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DLN: 93493316053490

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

OMB No 1545-0047

2009

Open to Public

	rthe 2	2009 cale	ndar yea	ır, or tax year beginning 0	1-01-2009 and ending 12-31-2009	9			
B Che			lease	C Name of organization JEWISH FEDERATION OF ST			D Employer identification number		
┌ Add	ress ch	unge	se IRS bel or		2002		43-065264		
☐ Nar	ne chai	nge P	rint or	Doing Business As			E Telephone nu	mber	
_ Init	ıal retur		pe. See pecific	Number and street (or P.O.	box if mail is not delivered to street addre	ss) Room/suite	(314) 442-0	0020	
	mınated	d ti	nstruc- ons.	12 MILLSTONE CAMPUS DR	VE	ssy Room, sale	G Gross receipts	\$ 66,557,548	
_	ended r dication	return n pending		City or town, state or count ST LOUIS, MO 631465776	ry, and ZIP + 4				
			F Nan	l ne and address of princip	al officer	H/a) Ta th		. 60 -	
				ROSENBERG		affilia	ıs a group returr ıtes?	TYes ▼No	
				LSTONE CAMPUS DRIV UIS,MO 631465776	E				
			31 200	313,MO 031403770		1 ' '	l affiliates includ	•	
I Tax	k-exem	npt status	5 01(c)) (3) ◀ (insert no)	7(a)(1) or		o," attach a list ip exemption nu	(see instructions) mber ►	
y W	ebsit e	e: ► www.je	ewis hins	tlouis org					
K Form	n of org	ganization 🔽	Corporat	tion Trust Association	Other ►	L Year of fo		l State of legal domicile O	
Pai	rt I	Summa	ary						
		SOLICIT,	COLLEG	CT, DISTRIBUTE & ADM	or most significant activities INISTER CONTRIBUTIONS FOR ⁻	THE BENEFIT	OF JEWISH CH	HARITABLE	
ခိုင် မ		ORGANIZ	ATIONS	<u> </u>					
e [[*									
Governance	2	Check this	s box ►	 _ if the organization disc	ontinued its operations or disposed	of more than	25% of its net a	ıssets	
ب مح	3	Number of	voting r	members of the governing	body (Part VI, line 1a)		3	3	
တ မ	4	Number of	: ındepen	ndent voting members of	he governing body (Part VI, line 1b)	. 4		
	5	Total num	berofen	nployees (Part V , line 2a)		5		
ACTIVITIES	6	Total num	berofvo	olunteers (estimate if nec	essary)		6	30	
•	7a Total gross unrelated business revenue from Part VIII, column (C), line 12 .						7 a	l	
	ь	Net unrela	ted busi	iness taxable income fror	n Form 990-T, line 34		7 6		
						Prio	or Year	Current Year	
	8	Contribut	tions and	d grants (Part VIII, line 1	h)		13,352,647	12,188,066	
Revenue	9	Program	service	revenue (Part VIII, line 2	2g)		368,473	392,420	
ē . 3-	10	Investme	ent incor	me (Part VIII, column (A), lines 3, 4, and 7d)		1,969,237	-1,365,030	
ď.	11	Other rev	/enue (P	art VIII, column (A), line	s 5, 6d, 8c, 9c, 10c, and 11e)		785,248	446,744	
	12				ust equal Part VIII, column (A), line	e	16 475 605	11.662.204	
							16,475,605	11,662,200	
	13				column (A), lines 1-3)		11,968,889	10,855,945	
	14				olumn (A), line 4)	_		(
82	15	Salaries, 10)	otherco	ompensation, employee b	enefits (Part IX, column (A), lines 5	5 –	3,846,594	4,187,049	
Expenses	16a	•	nal fund	Iraising fees (Part IX, col	umn (A), line 11e)		25,648	18,389	
÷ '	ь			penses (Part IX, column (D), lin			,	,	
<u>a</u>	17				s 11a-11d, 11f-24f)		2,492,506	2,779,184	
	18				qual Part IX, column (A), line 25)		18,333,637	17,840,567	
	19	•		•	from line 12		-1,858,032	-6,178,367	
ው ው		Revenue	1633 67	Zenses Subtract fille 10	Tom me 12	Beginning	g of Current	End of Year	
ည်း ကိုယ်	20	Tatala	ohe /D	wh V line 4.5.		Y	'ear		
A 79 1	20		•	rt X, line 16)			90,343,716	107,279,22	
A.S.S. 18 a.		Total liabilities (Part X, line 26)					25,431,826	31,448,413	
Vet Ass und Ba	21	N - +			21 from line 20		64,911,890	75,830,808	
	22			nck		schodulos and s	tatements and to t		
Not Assets or D Fund Balances		Signat Under pena	ure Blo	erjury, I declare that I have ex	amined this return, including accompanying				
	22	Signat Under pena	ure Blo	erjury, I declare that I have ex	amined this return, including accompanying tion of preparer (other than officer) is base				
Par Sign	22 t II	Signat Under pena and belief,	ure Blo alties of pe it is true,	erjury, I declare that I have ex- correct, and complete Declara		d on all informat			
	22 t II	Signat Under pena and belief,	ure Blo	erjury, I declare that I have ex- correct, and complete Declara		d on all informat	on of which prepare		
Par Sign	22 t II	Under pena and belief, ****** Signatu JUDITH	ure Blo ilties of pe it is true, of	erjury, I declare that I have excorrect, and complete Declara er S ASSOCIATE EXECUTIVE VP		d on all informat	on of which prepare		
Par Sign	22 t II	Under pena and belief, ****** Signatu JUDITH Type or	ure Blo ilties of pe it is true, of	erjury, I declare that I have ex- correct, and complete Declara	tion of preparer (other than officer) is base	d on all informat 2010- Date	ion of which prepare	er has any knowledge	
Par Sign Here	22 t II	Under pena and belief, ****** Signatu JUDITH	ure Ble alties of pe it is true, of re of office M ABRAM: print nam	erjury, I declare that I have excorrect, and complete Declara er S ASSOCIATE EXECUTIVE VP	Date	d on all information 2010- Date Check if self-	on of which prepare	er has any knowledge	
Par Sign Here	22 † III	Signat Under pena and belief, ****** Signatu JUDITH Type or Preparer's signature	ure Blo alties of pe it is true, or re of office M ABRAM: print nam	erjury, I declare that I have excorrect, and complete Declara er S ASSOCIATE EXECUTIVE VP ne and title	Date	d on all information 2010-Date	11-09 Preparer's identif	er has any knowledge	
Par Sign Here	t III	Signat Under pena and belief, ****** Signatu JUDITH Type or Preparer's signature Firm's name if self-emple	re of office M ABRAM: print name	erjury, I declare that I have excorrect, and complete Declara er S ASSOCIATE EXECUTIVE VP ne and title	Date	d on all information 2010- Date Check if self-	11-09 Preparer's identif	er has any knowledge	
Par Sign Here	t III	Signat Under pena and belief, ****** Signatu JUDITH Type or Preparer's signature Firm's name	re of office M ABRAM: print name	erjury, I declare that I have excorrect, and complete Declara er S ASSOCIATE EXECUTIVE VP ne and title	Date	d on all information 2010- Date Check if self-	Preparer's identif	rying number	

4e

Total program service expenses►\$

Part III Statement of Program Service Accomplishments

Briefly describe the organization's mission

JEWISH FEDERATION MOBILIZES THE HUMAN AND FINANCIAL RESOURCES NEEDED TO PRESERVE AND ENHANCE JEWISH LIFE IN ST LOUIS, ISRAEL, AND AROUND THE WORLD TO SOLICIT, COLLECT AND DISTRIBUTE CONTRIBUTIONS FOR THE BENEFIT OF ALL JEWISH CHARITABLE, SOCIAL WELFARE, CULTURAL, EDUCATIONAL, AND PHILANTHROPIC ORGANIZATIONS AND FOR PROVIDING CERTAIN ASSET MANAGEMENT AND GENERAL SERVICES TO AFFILIATED AGENCIES

2	Did the organization unde the prior Form 990 or 990			rvices during the yea	r which were not listed on	┌ Yes ┌ No
	If "Yes," describe these n	ew services o	n Schedule O			
3	Did the organization ceas services?			t changes in how it c	onducts, any program	┌ Yes ┌ No
	If "Yes," describe these c	hanges on Scl	hedule O			
4		1(c)(4) organ	izations and section	on 4947(a)(1) trusts	e largest program services lare required to report the ai service reported	
4a	(Code) (Expenses \$	12,609,864	including grants of \$	10,855,945) (Revenue \$	76,426)
	1901, IT IS ONE OF THE REGI PROGRAMS AND SERVICES, T THE YOUNG AND OLD, FIGHT CONNECTIONS TO ISRAEL, FE HUNDREDS OF VOLUNTEERS FRESPOND TO EMERGENCIES, AGENCIES ARE REVIEWED ANI FEDERATION'S PLANNING AND OF AGES, INTEREST AND VIEW AND MAKE PLANS TO ADDRES THE GOVERNANCE, MANAGEM INDEPENDENT BENEFICIARY A OCCURRING RETIREMENT CO AGE IN PLACE WITH SUPPORT IN WEST ST LOUIS COUNTY A INSTITUTIONALIZATION FEWE COST OF \$48,000 PER PERSO EFFECTIVE AND DIGNIFIED OF FOR JEWISH OLDER ADULTS, BENEFICIARY AGENCY STAFF ADVICE AND INFORMATION OI RESOURCES, HOUSING, LEARI CONFIDENTIAL PHONE CLL OR REPEAT PJ LIBRARY PROGRAM	ON'S OLDEST ANI HREE INTERNATI ANTI-SEMITISM, DERATION DIRECT FROM ALL SECTO EVALUATE NEEDS D FUNDS ALLOCA D ALLOCATIONS PO WAS ADDRESSING ALLOCATIONS IS VPOINTS WORKII S THEM EFFICIEN ENT AND ADMINI AGENCIES, SEVER MMUNITY (NORCE SERVICES AND IND HAS A CURR ER THAN 1% OF THEIR CHILDREN MEMBERS, WHO N EVERYTHING F NING AND RECRI E EMAIL IN 2009 IN ST LOUIS IS CO ILY WITH CHILDE	D LARGEST NONPROFI IONAL AGENCIES AND I PROMOTE JEWISH CU PROMOTE JEWISH CU ISTLY LINKS ST LOUIS RS OF THE COMMUNIT AND DISTRIBUTE CHA ITED IN THREE-YEAR O ROCESS IS BUILT ARO INTEGRATION OF SE GUIDED BY COMMUN ING WITH AGENCIES TO INTEGRATION OF SE GUIDED BY COMMUN ING WITH AGENCIES TO INTEGRATION OF SE GUIDED BY COMMUN ING WITH AGENCIES TO INTEGRATION OF SE GUIDED BY COMMUN ING WITH AGENCIES TO INTEGRATION OF SE GUIDED BY COMMUN INTEGRATION OF SE GUIDED BY INTEGRATION OF SE GUIDED INTEGRATION OF	T ORGANIZATIONS FUNDS FOUR TARGETED AREAS - LTURE AND SUPPORT JEW TO ISRAEL THROUGH A PA TY, WHO SERVE ON BOARE ARITABLE DOLLARS TO FEE CYCLES NATIONAL AND IN UND A VISION OF AN INSP NIOR SERVICES, JEWISH ITY INPUT FROM SOME 60 D EXAMINE GEOGRAPHIC A E DUPLICATION OF SERVIC OF OUR AGENCIES ALTHO ARE UNDER THE AEGIS O ST LOUIS NORC IS DESIGN ST LOUIS NORC IS DESIGN ST LOUIS NORC IS DESIGN TO KEEP THEM ACTIVE A 653 PEOPLE AGED 65+ TH IS REPORT HAVING MOVE E BED IN ST LOUIS (ACCO CHOICE OF MATURE ADUL HICH IS A PROJECT OF TH DCIAL WORK DEGREES AN AND CAREGIVER RESOUR D MENTAL HEALTH, SAFETY ERE RECEIVED WITH INDICOMMUNITIES THROUGH COMMUNITIES THROUGH CHROUGH 7 YEARS OF AG	S IN ISRAEL AND AROUND THE W RTNERSHIP 2000 SISTER-CITY PF SS AND COMMITTEES, RAISE FUNI DERATION'S FAMILY OF AGENCIES ETERNATIONAL AGENCIES ARE REV IRING, CARING AND UNITED JEW IDENTITY AND ENGAGEMENT AND LOCAL LAY LEADERS PLUS STAFF ND DEMOGRAPHIC SHIFTS, IDEN' ES ADDITIONALLY, EFFORTS ARE ES ADDITIONALLY, EFFORTS AF IND THE GREAT MAJORITY OF SE IF PLANNING AND ALLOCATIONS T IND MENTALLY ENGAGED NORCE HE ST LOUIS NORC OFFERS A LO' DO FROM THE NORC INTO NURSINA TO SELDERLINK ST LOUIS IS A CO HE SENIOR SERVICE INTEGRATION DO ARE EXPERIENCED IN GERONTIC SES, TO EMPLOYEMENT, END-OF- AND LEGAL ISSUES AND MUCH VIDUALS SEEKING REFERRAL SER OUT THE COUNTRY WHICH OFFER EMORE THAN 800 LOCAL FAMILIE TO SERVICE INTEGRATION TO SEEKING REFERRAL SER TO SERVICE THAN 800 LOCAL FAMILIE TO SERVICE THE SERVICE THAN 800 LOCAL FAMILIE TO SERVICE THAN	AND 21 NATIONAL AGENCIES, STUDENTS OF ALL AGES, CARE FOR ORLD TO STRENGTHEN ST LOUIS' ROGRAM FEDERATION IS LED BY DS, MANAGE ENDOWMENTS, PROGRAMS AND SERVICES LOCAL ITEWED ANNUALLY THE ISH COMMUNITY AND IS GUIDED BY GLOBAL JEWISH UNITY AND REPRESENTING A WIDE VARIETY FIFY WHERE NEEDS ARE GREATEST DIRECTED AT STRENGTHENING ERVICES ARE OPERATED BY HE ST LOUIS NATURALLY NDEPENDENT IN THEIR HOMES TO ENCOMPASSES A THREE-MILE AREA W-COST ALTERNATIVE TO G HOMES AT AN AVERAGE ANNUAL L), THE NORC PROVIDES A COST- DORDINATED REFERRAL SERVICE IN COMMISSION, ADMINISTERED BY A DILOGY, CONNETCT USERS WITH LIFE SERVICES, FINANCIAL IORE WITH EITHER A SIMPLE, VICES, OF THESE CALLS 139 WERE IS THE NATIONAL PJ LIBRARY
4b	HUMAN AND FINANCIAL RESO SUPPORT THE NEEDS OF THE DONOR LOYALTY AND STRONG FEDERATION'S ANNUAL COMM APPROXIMATELY 7,400 DONOF AND THE MAIMONIDES, CARD HANDLED BY THE JEWISH COT CENTRAL PLACE TO ACCEPT A ALSO PROVIDES A PLACE FOR PLUS YEARS OF JEWISH FEDE ADDITION, TO STRENGTHEN L	COMMUNITY AND COMMUNITY AND COMMUNITY CAMPAIGNES, MANY OF WHOZO AND MONTE MMUNITY FOUND MANAGE END DONORS AND LO RATION'S SERVICO. OCAL AGENCIES DEVELOPMENT F	D TO DEVELOP PROFES TWORK, THE FEDERAT N IS THE JEWISH COM IS THE	SIONAL AND VOLUNTEER TON'S FUNDRAISING EXPENUNTY'S LARGEST FUNDEER GROUP ACTIVITIES SIED OF THE JEWISH THE JEWISH BEQUESTS, CHAFIT FROM THE COORDIEST LOUIS' JEWISH COMEDERATION'S PROFESSIOI/HO WORK IN ST LOUIS J	ENSES ARE AMONG THE LOWEST IN RAISING EFFORT CAMPAIGN DON JUDEN AS WOMEN'S CONNECTION, NAMINITY LEADERSHIP ENDOWME IN FEDERATION (JCF) IN 2006 JCM IN ARITABLE TRUSTS, ANNUITIES AN ANTED MANAGEMENT OF COMMUNITY FUNDS WEBSITE WWW NAL EXCELLENCE PROJECT PROMOREWISH CONGREGATIONS, AGENCIE	UGH MULTIPLE CHANNELS TO RCES BUILT ON A HIGH DEGREE OF N THE NON-PROFIT WORLD THE NATIONS ARE RECEIVED FROM YOUNG PROFESSIONALS DIVISION NTS AND PLANNED GIVING ARE F SERVES AS OUR COMMUNITY'S ID DONOR-ADVISED FUNDS JCF NITY ASSETS IT IS BACKED BY 100-JEWISHINSTLOUIS ORG/JCF IN DIVES NETWORKING,
	(Code) (Expenses \$	532,106	ıncludıng grants of \$	0)(Revenue \$	0)
40	HOLOCAUST MUSEUM & LEARI	NING CENTER THE ADMITTANCE T	HE MUSEUM AND LEAR TO THE MUSEUM AND A	NING CENTER OPENED IN ALL PROGRAMS ARE FREE	, ,	E VISIT THE MUSEUM EACH YEAR, IUSEUM PROVIDES A
	0 th	/D	Cabadula C \ C	alaa Auldisiaaa I Darii d	i Diti	
4d	Other program services (Expenses \$	•	including grants o) (Revenue \$	52,140)

