No							
2 8	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State-										
	ments, filed for the calendar year ending with or within the year covered by this return 2a 672		,,								
ł	f at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	Χ								
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to <i>e-file</i> (see instructions)		v								
	a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3 a	X								
	a If 'Yes,' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O.	3 b	Λ								
4 8	a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		Χ							
ŀ	n If 'Yes,' enter the name of the foreign country: ►										
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).										
5 8	a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5 a		Х							
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5 b 5 c		X							
(c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?										
6 8	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 as charitable contributions?	6 a		Х							
	olf 'Yes,' did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b									
7	Organizations that may receive deductible contributions under section 170(c).										
á	a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7 a	Χ								
ŀ	If 'Yes,' did the organization notify the donor of the value of the goods or services provided?	7 b	X								
(Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file	7.		Х							
	Form 8282?	7 c		Λ							
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7 e		Х							
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		Χ							
Ç	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899										
	as required?	7 g									
ŀ	n If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7 h									
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring										
	organization have excess business holdings at any time during the year?	8									
	Sponsoring organizations maintaining donor advised funds.										
	a Did the sponsoring organization make any taxable distributions under section 4966?	9 a									
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9 b									
	Section 501(c)(7) organizations. Enter: a Initiation fees and capital contributions included on Part VIII, line 12										
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 10b										
	Section 501(c)(12) organizations. Enter:										
	a Gross income from members or shareholders										
ŀ	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)										
	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a									
	olf 'Yes,' enter the amount of tax-exempt interest received or accrued during the year										
	Section 501(c)(29) qualified nonprofit health insurance issuers.										
ć	a Is the organization licensed to issue qualified health plans in more than one state?	13a									
	Note. See the instructions for additional information the organization must report on Schedule O.										
	Denter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans										
	a Did the organization receive any payments for indoor tanning services during the tax year?	14a		Х							
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in Schedule O	14b									
	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or	5									
	excess parachute payment(s) during the year?	15		Х							
	If 'Yes,' see instructions and file Form 4720, Schedule N.										
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If 'Yes,' complete Form 4720, Schedule O.	16		Х							
	n res, complete rollin 4/20, schedule o.										

John Trahan 1513 Cambridge

Part VI Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response or note to any line in this Part VI. Section A. Governing Body and Management No Yes 1 a Enter the number of voting members of the governing body at the end of the tax year. 33 If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. **b** Enter the number of voting members included in line 1a, above, who are independent ... 33 2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 Χ Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 3 Χ Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Χ X Did the organization become aware during the year of a significant diversion of the organization's assets?.... 5 Χ Did the organization have members or stockholders?..... 6 7 a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more 7 a Χ **b** Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?..... Χ 7 b Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following: a The governing body?.... Χ 8 a X **b** Each committee with authority to act on behalf of the governing body?..... 9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O..... 9 Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code. Yes No 10 a Did the organization have local chapters, branches, or affiliates?..... 10 a Χ b If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 10b 11 a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?..... Χ b Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O Χ 12a Did the organization have a written conflict of interest policy? If 'No,' go to line 13...... 12a b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise 12b Χ to conflicts?..... c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done ... See .Schedule .0 Χ 12c 13 Did the organization have a written whistleblower policy?..... 13 Χ Χ 14 Did the organization have a written document retention and destruction policy?..... 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? a The organization's CEO, Executive Director, or top management official.. See . Schedule.. 0...... Χ 15a **b** Other officers or key employees of the organization...See .Schedule . 0..... 15 b X If 'Yes' to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?.... Χ 16 a **b** If 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?.. 16 b Section C. Disclosure List the states with which a copy of this Form 990 is required to be filed > None Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website X Upon request Other (explain in Schedule O) Describe in Schedule 0 whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to 19 the public during the tax year. See Schedule O State the name, address, and telephone number of the person who possesses the organization's books and records

Houston TX 77030 713-533-6750

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

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

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

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

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

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

(A) Name and Title (B) Average hours Position (do not check more than one box, unless person is both an officer and a director/trustee) per Position (do not check more than one box, unless person is both an officer and a director/trustee) per Position (do not check more than one box, unless person is both an officer and a director/trustee) reper Position (do not check more than one box, unless person is both an officer and a director/trustee) reper Position (do not check more than one box, unless person is both an officer and a director/trustee) Reportable compensation from related organizations	(F) Estimated amount of other compensation
per week (list any hours for director related organizations) hours for clated organization (W-2/1099-MISC) Tright T	from the organization and related organizations
(1) Stacy Methvin 4	
Board Chair 0 X X 0. 0.	0.
(2) Joe Cleary 1	
Vice Chair 0 X X 0. 0.	0.
(3) Cullen Geiselman 1 1	
Vice Chair 0 X X 0. 0.	0.
(4) Robert Graham 1	
Vice Chair 0 X X 0. 0.	0.
Vice Chair 0 X X 0. 0.	0.
Vice Chair 0 X X 0. 0.	0.
Imm Past Chair 0 X X 0. 0.	0.
_(8) Roxanne Almaraz 1 1	
Board Member 0 X 0. 0.	0.
_(9) Philip Bahr (thru 6/18) 1 1	
Board Member 0 X 0. 0.	0.
(10) Monica Benton (thru 6/18) 1 1	
Board Member 0 X 0. 0.	0.
(11) Roberto Contreras 1	
Board Member 0 X 0. 0.	0.
(12) Joshua Davidson 1	
Board Member 0 X 0. 0.	0.
(13) Joe Dilg 1	
Board Member 0 X 0. 0.	0.
(14) Jeff Dudderar 1	
Board Member 0 X 0. 0.	0.

Part VII Section A. Officers, Directors, Tru	ustees,	Key	Em	ıplo	oye	es,	and	d Highest Com	pensated Emp	loyees	(cont	inued)
	(B)			((,							
(A) Name and title	Average hours per	box	, unle	check ess pe	erson direct	e than is botl or/trus	h an tee)	(D) Reportable compensation from	(E) Reportable compensation from	amo	(F) stimated unt of o	ther
	week (list any hours for related organiza - tions below dotted line)	or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	f org an	npensati rom the panizatio d relate anizatio	on ed
(15) Robert Edwards Board Member	1	Х						0.	0.			0.
(16) Jenny Elkins Board Member	$-\frac{1}{0}$	X						0.	0.			0.
(17) Kat Gallagher Board Member	$-\frac{1}{0}$	X						0.	0.			0.
(18) Amy Garrou Board Member	1	Х						0.	0.			0.
(19) Eureka Gilkey (as of 7/18) Board Member	$-\frac{1}{0}$	Х						0.	0.			0.
(20) Marty Goossen Board Member	1	Х						0.	0.			0.
(21) Winell Herron (thru 6/18) Board Member	1	Х						0.	0.			0.
(22) Gillian Hobson Board Member	10	Х						0.	0.			0.
(23) Tandra Jackson Board Member	1	Х						0.	0.			0.
C24) Jill Jewett Board Member	$-\frac{1}{0}$	Х						0.	0.			0.
C25) Myrtle Jones Board Member	$-\frac{1}{0}$	Х						0.	0.			0.
1 b Sub-total								0.	0.			0.
c Total from continuation sheets to Part VII, Secti								1,686,644.	0.			487.
d Total (add lines 1b and 1c)								1,686,644.	0.			487.
from the organization 19	i to those i	isteu	abo	ve) v	WIIO	recei	veu	more man \$100,00	o or reportable com	Jensano	1	
3 Did the organization list any former officer, direct on line 1a? If 'Yes,' complete Schedule J for such	ctor, or tru	stee,	, key	/ em	nplo	yee,	or h	nighest compensat	ed employee	. 3	Yes	No X
4 For any individual listed on line 1a, is the sum o the organization and related organizations greate	f reportab	le co	mpe	ensa	ation	and	oth	er compensation t				
such individual5 Did any person listed on line 1a receive or accrufor services rendered to the organization? <i>If 'Ye</i>:	e comper	satio	n fr	om	any	unre	late	ed organization or	individual	5	X	V
Section B. Independent Contractors	s, comple	16 30	riec	iuie	J 10	Suc	πρ	erson		. Б		X
Complete this table for your five highest comper compensation from the organization. Report comper	sated indessation for	epen the c	den alen	t coi dar j	ntra year	ctors endi	tha	it received more the vith or within the or	nan \$100,000 of ganization's tax yea	r.		
(A) Name and business address (B) Description of services C							Compe	C) ensatio	on			
Tellepsen Builders 777 Benmar #400 Houston, TX 77060 Construction service							11,6					
Baylor College of Medicine One Baylor Plaz								Research				048.
Studio Hanson/Roberts 250 Madrona Way NE #				Is	lan	d, V	VΑ	Architect				<u>831.</u>
Strike Marketing 906 Rutland Street Housto				0 0	005	<u> </u>		Advertising				052.
	Service Systems Associates Inc. 4699 Marion St Denver, CO 80216 Food service 1,961,012							UIZ.				
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ▶ 23												

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

Name of the Organization

Houston Zoo, Inc.