14,540,843

Part IV	Check	list of	Require	d Sche	dule

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors? 🕏	2	Yes	
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		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4	Yes	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? <i>If "Yes," complete Schedule D, Part II</i>	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in term, permanent,or quasi- endowments? If "Yes," complete Schedule D, Part V	10	Yes	
11	Is the organization's answer to any of the following questions "Yes"? If so,complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable	11	Yes	
	◆ Did the organization report an amount for land, buildings, and equipment in Part X, line10? If "Yes," complete Schedule D, Part VI.			
	◆ Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.			
	◆ Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.			
	◆ Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.			
	◆ Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.			
	◆ Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.			
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII	12		Νο
12A	Was the organization included in consolidated, independent audited financial statements for the tax year? Yes No			
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional			
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Νο
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		Νο
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part I	14b		Νο
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S? <i>If</i> " <i>Yes,"</i> complete Schedule F, Part II	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No
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? <i>If</i> " <i>Yes," complete Schedule G, Part I</i>	17	Yes	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	Yes	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		Νo

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25	24a		N o
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		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		Νο
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		N o
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		N o
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? If "Yes," complete Schedule L, Part III	27		N o
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		Νο
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Νο
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? If "Yes," complete Schedule L, Part IV	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 🕏	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		Νο
31	Part I	31		N o
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		N o
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		N o
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35	Yes	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		N o
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		N o
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

	1 990 (2009)			Page
Pai	rt V Statements Regarding Other IRS Filings and Tax Compliance		T	
_	5		Yes	No
1a	Enter the number reported in Box 3 of Form 1096, Annual Summary and Transmittal of U.S. Information Returns. Enter -0- if not applicable			
	1a	21		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and gaming (gambling) winnings to prize winners?	reportable	Yes	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		1	
	Statements filed for the calendar year ending with or within the year covered by this return	58		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax r		Yes	
	Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (instructions)	(see 2b	res	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year coverturn?	ered by this 3a		No
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or oth over, a financial account in a foreign country (such as a bank account, securities account, or othe account)?			No
Ь	If "Yes," enter the name of the foreign country			
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1, Report of Foreignancial Accounts	ign Bank and		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax yea	r? 5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter tra	insaction? 5b		Νo
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Prohibited Tax Shelter Transaction?	Regarding 5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and dorganization solicit any contributions that were not tax deductible?	ıd the 6a		Νo
b	If "Yes," did the organization include with every solicitation an express statement that such contri were not tax deductible?	butions or gifts		
7	Organizations that may receive deductible contributions under section 170(c).			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly services provided to the payor?	for goods and 7a		Νo
b	If "Yes," did the organization notify the donor of the value of the goods or services provided? .	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it file Form 8282?			No
d	If "Yes," indicate the number of Forms 8282 filed during the year			
e	Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on benefit contract?			No
f				Νo
g	For all contributions of qualified intellectual property, did the organization file Form 8899 as require	red? 7g		
h	For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 109			
8	required?	nizat ions. Did		
	business holdings at any time during the year?	8		Νo
9	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?			Νo
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		Νο
10	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a Gross receipts, included on Form 990, Part VIII, line 12, for public use of club 10b			
U	facilities			
11	Section 501(c)(12) organizations. Enter			
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of For	rm 1041? 12a		
ь	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year 12b			

12 MILLSTONE CAMPUS DRIVE ST LOUIS, MO 631465776

(314) 442-3857

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

Se	ection A. Governing Body and Management			
			Yes	No
_				
1a	Enter the number of voting members of the governing body 1a 30			
ь	Enter the number of voting members that are independent 1b 30			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2	Yes	
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		Νο
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		Νo
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5		No
6	Does the organization have members or stockholders?	6	Yes	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a	Yes	
ь	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b	Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
а	The governing body?	8a	Yes	
ь	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the		100	
•	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		Νo
	ection B. Policies (This Section B requests information about policies not required by the Internal			
Re	evenue Code.)			
			Yes	No
	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise			
	to conflicts?	12b	Yes	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
а	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line a or b, 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?	16a		Νο
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the			
	organization's exempt status with respect to such arrangements?	16b		
Se	ection C. Disclosure			
17	List the States with which a copy of this Form 990 is required to be filed▶			
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply Own website. Another's website.			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table			
20	State the name, physical address, and telephone number of the person who possesses the books and records of the	ne orga	nızatıor	n 🕨
	SANDRA A JANITCH-SCHWARZEN			

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year. Use Schedule J-2 if additional space is needed

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation, and current key employees Enter -0- in columns (D), (E), and (F) if no compensation was paid
- List all of the organization's current key employees. See instructions for definition of "key 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

Check this box if the organization did i	not compen	ffice	r, dırector, trustee	or key employee						
(A) Name and Title	(B) Average hours per	Posi t	(C tion (hat a	ched	ckal)	I		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other
	week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
See add'l data										

Forr	n 990 (2009)			Page 8
1b	Total	0		140,191
2	Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization 4			
			Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If</i> "Yes," complete Schedule J for such individual	3		N o_
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual	4	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? If "Yes," complete Schedule I for such person	5		No
s	ection B. Independent Contractors			
1	Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization			
	(A) Name and business address (B) Description of services		(C Comper	
		$\frac{1}{2}$		
2	Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization •0			
		F	orm 99 0	0 (2009)

Form 99								Page 9
Part V	<u>/</u>	Statement o	of Revenue		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512,513, or 514
\$ \$	1a	Federated cam	paigns 1a	162,514				
Contributions, gifts, grants and other similar amounts	ь	Membership du	es 1b					
%. E	c	Fundraising eve	ents 1 c	229,954				
£ a	d	Related organiz	ations 1d	669,467				
<u>ي</u> آ	e	Government grant	s (contributions) 1e	135,497				
ાં ક	f	All other contribution	ons, gifts, grants, and 1f	10,990,634				i i
ਰੋ ਜੁ	g	Noncash contri	butions included in					
Ę		lines 1a-1f \$,752,719					
ပ္ပန	h	Total. Add lines	s 1a-1f	· · · •	12,188,066			
				Business Code				
nue	2a	OFFICE SERVICES		900,099	133,959			133,959
<u>8</u>	ь	OCCUPANCY		900,099	129,895			129,895
ů,	c	ELDERLINK		900,099	76,426	76,426		
ž.	d	COMMUNICATIONS	S REVENUE	900,099	52,140	52,140		
Program Service Revenue	e							
Š.	f	All other progra	am service revenue					
ž	g	Total. Add lines	s 2a-2f		392,420			
	3		ome (including dividend					
		and other simil	aramounts)	▶ [1,428,020			1,428,020
	4	Income from inves	stment of tax-exempt bond p	proceeds 🕨				
	5	Royalties						
			(ı) Real	(II) Personal				
	6a b	Gross Rents Less rental	28,632					
	_	expenses	20.622					
	C	Rental income or (loss)	28,632					
	d	Net rental inco	me or (loss)		28,632			28,632
		Gross amount	(ı) Securities 52,052,758	(II) O ther				
	7a	from sales of assets other	32,032,730					
		than inventory						
	b	Less cost or other basis and	54,845,808					
	_c	sales expenses Gaın or (loss)	-2,793,050					
	d	Net gain or (los	s)		-2,793,050			-2,793,050
	8a		rom fundraising					
<u>n</u>		events (not inc \$ 229	luding ,954					
Other Revenue		of contributions	reported on line 1c)					
æ		See Part IV, lin	ne 18 a					
<u> </u>	ь	lass direct av	penses b	0				
₹	c		(loss) from fundraising (49,540 events ►	-49,540			-49,540
	9a		rom gaming activities					
		See Part IV, lin						
	_		a					
	b с		penses b (loss) from gaming activ	/Itles				
	-	Gross sales of						
		returns and allo						
	١.		a					
	b с	_	oods sold b (loss) from sales of inve	entory 🟲				
	-	Miscellaneous		Business Code				
	11a	INTERCOMPA		900,099	467,652			467,652
	ь	2 ERCOPITA						
	_ c							
	d	All other reven	ue					
	e		ا s 11a-11d		467.650			
				▶	467,652			
	12	Total revenue.	See Instructions	· · •	11,662,200	128,566	0	-654,432

	990 (2009)				Page 10
Part					
	Section 501(c)(3) and 501(c)(4) organizations m Il other organizations must complete column (A) but are not required to			(D)	
	ot include amounts reported on lines 6b,	(A)	(B)	(C)	(D)
	o, 9b, and 10b of Part VIII.	Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	10,855,945	10,855,945		Скрепосо
2	Grants and other assistance to individuals in the U.S. See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and				
6	key employees Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$	745,151	409,833	74,515	260,803
7	Other salaries and wages	2,474,761	1,354,123	638,542	482,096
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	448,536	245,504	111,440	91,592
9	Other employee benefits	291,303	159,455	71,704	60,144
10	Payroll taxes	227,298	124,500	51,444	51,354
11	Fees for services (non-employees)				
а	Management				
ь	Legal	47,878	36,920	8,729	2,229
с	Accounting	92,072	70,999	16,786	4,287
d	Lobbying	55,744	55,744		· ·
e	Professional fundraising See Part IV, line 17	18,389	,		18,389
f	Investment management fees	81,960		68,060	13,900
g	Other	739,826	571,921	 	19,508
12	Advertising and promotion	194,651	139,512	 	36,155
13	Office expenses	189,973	34,471	117,578	37,924
14	Information technology	23,808	18,359	 	1,108
15	Royalties		25,555	,,,,,,	
16	Occupancy	593,655	269,293	276,511	47,851
17	Travel	7,692	3,675	+ + +	1,728
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	7,652	3,073	2,200	1,,23
19	Conferences, conventions, and meetings	156,211	88,886	64,341	2,984
20	Interest	9,212	-	9,212	·
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	226,389	47,356	156,199	22,834
23	Insurance	63,842	6,259	57,583	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
а	PROVISION FOR BAD DEBT	159,000			159,000
ь	MISSIONS	65,713	4,931	3,885	56,897
С	A WARDS AND GRANTS	31,292	20,791	9,096	1,405
d	BOOKS, PUBL, & SUBSCRIP	25,627	15,743	6,084	3,800
e	MISCELLANEOUS	14,639	6,623	 	
f	All other expenses				
25	Total functional expenses. Add lines 1 through 24f	17,840,567	14,540,843	1,923,736	1,375,988
26	Joint costs. Check here ► ☐ If following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				. ,

Pa	rt X	Balance Sheet							
					(A) Beginning of year		(B) End of year		
	1	Cash—non-interest-bearing			1,713,663	1	2,492,891		
	2	Savings and temporary cash investments	_			2			
	- 3	Pledges and grants receivable, net		4,225,342	3	3,639,423			
	4	Accounts receivable, net	•		393,695		344,747		
	5	Receivables from current and former officers, directors, trustees	s kev	employees and		- 1			
		highest compensated employees Complete Part II of	, KC,	employees, and					
		Schedule L				5			
	6	Receivables from other disqualified persons (as defined under spersons described in section $4958(c)(3)(B)$ Complete Part II of	4958(f)(1)) and						
		Schedule L							
ets	7	Notes and loans receivable, net			747,067	7	708,509		
ssets	8	Inventories for sale or use				8			
⋖	9	Prepaid expenses and deferred charges			191,957	9	146,625		
	10a	Land, buildings, and equipment cost or other basis <i>Complete</i> Part VI of Schedule D	10a	7,224,866					
	ь	Less accumulated depreciation	10b	4,020,442	3,144,190	10c	3,204,424		
	11	Investments—publicly traded securities		63,368,839	11	66,647,087			
	12	Investments—other securities See Part IV, line 11		16,558,963	12	30,095,515			
	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 34) .	90,343,716	16	107,279,221				
	17	Accounts payable and accrued expenses .			1,551,050	17	5,324,117		
	18	Grants payable	3,360,135	18					
	19	Deferred revenue			19				
_	20	Tax-exempt bond liabilities			20				
<u>.</u>	21	Escrow or custodial account liability Complete Part IV of Schedul	le D .		17,198,131	21	20,531,104		
Liabilities	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified							
-		persons Complete Part II of Schedule L				22			
	23	Secured mortgages and notes payable to unrelated third parties				23			
	24	Unsecured notes and loans payable to unrelated third parties				24	887,000		
	25	Other liabilities Complete Part X of Schedule D			3,322,510	25	4,706,192		
	26	Total liabilities. Add lines 17 through 25			25,431,826	26	31,448,413		
S		Organizations that follow SFAS 117, check here 🕨 🔽 and comp	lete li	nes 27					
9		through 29, and lines 33 and 34.							
<u> </u>	27	Unrestricted net assets			35,002,309		41,156,747		
Fund Balance	28	Temporarily restricted net assets			14,421,310	28	18,704,451		
Ē	29	Permanently restricted net assets			15,488,271	29	15,969,610		
교		Organizations that do not follow SFAS 117, check here ► ar	nd com	plete					
ō	30	lines 30 through 34.				_			
ets.	30	Capital stock or trust principal, or current funds				30			
Assets	31	Paid-in or capital surplus, or land, building or equipment fund				31			
	32	Retained earnings, endowment, accumulated income, or other fu	mas		64 011 200	32	75 020 000		
Net	33	Total net assets or fund balances			64,911,890	33	75,830,808		
	34	Total liabilities and net assets/fund balances			90,343,716	34	107,279,221		

Part XI Financial Statements and Reporting

			Yes	No
L	Accounting method used to prepare the Form 990			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
b	Were the organization's financial statements audited by an independent accountant?	2b	Yes	
c	If "Yes," to 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? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	2c	Yes	
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both			
	☐ Separate basis			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Form **990** (2009)

OMB No 1545-0047

SCHEDULE A

Name of the organization JEWISH FEDERATION OF ST LOUIS

(Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

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

Public Charity Status and Public Support

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

Inspection **Employer identification number**

Par	+ T	Peac	on for Bul	blic Charity Stat	us /All ord	anizatione	must comr	olete this na	rt \ See upc				
				e foundation because						u ucuons			
1	- ga			on of churches, or as:					,				
2	<u></u>			ın section 170(b)(1)				X-X-X-X-					
3	<u>'</u>			perative hospital serv				n 170/h)/1)//	A 1/iii)				
4	<u>'</u>									/A \/ iii\ En#	or tha		
•	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(hospital's name, city, and state						(A)(III). LIII	er tile					
5	Γ	_	· ·	erated for the benefit	_	or universit	ty owned or o	perated by a g	governmental	unıt describ	ed in		
•	_			A)(iv). (Complete Pa		al unit daca	ribad in casti	on 170/h\/1\/	(4.)()				
7	 			local government or t t normally receives a	_					+	منا طانیما.	_	
,	Į*	describ	ed in	A)(vi) (Complete Pa		ii part or its	support Irom	a government	tal unit of hor	n the genera	ii public	•	
8	Г			described in section		A)(vi) (Con	nplete Part II)					
9									ıtıons, membe	ership fees,	and gro	ss	
		An organization that normally receives (1) more than 331/3% 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 331/3% of											
		ıts supp	ort from gro	ss investment incom	ne and unrel	ated busine	ss taxable ın	come (less se	ection 511 ta	x) from busi	nesses		
		acquire	d by the org	anızatıon after June 3	30,1975 S	ee section 5	509(a)(2).(C	omplete Part	III)				
10	\sqcap	acquired by the organization after 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).											
An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Che the box that describes the type of supporting organization and complete lines 11e through 11h a									Check her ons 1) or				
g			g persons?	006, has the organiz	ation accep	rea any gne	or contribution	on nom any or	i tire				
		(i) a pe	rson who dır	ectly or indirectly co	ntrols, eithe	eralone ort	ogether with i	persons desc	rıbed ın (ıı)		Yes	No	
		and (III)	below, the o	governing body of the	the suppor	ted organiza	ation?			11g(i)			
		(ii) a fa	mily membe	r of a person describ	ed ın (ı) abo	ve?				11g(ii))		
		(iii) a 3	5% controll	ed entity of a person	described i	n (ı) or (ıı) a	bove?			11g(iii)	<u> </u>	
h		Provide	the followin	g information about t	he supporte	ed organizat	ion(s)						
(i) Nam suppo organiz		ne of (ii) (described on col (i) listed in your governing lization or IRC section document?			organization in orga col (i) of your col (Is the organizat	nization in) organized		vii) ount of oport?			
				(see instructions))	Yes	No	Yes	No	Yes	No	7		
Total													

Support Schedule for Organizations Described in IRC 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.)

	(Complete only if y	ou checked the	box on line 5, 7	, or 8 of Part I	.)									
	ection A. Public Support endar year (or fiscal year beginning													
Cuit	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	009	(f) Total						
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	13,632,387	17,904,313	14,398,013	13,352,647	12	,188,066	71,475,426						
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf													
3	The value of services or facilities furnished by a governmental unit to the organization without charge													
4	Total. Add lines 1 through 3	13,632,387	17,904,313	14,398,013	13,352,647	12	,188,066	71,475,426						
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							217,249						
6	(f) Public Support. Subtract line 5 from line 4							71,258,177						
S	ection B. Total Support	•		•			•							
Cale	endar year (or fiscal year	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 20	109	(f) Total						
-	beginning in)	13,632,387	2,376,061	14,398,013	13,352,647			12,188,066		71,475,426				
7 8	A mounts from line 4 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar	1,687,760	2,376,061	2,404,682	1,754,565	1,456,652						1,456,652		9,679,720
9	sources Net income from unrelated business activities, whether or not the business is regularly carried on													
10	Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets	105,801	69,229	587,210	741,237		652,307	2,155,784						
11	Total support (Add lines 7 through 10)							83,310,930						
12	Gross receipts from related activity	ties, etc (See inst	ructions)			12		1,819,200						
13	First Five Years If the Form 990 is check this box and stop here	s for the organizati	on's first, second,	thırd, fourth, or fı	fth tax year as a 5	501(c)(3		ation,						
S	ection C. Computation of Pu													
14	Public Support Percentage for 200	•		l1 column (f))		14		85 530 %						
15	Public Support Percentage for 200	08 Schedule A , Pa	rt II, lıne 14			15		86 680 %						
	33 1/3% support test—2009. If the and stop here. The organization quantum of the stop here.	ualifies as a public	ly supported organ	nization				▶▼						
	33 1/3% support test—2008. If the box and stop here. The organization 10%-facts-and-circumstances test is 10% or more, and if the organization means are to the organization means are to the organization.	on qualifies as a pi t—2009. If the org ation meets the "f	ublicly supported o anization did not c acts and circumst	organization heck a box on lin ances" test, chec	e 13, 16a, or 16b ck this box and st e	and line	14 Explain	▶┌						
ь 18	10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part IV how the organiz supported organization Private Foundation If the organiza	anization meets th ation meets the "f	e "facts and cırcuı acts and cırcumst	nstances" test, c ances" test The	heck this box and organization quali	d stop he Ifies as a	re. publicly	▶ □						
	instructions		,	•				▶ □						

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

	(Complete only if you	cnecked the	box on line 9 o	r Part I.)			
	ction A. Public Support	T			1	T	I
cale	ndar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
	include any "unusual grants ")						
2	Gross receipts from admissions, merchandise sold or services						
	performed, or facilities furnished in						
	any activity that is related to the						
	organization's tax-exempt						
_	purpose Gross receipts from activities that						
3	are not an unrelated trade or						
	business under section 513						
4	Tax revenues levied for the						
	organization's benefit and either						
	paid to or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
_	the organization without charge						
6	Total. Add lines 1 through 5 Amounts included on lines 1, 2,						
/a	and 3 received from disqualified				1		
	persons						
b	A mounts included on lines 2 and 3						
	received from other than disqualified persons that exceed						
	the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
c	Add lines 7a and 7b						
8	Public Support (Subtract line 7c						
	rom line 6) ction B. Total Support						
	ndar year (or fiscal year beginning						
cuic	in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9	A mounts from line 6						
10a	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties and income from similar						
	sources						
ь	Unrelated business taxable						
	income (less section 511 taxes) from businesses acquired after						
	June 30, 1975						
c	Add lines 10a and 10b						
11	Net income from unrelated						
	business activities not included						
	in line 10b, whether or not the business is regularly carried on						
12	Other income Do not include						
	gain or loss from the sale of						
	capital assets (Explain in Part						
13	IV) Total support (Add lines 9, 10c,						
13	11 and 12)						
14	First Five Years If the Form 990 is for	or the organizat	ion's first, second	l, thırd, fourth, or	fifth tax year as a	a 501(c)(3) orgar	
	check this box and stop here						► □
Se	ction C. Computation of Publ	ic Support P	ercentage				
15	Public Support Percentage for 2009			13 column (f))		15	
16	Public support percentage from 200	-		.,,		16	
	Table support personage nom 200	o o o modulo / i / i	arc 111, mrs 15			10	
Se	ction D. Computation of Inve	stment Inco	ome Percenta	ae			
17	Investment income percentage for 2				n (f))	17	
18	Investment income percentage from	•		•		18	
	33 1/3% support tests—2009. If the		•		d line 15 is more		line 17 is not
1.7a	more than 33 1/3%, check this box a					u.ii 23 1/3/0 dill	. IIIC 17 13 110t
	organization	•厂		•			
ь	33 1/3% support tests—2008. If the	organization di	d not check a box	on line 14 or line	e 19a, and line 16	5 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

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

Explanation

Schedule A, Part II, Line 10, Explanation of Other Income MISCELLANEOUS ALLOC'N WRITE-OFF RECLASSIFICATION FROM BOARD-CONTROLLED ENDOWMENTS HOLOCAUST MUSEUM INTERCOMPANY CHARGES PROVISION FOR UNCOLLECTIBLE PLEDGES

Schedule A (Form 990 or 990-EZ) 2009

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DLN: 93493316053490

OMB No 1545-0047

SCHEDULE C

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ► Complete if the organization is described below.