Employler Identification number
74-1590271

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

Highest Compensated Employees											
(A)	(B)		(C)				(D)	(E)	(F)		
Name and Title	Average hours per week (list any hours for	Individual trustee or director			Key employee	hat app Highest c	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	
	related organiza- tions below dotted line)	l trustee or	Institutional trustee		loyee	Highest compensated employee				organizations	
Peggy_KostialBoard Member	<u> 1</u> 0	X						0.	0.	0.	
Kimberly McKay (as of 7/18 Board Member	10	Х						0.	0.	0.	
Clay Neff (as of 7/18) Board Member	10	Х						0.	0.	0.	
Bruce Niemeyer (thru 6/18) Board Member	10	Х						0.	0.	0.	
Sara Ortwein (thru 6/18) Board Member	10	X						0.	0.	0.	
Tim Roberts Board Member	10	X						0.	0.	0.	
Brent Smolik	1									_	
Board Member Bas Solleveld	0 1	Х						0.	0.	0.	
Board Member Macey Stokes	0	Х						0.	0.	0.	
Board Member Steve Trauber (thru 6/18)	0	Х						0.	0.	0.	
Board Member Molly Voorhees	0	Х						0.	0.	0.	
Board Member	0	Х						0.	0.	0.	
Cynthia Walker (as of 7/18 Board Member	10	Х						0.	0.	0.	
Randa Duncan Williams Member Emeritus	<u>1</u>	Х						0.	0.	0.	
Austin Young Member Emeritus	<u>1_</u>	Х						0.	0.	0.	
Lee Ehmke CEO	<u> 40</u> _	Ē		Χ				424,085.	0.	8,196.	
Leslie Forestier VP Finance	<u>40</u>			Χ				170,693.	0.	15,935.	
John Trahan CFO				Х				84,787.	0.	3,672.	
Sheryl Kolasinski COO	<u> 40</u> _			Х				235,160.	0.	13,257.	
Roberto Espinosa VP Development		-				Х		160,074.	0.	14,126.	
Peter Riger VP Conservation	<u>40</u> 0					Х		136,462.	0.	11,072.	
Kristin Finney	40					X			0.		
VP HR	0					Λ		139,807.	0.	14,350.	

Form **990** Cont 2018

Form 990

Continuation Sheet for Form 990

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

lame of the Organization

Employler Identification number

74-1590271

Houston Zoo, Inc Part VII Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (C) (D) (F) (E) Position (check all that apply) Reportable compensation from related organizations (W-2/1099-MISC) Reportable compensation from Estimated amount of other Name and Title Average Individual to or director Average hours per week (list any hours for related organiza-tions Officer Highest compensated Institutional trustee employee Former compensation from the organization and related the organization (W-2/1099-MISC) y employee organizations l trustee below dotted line) Mark Van Wickler 40 Dir Exhibit Design 0 Χ 200,400. 0 11,858. <u>Lisa Avendano</u> 40 VP Animal Ops 0 Χ 135,176. 0. 11,021.

Form **990** Cont 2018

		Check if Schedule O contains a resp	onse or note to any	y line in this Part V	TIL		
				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	b c d e f	Federated campaigns 1a Membership dues 1b Fundraising events 1c Related organizations 1d Government grants (contributions) 1e All other contributions, gifts, grants, and similar amounts not included above 1f Noncash contributions included in lines 1a-1f: \$ Total. Add lines 1a-1f	7,221,576. 1,453,932. 5,000. 57,123,012. 3,792,253.	CE 002 E20			
		Total: Add lines 1a-11	Business Code	65,803,520.			
ᇤ	2 a	Admission fees	900099	13,659,788.	13,659,788.		
ě			561499	9,973,836.			
e l			611600	9,502,713.			
ervi	d		722210	3,539,267.	3,539,267.		
٦Š	e	Concessions	122210	3,337,207.	3,333,207.		
grar	f	All other program service revenue					
Program Service Revenue		Total. Add lines 2a-2f		36,675,604.			
	3	Investment income (including dividends other similar amounts)	s, interest and	538,598.			538,598.
	5	Royalties					
	•	(i) Real	(ii) Personal				
	6 a	Gross rents					
	b	Less: rental expenses					
	С	Rental income or (loss)					
	d	Net rental income or (loss)	······ ►				
		Gross amount from sales of (i) Securities	(ii) Other				
	, u	assets other than inventory 14966892					
		Less: cost or other basis and sales expenses					
		Gain or (loss) 299,744		000 744			000 744
		Net gain or (loss)		299,744.			299,744.
Other Revenue	8 a	Gross income from fundraising events (not including \$\frac{1,453,932.}{\text{of contributions reported on line 1c).}}\$	a 500,141.				
Jer	b	Less: direct expenses	589,221.				
ᅙ	С	Net income or (loss) from fundraising e	events	-89,080.			-89,080.
		Gross income from gaming activities. See Part IV, line 19					
		Less: direct expenses					
	С	Net income or (loss) from gaming active	rities▶				
		Gross sales of inventory, less returns and allowances					
		Less: cost of goods sold					
	С	Net income or (loss) from sales of inve	Business Code				
	11 a		Dubiliess Code				
	ııa b						
	Ч	All other revenue					
		Total. Add lines 11a-11d					
		Total revenue. See instructions		103228386	36 675 604	0.	749.262

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

	Check if Schedule O contains a response or note to any line in this Part IX.										
Do i 6b,	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 domestic organizations and domestic governments. See Part IV, line 21	1,314,624.	1,314,624.								
2	Grants and other assistance to domestic individuals. See Part IV, line 22	31,343.	31,343.								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	1,604,530.	1,604,530.								
4 5	Benefits paid to or for members	962,260.	402,049.	403,825.	156,386.						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.	0.	0.	0.						
7		20,470,715.	17,607,944.	1,024,026.	1,838,745.						
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	652,282.	556,239.	34,618.	61,425.						
9	Other employee benefits	2,373,667.	2,011,016.	141,592.	221,059.						
10	Payroll taxes	1,593,159.	1,340,322.	104,482.	148,355.						
11	Fees for services (non-employees):	,,,	, , ,	-,	,						
a	Management										
Ł	Legal	34,051.		34,051.							
C	: Accounting	61,136.		61,136.							
c	Lobbying										
e	Professional fundraising services. See Part IV, line 17	85,282.			85,282.						
f	Investment management fees	97,287.		97,287.							
g	Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule 0.)	3,213,948.	2,454,460.	463,997.	295,491.						
12	Advertising and promotion.	1,471,588.	1,445,143.	17,459.	8,986.						
13	Office expenses	838,717.	546,495.	65,370.	226,852.						
14	Information technology	458,241.	111,396.	271,952.	74,893.						
15	Royalties	,	,	,							
16	Occupancy	894,684.	855,612.	28,416.	10,656.						
17	Travel	390,965.	333,625.	24,543.	32,797.						
18	Payments of travel or entertainment expenses for any federal, state, or local public officials										
19	Conferences, conventions, and meetings	405,453.	287,501.	1,378.	116,574.						
20	Interest										
21	Payments to affiliates										
22	Depreciation, depletion, and amortization	8,429,292.	8,429,292.								
23 24	Insurance	637,165.	577,268.	25,802.	34,095.						
=	Supplies	2,259,589.	2,213,470.	17,519.	28,600.						
	Printing & publications	697,404.	2,213,470.	6,539.	412,713.						
	Equipment expense	473,177.	442,002.	28,540.	2,635.						
	Grounds/Events	407,626.	406,433.	20,040.	1,193.						
	All other expenses	10,,020.	100, 400.								
	Total functional expenses. Add lines 1 through 24e	49,858,185.	43,248,916.	2,852,532.	3,756,737.						
26 BAA	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ► ☐ if following SOP 98-2 (ASC 958-720)				Form 990 (2018)						
нΔΔ		TEE A 0.1.1 0.1 0.2	100110		Lorm uun (2010)						

		Check if Schedule O contains a response or note to	any li	ne in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash – non-interest-bearing			13,026,409.	1	12,852,677.
	2	Savings and temporary cash investments			10,998,785.	2	20,093,319.
	3	Pledges and grants receivable, net			18,225,681.	3	54,592,432.
	4	Accounts receivable, net			3,033,973.	4	627,463.
	5	Loans and other receivables from current and former trustees, key employees, and highest compensated er Part II of Schedule L	mplove	es. Complete		5	
	6	Loans and other receivables from other disqualified posection 4958(f)(1)), persons described in section 4958(c)(3) employers and sponsoring organizations of section 501(c) beneficiary organizations (see instructions). Complete	ersons	(as defined under		6	
Ø	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use		_	157,331.	8	90,526.
As	9	Prepaid expenses and deferred charges			759,273.	9	994,815.
9	-	Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	İ		135,213.		JJ4,013.
		Less: accumulated depreciation.		175,386,763. 57,744,586.	107 102 750	10 c	117 (40 177
	11	Investments – publicly traded securities			107,103,758. 20,132,006.	11	117,642,177. 19,452,380.
	12	Investments – other securities. See Part IV, line 11		L	20,132,006.	12	19,452,380.
	13	Investments – program-related. See Part IV, line 11.		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equal line			172 /27 216	16	226 245 700
_	17	Accounts payable and accrued expenses	34)		173,437,216. 4,299,627.	17	226,345,789. 5,572,772.
	18	Grants payable	4,233,021.	18	5,512,112.		
	19	Deferred revenue	648,554.	19	3,751,880.		
	20	Tax-exempt bond liabilities	010,0011	20	0,102,0001		
S	21	Escrow or custodial account liability. Complete Part I		<u> </u>	166,125.	21	70,483.
Liabilities	22	Loans and other payables to current and former office key employees, highest compensated employees, and Complete Part II of Schedule L	disau.	alified persons.	,	22	.,
	23	Secured mortgages and notes payable to unrelated th	ird par	ties		23	
	24	Unsecured notes and loans payable to unrelated third	parties	S		24	
	25	Other liabilities (including federal income tax, payable and other liabilities not included on lines 17-24). Com				25	
	26	Total liabilities. Add lines 17 through 25			5,114,306.	26	9,395,135.
ces		Organizations that follow SFAS 117 (ASC 958), check he lines 27 through 29, and lines 33 and 34.					
an	27	Unrestricted net assets		<u>L</u>	135,088,735.	27	144,066,349.
Bal	28	Temporarily restricted net assets		-	29,708,076.	28	69,358,178.
פַ	29	Permanently restricted net assets			3,526,099.	29	3,526,127.
Net Assets or Fund Balances		Organizations that do not follow SFAS 117 (ASC 958), ch and complete lines 30 through 34.	eck he	re ►			
9	30	Capital stock or trust principal, or current funds				30	
8	31	Paid-in or capital surplus, or land, building, or equipm	ent fur	nd		31	
As	32	Retained earnings, endowment, accumulated income,	or oth	er funds		32	
let	33	Total net assets or fund balances			168,322,910.	33	216,950,654.
_	34	Total liabilities and net assets/fund balances		· · · · · · · · · · · · · · · · · · ·	173,437,216.	34	226,345,789.