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

Open to Public Inspection

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

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

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

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

If the organization answered "Yes," to Form 990, Part IV, Line 5 (Proxy Tax) or Form 990-EZ, line 35a (regarding proxy tax), then

◆ Section 501(c)(4), (5), or (6) organizations Complete Part III

	ame of the organization EWISH FEDERATION OF ST LOUIS Employer				er
		43-065264	3		
Par	I-A Complete if the organization is exempt under section 501(c) or is a s	ection 52	7 or	ganizatio	n.
1	Provide a description of the organization's direct and indirect political campaign activities in Part	: IV			
2	Political expenditures	-	\$		0
3	Volunteer hours		_		0
Par	tI-B Complete if the organization is exempt under section 501(c)(3).				
1	Enter the amount of any excise tax incurred by the organization under section 4955	▶	\$ _		0
2	Enter the amount of any excise tax incurred by organization managers under section 4955	▶	\$ _		0
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?			┌ Yes	┌ No
4a	Was a correction made?			┌ Yes	┌ No
b	If "Yes," describe in Part IV				
Par	tI-C Complete if the organization is exempt under section 501(c) except s	section 50)1(c)	(3).	
1	Enter the amount directly expended by the filing organization for section 527 exempt function ac	tivities 🕨	\$_		0
2	Enter the amount of the filing organization's funds contributed to other organizations for section 5	527			
	exempt funtion activities	•	\$		0
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 1	.7b ►	\$		
4	Did the filing organization file Form 1120-POL for this year?			☐ Yes	┌ No
5	State the names, addresses and employer identification number (EIN) of all section 527 political were made. For each organization listed, enter the amount paid from the filing organization's funds.	. Also enter	the a	mount of po	litical

contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	(b) Address	(c) EIN	(d) A mount paid from filing organization's funds If none, enter -0-	(e) A mount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-

section 4911 tax for this year?

┌ Yes ┌ No

Ρ	art II-A Complete if the organization under section 501(h)).	is exempt under section 501(c)(3) a	and filed Form 5768	(election
	Check If the filing organization belongs to			
В	Check If the filing organization checked bo	x A and "limited control" provisions apply		
	Limits on Lobbying E (The term "expenditures" means a	(a) Filing O rganization's Totals	(b) Affiliated Group Totals	
1a	Total lobbying expenditures to influence public o	opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legisl	97,009		
c	Total lobbying expenditures (add lines 1a and 1	97,009		
d	Other exempt purpose expenditures	16,526,575		
е	Total exempt purpose expenditures (add lines 1	16,623,584		
f	Lobbying nontaxable amount Enter the amount columns	981,179		
	If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:		
	Not over \$500,000	20% of the amount on line 1e		
	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000		
	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000		
	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000		
	Over \$17,000,000	\$1,000,000		
g	Grassroots nontaxable amount (enter 25% of lir	ne 1f)	245,295	
h	Subtract line 1g from line 1a If zero or less, ent	er -0-	0	
i	Subtract line 1f from line 1c If zero or less, ente	0		

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

j If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting

	Lobbying Expenditures During 4-Year Averaging Period										
	Calendar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) Total					
2a	Lobbying non-taxable amount	1,000,000	1,000,000	1,000,000	981,179	3,981,179					
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,971,769					
_c	Total lobbying expenditures	86,906	90,645	95,601	97,009	370,161					
_d	Grassroots non-taxable amount	250,000	250,000	250,000	245,295	995,295					
е 	Grassroots ceiling amount (150% ofline 2d, column (e))					1,492,943					
f	Grassroots lobbying expenditures										

Part IV, Supplemental Information

	rt II-B Complete if the organization is exempt under section 501(c)(3) and has N (election under section 501(h)).	IOT fi	led Fo	orm	5768	3
		(a)		(b)		
		Yes	No	A	moun	it
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of					
а	Volunteers?					
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?					
c	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?					
i	Other activities? If "Yes," describe in Part IV					
j	Total lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
b	If "Yes," enter the amount of any tax incurred under section 4912					
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Pai	rt III-A Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6).	01(c)(5), (or se	ectio	n
			_		Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		-	1		<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		 	2		
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3		
Pa	t III-B Complete if the organization is exempt under section 501(c)(4), section 5501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III answered "Yes".				ectio	n
1	Dues, assessments and similar amounts from members	1				
2	Section 162(e) non-deductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
а	Current year	2a				
b	Carryover from last year	2b				
c	Total	2c				
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3				
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4				
	Taxable amount of lobbying and political expenditures (see instructions)	5				
5	art IV Supplemental Information					
						$\overline{}$
P.	emplete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, and so, complete this part for any additional information	d Part	II-B, lin	e 1ı		

LISTED

Schedule C (Form 990 or 990EZ) 2009

PART II-A, LINE 2C THE AMOUNT THAT THE FEDERATION HAS SPENT ON GRASS ROOTS LOBBYING FOR EACH YEAR

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As Filed Data

DLN: 93493316053490

OMB No 1545-0047

SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Financial Statements

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

Open to Public Inspection

Employer identification number Name of the organization JEWISH FEDERATION OF ST LOUIS 43-0652643 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 96 0 1,201,264 0 Aggregate contributions to (during year) 2,058,642 0 3 Aggregate grants from (during year) Aggregate value at end of year 6,994,402 0 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised ┌ No ✓ Yes funds are the organization's property, subject to the organization's exclusive legal control? Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply) Preservation of land for public use (e.g., recreation or pleasure) Preservation of an historically importantly land area Preservation of a certified historic structure Protection of natural habitat Preservation of open space Complete lines 2a-2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Year Total number of conservation easements 2a Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c Number of conservation easements included in (c) acquired after 8/17/06 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during 3 the taxable year 🛌 Number of states where property subject to conservation easement is located **\(\mathbb{F}_{\top}\)** Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year 🕨 A mount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ ___ Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(ı) and 170(h)(4)(B)(ıı)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items (i) Revenues included in Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

											ontinuea)
			_								
Public exhibition		d	ı	Loan or	exch	nange progr	ams				
Scholarly research		e	Γ	Other							
Preservation for future generations											
	ollections and expla	ın hov	w the	y further	the o	rganızatıon	's ex	empt purpo	se in		
								nılar	Г	Yes	┌ No
						n answere	Y" b	es" to Fori	n 990),	
	ian or other interme	dıary	for c	ontributio	ons c	or other ass	ets i	not	Γ	Yes	√ No
If "Yes," explain the arrangement in Part XI'	/ and complete the	follow	ıng t	able		Г			A mou	ınt	
Reginning halance							1c				
· ,											
• ,											
J	orm 000 Bort V line	. 717				L				Vac	□ No
		21,							1*	res	1 140
		. anc	WOR	ad "Vac"	' to 1	Form 990	Dar	t IV line 1	<u> </u>		
Lindowine it i dids. Complete	(a)Current Year									Four Y	/ears Back
Beginning of year balance	60,220,468		8	4,491,347			Ť	•		-	
Contributions	2,151,377			3,133,262							
Investment earnings or losses	15,085,489		-2	0,852,214							
Grants or scholarships	5,198,081		-	6,551,927							
Other expenditures for facilities and programs											
Administrative expenses	606,621										
End of year balance	71,652,632		6	0,220,468							
Provide the estimated percentage of the yea	r end balance held a	ıs									
Board designated or quasi-endowment	55 000 % %										
Term endowment F	ssion of the organiza	ation '	thata	are held a	and a	dministered	l for	the			
•								_		Yes	No
(i) unrelated organizations								-			No
• •		•	•								No
	·						•	[3b		
					0 D-		10				
investments—Land, Building	s, and Equipme	nt. 5						l , , ,	[
Description of investment						basis (othe		(c) Accumul depreciati		(d) Bo	ook value
			1			l		Ī	- 1		
and		•	_								
and						2,818	,662	1,56	5,457		1,253,205
						2,818	,662	1,56	5,457		1,253,205
Buildings	· · · · · · · · · · · · · · · · · · ·	· ·				2,818 3,739			0,209		1,253,205 1,589,746
Buildings						3,739		2,15			
	Using the organization's accession and othe items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's content of the organization's content of the organization's content of the organization solicition assets to be sold to raise funds rather than the second of the organization solicition assets to be sold to raise funds rather than the second of the organization and agent, trustee, custod included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Fourty of the organization	Using the organization's accession and other records, check any items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and expla Part XIV During the year, did the organization solicit or receive donations assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as assets to be sold to raise funds rather than to be maintained as setting rather than to be maintained as assets to be sold to raise funds rather than to be maintained as setting rather than to be maintained as required to record rather than to be maintained as required to record rather than to be maintained as required to record rather than to be maintained as required to record rather than to be maintained as required to record rather than to be designed as required to record rather than to be dead as required to record rather than to be maintained as required to record rather than to be maintained as required to record rather than to be maintained as required to record rather than to be maintained as required to	Using the organization's accession and other records, check any of the items (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain howeart XIV During the year, did the organization solicit or receive donations of an assets to be sold to raise funds rather than to be maintained as part of the organization and agent, trustee, custodian or other intermediary included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the follows Beginning balance Additions during the year Distributions during the year End the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization and explaining of year balance Contributions	Using the organization's accession and other records, check any of the folitems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how the Part XIV During the year, did the organization solicit or receive donations of art, his assets to be sold to raise funds rather than to be maintained as part of the Part IV, line 9, or reported an amount on Form 990, Part X: Is the organization an agent, trustee, custodian or other intermediary for cincluded on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following to the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV VEndowment Funds. Complete if the organization answers (a)current Year (b)Provided (a)curre	Using the organization's accession and other records, check any of the following the terms (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further Part XIV During the year, did the organization solicit or receive donations of art, historical trassets to be sold to raise funds rather than to be maintained as part of the organization to be maintained as part of the organization to be maintained as part of the organization assets to be sold to raise funds rather than to be maintained as part of the organization to be maintained as part of the organization assets to be sold to raise funds rather than to be maintained as part of the organization. Part XIV, line 9, or reported an amount on Form 990, Part X, line 2: It is the organization an agent, trustee, custodian or other intermediary for contributions during the year. Is the organization an agent, trustee, custodian or other intermediary for contributions during the year. Beginning balance Additions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 2:1? If "Yes," explain the arrangement in Part XIV The intermediation of the part XIV The intermediation of the organization answered "Yes' The intermediation of the organization answered "Yes' The intermediation of the organization answered of the year and balance held as a sequence of the year and balance held as a sequence of the organization by the organization in the possession of the organization that are held organization by the organization in the possession of the organization that are held organization by the organizations is sted as required on Schedule R? Describe in Part XIV the intended uses of the organization's endowment funds organization is part XIV the intended uses of the organization's endowment funds in the possession of the organization's endowment funds and progenization of the part XIV the intended uses of the	Using the organization's accession and other records, check any of the following that aritems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization assets to be sold to raise funds rather than to be maintained as part of the organization Part XIV During the year, did the organization solicit or receive donations of art, historical treasus assets to be sold to raise funds rather than to be maintained as part of the organization Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions of included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Ending balance Did the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV **V** Endowment Funds.** Complete if the organization answered "Yes" to I (a)Current Year (b)Prior Year (c)T Beginning of year balance (a)Current Year (b)Prior Year (c)T Contributions (a)Current Year (b)Prior Year (c)T Gournett Year (b)Prior Year (c)T (a)Current Year (b)Prior Year (c)T (b) Prior Year (c)T (c) To the expenditures for facilities and programs (b) To the expenditure of the organization that are held and a organization by (b) University to t	Using the organization's accession and other records, check any of the following that are a signification (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other assets to be sold to raise funds rather than to be maintained as part of the organization answered Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assimiculed on form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance If endoment Funds. Complete if the organization answered "Yes" to Form 990, Part X; If "Yes," explain the arrangement in Part XIV V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part X; If "Yes," explain the arrangement in Part XIV London during the year Distributions during the year Distr	Using the organization's accession and other records, check any of the following that are a significant ustems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's expert XIV During the year, did the organization solicit or receive donations of art, historical treasures or other sim assets to be sold to raise funds rather than to be maintained as part of the organization's collection? **IV** Excrow and Custodial Arrangements.** Complete if the organization answered "Y Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets included on form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table **Beginning balance** **Beginning balance** **Beginning balance** **Distributions during the year** **Distributions duri	Using the organization's accession and other records, check any of the following that are a significant use of its coltems (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpo- Part XIV 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? IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Forr Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV For the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Additions during the year In the organization include an amount on Form 990, Part X, line 21? If "Yes," explain the arrangement in Part XIV Additions during the year In the organization include an amount on Form 990, Part X, line 21. In the organization include an amount on Form 990, Part X, line 21. In the organization include an amount on Form 990, Part X, line 21. In the organization include an amount on Form 990, Part X, line 10. Permanent endowment P 22 000 % Are there endowment funds not in the possession of th	Using the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV During the year, did the organization solicit or receive donations of art, historical treasures or other similar assests to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV, line 9, or reported an amount on Form 990, Part X, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X2. If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year Distributions during the year Distributions during the year Distributions during the year Distributions during the Prince of the organization answered "Yes" to Form 990, Part IV, line 10. Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV On the organization include an amount on Form 990, Part X, line 21? Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas," explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas, "explain the arrangement in Part XIV Fifewas, "explain	Using the organization's accession and other records, check any of the following that are a significant use of its collection terms (check all that apply) Public exhibition Scholarly research Preservation for future generations Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV 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? Ves VESCOW and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part XIV, line 9, or reported an amount on Form 990, Part XIV, line 21. Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part XIV and complete the following table Beginning balance Additions during the year If "Yes," explain the arrangement in Part XIV and complete the following table Beginning balance Additions during the year If "Yes," explain the arrangement in Part XIV Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Beginning of year balance Go) 220,468 94,491,347 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)

(a) Description of security or category		(c) Method of valuation
(including name of security)	(b)Book value	Cost or end-of-year market value
Financial derivatives		
Closely-held equity interests Other		
LIMITED PARTNERSHIPS	28,774,850	F
CSV OF LIFE INSURANCE	1,286,658	F
OTHER	34,007	F
OTHER	34,007	<u>'</u>
Total. (Column (b) should equal Form 990, Part X, col (B) line 12)	30,095,515	
Part VIII Investments—Program Related. See		
(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or end-of-year market value
		Cost of end-of-year market value
Total. (Column (b) should equal Form 990, Part X, col (B) line 13)		
Part IX Other Assets. See Form 990, Part X, lin (a) Descrip		(b) Book value
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X		
Total. (Column (b) should equal Form 990, Part X, col.(B) line 1: Part X Other Liabilities. See Form 990, Part X 1 (a) Description of Liability		
Part X Other Liabilities. See Form 990, Part X	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability	, line 25.	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	, , , , , >
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	
Part X Other Liabilities. See Form 990, Part X (a) Description of Liability Federal Income Taxes SPLIT INTEREST OBLIGATIONS	, line 25. (b) A mount 3,397,018	

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	
4	Net unrealized gains (losses) on investments	4	
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	
9	Total adjustments (net) Add lines 4 - 8	9	
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	
Par	t XII Reconciliation of Revenue per Audited Financial Statements With Revenue p	er Re	turn
1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains on investments		
b	Donated services and use of facilities	1	
c	Recoveries of prior year grants	1	
d	Other (Describe in Part XIV) 2d	1	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIV) 4b]	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	
Part	XIIII Reconciliation of Expenses per Audited Financial Statements With Expenses	per F	≀eturn
1	Total expenses and losses per audited financial	.	
-	statements	1	
2	A mounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	-	
b	Prior year adjustments	+	
С.	Other losses	1	
d	Other (Describe in Part XIV)	┨╻	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
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 4a	4	
b	Other (Describe in Part XIV)	┤	
_ C	Add lines 4a and 4b	4c	
5 Date	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	
	rt XIV Supplemental Information nplete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Pa	5 rt 11/ 1	unas 1h and 2h
Lor	objete tous pair to provide the descriptions required for Marr II. lines 3, 5, and 9, Marr III. lines I a and 4, Ma	arriv. II	mes id and ZD.

Part XI Reconciliation of Change in Net Assets from Form 990 to Financial Statements

Complete this part to 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, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information

Ident if ier	Return Reference	Explanation
Part IV, Line 2b		FUNDS HELD IN CUSTODY FOR OTHERS INCLUDE INVESTMENTS OF VARIOUS BENEFICIARY AGENCIES AND OTHER ORGANIZATIONS WHICH PARTICIPATE IN THE POOLED INVESTMENT PROGRAM OF THE FEDERATION, WHICH ARE RELATED PARTIES THESE AGENCIES AND ORGANIZATIONS RETAIN THE AUTHORITY TO WITHDRAW THESE FUNDS AT ANY TIME WITH CERTAIN ADVANCE NOTICE FUNDS HELD IN CUSTODY FOR OTHERS ALSO INCLUDE THE ESTIMATED AMOUNT TO BE DISTRIBUTED TO OTHER ORGANIZATIONS UPON THE DEATH OF A DONOR ANNUITY BENEFICIARY AND AMOUNTS TO BE DISTRIBUTED IN ACCORDANCE WITH THE PASSPORT TO
Part V , Line 4		THE FEDERATION'S ENDOWMENT FUNDS SUPPORT THE FEDERATION'S CHARITABLE PURPOSE, BY MAKING FUNDS AVAILABLE TO BE USED IN THE FEDERATION'S ANNUAL SUPPORT OF BENEFICIARY AGENCIES, TO SUPPORT SPECIFIC PROGRAMS OF THE FEDERATION OR TO SUPPORT OTHER DESIGNATED PROGRAMS OUTSIDE OF THE ORGANIZATION

As Filed Data -

DLN: 93493316053490

SCHEDULE G (Form 990 or 990-EZ) Supplemental Information Regarding Fundraising or Gaming Activities

OMB No. 1545-0047

2009

Department of the Treasury
Internal Revenue Service

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

Open to Public Inspection

Internal Revenue Service	Attach to Form 990 or Form 990-EZ. F See separate instructions.	Inspection
Name of the organization		Employer identification number
JEWISH FEDERATION C	FST LOUIS	
		43-0652643

Part I Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

- 1 Indicate whether the organization raised funds through any of the following activities Check all that apply
 - Mail solicitations

e 🔽 Solicitation of non-government grants

Internet and e-mail solicitations

F Solicitation of government grants

Phone solicitations

g Special fundraising events

- 2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising activities?

		_
es		

No

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization Form 990-EZ filers are not required to complete this table

(i) Name of individual or entity (fundraiser)	(ii) Activity	(iii) fundrais custo contr contribu	er have dy or ol of	(iv) Gross receipts from activity	(v) A mount paid to (or retained by) fundraiser listed in col (i)	(vi) A mount paid to (or retained by) organization	
		Yes	No				
GREEN POINT TECHNOLOGY SERVICE	TELEMARKETING		No	89,053	12,638	76,415	
SIEGEL MARKETING GROUP	TELEMARKETING		No	10,970	5,751	5,219	
Total				100,023	18,389	81,634	

3 List all states in which the organization is registered or licensed to solicit funds or has been notified it is exempt from registration or licensing

МО

			(a) Event #1	(b) Event #2	eipts greater than \$5 (c) O ther Events		tal Even	
			LIGHTFEST			(Add col	(a) thre	ough
			(event type)	(event type)	(total number)		· (c)	
Revenue	1	Gross receipts	229,954	1			229	9,954
Şeve	2	Less Charitable contributions	229,954	1			229	9,954
	3	Gross income (line 1 minus line 2)						
	4	Cash prizes						
မှာ ()	5	Non-cash prizes						
Expenses	6	Rent/facility costs						
	7	Food and beverages						
Direct	8	Entertainment	10,033	3			10	,03:
	9	Other direct expenses .	39,507	7			39	,50
	10	Direct expense summary Add lir	•				49	,540
	11	Net income summary Combine li	nes 3, column d, and line	10	.	<u> </u>	-49	,540
Par	t III	Gaming. Complete if the o \$15,000 on Form 990-EZ, li		"Yes" to Form 990, Pa	rt IV, line 19, or repo	orted mor	e than	
Revenue			(a) Bıngo	(b) Pull tabs/Instant bingo/progressive bingo	(c) O ther gaming	(Add col	tal gamı (a) thre	
ž	١.							
		Gross revenue				+		
Expenses	2	Cash prizes						
ক	3	Non-cash prizes						
웃								
	4	Rent/facility costs						
		Rent/facility costs Other direct expenses						
_	5			Г Yes%_ Г No				
_	5	Other direct expenses	ΓNο	ΓNο				
Direct Exp	5 6 7	Other direct expenses Volunteer labor	No S 2 through 5 in column (П No				
_ Direct	5 6 7 8	Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com	No s 2 through 5 in column (П N o			Yes	No
_ Direct	5 6 7 8	Other direct expenses Volunteer labor Direct expense summary Add line	No s 2 through 5 in column (abine lines 1, column d, a ation operates gaming ac	No d) nd line 7 tivities		9a	Yes	No
Pred	5 6 7 8 Ente	Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organiz	No s 2 through 5 in column (abine lines 1, column d, a ation operates gaming ac	No d) nd line 7 tivities			Yes	No
pula a	5 6 7 8 Ente	Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com er the state(s) in which the organiz the organization licensed to operate	No s 2 through 5 in column (abine lines 1, column d, a ation operates gaming ac	No d) nd line 7 tivities			Yes	No
pined 9	5 6 7 8 Enter Is the If "N Wer	Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Com er the state(s) in which the organiz the organization licensed to operate	No s 2 through 5 in column (sbine lines 1, column d, a sation operates gaming ac gaming activities in eac	No id)	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □		Yes	No
9 a b	5 6 7 8 Enter Is the If "N Wer	Other direct expenses Volunteer labor Direct expense summary Add line Net gaming income summary Comer the state(s) in which the organization licensed to operate No," Explain	No s 2 through 5 in column (sbine lines 1, column d, a sation operates gaming ac gaming activities in eac	No id)	□ No □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	· 9a	Yes	No

		Yes	No
13	Indicate the percentage of gaming activity operated in		
а	The organization's facility		
b	An outside facility		
14	Enter the name and address of the person who prepares the organization's gaming/special events books and records		
	Name 🟲		
	Address -		
15a	Does the organization have a contract with a third party from whom the organization receives gaming		
	revenue?	,	
b	If "Yes," enter the amount of gaming revenue received by the organization 🕨 \$ and the	+	
	amount of gaming revenue retained by the third party 🟲 \$		
c	If "Yes," enter name and address		
	Name 🟲		
	Address •		
16			
16	Gaming manager information		
	Name 🟲		
	Name F		
	Gaming manager compensation 🕨 \$		
	Description of services provided -		
	Director/officer Employee Independent contractor		
	I Independent contractor		
.7	Mandatory distributions		
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to		
	retain the state gaming license?	<u> </u>	
b	Enter the amount of distributions required under state law distributed to other exempt organizations or spent		
	in the organization's own exempt activities during the tax year ▶ \$	1	

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Schedule I

(Form 990)

Department of the Treasury

DLN: 93493316053490

OMB No 1545-0047

Grants and Other Assistance to Organizations, Governments and Individuals in the United States Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.

► Attach to Form 990

Internal Revenue Service							Hispection
Name of the organization						Employer identification	on number
JEWISH FEDERATION OF ST LOUIS						43-0652643	
Part I General Information	n on Grants and	Assistance				•	
 Does the organization maintain r the selection criteria used to awa Describe in Part IV the organization 	ard the grants or ass	istance?			-	•	√ Yes
Part II Grants and Other As Form 990, Part IV, line Part IV and Schedule I	21 for any recipi	ent that received m	nore than \$5,000. Ch	eck this box if no one	recipient receive	d more than \$5,000.	Use
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gran or assistance
See Additional Data Table							

Schedule I	(Form 990) 2009
Part III	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 22
	Use Schedule I-1 (Form 990) if additional space is needed.