Pa	rt XI Reconciliation of Net Assets						
	Check if Schedule O contains a response or note to any line in this Part XI.				. X		
1	Total revenue (must equal Part VIII, column (A), line 12)	1	103,	228,3	386.		
2	Total expenses (must equal Part IX, column (A), line 25)	2	49,	358,1	L85.		
3	Revenue less expenses. Subtract line 2 from line 1	3	53,	370,2	201.		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	168,	322,9	910.		
5	Net unrealized gains (losses) on investments.	5	-1,	411,9	922.		
6	Donated services and use of facilities	6					
7	Investment expenses	7					
8	Prior period adjustments	8					
9	Other changes in net assets or fund balances (explain in Schedule O). See Schedule O	9	-3,	330,5	535.		
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	216,	950 <i>e</i>	554		
Pa	rt XII Financial Statements and Reporting		210)	,,,,,			
	Check if Schedule O contains a response or note to any line in this Part XII						
	Check if Schedule O contains a response of note to any line in this Fart XII			Yes	No		
1	Accounting method used to prepare the Form 990: Cash X Accrual Other			Tes	NO		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O.						
2 :	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a	1	Х		
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewe separate basis, consolidated basis, or both: Separate basis Consolidated basis Both consolidated and separate basis	ed on a					
	b Were the organization's financial statements audited by an independent accountant?		2 l	X			
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separa basis, consolidated basis, or both:	te					
	X Separate basis Consolidated basis Both consolidated and separate basis						
(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?		20	: X			
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.						
3	a 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	1	Х		
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the required aud or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3l				
BAA	TEEA0112L 08/03/18		Fori	n 990	(2018)		

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.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization Employer identification number Houston Zoo, Inc. 74-1590271 Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions. The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 4 A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state: 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in section 170(b)(1)(A)(iv). (Complete Part II.) 6 A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or An organization that normally receives: (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after 10 June 30, 1975. See section 509(a)(2). (Complete Part III.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in 12 lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g Type I. A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. You must complete Part IV, Sections A and B. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). You must complete Part IV, Sections A and C. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). You must complete Part IV, Sections A, D, and E. **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.** Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations **q** Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (described on lines 1-10 above (see instructions)) (v) Amount of monetary (iv) Is the organization listed (vi) Amount of other support (see instructions) support (see instructions) in your governing document? No (A) (B) (C) (D) (E) Total

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

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

Sec	Section A. Public Support									
begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total			
1	Gifts, grants, contributions, and membership fees received. (Do not include any 'unusual grants.').	17969911.	14246988.	16879194.	33435509.	65803520.	148335122.			
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.			
3	The value of services or facilities furnished by a governmental unit to the organization without charge						0.			
4	Total. Add lines 1 through 3	17969911.	14246988.	16879194.	33435509.	65803520.	148335122.			
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)						52,454,810.			
6	Public support. Subtract line 5 from line 4						95,880,312.			
Sec	tion B. Total Support	•					, ,			
Cale begi	ndar year (or fiscal year nning in) ►	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(f) Total				
7	Amounts from line 4	17969911.	14246988.	16879194.	33435509.	65803520.	148335122.			
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	616,733.	666,304.	603,974.	536,064.	538,598.	2,961,673.			
9	Net income from unrelated business activities, whether or not the business is regularly carried on	,	,	,	,	,	0.			
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.).						0.			
	Total support. Add lines 7 through 10						151296795.			
12	Gross receipts from related activ	rities, etc. (see ins	tructions)			12	179709065.			
13	First five years. If the Form 990 is organization, check this box and	for the organization stop here	's first, second, thi	ird, fourth, or fifth t	tax year as a sectio	n 501(c)(3)	▶ □			
	tion C. Computation of Pul	blic Support P	ercentage							
	Public support percentage for 20						63.37 %			
15	Public support percentage from 2	2017 Schedule A,	Part II, line 14			15	88.07 %			
16a	33-1/3% support test—2018. If the and stop here. The organization	he organization di qualifies as a pub	d not check the b licly supported or	ox on line 13, and ganization	d line 14 is 33-1/3	% or more, checl	this box ∴ ∴ ✓ X ☐ X ☐ X ☐ X ☐			
b	33-1/3% support test—2017. If the and stop here. The organization	e organization did qualifies as a pub	not check a box olicly supported o	on line 13 or 16arganization	a, and line 15 is 33	3-1/3% or more, o	check this box			
17a	10%-facts-and-circumstances te or more, and if the organization the organization meets the 'facts	meets the 'facts-a	nd-circumstances	s' test, check this	box and stop her	e. Explain in Part	t VI how			
	10%-facts-and-circumstances te or more, and if the organization organization meets the 'facts-and	meets the 'facts-a d-circumstances' t	nd-circumstances est. The organiza	s' test, check this ation qualifies as	box and stop her a publicly support	e. Explain in Parted organization.	t VI how the ►			
18	Private foundation. If the organization	zation did not che	ck a box on line 1	13, 16a, 16b, 17a	, or 17b, check thi	s box and see ins	structions ►			

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

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

Calendar 1 Galendar 2 G m por fu rea ta 3 G th or ei ei ei	year (or fiscal year beginning in) > hifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
1 Gan read read read read read read read read	sifts, grants, contributions, and membership fees eceived. (Do not include ny 'unusual grants.')	(a) 2014	(6) 2013	(0) 2010	(a) 2017	(6) 2010	(i) Total		
2 G m po fu re ta 3 G th on ei	aross receipts from admissions, perchandise sold or services erformed, or facilities urnished in any activity that is elated to the organization's ax-exempt purpose								
th or 4 Ta or ei	nat are not an unrelated trade r business under section 513. ax revenues levied for the rganization's benefit and ither paid to or expended on s behalfhe value of services or acilities furnished by a overnmental unit to the								
or ei	rganization's benefit and ither paid to or expended on s behalf								
	acilities furnished by a overnmental unit to the								
fa go									
7a A 2,	otal. Add lines 1 through 5 mounts included on lines 1, , and 3 received from isqualified persons.								
ai di ex 1°	mounts included on lines 2 nd 3 received from other than isqualified persons that xceed the greater of \$5,000 or % of the amount on line 13 or the year.								
c A	dd lines 7a and 7b								
70	tublic support. (Subtract line c from line 6.)								
	on B. Total Support				1 40				
	r year (or fiscal year beginning in)	(a) 2014	(b) 2015	(c) 2016	(d) 2017	(e) 2018	(f) Total		
10a Gr pa re	mounts from line 6 ross income from interest, dividends, ayments received on securities loans, ents, royalties, and income from milar sources								
in ta ad	Inrelated business taxable acome (less section 511 axes) from businesses cquired after June 30, 1975								
11 Ne	dd lines 10a and 10bet income from unrelated business citivities not included in line 10b, hether or not the business is gularly carried on								
ga ca	other income. Do not include ain or loss from the sale of apital assets (Explain in Part VI.)								
10	otal support. (Add lines 9, 0c, 11, and 12.)								
10	irst five years. If the Form 990 rganization, check this box and	stop here		nd, third, fourth, c	or fifth tax year as	a section 501(c)(3)		
	on C. Computation of Pul			no 12!: "	<u> </u>	1 1	0		
	Public support percentage for 20	•			-		<u> </u>		
	ublic support percentage from 2					16	%		
	on D. Computation of Inv				(0)		0		
	nvestment income percentage for	•	• •	-	* * * *		00		
	nvestment income percentage fr					<u> </u>	%		
is	3-1/3% support tests—2018. If to not more than 33-1/3%, check 3-1/3% support tests—2017. If to	this box and stop	here. The organ	ization qualifies	as a publicly supp	orted organization			
lir	33-1/3% support tests—2017. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and stop here. The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions								

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? If 'No,' describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If 'Yes,' explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).	2		
За	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If 'Yes,' answer (b) and (c) below.	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If 'Yes,' describe in Part VI when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If 'Yes,' explain in Part VI what controls the organization put in place to ensure such use.	3c		
4a	Was any supported organization not organized in the United States ('foreign supported organization')? If 'Yes' and if you checked 12a or 12b in Part I, answer (b) and (c) below.	4 a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If 'Yes,' describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If 'Yes,' explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? If 'Yes,' answer (b) and (c) below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).	5a		
b	Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
С	Substitutions only. Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If 'Yes,' provide detail in Part VI.</i>	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If 'Yes,' complete Part I of Schedule L (Form 990 or 990-EZ).	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If 'Yes,' provide detail in Part VI .	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If 'Yes,' provide detail in Part VI .	9b		
С	Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If 'Yes,' provide detail in Part VI .	9с		
0a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations), and all Type III non-functionally integrated supporting organizations)? If 'Yes,' answer 10b below.	10a		
b	Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)	10b		