1 					
(a)Type of grant or assistance	(b) Number of recipients	(c)A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance

Part IV Supplem	nental Information. Complete t	this part to provide the information required in Part I, line 2, and any other additional information.
Ident if ier	Return Reference	Explanation
Procedure for Monitoring Grants in the U S		Schedule I, Part I, Line 2 ALL GRANTS MADE THROUGH THE FEDERATION'S ALLOCATIONS PROGRAM HAVE AN ANNUAL REVIEW OF THE ORGANIZATION RECEIVING THE GRANT THIS INCLUDES A FINANCIAL AND ADMINISTRATIVE REVIEW OF THE ORGANIZATION AND, IF APPLICABLE, A PROGRAMMATIC REVIEW AS WELL FOR GRANTS MADE THROUGH THE FEDERATION'S DONOR ADVISED FUNDS, ALL GRANTEES' 501(C)(3) STATUS IN GOOD STANDING IS CONFIRMED SCHEDULE I, PART II THE LARGE VARIETY IN ORGANIZATIONS RECEIVING GRANTS FROM THE FEDERATION IS DUE TO THE INCLUSION OF GRANTS MADE THROUGH DONOR ADVISED FUNDS

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DLN: 93493316053490

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule J (Form 990)

Department of the Treasury

Internal Revenue Service

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

Compensation Information

► Complete if the organization answered "Yes" to Form 990, Part IV, question 23.

► Attach to Form 990. ► See separate instructions.

Name of the organization JEWISH FEDERATION OF ST LOUIS

43-0652643 Questions Regarding Compensation Yes Νo Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement orprovision of all the expenses described above? If "No." complete Part III to explain Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? Yes Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply Compensation committee ✓ Written employment contract Compensation survey or study Independent compensation consultant Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? **4**a Νo Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Yes Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9. For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? 5a Νo 5b Any related organization? Νo If "Yes," to line 5a or 5b, describe in Part III For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? Νo Any related organization? 6b Νo If "Yes," to line 6a or 6b, describe in Part III For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Νo Were any amounts reported in Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regs section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 Νo If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations

section 53 4958-6(c)?

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

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

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

(A) Name		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	(F) Compensation
		(i) Base compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	reported in prior Form 990 or Form 990-EZ
BARRY ROSENBERG	(I) (II)	270,361 0	- 1	2,506 0	55,936 0		349,370 0	
JUDITH M ABRAMS	(I) (II)	191,836 0	0	938 0	12,530 0		219,875 0	0
STEPHEN COHEN	(I) (II)	153,876 0	0	1,371 0			175,905 0	
RUTH LEDERMAN	(I) (II)	135,966 0	0	425 0	8,865 0		152,320 0	0
	<u> </u>							
	<u> </u>							
	<u> </u>							
	<u> </u>							
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	<u> </u>							

Part III Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8 Also complete this part for any additional information

Ident if ier	Return Reference	Explanation
	Part I, Line 1a	BARRY ROSENBERG - TRAVEL FOR COMPANIONS \$1,410 - INCLUDED IN TAXABLE INCOME
	Part I, Line 4a	409(A) NON-QUALIFIED SUPPLEMENTAL RETIREMENT PLAN EMPLOYER CONTRIBUTION - BARRY ROSENBERG \$38,200

Schedule J (Form 990) 2009

OMB No 1545-0047

Open to Public Inspection

SCHEDULE M (Form 990)

Department of the Treasury

Internal Revenue Service

▶Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

NonCash Contributions

Name of the organization JEWISH FEDERATION OF ST LOUIS **Employer identification number**

43-0652643

Pa	rt I Types of Property				43-0652643			
	- Types of the policy	(a) Check If applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d Method of d reven	- etermı	nıng	
1	Art—Works of art	аррпсавіе		<u> </u>				
	Art—Historical treasures							
	Art—Fractional interests							
	Books and publications							
	Clothing and household							
	goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	193	2,272,126	STOCK MARKET Q	UOTE	S	
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 .	Х	1	480,593	APPRAISAL			
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies .							
21	Taxidermy							
	Historical artifacts							
	Scientific specimens							
	Archeological artifacts							
25	O ther ► ()							
	O ther ▶()							
27	O ther ▶()							
28	Other ► ()							
29	Number of Forms 8283 received for which the organization compl				29			0
					4 20 11 1 :		Yes	No
30a	During the year, did the organiza							
	must hold for at least three year			on, and which is not require	d to be used			
	for exempt purposes for the enti	.				30a		No
	If "Yes," describe the arrangem] ,	V 4 -	
31	Does the organization have a gif	π acceptano	ce policy that requires the r	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	e third part	es or related organizations	to solicit, process, or sell i	non-cash	32a		Νo
b	If "Yes," describe in Part II							
	If the organization did not report	t revenues i	n column (c) for a type of p	roperty for which column (a) is checked,			
•	describe in Part II		· · · · · · · · · · · · · · · · · · ·	. ,	,			

Page 2

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier Return Reference Explanation

Schedule M (Form 990) 2009

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990

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

Attach to Form 990.

2009

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number

43-0652643

ldentifier	Return Reference	Explanation
Form 990, Part VI, Section A, line 2		RANDALL GREEN & KAREN GREEN - FAMILY RELATIONSHIP
Form 990, Part VI, Section A, line 6		ANY JEWISH ADULT INDIVIDUAL (AGE EIGHTEEN OR OLDER) WHO MAKES PAYMENT OR A CONTRIBUTION OF NOT LESS THAN THIRTY DOLLARS (\$30 00) TO THE ORGANIZATION'S ANNUAL CAMPAIGN, OR TO ANY CAMPAIGN CONDUCTED IN LIEU OF THE ANNUAL CAMPAIGN, SHALL BE A VOTING MEMBER FOR THE FISCAL YEAR IN RESPECT TO WHICH SUCH PAYMENT IS MADE AND UNTIL ADJOURNMENT OF THE ANNUAL MEETING OF THE ORGANIZATION HELD THE FOLLOWING YEAR AS A CONDITION PRECEDENT TO MEMBERSHIP, AN INDIVIDUAL SHALL AGREE (AND CONTINUE TO ABIDE BY SUCH AGREEMENT) TO RESPECT THE ORGANIZATION'S MISSION STATEMENT AS SET FORTH IN ARTICLE TWO OF THE ORGANIZATION'S BY-LAWS
Form 990, Part VI, Section A, Iine 7a		AT EACH ANNUAL MEETING OF THE MEMBERS, THE MEMBERS SHALL ELECT TO FILL THE POSITIONS OF THOSE AT-LARGE TRUSTEES WHOSE TERMS ARE EXPIRING FROM A SLATE OF NOMINEES PREPARED AND PROPOSED BY THE BOARD DEVELOPMENT AND NOMINATING COMMITTEE OR FROM THOSE NOMINEE(S) PROPOSED BY TWO HUNDRED FIFTY MEMBERS OF THE ORGANIZATION AS DESCRIBED IN ARTICLE 7 02 OF THE BY-LAWS EACH MEMBER SHALL HAVE ONE VOTE FOR AS MANY TRUSTEES AS THERE ARE TO BE ELECTED THERE SHALL BE NO CUMULATIVE VOTING IN THE ELECTION OF TRUSTEES THE BOARD OF TRUSTEES ARE RESPONSIBLE FOR THE ELECTION OF THE AT-LARGE DIRECTORS, CONSIDER AND VOTE ON CHANGES TO THE BY-LAWS EITHER DRAFTED AND APPROVED BY THE BOARD OF DIRECTORS OR THE MEMBERS OF THE FEDERATION, APPROVE THE APPOINTMENT, BY THE PRESIDENT, OF SIX AT-LARGE TRUSTESS WHO WILL EACH SERVE ON THE BOARD DEVELOPMENT AND NOMINATING COMMITTEE, AND PARTICIPATE IN DISCUSSIONS OF COMMUNITY PRIORITES
Form 990, Part VI, Section A, line 7b		THE BOARD OF DIRECTORS MAY ACT TO ADD TO, ALTER, AMEND, OR REPEAL THE BY-LAWS, SUBJECT TO THE AFFIRMATIVE VOTE OF AT LEAST TWO-THIRDS (2/3) OF THE TRUSTEES PRESENT AT ANY MEETING OF THE BOARD OF TRUSTEES AS TO WHICH NOTICE OF THE CONTEMPLATED ACTION WAS GIVEN
Form 990, Part VI, Section B, line 11		THE FEDERATION BUDGET FINANCE AND ADMINISTRATION (BF&A) WILL REVIEW THE FORM 990 PRIOR TO ITS FILING THE BF&A COMMITTEE CHAIR WILL REPORT TO THE FULL BOARD SUBSEQUENT TO THE REVIEW AND RECOMMEND THAT THE BOARD APPROVE FILING EACH BOARD MEMBER WILL RECEIVE A COPY OF THE FORM 990 PRIOR TO ITS FILING
Form 990, Part VI, Section B, Ine 12c		ON A YEARLY BASIS, EACH DIRECTOR, TRUSTEE, OFFICER, COMMITTEE MEMBER AND EMPLOYEE HAS TO SIGN/UPDATE A CONFLICT OF INTEREST POLICY DISCLOSURE STATEMENT. THIS STATEMENT REQUIRES ONE TO LIST ANY CONFLICTS AND AFFIRMS THE PERSON'S RESPONSIBILITY ON DISCLOSURE OF A CONFLICT EACH OF THE ABOVE PERSONS (OTHER THAN EMPLOYEES) MUST DISCLOSE A POTENTIAL CONFLICT TO THE FEDERATION'S PRESIDENT AND THE CHAIRMAN OF THE AUDIT COMMITTEE. AN EMPLOYEE MUST ALSO DISCLOSE ANY CONFLICT TO THE EXECUTIVE VICE PRESIDENT. THE CONTRACT/TRANSACTION WILL BE DETERMINED TO EITHER BE OR NOT BE A CONFLICT BY A MAJORITY OF THE FEDERATION BOARD MEMBERS OR COMMITTEE MEMBERS. ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE NOTED IN THE MEETING MINUTES.
Form 990, Part VI, Section B, Iine 15a		THE PROCESS FOR DETERMINING COMPENSATION FOR THE EXECUTIVE VICE PRESIDENT INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA AND SUBSTANTIATION OF THE DELIBERATION AND DECISION THE PROCESS IS DONE ON AN ANNUAL BASIS THIS PROCESS WAS LAST UNDERTAKEN IN 2009 FOR THE EXECUTIVE VICE PRESIDENT, B ROSENBERG KEY EMPLOYEES OF THE FEDERATION EACH HAVE AN ANNUAL REVIEW SIGNED OFF BY THEIR SUPERVISOR COMPENSATION IS BASED ON COMPARABILITY DATA AND MEETING INTERNALLY ESTABLISHED GOALS THIS PROCESS WAS LAST UNDERTAKEN IN 2009 FOR THE ASSOCIATE EXECUTIVE VICE PRESIDENTS, J ABRAHMS AND S COHEN
Form 990, Part VI, Section C, Inne 19		THE FEDERATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND THE FORM 990 ARE MADE AVAILABLE TO THE PUBLIC UPON REQUEST THE FEDERATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE

ldentifier	Return Reference	Explanation
FORM 990, PART VII, SECTION A	EXPLANATION FOR HOURS WORKED	BARRY ROSENBERG WORKED APPROXIMATELY 43 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 40 HOURS THE KRANZBERG FOUNDATION 1 HOUR LUBIN-GREEN FOUNDATION 1 HOUR STAENBERG FAMILY FOUNDATION 1 HOUR THOMAS R GREEN WORKED APPROXIMATELY 6 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 5 HOURS STAENBERG FAMILY FOUNDATION 1 HOUR KENNETH KRANZBERG WORKED APPROXIMATELY 6 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 5 HOURS THE KRANZBERG FOUNDATION 1 HOUR MICHAEL LITWICK WORKED APPROXIMATELY 6 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 5 HOURS THE KRANZBERG FOUNDATION 1 HOUR KAREN SHER WORKED APPROXIMATELY 11 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 10 HOURS THE KRANZBERG FOUNDATION 1 HOUR TODD SIWAK WORKED APPROXIMATELY 6 HOURS PER WEEK AS FOLLOWS JEWISH FEDERATION OF ST LOUIS 5 HOURS STAENBERG FAMILY FOUNDATION 1 HOUR

DLN: 93493316053490

2009

Open to Public Inspection

OMB No 1545-0047

SCHEDULE R (Form 990)

Name of the organization

Related Organizations and Unrelated Partnerships

Department of the Treasury Internal Revenue Service

20-4920260

Complete if the organization answered "Yes" to Form 990, Part IV, line 33, 34, 35, 36, or 37.
 ► Attach to Form 990.
 ► See separate instructions.

Employer identification number

43-0652643

JEWISH FEDERATION OF ST LOUIS

(a)
Name, address, and EIN of disregarded entity

(b) Primary activity

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(c)
Legal domicile (state
or foreign country)

(d) Total income (e) End-of-year assets **(f)** Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
LUBIN-GREEN FOUNDATION					
12 MILLSTONE CAMPUS DR	SUPPORTING FOUNDATION	МО	501(c)(3)	Line 11a, I	N/A
ST LOUIS, MO 63146 43-6049332 STAENBERG FAMILY FOUNDATION					
2127 INNERBELT BUSINESS CTR STE 200	SUPPORTING FOUNDATION	МО	501(c)(3)	Line 11a, I	N/A
ST LOUIS, MO 63114 20-2055339 THE KRANZBERG FOUNDATION					
12 MILLSTONE CAMPUS DR	SUPPORTING FOUNDATION	МО	501(c)(3)	Line 11a, I	N/A
ST LOUIS. MO 63146					

Part III	Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990,	, Part IV,	, line 34
	because it had one or more related organizations treated as a partnership during the tax year.)		

(a) Name, address, and EIN of related organization **(b)** Primary activity (c)
Legal
domicile
(state or
foreign
country)

(d) Direct controlling entity (e)
Predominant income
(related, unrelated,
excluded from tax
under sections 512514)

(f) Share of total income (g) Share of end-of-year assets (h)
Disproprtionate
allocations?

(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (j) General or managing partner?

Yes No

Yes No

Part IV Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a)
Name, address, and EIN of related organization

(b) Primary activity (c) Legal domicile (state or foreign country) (d) Direct controlling entity (e)
Type of entity
(C corp, S corp,
or trust)

(f) Share of total income

(g) Share of end-of-year assets (h) Percentage ownership

(4)

(5)

(6)

Part V	Transactions With Related Organizations	(Complete if the organization answered	"Yes" on Form 990	Part IV line 34 35 or 36)
raitv	Transactions with Related Organizations	(Complete if the organization answered	ies diridili 990,	rait 1V, lille 34, 33, 01 30.)

	Note. Complete line 1 if any entity is listed in Parts II, III or IV		Yes	No
1 D	uring the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity	1a		No
Ь	Gift, grant, or capital contribution to other organization(s)	1b		No
c	Gıft, grant, or capıtal contribution from other organization(s)	1c	Yes	
d	Loans or loan guarantees to or for other organization(s)	1d		No
е	Loans or loan guarantees by other organization(s)	1e		No
f	Sale of assets to other organization(s)	1f		No
g	Purchase of assets from other organization(s)	1g		No
h	Exchange of assets	1h		No
i	Lease of facilities, equipment, or other assets to other organization(s)	1i		No
j	Lease of facilities, equipment, or other assets from other organization(s)	1j		No
k	Performance of services or membership or fundraising solicitations for other organization(s)	1k	Yes	
ı	Performance of services or membership or fundraising solicitations by other organization(s)	11		No
m	Sharing of facilities, equipment, mailing lists, or other assets	1m		No
n	Sharing of paid employees	1n		No
0	Reimbursement paid to other organization for expenses	10		No
р	Reimbursement paid by other organization for expenses	1p		No
q	O ther transfer of cash or property to other organization(s)	1q		No
r	O ther transfer of cash or property from other organization(s)	1r		No
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds			
	(a) (b) Name of other organization (type(a-r)) (b) Transaction type(a-r)		(c) t involv	ed
(1) L	UBIN-GREEN FOUNDATION		2	73,467
(2) S	TAENBERG FAMILY FOUNDATION		30	96,000
3)			J.	,,,,,,,
-,				

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

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

(a)
Name, address, and EIN of entity

(b) Primary activity (c) Legal domicile (state or foreign country) (d)
Are all
partners
section
501(c)(3)
organizations?

Yes No

(e) Share of end-of-year assets **(f)**Disproprtionate allocations?

No

Yes

(g) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) (h) General or managing partner?

Yes No

Software ID:

Software Version:

EIN: 43-0652643

Name: JEWISH FEDERATION OF ST LOUIS

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
100 NEEDIEST CASESPO BOX 955925 ST LOUIS,MO 631955925	43-0714167	501(C)(3)	5,200	0	N/A	N/A	GENERAL SUPPORT
A ISh Hatorah457 N WOODS MILL ROAD CHESTERFIELD, MO 63017	43-1839464	501(C)(3)	14,550	0	N/A	N/A	GENERAL SUPPORT
AMERICAN CANCER SOCIETY4207 LINDELL BLVD ST LOUIS,MO 63108	74-1185665	501(C)(3)	6,990	0	N/A	N/A	GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE7751 CARONDOLET AVE ST LOUIS,MO 53105	13-5563393	501(C)(3)	31,531	0	N/A	N/A	GENERAL SUPPORT
ANTI-DEFAMATION LEAGUE10420 OLD OLIVE STREET ROAD ST LOUIS,MO 63141	13-1818723	501(C)(3)	30,934	0	N/A	N/A	GENERAL SUPPORT
ARTS & EDUCATION COUNCIL3547 OLIVE STREET ST LOUIS,MO 63103	43-0790672	501(C)(3)	5,260	0	N/A	N/A	GENERAL SUPPORT
ASTHMA & ALLERGY FOUNDATION OF AMERICA 1500 S BIG BEND STE 1 SOUTH ST LOUIS, MO 63117	43-1484316	501(C)(3)	10,150	0	N/A	N/A	GENERAL SUPPORT
AUBURN FOOD BANK930 18TH PL NE AUBURN,WA 98002	91-1215485	501(C)(3)	6,740	0	N/A	N/A	GENERAL SUPPORT
BAIS ABRAHAM CONGREGATION6910 DELMAR ST LOUIS,MO 63130	43-0782212	501(C)(3)	12,125	0	N/A	N/A	CONGREGATION PROGRAMS
BAIS YAAKOV HIGH SCHOOL OF ST LOUIS700 NORTH SOUTH ST LOUIS,MO 63130	43-1819166	501(C)(3)	6,650	0	N/A	N/A	GENERAL SUPPORT

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(h) Purpose of grant (a) Name and address of (f) Method of (g) Description of ıf applıcable grant valuation non-cash assistance organization cash orassistance or government (book, FMV, appraisal, assistance other) 43-1648435 501(C)(3) N/A N/A GENERAL SUPPORT BARNES-JEWISH HOSPITAL 0 FOUNDATION600 S 79,017 TAYLOR AVE ST LOUIS, MO 63110 31-1794932 N/A 501(C)(3) οl N/A GENERAL SUPPORT B'NAI B'RITH HILLEL

YOUTH ORGANIZATION 5185 MACARTHUR BLVD STE 640 WASHINGTON, DC 20016	01 1/3/302	301(0)(0)	44,615		14//	14//	9211211112 9977 9111
BRITH SHOLOM KNESETH ISRAEL CO1107 ELINDEN ST LOUIS,MO 63117	43-0668539	501(C)(3)	42,473	0	N/A	N/A	CONGREGATION PROGRAMS
CENTRAL AGENGY FOR JEWISH EDUCATION OF ST LOUIS12 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	23-7123583	501(C)(3)	975,288	0	N/A	N/A	GENERAL SUPPORT
CENTRAL REFORM CONGREGATION5020 WATERMAN ST LOUIS,MO 63108	43-1336060	501(C)(3)	80,700	0	N/A	N/A	CONGREGATION PROGRAMS
CITY ACADEMY4175 N KINGSHIGHWAY ST LOUIS,MO 63115	31-1619379	501(C)(3)	15,350	0	N/A	N/A	GENERAL SUPPORT
COMMUNITY AGING CORPORATION8 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	43-1365901	501(C)(3)	110,704	0	N/A	N/A	GENERAL SUPPORT
CONGREGATION B'NAI AMOONA324 S MASON RD ST LOUIS,MO 63141	43-0706846	501(C)(3)	64,281	0	N/A	N/A	CONGREGATION PROGRAMS
CONGREGATION SHAARE EMETH11645 LADUE RD ST LOUIS,MO 63141	43-0662466	501(C)(3)	19,672	0	N/A	N/A	CONGREGATION PROGRAMS
							1

14,750

N/A

0

N/A

GENERAL SUPPORT

43-1202816

CONTEMPORARY ART

WASHINGTON BLVD ST LOUIS, MO 63108

MUSEUM OF ST LOUIS3750

501(C)(3)

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) DONALD DANFORTH PLANT 31-1584621 501(C)(3) 0 N/A N/A GENERAL SUPPORT SCIENCE975 N WARSON 8,080 RDST LOUIS, MO 63132 GILDA'S CLUB ST LOUIS 35-2274422 501(C)(3) 0 N/A GENERAL SUPPORT N/A 1401 S BRENTWOOD BLVD 10,000 STE 715 ST LOUIS, MO 63144 501(C)(3) 0 GENERAL SUPPORT **GLADYS & HENRY CROWN** 43-1695861 N/A N/A CENTER FOR SENIOR 30,000 LIVING8350 DELCREST DR ST LOUIS, MO 631242166 HF EPSTEIN HEBREW 43-6001158 501(C)(3) 0 N/A N/A **EDUCATION** PROGRAM ACADEMY1138 WARSON 156,634 RD ASSISTANCE ST LOUIS, MO 63132 HILLEL UNIVERSITY OF 43-1600778 501(C)(3) 0 N/A N/A GENERAL SUPPORT MISSOURI-COLUMBIA1107 59,597 UNIVERSITY AVE COLUMBIA, MO 65201 0 N/A **HOLOCAUST MUSEUM &** 43-0652643 501(C)(3) N/A GENERAL SUPPORT LEARNING CENTER12 10,650 MILLSTONE CAMPUS DR ST LOUIS, MO 63146 501(C)(3) 0 JEWISH CENTER FOR AGED 43-0652646 N/A GENERAL SUPPORT 13190 S OUTER 40 RD 57,294 ST LOUIS, MO 63017 0 GENERAL SUPPORT JEWISH COMMUNITY 43-0681477 501(C)(3) N/A N/A CENTERSTWO MILLSTONE 1,486,051 CAMPUS DR ST LOUIS, MO 63146 JEWISH COMMUNITY 20-5631988 501(C)(3) 0 N/A N/A GENERAL SUPPORT RELATIONS COUNCIL12 380,707 MILLSTONE CAMPUS DR ST LOUIS, MO 63146 0 JEWISH COUNCIL FOR 13-1624104 501(C)(3) N/A GENERAL SUPPORT PUBLIC AFFAIRS116 E 14,500 27TH ST NEW YORK, NY 10016

Form 990. Schedule I, Part II. Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (a) Description of (h) Purpose of grant ıf applıcable organization grant cash valuation non-cash assistance or assistance or government assistance (book, FMV, appraisal, other) JEWISH FAMILY AND 43-0790330 501(C)(3) 0 N/A N/A GENERAL SUPPORT CHILDREN'S SERVICE 952,710 10950 SCHUETZ RD ST LOUIS, MO 63146 501(C)(3) JEWISH FEDERATION OF 37-0661214 0 N/A N/A GENERAL SUPPORT SOUTHERN ILLINOIS3419 5,400 W MAIN ST BELLEVILLE, IL 62226 501(C)(3) 0 JOHN BURROUGHS 43-0652619 N/A N/A EDUCATION SCHOOL755 S PRICE RD PROGRAM 29,500 ST LOUIS, MO 63124 ASSISTANCE FRIENDS OF KWMU FM 43-1108249 501(C)(3) 0 N/A N/A GENERAL SUPPORT RADIO 8001 NATURAL 5,135 BRIDGE ST LOUIS, MO 631214401 0 LOUIS AND SARAH BLOCK 43-1114640 501(C)(3) N/A N/A **EDUCATION** YESHIVA HIGH SCHOOL PROGRAM SUPPORT 95,343 1146 N WARSON RD ST LOUIS, MO 63132 0 ENDOWMENT FUND OF 26-0043932 501(C)(3) N/A N/A GENERAL SUPPORT MACCABI USA1926 ARCH 5.269 ST STE 4R PHILADELPHIA, PA 19103 43-0652657 501(C)(3) 0 N/A GENERAL SUPPORT MERSMISSOURI GOODWILL INDUSTRIES1727 LOCUST 50,000 ST ST LOUIS, MO 63103 MISSOURI BOTANICAL 43-0666759 501(C)(3) 0 N/A GENERAL SUPPORT **GARDENPO BOX 299** 17,280 ST LOUIS, MO 63166 0 N/A GENERAL SUPPORT MISSOURI TORAH 20-8392331 501(C)(3) N/A INSTITUTE14550 LADUE 6,200 RD ST LOUIS, MO 63017 0 NATIONAL COUNCIL OF 43-0722936 501(C)(3) N/A GENERAL SUPPORT JEWISH WOMEN8350 6,000 DELCREST DR ST LOUIS, MO 63124