Pa	rt IV	Supporting Organizations (continued)			
11	∐ac t	the organization accepted a gift or contribution from any of the following persons?		Yes	No
		son who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the			
		rning body of a supported organization?	11a		
	b A fan	nily member of a person described in (a) above?	11b		
		% controlled entity of a person described in (a) or (b) above? If 'Yes' to a, b, or c, provide detail in Part VI.	11c		
Sec	ction I	B. Type I Supporting Organizations			
1	Did th	ne directors, trustees, or membership of one or more supported organizations have the power to regularly appoint		Yes	No
•	or ele	ect at least a majority of the organization's directors or trustees at all times during the tax year? If 'No,' describe in			
	If the	VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. organization had more than one supported organization, describe how the powers to appoint and/or remove			
		tors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, ed to such powers during the tax year.	1		
2	Did th	ne organization operate for the benefit of any supported organization other than the supported organization(s)			
	that c	operated, supervised, or controlled the supporting organization? If 'Yes,' explain in Part VI how providing such fit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the			
		orting organization.	2		
Sec	ction (C. Type II Supporting Organizations			
				Yes	No
1	Were	a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees ch of the organization's supported organization(s)? If 'No,' describe in Part VI how control or management of the			
	supp	orting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Sec	ction I	D. All Type III Supporting Organizations			
				Yes	No
1	Did th	ne organization provide to each of its supported organizations, by the last day of the fifth month of the			
	orgar	nization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
		nization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2 Were any		of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
_	organization (s) or (ii) serving on the governing body of a supported organization? If 'No,' explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		2		
_			_		
3	voice	eason of the relationship described in (2), did the organization's supported organizations have a significant in the organization's investment policies and in directing the use of the organization's income or assets at			
		mes during the tax year? If 'Yes,' describe in Part VI the role the organization's supported organizations played is regard.	3		
Sec		E. Type III Functionally Integrated Supporting Organizations			
		, , , , , , , , , , , , , , , , , , ,			
	_	k the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).			
	〓	The organization satisfied the Activities Test. Complete line 2 below.			
	吕	The organization is the parent of each of its supported organizations. Complete line 3 below.	,	,, ,	
	c ∐	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see in	istruc	tions).	
2	Activi	ities Test. Answer (a) and (b) below.		Yes	No
		ubstantially all of the organization's activities during the tax year directly further the exempt purposes of the			
	suppo orgai	orted organization(s) to which the organization was responsive? If 'Yes,' then in Part VI identify those supported nizations and explain how these activities directly furthered their exempt purposes, how the organization was			
		onsive to those supported organizations, and how the organization determined that these activities constituted tantially all of its activities.	2a		
	the o	ne activities described in (a) constitute activities that, but for the organization's involvement, one or more of rganization's supported organization(s) would have been engaged in? If 'Yes,' explain in Part VI the reasons for			
		rganization's position that its supported organization(s) would have engaged in these activities but for the nization's involvement.	2b		
,					
		nt of Supported Organizations. Answer (a) and (b) below. ne organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of			
	each	of the supported organizations? Provide details in Part VI.	3a		
		ne organization exercise a substantial degree of direction over the policies, programs, and activities of each of its orted organizations? If 'Yes,' describe in Part VI the role played by the organization in this regard.	3b		

SCITE	Edule A (Form 990 of 990-EZ) 2018 HOUSTON ZOO, INC.		74-15	90271 Page
Pai	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	aniza	tions	
1	Check here if the organization satisfied the Integral Part Test as a qualifying true instructions. All other Type III non-functionally integrated supporting organization	st on N ons mu	ov. 20, 1970 (explain ir st complete Sections A	Part VI). See through E.
Sec	tion A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sec	tion B — Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):			
	Average monthly value of securities	1a		
t	Average monthly cash balances	1b		
	Fair market value of other non-exempt-use assets	1c		
	I Total (add lines 1a, 1b, and 1c)	1d		
	e Discount claimed for blockage or other factors (explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 1-1/2% of line 3 (for greater amount, see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by .035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sec	tion C — Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6		

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

Schedule A (Form 990 or 990-EZ) 2018

Part V Type III Non-Fur	ctionally Integrated 5	509(a)(3) Supporting (Organizations (continued)

r a	t V Type in Non-1 directionally integrated 303(a)(3) Supporting Organizations (continued)	/
Sec	tion D – Distributions	Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	
4	Amounts paid to acquire exempt-use assets	
5	Qualified set-aside amounts (prior IRS approval required)	
6	Other distributions (describe in Part VI). See instructions.	
7	Total annual distributions. Add lines 1 through 6.	
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	
9	Distributable amount for 2018 from Section C, line 6	
10	Line 8 amount divided by line 9 amount	

Section E — Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2018	(iii) Distributable Amount for 2018
1 Distributable amount for 2018 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2018 (reasonable cause required — explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2018			
a From 2013			
b From 2014			
c From 2015			
d From 2016			
e From 2017			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2018 distributable amount			
i Carryover from 2013 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2018 from Section D, line 7:			
a Applied to underdistributions of prior years			
b Applied to 2018 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4.			
5 Remaining underdistributions for years prior to 2018, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions.			
6 Remaining underdistributions for 2018. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions.			
7 Excess distributions carryover to 2019. Add lines 3j and 4c.			
8 Breakdown of line 7:			
a Excess from 2014			
b Excess from 2015			
c Excess from 2016			
d Excess from 2017			
e Excess from 2018			

BAA

Schedule A (Form 990 or 990-EZ) 2018

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

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

Department of the Treasury Internal Revenue Service

Name of the organization

PUBLIC DISCLOSURE COPY

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF. ► Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2018

Employer identification number

Houston Zoo, Inc.	74-1590271
Organization type (check one):	
Filers of:	Section:
Form 990 or 990-EZ	X 501(c)(3) (enter number) organization
	4947(a)(1) nonexempt charitable trust not treated as a private foundation
	527 political organization
Form 990-PF	501(c)(3) exempt private foundation
	4947(a)(1) nonexempt charitable trust treated as a private foundation
	501(c)(3) taxable private foundation
Check if your organization is covered by the Gene	ral Rule or a Special Rule.
Note: Only a section 501(c)(7), (8), or (10) or	rganization can check boxes for both the General Rule and a Special Rule. See instructions.
General Rule	
For an organization filing Form 990, 990-property) from any one contributor. Comp	EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or blete Parts I and II. See instructions for determining a contributor's total contributions.
Special Rules	
under sections 509(a)(1) and 170(b)(1)(A)(vi	501(c)(3) filing Form 990 or 990-EZ that met the 33-1/3% support test of the regulations), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) 990-EZ, line 1. Complete Parts I and II.
For an organization described in section suring the year, total contributions of mor purposes, or for the prevention of cruelty contributor name and address), II, and III	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, re than \$1,000 exclusively for religious, charitable, scientific, literary, or educational to children or animals. Complete Parts I (entering 'N/A' in column (b) instead of the .
during the year, contributions exclusively \$1,000. If this box is checked, enter here charitable, etc., purpose. Don't complete	501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, for religious, charitable, etc., purposes, but no such contributions totaled more than the total contributions that were received during the year for an <i>exclusively</i> religious, any of the parts unless the General Rule applies to this organization because table, etc., contributions totaling \$5,000 or more during the year
990-PF), but it must answer 'No' on Part IV,	y the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF,
Part I, line 2, to certify that it doesn't meet th	e filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

1

Name of organization

Employer identification number

Houston	Zoo,	Inc.

74-1590271

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional s	pace is needed.	
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$2 <u>,418,553</u> .	Person X Payroll
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2		\$ <u>50,400,000</u> .	Person X Payroll Noncash X (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)

Schedule B (Form 990, 990-EZ, or 990-PF) (2018)

Employer identification number

Houston Zoo, Inc.

Name of organization

BAA

74-1590271

Noncash Property (see instructions). Use duplicate copies of Part II if additional space is needed. (b)
Description of noncash property given (a) No. from Part I (c) FMV (or estimate) (See instructions.) (d) Date received Stock 1 2,206,200. 5/29/18 (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I Stock 2 940,610. 10/11/18 (a) No. from Part I (b) Description of noncash property given (c) FMV (or estimate) (See instructions.) (d) Date received (a) No. from Part I (b) Description of noncash property given (d) Date received (c) FMV (or estimate) (See instructions.) (a) No. from (d) Date received (b) Description of noncash property given (c) FMV (or estimate) Part I (See instructions.) (a) No. (b) Description of noncash property given (c) FMV (or estimate) (d) Date received from (See instructions.) Part I

Page 4

Name of organization Employer identification number Houston Zoo, 74-1590271 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.)..... Use duplicate copies of Part III if additional space is needed. (b) Purpose of gift (d) Description of how gift is held (c) Use of gift (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (b) Purpose of gift (a) No. from (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (d) Description of how gift is held (b) Purpose of gift (a) No. from (c) Use of gift Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (a) No. from Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Name of the organization