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of **(b)** EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 501(C)(3) 0 N/A NFTY IN ISRAEL - UNION 13-1663143 N/A GENERAL SUPPORT FOR REFORM JUDAISM46 6,984 **BOWEN RD** WARWICK, NY 10990 59-2314655 501(C)(3) 0 N/A GENERAL SUPPORT NCH HEALTHCARE N/A FOUNDATION350 14,420 SEVENTH ST N NAPLES, FL 34106 0 OASIS7710 CARONDELET 43-1830354 501(C)(3) N/A N/A GENERAL SUPPORT **AVESTE 125** 73,300 ST LOUIS, MO 631053319 501(C)(3) 0 PARK SCHOOL OF 52-0591625 N/A N/A GENERAL SUPPORT BALTIMOREPO BOX 8200 156,640 BALTIMORE, MD 21022 501(C)(3) 0 PROSTATE CANCER 95-4418411 N/A N/A GENERAL SUPPORT FOUNDATION1250 9,000 FOURTH ST SANTA MONICA, CA 90401 43-1077667 501(C)(3) 0 N/A GENERAL SUPPORT SAFE CONNECTIONS2165 N/A **HAMPTON AVE** 10,900 ST LOUIS, MO 63139 0 SALVATION ARMY1130 43-0653584 501(C)(3) N/A N/A GENERAL SUPPORT **HAMPTON AVE** 6,875 ST LOUIS, MO 63139 501(C)(3) 0 SAUL MIRO WITZ DAY 43-1772004 N/A N/A EDUCATION PROGRAM SCHOOLREFORM JEWISH 94,237 ACADEMY11411 N FORTY ASSISTANCE DR ST LOUIS, MO 63131 0 N/A SCHOLARSHIP 43-6031234 501(C)(3) N/A GENERAL SUPPORT FOUNDATION OF ST LOUIS 5,600 8215 CLAYTON RD ST LOUIS, MO 631171116 501(C)(3) 0 SHA'AREI CHESED SHUL 43-1755680 N/A N/A GENERAL SUPPORT 700 NORTH SOUTH 11,000 ST LOUIS, MO 63130

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (a) Name and address of (b) EIN (c) IRC Code section (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) SHAARE SHALOM 501(C)(3) N/A N/A 43-0668539 0 CONGREGATION CONGREGATION1107 E PROGRAMS 21,500 LINDEN ST LOUIS, MO 63117 N/A N/A 43-1216025 501(C)(3) 0 SOLOMON SCHECHTER **EDUCATION** DAY SCHOOL OF ST LOUIS PROGRAM 149,745 348 S MASON RD ASSISTANCE ST LOUIS, MO 63141 501(C)(3) ST ANTHONY'S MEDICAL 43-0980256 N/A N/A GENERAL SUPPORT CENTER10010 KENNERLY 10,000 STE 150 MOB-A ST LOUIS, MO 63128 ST LOUIS ART MUSEUM 43-1056957 501(C)(3) 0 N/A N/A GENERAL SUPPORT ONE FINE ARTS DR 7,385 ST LOUIS, MO 63110 43-0965860 0 N/A ST LOUIS JEWISH LIGHTPO 501(C)(3) N/A GENERAL SUPPORT BOX 955519 97,446 ST LOUIS, MO 63195 ST LOUIS KOLLEL8202 43-1594954 501(C)(3) 0 N/A N/A GENERAL SUPPORT DELMAR BLVD 14,400 ST LOUIS, MO 63124 43-0666769 501(C)(3) 0 N/A ST LOUIS SYMPHONY N/A GENERAL SUPPORT ORCHESTRA718 N GRAND 12,180 BLVD ST LOUIS, MO 63103 501(C)(3) 0 N/A ST LOUIS ZOOONE 43-1027365 N/A GENERAL SUPPORT GOVERNMENT DR 14,750 ST LOUIS, MO 63110 501(C)(3) 0 TEMPLE ISRAEL 43-0653290 N/A N/A CONGREGATION CONGREGATIONONE PROGRAMS 40.862 RABBI ALVIN D RUBIN DR ST LOUIS, MO 63141 N/A THE JEWISH FEDERATIONS 13-1624240 501(C)(3) 0 N/A GENERAL SUPPORT OF NORTH AMERICA111 4,318,016 EIGHTH AVE NEW YORK, NY 10011

Additional Data

Software ID: Software Version:

EIN: 43-0652643

Name: JEWISH FEDERATION OF ST LOUIS

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

4d. Other program services

(Code) (Expenses \$ 342,169 including grants of \$ 0) (Revenue \$ 52,140)

COMMUNICATIONS THE JEWISH FEDERATION'S COMMUNICATIONS DEPARTMENT PROVIDES MARKETING, ADVERTISING, MEDIA RELATIONS AND PUBLIC RELATIONS SUPPORT FOR FEDERATION SPONSORED EVENTS, HOLOCAUST MUSEUM, FEDERATION PLANNING AND ALLOCATIONS, NORC (NATURALLY OCCURRING RETIREMENT COMMUNITY) SENIOR PROJECT, JEWISH COMMUNITY FOUNDATION, PARTNERSHIP 2000, FOCUS ISRAEL, PROFESSIONAL EXCELLENCE AND MORE THE COMMUNICATIONS PROGRAM PLANS AND MANAGES THE JEWISH FEDERATION'S ANNUAL MEETINGS AND DESIGNS/PUBLISHES ITS ANNUAL REPORT TO THE COMMUNITY

(Code) (Expenses \$ 235,452 including grants of \$ 0) (Revenue \$ 0)

COMMUNITY BUILDING THE FEDERATION ALSO BUILDS AND PROMOTES BY ENGAGING JEWS IN JEWISH LIFE THROUGH SUCH SERVICES AS THE COMMUNITY WEBSITE PROJECT WWW JEWISHINSTLOUIS ORG WWW JEWISHINSTLOUIS ORG IS THE ONLINE GATEWAY TO EVERYTHING JEWISH IN ST LOUIS AND ONE OF THE MOST SUCCESSFUL JEWISH COMMUNITY WEBSITES IN THE COUNTRY A SERVICE OF JEWISH FEDERATION OF ST LOUIS - JEWISHINSTLOUIS IS SUPPORTED BY CORPORATE AND INDIVIDUAL SPONSORS WITH THE MISSION TO SERVE AS A COMMUNITY BUILDING TOOL SINCE INCEPTION IN JUNE, 2005, JEWISHINSTLOUIS ORG HAS WELCOMED MORE THAN 868,000 VISITORS - WHO HAVE LOGGED MORE THAN 3 1 MILLION PAGE VIEWS THE SITE AVERAGES 1,500 TO 2,000 VISITORS EACH DAY

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

Compensated Employees, and Independent Contractors												
(A) Name and Title	(B) Average hours per		(C) ition (che that apply	у)		(D) Reportable compensation from the	(E) Reportable compensation from related	(F) Estimated amount of other compensation				
	week	Individual trustee or director	Officer Institutional Trustee	employee Key employee	Former Highest compensated	organization (W- 2/1099-MISC)	organizations (W- 2/1099- MISC)	from the organization and related organizations				
SANFORD NEUMAN PRESIDENT	20 00	Х	Х		·	0	C	0				
HARVEY WALLACE VP FINANCE/HR DIR	10 00	Х	Х			0	C	0				
ROBERT MILLSTONE VP CAMPAIGN	10 00	Х	Х			0	C	0				
SHERRI FRANK-WEINTROP VP PLANNING/ALLOCATIONS	10 00	Х	Х			0	C	0				
TODD SIWAK VP STRATEGIC PLANNING	10 00	X	х			0	C	0				
SHEILA GREENBAUM IMMEDIATE PAST PRESIDENT	5 00	Х	Х			0	C	0				
JOHN KALISHMAN VP FINANCE/TREASURER	10 00	Х	X			0	C	0				
RANDALL GREEN VP AT LARGE/SECRETARY	10 00	Х	Х			0	C	0				
LISA GRAIVIER-BARNES BOARD DIRECTOR	5 00	X				0	C	0				
PATRICIA CROUGHAN BOARD DIRECTOR	5 00	Х				0	C	0				
JONATHAN DEUTSCH BOARD DIRECTOR	5 00	Х				0	C	0				
NANCY GREEN BOARD DIRECTOR	5 00	Х				0	C	0				
THOMAS R GREEN BOARD DIRECTOR	5 00	Х				0	C	0				
KENNETH KRANZBERG BOARD DIRECTOR	5 00	X				0	C	0				
JAYNE LANGSAM BOARD DIRECTOR	5 00	Х				0	C	0				
MARK LEVIN BOARD DIRECTOR	5 00	Х				0	C	0				
MICHAEL LITWACK BOARD DIRECTOR	5 00	X				0	C	0				
BILL MILLER BOARD DIRECTOR	5 00	X				0	C	0				
MICHAEL OBERLANDER BOARD DIRECTOR	5 00	Х				0	C	0				
DR HESCHEL RASKAS BOARD DIRECTOR	5 00	Х				0	C	0				
RICK RECHT BOARD DIRECTOR	5 00	Х				0	C	0				
DAVID ROBERTS BOARD DIRECTOR	5 00	X				0	C	0				
RONALD RUBIN BOARD DIRECTOR	5 00	X				0	C	0				
JAY SARVER BOARD DIRECTOR	5 00	Х				0	C	0				
KAREN SHER BOARD DIRECTOR	5 00	Х				0	C	0				

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

ASST EXEC VP/DEVLPMT DIR

Compensated Employees, a	na maepena	uent (JOHU	acı	LOIS	5				
(A) Name and Title	(B) A verage hours		(C) sition (check all that apply)			Ш		(D) Reportable compensation	(E) Reportable compensation	(F) Estimated amount of other
	per week	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	from the organization (W- 2/1099-MISC)	from related organizations (W- 2/1099- MISC)	compensation from the organization and related organizations
RABBI JEFFREY STIFFMAN BOARD DIRECTOR	5 00	×						0	0	0
JANE ROODMAN WEISS BOARD DIRECTOR	5 00	X						0	0	0
LEE WIELANSKY BOARD DIRECTOR	5 00	Х						0	0	0
GREG YAWITZ BOARD DIRECTOR	5 00	Х						0	0	0
MARK ZORENSKY BOARD DIRECTOR	5 00	X						0	0	0
BARRY ROSENBERG ASSOC EXECUTIVE VP	40 00			Х				272,867	0	76,503
JUDITH M ABRAMS ASSOC EXEC VP, CAO	40 00				X			192,774	0	27,101
STEPHEN COHEN ASST EXECUTIVE VP	40 00				Х			155,247	0	20,658
RUTH LEDERMAN ASST EXEC VP/DEVLPMT DIR	40 00					X		136,391	0	15,929

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
PROVISION FOR BAD DEBT	159,000			159,000
MISSIONS	65,713	4,931	3,885	56,897
AWARDS AND GRANTS	31,292	20,791	9,096	1,405
BOOKS, PUBL, & SUBSCRIP	25,627	15,743	6,084	3,800
MISCELLANEOUS	14,639	6,623	8,016	

Form 990, Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States (c) IRC Code section (a) Name and address of (b) EIN (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization if applicable grant cash valuation non-cash assistance or assistance (book, FMV, appraisal, or government assistance other) 43-0887584 501(C)(3) N/A TORAH PREP SCHOOL8659 0 N/A EDUCATION OLIVE BLVD PROGRAM 157,592 ST LOUIS, MO 63132 ASSISTANCE TORAH MITZION KOLLEL 56-2318455 501(C)(3) 0 N/A N/A GENERAL SUPPORT 7925 DELMAR DR 25,000 ST LOUIS, MO 63130 501(C)(3) N/A N/A CONGREGATION UNITED HEBREW 43-0743415 CONGREGATON13788 PROGRAMS 10,420 CONWAY RD ST LOUIS, MO 63141 UNITED WAY OF GREATER 43-0714167 501(C)(3) 0 N/A N/A GENERAL SUPPORT ST LOUISPO BOX 14507 37,050 ST LOUIS, MO 63178 N/A UNIVERSITY OF 43-6100211 501(C)(3) 0 N/A GENERAL SUPPORT MISSOURI-ST LOUISONE 25,000 UNIVERSITY BLVD ST LOUIS, MO 63121 KIDS PLACE AT 43-0744071 501(C)(3) 0 N/A N/A GENERAL SUPPORT UNIVERSITY UNITED 15,000 METHODIST CHURCH6901 WASHINGTON AVE ST LOUIS, MO 63130 501(C)(3) N/A WASHINGTON UNIVERSITY 43-0653611 0 N/A GENERAL SUPPORT 660 S EUCLID AVE 43,950 ST LOUIS, MO 63110 43-1587517 501(C)(3) N/A WELLNESS COMMUNITY OF N/A GENERAL SUPPORT ST LOUIS1058 OLD DES 11,200 PERES RD ST LOUIS, MO 63131 N/A N/A 43-0824829 501(C)(3) 0 CONGREGATION YOUNG ISRAEL OF ST LOUIS8101 DELMAR BLVD PROGRAMS 35,354 ST LOUIS, MO 63130