Department of the Treasury Internal Revenue Service

Open to Public Inspection
Employer identification number

	Houston Zoo, Inc.	74-1590271
Pai	Organizations Maintaining Donor Advised Funds or Other Similar Funds Complete if the organization answered 'Yes' on Form 990, Part IV, line 6.	
	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate value of contributions to (during year)	
3	Aggregate value of grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor are the organization's property, subject to the organization's exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds of for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purimpermissible private benefit?	rpose conferring Yes No
Pai	Complete if the organization answered 'Yes' on Form 990, Part IV, line 7.	
1		
		historically important land area
		certified historic structure
_	Preservation of open space	
2	Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of last day of the tax year.	Held at the End of the Tax Year
	a Total number of conservation easements.	2a
	b Total acreage restricted by conservation easements.	2b
	c Number of conservation easements on a certified historic structure included in (a)	2 c
	d Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic	
•	structure listed in the National Register	2 d
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the catax year ►	organization during the
4	Number of states where property subject to conservation easement is located ▶	
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling	
_	and enforcement of the conservation easements it holds?	
6	Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conser	rvation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation ▶ \$	on easements during the year
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section and section 170(h)(4)(B)(ii)?	Yes No
9	In Part XIII, describe how the organization reports conservation easements in its revenue and expense sinclude, if applicable, the text of the footnote to the organization's financial statements that described conservation easements.	statement, and balance sheet, and ribes the organization's accounting for
Pai	Organizations Maintaining Collections of Art, Historical Treasures, or Ot Complete if the organization answered 'Yes' on Form 990, Part IV, line 8.	her Similar Assets.
1 :	a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue art, historical treasures, or other similar assets held for public exhibition, education, or research in further in Part XIII, the text of the footnote to its financial statements that describes these items See F	erance of public service, provide.
I	b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue sta historical treasures, or other similar assets held for public exhibition, education, or research in furtheran following amounts relating to these items:	ce of public service, provide the
	(i) Revenue included on Form 990, Part VIII, line 1.	
	(ii) Assets included in Form 990, Part X	▶\$
	amounts required to be reported under SFAS 116 (ASC 958) relating to these items:	
	a Revenue included on Form 990, Part VIII, line 1	
	b Assets included in Form 990, Part X	

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Part III Organizations Mainta	ining Collections	of Art, Histori	cal Treasures, or	Other	Similar Ass	ets (c	ontinu	ied)	
3 Using the organization's acquisition items (check all that apply):									
a X Public exhibition		d X Loan or	exchange programs						
b X Scholarly research		e Other							
c X Preservation for future generations									
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. See Part XIII									
	5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?								
Part IV Escrow and Custodia line 9, or reported an				werec	l 'Yes' on Foi	m 99	0, Par	t IV,	
1 a Is the organization an agent, trus on Form 990, Part X?	stee, custodian or oth	er intermediary for	contributions or other	assets	s not included	Yes	F	X No	
b If 'Yes,' explain the arrangement							Ŀ	<u>v</u> 140	
2 ee, explain the arrangement	and com	prote the following			1	Amoun	t		
c Beginning balance				10					
d Additions during the year				10	1				
e Distributions during the year					9				
f Ending balance				. 1 f	•			0.	
2 a Did the organization include an a	mount on Form 990,	Part X, line 21, fo	r escrow or custodial a	ccount	l liability?	X Yes		No	
b If 'Yes,' explain the arrangement	in Part XIII. Check h	ere if the explanat	ion has been provided	on Pa	rt XIII	.		K	
		e Part XIII							
Part V Endowment Funds. C		'							
	(a) Current year	(b) Prior year	(c) Two years back		Three years back		Four year		
1 a Beginning of year balance	12,473,441.	10,825,755			9,343,383.	8		467.	
b Contributions	33,368.	9,000	1,054,000		22,532.		466,	768.	
c Net investment earnings, gains, and losses	-711,865.	1,710,324	598,621	•	-7,048.		590,	197.	
d Grants or scholarships			31,704		29,687.		32,	485.	
e Other expenditures for facilities and programs	8,200.				0.				
f Administrative expenses	77,322.	71,638	3. 49,130		75,212.			564.	
g End of year balance	11,709,422.	12,473,441			9,253,968.	9	,343,	383.	
2 Provide the estimated percentage	-	•	1g, column (a)) held a	s:					
a Board designated or quasi-endowm		9.85 [%]							
b Permanent endowment ►	30.11 %	•							
c Temporarily restricted endowmer									
The percentages on lines 2a, 2b, an	nd 2c should equal 100)%.							
3 a Are there endowment funds not in t	he possession of the o	rganization that are	held and administered	or the		ſ			
organization by:							Yes	No	
(i) unrelated organizations						3a(i)		X	
(ii) related organizations						3a(ii)		X	
b If 'Yes' on line 3a(ii), are the rela	-	•				3b		<u> </u>	
4 Describe in Part XIII the intended		ation's endowment	funds. See Part	XII	<u>T</u>				
Part VI Land, Buildings, and		IVaalaa Fawa	000 David IV/ Iima	11_ (Caa Farra 00/	٠ D	T // 1::	10	
Complete if the organi									
Description of property	(a) Cost (in	t or other basis vestment)	(b) Cost or other basis (other)	(c) A de _l	ccumulated preciation	(d)	Book va	alue	
1 a Land									
b Buildings									
c Leasehold improvements			150,207,958.	51	,232,269.	98	, 975	,689.	
d Equipment	d Equipment								
e Other			11,381,040.					,040.	
Total. Add lines 1a through 1e. (Column	nn (d) must equal For	m 990, Part X, col	umn (B), line 10c.)			117	,642	,177.	

Schedule D (Form 990) 2018

	Complete if the organization answered	l 'Yes' on Form 990	N/A), Part IV, line 11b. See Form 990, Part X, lin	e 12
	ption of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value	
(1) Financia	al derivatives			
(2) Closely-	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G) (I)				
(H) 				
(l) Tatal (Caluma	(h) must small form 000 Part V salum (P) line 12			
	n (b) must equal Form 990, Part X, column (B) line 12.) Investments — Program Related.		N/A	
Part VIII	Complete if the organization answered	l 'Yes' on Form 990	D, Part IV, line 11c. See Form 990, Part X, lin	e 13
	(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market valuation	
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
(9)				
(10)	n (b) must equal Form 990, Part X, column (B) line 13.) •			
	Other Assets.	N/A		
i di circ	Complete if the organization answered	l 'Yes' on Form 990	D, Part IV, line 11d. See Form 990, Part X, lin	
(1)	(a) De	scription	(b) Book valu	
(1)		•	(b) Book valu	е
			(b) Book value	e
(2)			(b) Book value	ie
(2) (3)			(b) Book value	
(2)			(b) Book value	
(2) (3) (4)			(b) Book value	
(2) (3) (4) (5) (6) (7)			(b) Book value	le
(2) (3) (4) (5) (6) (7) (8)			(b) Book value	
(2) (3) (4) (5) (6) (7) (8) (9)			(b) Book value	
(2) (3) (4) (5) (6) (7) (8) (9) (10)	umn (h) must aqual Form 990. Part X. column (
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	umn (b) must equal Form 990, Part X, column (
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	umn (b) must equal Form 990, Part X, column (Other Liabilities. Complete if the organization answered 'Yes' on F	B) line 15.)		
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	Other Liabilities.	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold	Other Liabilities. Complete if the organization answered 'Yes' on F	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2) (3)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2) (3) (4)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colo Part X (1) Federa (2) (3) (4) (5) (6)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2) (3) (4) (5)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Color Part X (1) Federa (2) (3) (4) (5) (6) (7) (8) (9)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Colo Part X (1) Federa (2) (3) (4) (5) (6) (7) (8) (9) (10)	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Cold Part X (1) Federa (2) (3) (4) (5) (6) (7) (8) (9) (10) (11)	Other Liabilities. Complete if the organization answered 'Yes' on f (a) Description of liability al income taxes	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Color (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Color (1) Federal (2) (2) (3) (4) (5) (6) (7) (7) (8) (9) (10) (11) Total. (Column	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability al income taxes n (b) must equal Form 990, Part X, column (B) line 25.)	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	e
(2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Color (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) Total. (Column 2. Liability for	Other Liabilities. Complete if the organization answered 'Yes' on F (a) Description of liability al income taxes n (b) must equal Form 990, Part X, column (B) line 25.) uncertain tax positions. In Part XIII, provide the text of the fo	B) line 15.)	1e or 11f. See Form 990, Part X, line 25.	

Part XI Reconciliation of Revenue per Audited Financial Statements With Rever).
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12	2a.	
1 Total revenue, gains, and other support per audited financial statements	1	101,719,177.
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a Net unrealized gains (losses) on investments	411,922.	
b Donated services and use of facilities		
c Recoveries of prior year grants		
d Other (Describe in Part XIII.) 2d		
e Add lines 2a through 2d	2e	-1,411,922.
3 Subtract line 2e from line 1	3	103,131,099.
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a Investment expenses not included on Form 990, Part VIII, line 7b	97,287.	
b Other (Describe in Part XIII.) 4b		
c Add lines 4a and 4b	4 c	97,287.
F T A A	_	102 220 206
5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)	5	103,228,386.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses		·
	enses per Retu	·
Part XII Reconciliation of Expenses per Audited Financial Statements With Expe	enses per Retu 2a.	·
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12	enses per Retu 2a.	irn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements	enses per Retu 2a.	irn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25:	enses per Retu 2a.	irn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	enses per Retu 2a.	irn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments 2 b	enses per Retu 2a.	irn.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses.	enses per Retu 2a.	49,760,898.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	enses per Retu 2a	49,760,898.
Part XII Reconciliation of Expenses per Audited Financial Statements With Experimental Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	enses per Retu 2a	49,760,898.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	enses per Retu 2a	49,760,898.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities	2a. 1 2e 3 97,287.	49,760,898. 49,760,898.
Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses Complete if the organization answered 'Yes' on Form 990, Part IV, line 12 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25: a Donated services and use of facilities b Prior year adjustments c Other losses. d Other (Describe in Part XIII.) e Add lines 2a through 2d. 3 Subtract line 2e from line 1. 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: a Investment expenses not included on Form 990, Part VIII, line 7b. 4 a	2a. 1 2enses per Retu 2a. 2enses per Retu 2a. 3 3 97,287. 4c	49,760,898. 49,760,898.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V,

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

Part III, Line 1a - F/S Footnote For Art, Treasures, Etc.

In accordance with industry practice, the Houston Zoo does not capitalize animal and horticultural collections; acquisitions are reported as expenditures in the period of acquisition. The Houston Zoo is responsible for the health and welfare of its animal and horticultural collections. The Houston Zoo maintains records of its collections and any exchanges with other organizations. Under the direction of the Board of Directors, the President, and the curatorial staff, collections continue to be cared

for, used, and expanded. In 2018 and 2017, the Houston Zoo expended approximately

BAA

Schedule D (Form 990)

Schedule D (Form 990) 2018

Part III, Line 1a - F/S Footnote For Art, Treasures, Etc. (continued)

\$32,000 and \$25,000, respectively, to expand its collections.

In an ongoing commitment to enhance worldwide reproduction and conservation of animals, the Houston Zoo exchanges animals with other organizations. Consistent with industry practice, the Houston Zoo does not record any liability for such exchange arrangements as generally these arrangements are without monetary consideration.

Part III, Line 4 - Description Of Organization Collections & How Furthers Exempt Purpose

The Houston Zoo is a conservation, education, and recreation organization dedicated to the reproduction, protection, and exhibition of animals in their habitats. The Houston Zoo provides a fun, unique and inspirational experience fostering appreciation, knowledge and care for the natural world.

Part IV, Line 2b - Explanation Of Escrow Account Liability

At 12/31/18, the Zoo held funds on behalf of the International Union for the Conservation of Nature (IUCN) Tapir Specialist Group (TSG), which studies tapirs and their habitat in order to gain a better understanding of their biology and promote their long-term survival in the wild. TSG has no mechanism for managing incoming or outgoing funds in the United States. Donors who wish to support TSG make donations to the Houston Zoo on behalf of TSG which the Zoo holds until the TSG Chair requests funding for travel, fieldwork, or individual grants for work performed in Tapir range countries in Central/South America and Malaysia.

Part V, Line 4 - Intended Uses Of Endowment Fund

To provide ongoing support for operating needs and program services that are consistent with the Houston Zoo's mission, and to provide growth and expansion of programs and/or creation of new programs.

SCHEDULE F (Form 990)

Department of the Treasury Internal Revenue Service

Statement of Activities Outside the United States

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

► Go to www.irs.gov/Form990 for instructions and the latest information.

General Information on Activities Outside the United States. Complete if the organization answered 'Yes'

2018 Open to Public

OMB No. 1545-0047

Inspection

Name of the organization

Houston Zoo, Inc.

on Form 990, Part IV, line 14b.

Employer identification number

74-1590271

1 For grantmakers. Does the the grantees' eligibility for	For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? X Yes No							
	For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States. Part V							
3 Activities per Region. (The	following Part I, I	ine 3 table can b	e duplicated if additional space	e is needed.)				
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in the region	(f) Total expenditures for and investments in the region			
(1) East Asia/Pacific			Program	Conservation	193,275.			
(2) Sub-Saharan Africa			Program	Conservation	1,106,237.			
(3) America/Caribbean			Program	Conservation	32,828.			
(4) South America			Program	Conservation	272,190.			
(5)								
(6)								
(7)								
(8)								
(9)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)								
(17)								
3a Subtotal					1,604,530.			
b Total from continuation sheets to Part I								
c Totals (add lines 3a and 3b)	0	0			1,604,530.			

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal,
				Part V					other)
			Central						
			America	See Part V	5,300.	Wire			
			E						
			Asia/Pacific	See Part V	10,150.	Wire			
			E Asia/Pacific	See Part V	14,500.	Wire			
			F.	See Tart v	14,500.	MILE			
			Asia/Pacific	See Part V	15,225.	Wire			
			Е		·				
			Asia/Pacific	See Part V	20,000.	Wire			
			E						
			Asia/Pacific	See Part V	20,400.	Wire			
			E Asia/Pacific	See Part V	21,000.	Wiro			
			F F	See Pait V	21,000.	wile			
			Asia/Pacific	See Part V	30,000.	Wire			
			Е						
			Asia/Pacific	See Part V	30,000.	Wire			
			South America	See Part V	115,000.	Wire			
			South America	See Part V	117,325.	Wire			
			South America	See Part V	33,740.	Wire			
			Sub-Sah Africa	See Part V	152,500.	Wiro			
			Sub-Sah	See Part V	132,300.	wile			
			Africa	See Part V	238,520.	Wire			
			Sub-Sah		, ,	-			
			Africa	See Part V	25,000.	Wire			
			Sub-Sah						
			Africa	See Part V	37,244.	Wire			

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	>	2
3	Enter total number of other organizations or entities	▶_	

BAA Schedule F (Form 990) 2018

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1) Conservation support	Central America	18	27,528.	Wire transfer			
(2) Conservation support	East Asia/Pacific	3	32,000.	Wire transfer			
(3) Conservation support	South America	2	6,125.	Wire transfer			
(4) Conservation support	Sub-Sah Africa	3	40,103.	Wire transfer			
(5)							
(6)							
(7)							
(8)							
(9)							
<u>(10)</u>							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							
BAA						Schedule F	(Form 990) 2018

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

BAA TEEA3505L 11/02/18 Schedule F (Form 990) 2018

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part I, Line 2 - Grantmakers Explanation For Monitoring Use of Funds Outside US

The Houston Zoo's selection standards for awarding grants are based on our mission statement goals and long term development of regional programs. We do not solicit proposals nor do we have a formal process for receiving and evaluating grant requests. Instead we actively seek out projects that fit the guidelines of the Zoo's Wildlife Conservation Program (see Part III, Line 4b). We then meet with the researchers to see how well they fit with our Zoo. We do not spend much money up front until we are satisfied that the researchers will communicate and interact with the Zoo (web, media, reports, speaker requests, articles, etc.), and their research program is sustainable over the next 1-3 years that we intend to partner with them. We monitor their progress through periodic site visits where practicable and request that they provide periodic reports of activities.

Part II, Line 1 - Additional Supplemental Information

Part II, Column (d) PURPOSE OF GRANT

- Line (1) Central America Support Wildtracks Belize program.
- Line (2) East Asia and Pacific region Support pangolin conservation.
- Line (3) East Asia and Pacific region Support small carnivore field program.
- Line (4) East Asia and Pacific region Support Hutan hornbill program.
- Line (5) East Asia and Pacific region Support pangolin conservation.
- Line (6) East Asia and Pacific region Support Hutan Kinabatangan orangutan conservation and wildlife wardens.
- Line (7) East Asia and Pacific region Support elephant conservation.
- Line (8) East Asia and Pacific region Support Hutan hornbill and orangutan conservation.
- Line (9) East Asia and Pacific region Support elephant conservation.
- Line (10) South America Support giant armadillo & anteater conservation.

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

Part II, Line 1 - Additional Supplemental Information (continued)

- Line (11) South America Support lowland tapir conservation.
- Line (12) South America Support Galapagos tortoise movement ecology project.
- Line (13) Sub-Saharan Africa Support RWCA crowned crane project.
- Line (14) Sub-Saharan Africa Support GERP Manombo and Maromizaha community reserves.
- Line (15) Sub-Saharan Africa Support gorilla conservation.
- Line (16) Sub-Saharan Africa Support lion conservation.
- Line (17) Sub-Saharan Africa Support Niassa lion project.
- Line (18) Sub-Saharan Africa Support mountain gorilla conservation.
- Line (19) Sub-Saharan Africa Support Garissa giraffe conservation.
- Line (20) Sub-Saharan Africa Support rhinoceros conservation.
- Line (21) Sub-Saharan Africa Support mouse lemur conservation.
- Line (22) Sub-Saharan Africa Support hirola conservation.

BAA TEEA3504L 11/02/18 Schedule F (Form 990) 2018

	Continuation of Grants			ions or Entiti	ies Outside the Un	ited States	(Schedule F (Form	990) Part II	line 1)
1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	
			Sub-Sah Africa	See Part V	386,225.	Wire			
			Sub-Sah Africa	See Part V	40,000.	Wire			
			Sub-Sah Africa	See Part V	45,000.	Wire			
			Sub-Sah Africa	See Part V	50,000.	Wire			
			Sub-Sah Africa	See Part V	6,645.	Wire			
			Sub-Sah Africa	See Part V	85,000.	Wire			

SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

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

► Attach to Form 990 or Form 990-EZ.

► Go to www.irs.gov/Form990 for instructions and the latest information.

2010

Open to Public Inspection

Name of the organization
Houston Zoo, Inc.

Part I Fundraising Activities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 17.

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

a X Mail solicitations			е	X Solicitation of non-	government grants	
b X Internet and email solicitations	5			X Solicitation of gove	-	
c X Phone solicitations			g	X Special fundraising	events	
d X In-person solicitations						
2a Did the organization have a written of employees listed in Form 990, Par	r oral agreemen rt VII) or entity	t with any i in connect	individual (i tion with p	ncluding officers, directo rofessional fundraising	rs, trustees, or key services?	X Yes No
b If 'Yes,' list the 10 highest paid incompensated at least \$5,000 by the	dividuals or ent	ities (fund	•	-		
(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did	fundraiser dy or control ributions?	(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in column (i)	(vi) Amount paid to (or retained by) organization
Sterling Associates		Yes	No			
1 55 Waugh Dr. #601	Centennial					
Houston TX 77007	campaign		X	58,974,042.	85,282.	58,888,760.
2						
3						
4						
5						
6						
7						
8						
9						
10						
Total			>	58,974,042.	85,282.	58,888,760.
List all states in which the organizati or licensing. TX				ontributions or has been	notified it is exempt from	registration

Schedule G (Form 990 or 990-EZ) 2018 Houston Zoo, Inc. 74-1590271 Fundraising Events. Complete if the organization answered 'Yes' on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. **(b)** Event #2 (d) Total events (a) Event #1 (c) Other events (add column (a) Zoo Ball Conserv Gala None through column (c) (event type) (event type) (total number) REVENUE **1** Gross receipts..... 1,134,750. 819,323. 1,954,073. 2 Less: Contributions..... 881,750 572,182. 1,453,932. **3** Gross income (line 1 minus line 2)..... 253,000 247,141. 500,141. 6 Rent/facility costs..... 65,463. 38,056. 103,519. 7 Food and beverages 95,706. 95,065 190,771. 15,455. 51,086. 66,541. Other direct expenses..... 107,892. 120,498. 228,390. 10 Direct expense summary. Add lines 4 through 9 in column (d)..... 589,221. Net income summary. Subtract line 10 from line 3, column (d)..... -89,080. Gaming. Complete if the organization answered 'Yes' on Form 990, Part IV, line 19, or reported more than Part III \$15,000 on Form 990-EZ, line 6a. (b) Pull tabs/instant (d) Total gaming REVENUE (a) Bingo bingo/progressive bingo (c) Other gaming (add column (a) through column (c)) Gross revenue..... **2** Cash prizes..... D X P E N C T S Rent/facility costs..... **5** Other direct expenses..... Yes Yes Yes No No No **9** Enter the state(s) in which the organization conducts gaming activities: a Is the organization licensed to conduct gaming activities in each of these states?..... **b** If 'No,' explain:

10 a Were any of the organization's gaming licenses revoked, b If 'Yes,' explain:		the tax year?	No
BAA	TEEA3702L 07/02/18	Schedule G (Form 990 or 990-	EZ) 2018

Sche	edule G (Form 990 or 990-EZ) 2018 Houston Zoo, Inc. 7-	4-1590)271	Page 3
	Does the organization conduct gaming activities with nonmembers?		Yes	No
12	Is the organization a grantor, beneficiary or trustee of a trust, or a member of a partnership or other entity formed to administer charitable gaming?		Yes	No
13	Indicate the percentage of gaming activity conducted in:	1 1		
	The organization's facility.	13 a		%
ŀ	a An outside facility	13 b		%
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records	:		
	Name ►			
	Address •			
ŀ	a Does the organization have a contract with a third party from whom the organization receives gaming revenue of If 'Yes,' enter the amount of gaming revenue received by the organization square \$ and the of gaming revenue retained by the third party square \$ and the organization square \$ and the or	ie? ne amour		No
	Name ►			
	Address ►			
16	Gaming manager information:			
	Name ►			
	Gaming manager compensation ► \$			
	Description of services provided			
	□ Director/officer □ Employee □ Independent contractor			
17	Mandatory distributions:			
â	a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license?		Yes	No
ł	• Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in	the	—ш	
Day	organization's own exempt activities during the tax year ► \$ To IV Supplemental Information. Provide the explanations required by Part I, line 2b, co	umne /	iii) and (<u></u>
rai	and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 1/b, as applicable. Also provide an	y additi	ional	v),
	information. See instructions.			

SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Grants and Other Assistance to Organizations, Governments, and Individuals in the United States

Complete if the organization answered 'Yes' on Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

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

OMB No. 1545-0047

2018

Open to Public Inspection

Name of the organization Houston Zoo,	Inc.					Employer identification 74-15902	
Part I General Information on G	rants and Assista	ance					
 Does the organization maintain records the selection criteria used to award the Describe in Part IV the organization's presented. 	he grants or assistand rocedures for monitorin	g the use of grant fu	unds in the United States.		See P	art IV	X Yes No
Part II Grants and Other Assista Form 990, Part IV, line 21							
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) Int'l Rhino Foundation 201 Main Street #2600 Fort Worth, TX 76102	75-2395006	501 (c) (3)	10,000.	0.			Operating Support
(2) International Elephant Fdn PO Box 366 Azle, TX 76098	75-2815706	501 (c) (3)	20,000.	0.			Operating Support
(3) Mountain Gorilla Vet. Project PO Box 356 Davis, CA 95617	06-1752363		110,000.	0.			Operating Support
(4) Wildlife Conservation Network 209 Mississippi Street San Francisco, CA 94107	30-0108469	501 (c) (3)	164,831.	0.			Support Niassa Lion Project
(5) Americans for Oxford Inc. 500 Fifth Avenue 32nd Floor New York, NY 10110	52-1495060	501 (c) (3)	86,764.	0.			Ruaha Carnivore Project Support
(6) Wildlife Guardians PO Box 9641 Washington, DC 20016	36-4712624	501 (c) (3)	41,233.	0.			Operating Support
(7) Conservation Breeding Group 12101 Johnny Cake Ridge Road Apple Valley, MN 55124	41-1719362	501 (c) (3)	10,000.	0.			Operating Support - Breeding
(8) Jane Goodall Institute 1595 Spring Hill Road #550 Vienna, VA 22182 2 Enter total number of section 501(c)(94-2474731	501 (c) (3)	10,000.	0.			Operating Support

3 Enter total number of other organizations listed in the line 1 table.

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered 'Yes' on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
Conservation research					
1 support	4	31,343.			
2					
3					
4					
5					
6					
7					

Part IV | **Supplemental Information.** Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S.

The Houston Zoo's selection criteria for awarding grants are based on our mission statement goals and long term development of regional programs. We do not solicit proposals nor do we have a formal process for receiving and evaluating grant requests. Instead we actively seek out projects that fit the areas of interest to the Zoo's leadership and staff. We then meet with the researchers to see how well they fit with our Zoo. We do not spend much money up front until we are satisfied that they will communicate and interact with the Zoo (web, media, reports, speaker requests, articles, etc.) and their research program is sustainable over the next 1-3 years that we intend to partner with them. We monitor their progress through periodic site visits where practicable and request that they provide periodic reports of

2012

Schedule I Part IV - Supplemental Information

2010	Schedule I, Part IV - Supplemental information	Fage 3
	Houston Zoo, Inc.	74-1590271
Part Iling 2 - P	Procedures for Monitoring Use of Grants Funds in U.S. (continued)	
activities.	roccuares for monitoring osc of citaties i unds in o.o. (continued)	
uccivicios.		

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2018

Continuation Page 1 of 2

Name of the organization
Houston Zoo, Inc.

Employer identification number
74-1590271

Part II Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.)										
(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance			
Lincoln Park Zoo							Goualougo			
2001 N Clark Street							Triangle Ape			
Chicago, IL 60614	36-2512404	501(c)(3)	15,000.				Project			
<u> White Oak Conservation Center</u>										
<u>581705_White_Oak_Road</u>							Conservation			
Yulee, FL 32097	26-0035224	501(c)(3)	20,000.				Partnership			
_ <u>Baylor College of Medicine</u>										
<u>PO_Box_301207</u>							EEHV Research			
Dallas, TX 75303	74-1613878	501(c)(3)	527,048.				Project			
<u> Ecology Project International</u>							Galapagos			
315_S4th_StE							Educational			
Missoula, MT 59801	91-2163952	501(c)(3)	30,000.				Program			
<u>Okapi Conservation Project</u>										
1615 Riverside Avenue							Operating			
Jacksonville, FL 32204	26-0035224	501(c)(3)	25,000.				Support			
<u> Amer Assoc - Zoos & Aquariums </u>										
<u>8403 Colesville Road, #710</u>										
Silver Spring, MD 20910	55-0526930	501(c)(3)	50,000.				ZA/SAFE Program			
<u>Smithsonian_Institution</u> _							Panama			
3001_Connecticut_AveNW							Amphibian			
Washington, DC 20008	53-0206027	501(c)(3)	50,000.				Conservation			
Univ_of_California-Davis							Sea Turtle			
<u> 1089 Veterinary Medicine Dr</u>							Conservation -			
Davis, CA 95616	94-6036494	501(c)(3)	45,000.				Argentina			
Minnesota Zoo Foundation										
13000 Zoo Boulevard							Malaysian Tiger			
Apple Valley, MN 55124	51-0147653	501(c)(3)	10,000.				Conservation			
Gorilla Rehab & Conserv Ctr										
PO Box 334							Operating			
Cumberland, ME 04021	46-2308758	[501 (c) (3)	25,000.				Support			

TEEA4001L 07/13/18

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Schedule I Cont (Form 990) 2018

Continuation Sheet for Schedule I (Form 990)

► Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2018

Continuation Page 2 of 2

Name of the organization Employer identification number 74-1590271 Houston Zoo, Inc. Part II | Continuation of Grants and Other Assistance to Domestic Organizations and Domestic Governments. (Schedule I (Form 990), Part II.) (c) IRC section (g) Description of (h) Purpose of (a) Name and address of organization or government (b) EIN (d) Amount of cash (f) Method of (e) Amount of nonvaluation (book, FMV, appraisal, grant or assistance (if applicable) grant cash assistance noncash assistance other) Port Aransas Chamber of Comm Support 403 West Cotter Ave Whooping Crane 74-1855506 501 (c) (6) Festival Port Aransas, TX 78373 10,000.

SCHEDULE J (Form 990)

Compensation Information

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

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

Houston Zoo, Inc.

Employer identification number 74-1590271

Par	rt I Questions Regarding Compensation			
	<u>'</u>		Yes	No
1 a	a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on 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			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as maid, chauffeur, chef)			
ŀ	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	1 b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.			
	X Compensation committee Written employment contract			
	Independent compensation consultant X Compensation survey or study			
	Form 990 of other organizations X Approval by the board or compensation committee			
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:			
	a Receive a severance payment or change-of-control payment?	4 a		X
	b Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4 b	Χ	
(c Participate in, or receive payment from, an equity-based compensation arrangement?	4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Part III			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:			
	a The organization?	5 a		X
k	b Any related organization?	5 b		X
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:			
a	a The organization?	6 a		Х
ŀ	b Any related organization?	6 b		X
	If 'Yes' on line 6a or 6b, describe in Part III.			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If 'Yes,' describe in Part III.	7		Х
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If 'Yes,' describe in Part III	8		Х
9	If 'Yes' on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations	0		

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

Schedule J (Form 990) 2018

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

For each individual whose compensation must be reported on 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 aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

	(B) Breakdown	of W-2 and/or 1099-MIS	SC compensation	(C) Detirement	(D) Nontaxable	(E) Total of	(F) Compensation	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	(C) Retirement and other deferred compensation	benefits	(E) Total of columns(B)(i)-(D)	in column (B) reported as deferred on prior Form 990
Lee Ehmke	(i)	423,885.	200.	0.	2,624.	5,572.	432,281.	0.
1 CEO	(ii)	0.	0.	0.	0.	0.	0.	0.
Leslie Forestier	(i)	170,493.	200.	0.	6,828.	9,107.	186,628.	0.
2 VP Finance	(ii)	0.	0.	0.	0.	0.	0.	0.
Sheryl Kolasinski	(i)	235,000.	160.	0.	7,643.	5,614.	<u>248,417.</u>	0.
3 COO	(ii)	0.	0.	0.	0.	0.	0.	0.
Roberto Espinosa	(i)	159,915.	159.	0.	5,019.	9,107.	174,200.	0.
4 VP Development	(ii)	0.	0.	0.	0.	0.	0.	0.
Kristin Finney	(i)	139,639.	168.	0.	5,592.	8,758.	154,157.	0.
5 VP HR	(ii)	0.	0.	0.	0.	0.	0.	0.
Mark Van Wickler	(i)	200,241.	159.	0.	6,244.	5,614.	212,258.	0.
6 Dir Exhibit Design	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)		L		L		L	
7	(ii)							
	(i)							
8	(ii)							
	(i)							
9	(ii)							
	(i)							
10	(ii)							
	(i)							
11	(ii)							
	(i)							
12	(ii)							
	(i)							
13	(ii)							
	(i)							
14	(ii)							
	(i)							
15	(ii)							
	(i)				L		L	
16	(ii)							
DAA			TEE \(\lambda \) 10/20	1/10			Calaaduda	L/Farm 000\ 2010

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Schedule J (Form 990) 2018

Page 2

Schedule J (Form 990) 2018 Houston Zoo, Inc. 74-1590271 Page **3**

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

Part I, Line 4 - Received Severance, Supplemental NQ Retirement, Equity-Based Compensation

Lee Ehmke participates in a 457 Top Hat plan. The contribution for 2018 was \$20,348.

BAA Schedule J (Form 990) 2018

SCHEDULE M (Form 990)

Noncash Contributions

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

► Attach to Form 990.

Department of the Treasury Internal Revenue Service ► Go to www.i

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Houston Zoo, Inc.

Part I Types of Property

Employer identification number
74-1590271

		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Metho noncash	od of c	d) determir oution a	
1	Art — Works of art							
2	Art — Historical treasures							
3	Art — Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities - Publicly traded	Х	12	3,630,973.	NYSE			
10	Securities - Closely held stock							
11	Securities - Partnership, LLC, or trust interests .							
12	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							
22	Historical artifacts.							
23	Scientific specimens							
24	Archeological artifacts.							
25	Other ► (Auction items)	X	62	75,854.	FMV			
26	Other ► (Food/Gift_cards)	X	13	85,426.	FMV			
27	Other ► ()							
28	Other ► ()							
29	Number of Forms 8283 received by the organization d organization completed Form 8283, Part IV, Done				29			
							Yes	No
30a	During the year, did the organization receive by contri	bution any pr	roperty reported in Part I	. lines 1 through 28, that				
	it must hold for at least three years from the date	of the initia	I contribution, and which	ch isn't required to be u	sed			
	for exempt purposes for the entire holding period?	?				30 a		Х
	If 'Yes,' describe the arrangement in Part II.							
31	Does the organization have a gift acceptance police	cy that requi	ires the review of any r	nonstandard contributio	ns?	31	Χ	
32a	Does the organization hire or use third parties or noncash contributions?					32 a		Х
b	If 'Yes,' describe in Part II.							
	If the organization didn't report an amount in colu describe in Part II.	mn (c) for a	type of property for wh	nich column (a) is chec	ked,			

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

Schedule M (Form 990) 2018

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

BAA TEEA4602L 10/22/18 Schedule M (Form 990) 2018

SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or 990-EZ.

► Attach to Form 990 or 990-EZ.

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

Open to Public Inspection

OMB No. 1545-0047

2018

Department of the Treasury Internal Revenue Service

Name of the organization

Houston Zoo, Inc.

Employer identification number

74-1590271

Form 990, Part III, Line 4a - Program Service Accomplishments

Aspiring to be one of the best zoos in the country, the Houston Zoo is focused on ensuring that visitors from both within and outside the Houston area feel like they have been as close to the wild as they can get. The Houston Zoo's animal care team, Conservation Education Department, Zoo Rangers, and our Guest Relations personnel lead this effort.

The Zoo's animal keepers provide uncompromising excellence in animal care as well as world class guest experiences. During this reporting period, the Houston Zoo animal care participated in Meet the Keeper talks, behind-the-scenes tours, and many other personal animal experiences for our guests which encourage appreciation and empathy for animals in the zoo and in the wild. These experiences help our guests understand how they can help save animals in the wild and how the Houston Zoo directly supports the conservation of various species across the globe.

Providing diverse learning experiences, the Houston Zoo's Education Department promotes connections with the natural world, empowering our guests to inquire, act, and conserve. During this reporting period, the Houston Zoo's Education Department personnel conducted interpretive programs on the grounds reaching approximately 156,991 participants.

Form 990, Part III, Line 4b - Program Service Accomplishments

The Houston Zoo's Wildlife Conservation Program was initiated in 2004 to facilitate leadership in conservation efforts related to the survival of threatened wildlife, the wise use of natural resources, and the appreciation of our natural world. As of fiscal year 2018, we currently support 42 projects in 22 countries around the world including the US. Accordingly, the Houston Zoo has committed 6% of its annual

Name of the organization

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Form 990, Part III, Line 4b - Program Service Accomplishments

operating budget to support this program, which compares favorably with other zoos, most of which do not make such substantial commitments to conservation from their operating budgets.

The Houston Zoo recognizes the need to work both close to home, supporting a number of wildlife reintroduction projects right here in Texas, and also across the globe where we support critical efforts aligned with the animals we house here at the Houston Zoo. These programs quite often focus not only on wildlife but as much on the support of the human communities living with those species on a daily basis. We believe conservation is not just about saving species but about improving the lives of the local communities so they see the benefits of protecting animals in the wild.

Through partnerships with local, national, and international conservation agencies and non-governmental organizations (NGOs), such as the Texas Parks and Wildlife Department, US Fish and Wildlife Service, and the Association of Zoos and Aquariums (AZA), the Houston Zoo actively participates in programs designed to protect both animals and their natural habitats worldwide.

Form 990, Part III, Line 4c - Program Service Accomplishments

The Zoo's conservation education programs offer a continuum of learning from birth to adulthood including fee-based educational programs, on-site live interpretation, adult volunteers and interns, and interpretive planning. Fee-based programs include family programs, early childhood programs, summer camp, overnights and ZooMobiles.

Conservation Education Programs (1/1/2018 to 12/31/1018):

Form 990, Part III, Line 4c - Program Service Accomplishments

Total persons served: 189,625 (includes onsite interactions by staff interpreters and pre-scheduled, fee-based programming)

Pro-bono programming:

The Houston Zoo values being a Zoo for All. Conservation Education supports this value by offering free weeklong summer camp experiences for need-based children ages 4-16. In addition, 20% of our ZooMobile programs are pro-bono for the community and we award college scholarships to our Zoo Crew teens that are graduating out of the program to college.

Summer Camp scholarships: 204 campers

ZooMobile programs: 43 programs reaching approx. 3,850 individuals

Zoo Crew teen college scholarships: 4 teens

Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Body

Per the Corporate documents, the Mayor of the City of Houston has the power to appoint 20% of the Board of Directors.

Form 990, Part VI, Line 11b - Form 990 Review Process

Form 990 is reviewed by the CEO and the CFO. Once reviewed internally, the Form is reviewed and approved by the Audit Committee. A copy of the Form is provided to each Board member prior to filing with the IRS.

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts

The Zoo's Board of Directors has a conflict of interest policy to ensure that both the Zoo and its directors and officers are protected from concerns of conflict of

Name of the organization
Houston Zoo, Inc.

Employer identification number
74-1590271

Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflicts (continued)

interest. The policy asks the directors and officers to disclose their relationship with other organizations or people that might give rise to a situation in which the officer or director would be subject to criticism for a conflict. Each year we ask the directors and officers of the Zoo to complete and file a form with the Zoo to meet this requirement. The Chairperson of the Audit Committee is responsible for the oversight process and the Chairperson of the Board of Directors is responsible for addressing any conflicts that may be disclosed in the process.

Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO & Top Management

The compensation of top management officials and key employees is determined by the Compensation Committee of the Board of Directors. The Committee reviews both comparable salaries for similar positions listed on other organizations' 990s as well as comparable position salaries in the American Zoological Association Salary Survey.

Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers & Key Employees

See above for the process followed for individuals described in question 15b.

Form 990, Part VI, Line 19 - Other Organization Documents Publicly Available

These documents are provided upon request.

Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances