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990

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

Open to Public Inspection

Department of the Treasury ▶The organization may have to use a copy of this return to satisfy state reporting requirements Internal Revenue Service For the 2010 calendar year, or tax year beginning and ending D Employer identification number Name of organization Check if applicable St Louis Art Museum Foundation Address change Doing Business As 43-1374479 Number and street (or P O box if mail is not delivered to street address) E Telephone number Name change Initial return (314) 721-0072 Fine Arts Drive City or town, state or country, and ZIP + 4 Terminated Amended return MO 63110-1380 G Gross receipts \$ 58,921,655 Name and address of principal officer Application pending Yes X No H(a) Is this a group return for affiliates? Carolyn Schmidt 1 Fine Arts Drive, St Louis, MO 63110-1380 H(b) Are all affiliates included? X 501(c)(3) If "No," attach a list (see instructions) Tax-exempt status 501(c)) ◀ (insert no) 4947(a)(1) or Website: ► www.slam.org H(c) Group exemption number ▶ X Corporation K Form of organization Trust Association Other > L Year of formation M State of legal domicile 1985 MO Part I Summary Briefly describe the organization's mission or most significant activities: The Foundation is organized for the sole benefit of, and to carry out in every manner the purposes of the Saint Louis Art Museum, Activities & Governance including encouraging philanthropic contributions to support the Museum, one of the nation's leading comprehensive art museums Check this box | If the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) Number of independent voting members of the governing body (Part VI, line 1b) 4 2 0 Total number of individuals employed in calendar year 2010 (Part V, line 2a) . . . 5 Total number of volunteers (estimate if necessary) . 6 0 Total unrelated business revenue from Part VIII, column (C), line 12. 7a Net unrelated business taxable income from Form 990-T, line 34 **Current Year** Contributions and grants (Part VIII, line 1h) 7.560.544 17.305.324 Program service revenue (Partryltt (The 20) 9 827,803 746,017 Investment income (Part VIII column) 10 4,249,270 2,277,272 Other revenue (Part VIII, cellumn (A), lines 5, 6d, 8c, 92, 10c, and 11e) . Total revenue—add lines 8 through 11 (must equal Part VII) column (A), line 12) 11 259,003 68,687 12 12.896.620 20.397.300 13 Grants and similar amounts paid (Part IX, column (A) Tines 1-3) Benefits paid to or for members (Part X; column (A), line 4) Salaries, other compensation, employee seneitis (Part X, column 14 0 0 15 X-celumn (A), lines 5-10). 0 0 Professional fundraising fees (Part IX, column (A), line 11e) 16a Total fundraising expenses (Part IX, column (D), line 25) ▶ 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24f) 2,605,686 33,833,834 18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25). 2,605,686 33.833.834 Revenue less expenses. Subtract line 18 from line 12 19 10.290.934 -13.436.534 **Beginning of Current Year** End of Year Total assets (Part X, line 16) 198,809,969 194,935,204 20 Total liabilities (Part X, line 26) 46,244,958 46,292,104 Net assets or fund balances Subtract line 21 from line 20 152,565,011 148,643,100 Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge Sign Date Here Type or print name and title Print/Type preparer's name Preparer's signature Date PTIN **O**Paid self-employed SELF-PREPARED RETURN Preparer's Firm's name Firm's EIN **Use Only** Firm's address Phone no May the IRS discuss this return with the preparer shown above? (see instructions). Yes

Form 990 (2010)

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes,"	١.		
2	complete Schedule A	1	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to	2	 ^	
	candidates for public office? If "Yes," complete Schedule C, Part I	3		x
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h)			
	election in effect during the tax year? If "Yes," complete Schedule C, Part II	4	Х	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues,			
	assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C,			
_	Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have			
	the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	 		 ^
-	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		x
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes,"			
	complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part			
	X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes,"			
	complete Schedule D, Part IV	9		X
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or			
11	quasi-endowments? If "Yes," complete Schedule D, Part V. If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI,	10	Х	
• •	VII, VIII, IX, or X as applicable	1		
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete	11a	- '	х
	Schedule D, Part VI	<u> </u>		
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		Х
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more			
	of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.	11c		_X
a	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			V
_	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.	11d 11e	х	X
f	Did the organization report arrandom for other habilities in Part X, line 25 in Pes, Complete Schedule D, Part X. Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	Tie	$\stackrel{\frown}{}$	
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		Х
12a	Did the organization obtain separate, independent audited financial statements for the tax year? <i>If</i> "Yes," <i>complete</i>			
	Schedule D, Parts XI, XII, and XIII	12a		Х
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes,"			
	and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional .	12b	Х	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		<u>X</u>
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		_X_
D	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 "Yes," complete Schedule F, Parts I and IV</i> .	446		~
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any	14b		<u>X</u>
	organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		х
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance			
	to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services			
	on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions).	17		Χ
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on			
40	Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	X	
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	ا ۱	ļ	v
202	If "Yes," complete Schedule G, Part III	19 20a		X
	If "Yes" to line 20a, did the organization attach its audited financial statements to this return? Note. Some	ZUa		
~	Form 990 filers that operate one or more hospitals must attach audited financial statements (see instructions).	20b	ļ	

Par	t IV . Checklist of Required Schedules (continued)			-9-
			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations			
	In the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the			ĺ
	United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the	1		
	organization's current and former officers, directors, trustees, key employees, and highest compensated			ł
	employees? If "Yes," complete Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than			
	\$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines			
	24b through 24d and complete Schedule K. If "No," go to line 25	24a	Х	
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		Х
С	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		X
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction	24d		<u> </u>
ZJa	with a disqualified person during the year? If "Yes," complete Schedule L, Part I	250		
h	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a	25a		X
b	prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or			
	990-EZ? If "Yes," complete Schedule L, Part I	25b		х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or	250		
	disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee,	-		
	substantial contributor, or a grant selection committee member, or to a person related to such an individual?			
	If "Yes," complete Schedule L, Part III	27		х
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		X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete			
	Schedule L, Part IV	28b		Х
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)			
	was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	X	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified			
	conservation contributions? If "Yes," complete Schedule M	30		_X
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N,</i>	ا ا		.,
22	Part I	31		<u> </u>
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II			v
33	If "Yes," complete Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	32		<u>X</u>
00	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II,		\dashv	
•	III, IV, and V, line 1	34	х	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)?	35		Х
а	Did the organization receive any payment from or engage in any transaction with a			
	controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R,			
	Part V, line 2			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related		l	
	organization? If "Yes," complete Schedule R, Part V, line 2	36	Х	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part		ļ	
	VI	37		Х
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and			
	19? Note. All Form 990 filers are required to complete Schedule O	38	X	
		Corr	aan ,	2040

Form 9	990 (2010) St Louis Art Museum Foundation 43-137	4479	F	age \$
Pai	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response to any question in this Part V			
•			Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	4		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable		١	L
	gaming (gambling) winnings to prize winners?	1c	N/	Α
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		Ì	1
	Statements, filed for the calendar year ending with or within the year covered by this return . 2a			l
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		<u> </u>
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file. (see instructions)	_		١.,
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	├	X
b	If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O.	3b	<u> </u>	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority			
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	40		x
h	If "Yes," enter the name of the foreign country:	<u>4a</u>		 ^
b	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts	1		1
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		x
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? .	5b		X
c	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			t –
	organization solicit any contributions that were not tax deductible?	6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			
	gifts were not tax deductible?	6b		}
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 for goods	1		1
	and services provided to the payor?	7a	X	<u> </u>
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	X	
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was			ĺ
	required to file Form 8282?	7c	ļ	X
d	If "Yes," indicate the number of Forms 8282 filed during the year		ļ	
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	<u> </u>	X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	<u> </u>	X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	N/	A
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	N/	A .
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting] .	
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8	N/	Δ
9	Sponsoring organizations maintaining donor advised funds.	<u>-</u>	'''	-
a	Did the organization make any taxable distributions under section 4966?	9a	N/	A
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	N/	
10	Section 501(c)(7) organizations. Enter	1	*	ļ
а	Initiation fees and capital contributions included on Part VIII, line 12	3		
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b N/A		5.	* .5
11	Section 501(c)(12) organizations. Enter	1 .	3.5	-
а	Gross income from members or shareholders	1 .	7	
b	Gross income from other sources (Do not net amounts due or paid to other sources	1	1	١.
	against amounts due or received from them.)	ŀ		; ;
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	N/	A
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b N/A		. ~ 🌋	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	<u> : : </u>	``	
а	Is the organization licensed to issue qualified health plans in more than one state?	13a	N/	Α
	Note. See the instructions for additional information the organization must report on Schedule O	(g) <	ļ ,	· -
b	Enter the amount of reserves the organization is required to maintain by the states in which	. *		,
	the organization is licensed to issue qualified health plans	1	}	ļ: `
C	Enter the amount of reserves on hand	↓	_	_
14a	Did the organization receive any payments for indoor tanning services during the tay year?	142	I	ΙY

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

14b

20

orm 9	990 (2010) St. Louis Art Museum Foundation 43	3-1374479	P	age 6
Pa	rt VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b be	elow, and		
	for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or cf	nanges in		
	Schedule O. See instructions.		_	
	Check if Schedule O contains a response to any question in this Part VI.		l	X
Sect	tion A. Governing Body and Management			-
			Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year 1a	3	7	
b	Enter the number of voting members included in line 1a, above, who are independent 1b	2	, ".	
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	Ī	Х
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	ı	Х
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?.	. 4		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	. 5		Х
6	Does the organization have members or stockholders?	6	Х	
7a	Does the organization have members, stockholders, or other persons who may elect one or more members			
	of the governing body?	7a	X	
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		Х
8	Did the organization contemporaneously document the meetings held or written actions undertaken during		. "	
	the year by the following	.	۰.	
а	The governing body?	8a	Х	
b	Each committee with authority to act on behalf of the governing body?	. 8b	X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached			
	at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	. 9		<u> </u>
Sect	ion B. Policies (This Section B requests information about policies not required by the Internal Revenu	ıe Code.)		
			Yes	No
10a		. 10a		_X_
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters,		ł	
	affiliates, and branches to ensure their operations are consistent with those of the organization?	. 10b		
11a	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the			
_	form?	11a	<u> </u>	
	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			
	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	<u> </u>	
D	Are officers, directors or trustees, and key employees required to disclose annually interests that could give			
_	rise to conflicts?	. 12b	X	
С	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes,"	1		
40	describe in Schedule O how this is done		X 	
13	Does the organization have a written whistleblower policy?		X	
14	Does the organization have a written document retention and destruction policy?		X	
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.		3 5 × ×	
a b	The organization's CEO, Executive Director, or top management official.		X	
D		1 2	X /	
16a	If "Yes" to line 15a or 15b, describe the process in Schedule O (See instructions.)	. [3 store]		5
IVa		1 1	,54°-2	~
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate	16a	. t 3.	<u> </u>
	its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard		. š.	•
	the organization's exempt status with respect to such arrangements?	"	<u> </u>	
Sect	ion C. Disclosure	. 16b		
17	List the states with which a copy of this Form 990 is required to be filed IL			
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)			
	available for public inspection. Indicate how you make these available. Check all that apply	is only)		
	Own website Another's website X Upon request			
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of in	toroet		
	policy and financial statements available to the public	101691		

State the name, physical address, and telephone number of the person who possesses the books and records of the organization Carolyn Schmidt 314 721 0072

1 Fine Arts Drive, St Louis, MO 63110-1380

orm 990 (2010)	St	Louis Art Museur	n Foundation

43-1374479

Castian A	Officers Diseases Truckers Key Freelesses and Wildred Consent of U.S.	• •	
	Check if Schedule O contains a response to any question in this Part VII		
	Employees, and Independent Contractors		
Part VII	Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated		•

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

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- · List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations List persons in the following order individual trustees or directors, institutional trustees, officers; key employees, highest compensated employees; and former such persons

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

										
(A)	(B)	Posit	tion (C) k all	that ap	(vlac	(D)	(E)	(F)
Name and Title	Average hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	_	Officer	Key employee		_	Reportable compensation from the organization (W-2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
(1) J Patrick Mulcahy Treasurer	2	x		x				0	0	0
(2) John Weil Vice President	5			x				0		. 0
(3) Brent Benjamın President and Director of Museum	45.	x	_	x	x			0	455,168	184,411
(4) Carolyn Schmidt Controller and Deputy Director of Museum	45			x	x			0	193,537	29,210
(5) David Linenbroker Secretary	1			x			-	0	0	0
(6) Sheila Manion <u>Director of Development and Campaign</u> (7) Linda Thomas	40.		ļ		x			0	96,584	15,213
Asst Director Exhibitions	40				х			0	138,641	23,872
(8) William Appleton Asst. Director Education	40				х			0	117,954	17,346
(9) Andrew Walker Asst Director Curatorial	40.				х			0	117,123	17,688
(10) Jennifer Stoffel Director of External Affairs	40				х			0	103,305	16,450
(11) Paul Haner Director of Conservation	40.					х		0	105,097	19,911
(12) James Burke Former Director of Art Museum	0.						х	0	84,898	0
(13)										
(14)										
(15)										
(16)		_								
										- 000

Pa	ert VII Section A. Officers, Directors, Ti	rustees, Key Eı	nplo	yee	s, a	nd	High	est	Compensated	Employee	s (co	ntınu	ed)	
	(A) Name and title	(B) Average	Posit	on (d	chec		that ap		(D) Reportable	(E) Reportat	ole	(F) Estimated		
		hours per week (describe hours for related organizations in Schedule O)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	from related organizations (W-2/1099-MIS		con f org ar	mount other other on the other of the other othe	tion e ion ed
<u>(17)</u>														
(18)														
(19)									- 11					
(20)										-		_	<u> </u>	
(21)														
(22)														
(23)														
(24)														
(25)														
(26)														
(27)								·						
(28)														
1b c	Sub-total			•			•	▼ ▼	0	1,412	,307		324	,101 0
	Total (add lines 1b and 1c)							▶	0 ed more than \$	1,412 100,000 in	,307		324	,101
	reportable compensation from the organization	n ▶		i	8				- -				Yes	No
3	Did the organization list any former officer, diremployee on line 1a? If "Yes," complete Schee					ee, 	or hi	ghe	est compensated	d 		3	х	
4	For any individual listed on line 1a, is the sum the organization and related organizations gre individual											4	x	
5	Did any person listed on line 1a receive or acc for services rendered to the organization? If "\									idividual	ľ	5	^	x
	ion B. Independent Contractors													
1	Complete this table for your five highest components of the organization.	ensated indepe	ndeni	t co	ntra	cto	rs tha	t re	ceived more tha	an \$100,00	0 of			
	(A) Name and business addr	ress							(B) Description of sen	vices	Co	(C) ompen		
														0
														0 0
														0
	T-1-1						\Box							0
2	Total number of independent contractors (inclumore than \$100,000 in compensation from the	-	nted f ►	to th	ose	e lis	ted a 0	bov	re) who received	1				
				_		<u> </u>			· · · · · · · · · · · · · · · · · · ·	<u>_</u> _		Form	990 (2010)

Dos	4 3 7 1111	Ctatament of Devenue	diradion_					43-1374-	rage 3
•	t VIII	Statement of Revenue				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns .		1a	0				
gra	Ь	Membership dues	[1b	1,361,640				
S, e	С	Fundraising events		1c	558,899				
giff	d	Related organizations.		1d	0				
ž, <u>E</u>	e	Government grants (contribution	ns) .	1e	0				
tion	f	All other contributions, gifts, gra	nts, and						
ig ag		similar amounts not included ab	ove	1f	15,384,785				
Contributions, gifts, and other similar am	g	Noncash contributions included in I	ines 1a-1f	\$	161,784				
ည်း	h	Total. Add lines 1a-1f			. ▶	17,305,324			
e					Business Code				
ven	2a	Membership Equal Value			900099	741,002	741,002		
Ŗ	b	Membership program - events	900099	5,015	5,015				
je S	С					0			
Sen	d					0			
E :	е			F		0			
Program Service Revenue	f	All other program service revenue	ue	Γ		0			
<u>_</u> _	g	Total. Add lines 2a-2f			•	746,017			
	3	Investment income (including di	vidends, inter	rest	, and				
		other similar amounts) .			.	1,871,695			1,871,695
	4	Income from investment of tax-e	exempt bond	prod	ceeds. ▶	0			
	5	Royalties				0			
		•	(ı) Real		(ii) Personal	_			
	6a	Gross Rents				Ī			
	b	Less rental expenses							
	C	Rental income or (loss) .		0	0				
	d	Net rental income or (loss)			•	o		İ	
	7a	Gross amount from sales of	(i) Securities	; T	(II) Other		,		
		assets other than inventory .	38,929,9	$\overline{}$	0				
	ь	Less cost or other basis	00,020,0	<u> </u>	·····				
		and sales expenses	38,524,3	355	o				
	c	Gain or (loss)	405,5		<u> </u>	j			
	d			_		405,577			405,577
		, in the contract of the contr		Ė		100(011			100,011
Other Revenue	8a	Gross income from fundraising				i			
/er		events (not including \$	558.899						
Re		of contributions reported on line							
е		See Part IV, line 18	•	a	54,000				
チ	ь	Less direct expenses		ь	0				
		Net income or (loss) from fundra			•	54.000	1		54,000
		Gross income from gaming activ	•	Γ					
		See Part IV, line 19		a	ol				
	ь	Less: direct expenses			0		l		
		Net income or (loss) from gamin				o			
		Gross sales of inventory, less	9	Γ					
		returns and allowances		a	0		l		
	b	Less: cost of goods sold			0				
		Net income or (loss) from sales		_	▶	ol	1		
		Miscellaneous Revenue			Business Code				
	11a	Litigation Settlements from Brok	erage Hous	1	541100	12,767			12,767
	b			Γ		0			
	С			Γ		0			
	d	All other revenue				1,920	1,920		0
	е	Total. Add lines 11a-11d.		_	▶	14,687			
	12	Total revenue. See instructions	<u></u>			20,397,300	747,937	0	2,344,039

Part IX Statement of Functional Expenses

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

	All other organizations must complete column (A) but are not requir	(D)		
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and		ехрепаеа	general expenses	expenses
•	organizations in the U.S. See Part IV, line 21 .	o			•
2	Grants and other assistance to individuals in				
_	the U.S See Part IV, line 22	_			
3	Grants and other assistance to governments,	0	-		
3					
	organizations, and individuals outside the				
	U.S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0	· · · · · · · · · · · · · · · · · · ·		
5	Compensation of current officers, directors,				
	trustees, and key employees	0			
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	0			
8	Pension plan contributions (include section 401(k)				
	and section 403(b) employer contributions)	0			
9	Other employee benefits	0	-		_
10	Payroll taxes	0			
11	Fees for services (non-employees):				
а	Management	o			
b	Legal	12,765		12,765	
c	Accounting	0		12,700	
ď	Lobbying	40,500		40,500	
e	Professional fundraising services See Part IV, line 17	70,500		+0,500	-· · · · · · · · · · · · · · · · · · ·
f	Investment management fees	55,908		55,908	<u> </u>
g	Other	33,300		33,300	
12		0			
13		0			
14			<u> </u>		
	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	0			
18	Payments of travel or entertainment expenses	_ [
	for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings.	0			
20	Interest	0			
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	0	0	0	0
23	Insurance	10,890		10,890	
24	Other expenses. Itemize expenses not covered				
	above (List miscellaneous expenses in line 24f If			j	
	line 24f amount exceeds 10% of line 25, column				
	(A) amount, list line 24f expenses on Schedule O.)				
а	Program Expenses to the Saint Louis Art Museum	33,666,857	33,666,857		
b	Write off uncollectable pledges for Expansion	11,554		11,554	0
C	other	80		80	
d	bond issuance costs	35,280		35,280	
e		0		25,236	
f	All other expenses	0			***-
25	Total functional expenses. Add lines 1 through 24f	33,833,834	33,666,857	166,977	0
26	Joint costs. Check here ▶ if following	22,000,001	22,000,001	100,077	
20	SOP 98-2 (ASC 958-720) Complete this line				
	only if the organization reported in column				
	(B) joint costs from a combined educational				
	campaign and fundraising solicitation				

_	n 990 (2	, 31 33 33 37 37 37 37 37 37 37 37 37 37 37		4	3-1374479 Page 11
	art X	Balance Sheet	(A) Beginning of year		(B) End of year
	1	Cash—non-interest-bearing		1	
	2	Savings and temporary cash investments	108,801,171	2	77,932,342
	3	Pledges and grants receivable, net	15,641,135		20,198,836
	4	Accounts receivable, net	0	-	12,500
	5	Receivables from current and former officers, directors, trustees, key			
		employees, and highest compensated employees Complete Part II of			
		Schedule L	0	5	
	6	Receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
		employers and sponsoring organizations of section 501(c)(9) voluntary			
ţ		employees' beneficiary organizations (see instructions)	0	6	
Assets	7	Notes and loans receivable, net	0		0
Ą	8	Inventories for sale or use		8	
	9	Prepaid expenses and deferred charges		9	
	10a	Land, buildings, and equipment cost or			
		other basis Complete Part VI of Schedule D 10a 0			
	Ь	Less accumulated depreciation 10b 0	0	10c	0
	11	Investments—publicly traded securities	73,492,622		95,869,446
	12	Investments—other securities. See Part IV, line 11	47,973		43,750
	13	Investments—program-related. See Part IV, line 11	0		43,730
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	827,068		878,330
	16	Total assets. Add lines 1 through 15 (must equal line 34)	198,809,969		194,935,204
	17	Accounts payable and accrued expenses	52,283		95,760
	18	Grants payable	32,203	18	93,700
	19	Deferred revenue		19	
	20	Tax-exempt bond liabilities	46,042,759	$\overline{}$	46,002,988
Ø	21	Escrow or custodial account liability. Complete Part IV of Schedule D	40,042,738	21	40,002,900
Liabilities	22	Payables to current and former officers, directors, trustees, key			
Ē		employees, highest compensated employees, and disqualified			
Ľ		persons. Complete Part II of Schedule L		22	
	23	Secured mortgages and notes payable to unrelated third parties .	- 0		0
	24	Unsecured notes and loans payable to unrelated third parties .	0	24	0
	25	Other liabilities, Complete Part Y of Schodulo D	149,916		193,356
	26	Total liabilities. Add lines 17 through 25	46,244,958		
		Organizations that follow SFAS 117, check here	40,244,930	20	46,292,104
Ses	ŀ	complete lines 27 through 29, and lines 33 and 34.			
<u>a</u>	27	Unrestricted net assets		27	
B	28	Temporarily restricted net assets		28	
Б	29	Permanently restricted net assets		29	
Net Assets or Fund Balances		Organizations that do not follow SFAS 117, check here ► X and complete lines 30 through 34.			
ş	30	Capital stock or trust principal, or current funds		30	
3 S6	31	Paid-in or capital surplus, or land, building, or equipment fund	74,199,848	31	E0 EE2 044
Ä	32	Retained earnings, endowment, accumulated income, or other funds			59,552,044 89,091,056
Ne	33	Total net assets or fund balances	78,365,163 152,565,011		89,091,056
	34	Total liabilities and net assets/fund balances	152,565,011		148,643,100
	, J4	rotal liabilities and fiet assets/fully balances	198,809,969	34	194,935,204

Form	990 (2010) St. Louis Art Museum Foundation	43-1	374479	Pa	ige 12
Par	t XI Reconciliation of Net Assets	-			
	Check if Schedule O contains a response to any question in this Part XI.				X
	•				
1	Total revenue (must equal Part VIII, column (A), line 12)	1	2	<mark>ე,39</mark> 7	<mark>7,300</mark>
2	Total expenses (must equal Part IX, column (A), line 25)	2	3	3,833	3,834
3	Revenue less expenses. Subtract line 2 from line 1	3	-1:	3,436	6,534
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	15:	2,565	5,011
5	Other changes in net assets or fund balances (explain in Schedule O)	5			4,623
6	Net assets or fund balances at end of year Combine lines 3, 4, and 5 (must equal Part X, line 33,				
	column (B))	6	148	3.643	3,100
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII			. 1	
				Yes	No
1	Accounting method used to prepare the Form 990. Cash X Accrual Other			-	
-	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?.		2a		x
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	 ^
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight		120	<u>^</u>	
•	the audit, review, or compilation of its financial statements and selection of an independent accountant?.		2c	х	
	If the organization changed either its oversight process or selection process during the tax year, explain in		20	$\stackrel{\wedge}{\rightarrow}$	
	Schedule O	•			
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were		1		1
u	issued on a separate basis, consolidated basis, or both:				
	Separate basis Consolidated basis X Both consolidated and separate basis		1 1	- 1	1

3a

3b

Form **990** (2010)

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in

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.

the Single Audit Act and OMB Circular A-133?

SCHEDULE A (Form 990 or 990-EZ)

Public Charity Status and Public Support

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

2010
Open to Public

OMB No 1545-0047

Department of the Treasury Inspection ▶ Attach to Form 990 or Form 990-EZ. ► See separate instructions Internal Revenue Service Name of the organization Employer identification number 43-1374479 St. Louis Art Museum Foundation Reason for Public Charity Status (All organizations must complete this part) See instructions The organization is not a private foundation because it is (For lines 1 through 11, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i), 1 2 A school described in section 170(b)(1)(A)(ii). (Attach Schedule E) 3 A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). A A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state. _____ An organization operated for the benefit of a college or university owned or operated by a governmental unit described 5 in section 170(b)(1)(A)(iv). (Complete Part II) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 6 An organization that normally receives a substantial part of its support from a governmental unit or from the general public 7 described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) 8 9 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions-subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Complete Part III.) 10 An organization organized and operated exclusively to test for public safety. See section 509(a)(4). An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the 11 purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h. b Type II c Type III-Functionally integrated By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disgualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box Since August 17, 2006, has the organization accepted any gift or contribution from any of the g following persons? Yes A person who directly or indirectly controls, either alone or together with persons described in (ii) No and (iii) below, the governing body of the supported organization? 11g(i) A family member of a person described in (i) above?. 11g(II) (iii) A 35% controlled entity of a person described in (i) or (ii) above? 11g(iii) Provide the following information about the supported organization(s) h (II) EIN (iii) Type of organization (iv) Is the organization (i) Name of supported (v) Did you notify (vi) Is the (vii) Amount of organization (described on lines 1-9 in col (i) listed in your the organization in organization in col support above or IRC section. governing document? col (i) of your (i) organized in the support? (see instructions)) US? Yes Yes No Yes (A) (B) (C) 0 (D) 0 (E)

0

0

Total

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

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

	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and					•	
	membership fees received. (Do not						
	include any "unusual grants ")	23,716,014	25,995,594	11,428,427	7,560,544	17,305,324	86,005,903
2	Tax revenues levied for the organization's	==,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		11,120,127	1,000,011	17,000,024	00,000,000
	benefit and either paid to or expended on	ĺ			i		
	ıts behalf	اه	o	ol	ol	0	О
3	The value of services or facilities						
	furnished by a governmental unit to the	l i					
	organization without charge	ا ا	o	o	ام	,	o
4	Total. Add lines 1 through 3	23,716,014	25,995,594	11,428,427	7,560,544	17,305,324	86,005,903
5	The portion of total contributions by each	20,710,014	20,000,004	11,420,427	7,300,344	17,303,324	80,005,905
•	person (other than a governmental unit						
	or publicly supported organization)						
	included on line 1 that exceeds 2%						
	of the amount shown on line 11,						
			ŀ				40 004 000
6	column (f)						43,301,303
	ion B. Total Support						42,704,600
		(-) 0000 T		() 0000 T	100000		
	ndar year (or fiscal year beginning in) 🕨	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
7	Amounts from line 4	23,716,014	25,995,594	11,428,427	7,560,544	17,305,324	86,005,903
8	Gross income from interest, dividends,						
	payments received on securities loans,	İ				j	
	rents, royalties and income from similar	1		ľ			
	sources	2,449,443	3,961,156	3,287,725	2,013,013	1,871,695	13,583,032
9	Net income from unrelated business	1					
	activities, whether or not the business is						
	regularly carried on	0	0	0	0	o	0
10	Other income Do not include gain or						
	loss from the sale of capital assets		ľ				
	(Explain in Part IV)	0	24,842	178,728	259,003	14,687	477,260
11	Total support. Add lines 7 through 10.						100,066,195
12	Gross receipts from related activities, etc. (s	ee instructions)				12	4,137,346
13	First five years. If the Form 990 is for the or	ganization's fire	st, second, thir	d, fourth, or fift	h tax year as a	section 501(c)(3)
	organization, check this box and stop here .				=		Û′.⊳∏
Sect	ion C. Computation of Public Support	Percentage		·		· · · ·	
14	Public support percentage for 2010 (line 6, c		ed by line 11 c	column (fl)	· · ·	14	42.68%
15	Public support percentage from 2009 Sched			olullii (i))		15	62 09%
16a				ine 13 and line	· · · L	or more, che	02 09 /6
	and stop here . The organization qualifies as	a nublicly sun	onted organiz	ation			
b	33 1/3% support test–2009. If the organization						▶X
_	box and stop here . The organization qualifie	se as a publicly	ck a box on mi	e 13 01 10a, ar anization			, check this
47.							· •
17a	10%-facts-and-circumstances test–2010.						
	is 10% or more, and if the organization meet	is the "facts-and	d-circumstance	es" test, check	this box and st	op here. Expla	ain in
	Part IV how the organization meets the "fact	s-and-circumsta	ances" test. Th	e organization	qualifies as a	publicly suppor	rted
							▶∐
þ	10%-facts-and-circumstances test-2009.	If the organizati	on did not che	ck a box on line	e 13, 16a, 16b,	, or 17a, and lir	ne
	15 is 10% or more, and if the organization m	eets the "facts-	and-circumsta	nces" test, che	ck this box and	d stop here. E	xplain in
	Part IV how the organization meets the "fact		ances" test Th	e organization	qualifies as a j	publicly	
	supported organization						. ▶□
18	Private foundation. If the organization did n	ot check a box	on line 13, 16a	a, 16b, 17a ,or	17b, check this	s box and see	
	instructions						. ▶□

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

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II.)

	ii the organization fails to quality un	ider the tests	ilsted below,	please comp	ete Part II)		
	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in) ▶ │	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
1	Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants")	0					0
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	0					0
3	Gross receipts from activities that are not an unrelated trade or business under section 513						0
4	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf	0					0
5	The value of services or facilities furnished by a governmental unit to the organization without charge	0					0
6 7a	Total. Add lines 1 through 5 Amounts included on lines 1, 2, and 3 received from disqualified persons	0	0	0	0	0	0
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b	0	0	0	0	0	0
8	Public support (Subtract line 7c from line 6)		,** .			, , , , , , , , , , , , , , , , , , ,	0
Sec	tion B. Total Support						<u> </u>
	ndar year (or fiscal year beginning in)	(a) 2006	(b) 2007	(c) 2008	(d) 2009	(e) 2010	(f) Total
9	Amounts from line 6	0	0	0	0	0	0
10a	Gross income from interest, dividends,						
	payments received on securities loans,	1					•
L	rents, royalties and income from similar sources						0
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	-			1		0
_	Add lines 10a and 10b	0	0	0	0	0	0
11	Net income from unrelated business						<u> </u>
••	activities not included in line 10b, whether or not the business is regularly carried on						0
12	Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	0					0
13	Total support. (Add lines 9, 10c, 11, and 12)	0	0	0	0	0	0
14	First five years. If the Form 990 is for the organization organization, check this box and stop here						▶□
Sec	tion C. Computation of Public Support F	Percentage					
15 16	Public support percentage for 2010 (line 8, column Public support percentage from 2009 Schedule A, F	(f) divided by line	e 13, column (f))			15	0.00% 0.00%
	tion D. Computation of Investment Incomp		ae				0 0070
17	Investment income percentage for 2010 (line 10c, c			ımn (f))		17	0.00%
18	Investment income percentage from 2009 Schedule		•	.,,	l	18	0 00%
19a	33 1/3% support tests-2010. If the organization did not more than 33 1/3%, check this box and stop he	d not check the b	oox on line 14, a			and line 17 is	▶ 🗌
b	33 1/3% support tests-2009. If the organization did line 18 is not more than 33 1/3%, check this box and						▶□
30 °	Private foundation. If the organization did not chec	=		•		•	

Schedule A (Form 990 or 990-EZ) 2010 St Louis Art Museum Foundation	43-1374479	Page 4
Part IV Supplemental Information. Complete this part to provide the explanations requested Part II, line 17a or 17b; and Part III, line 12 Also complete this part for any additional instructions).	uired by Part II, lin	e 10;
	-	
Part II Line 10 Other income is due to litigation receipts from brokerage houses involved		
ın ınvestment transactions		
•••••••••••••••••••••••••••••••••••••••		
•		
•		
	• • • • • • • • • • • • • • • • • • • •	
	• • • • • • • • • • • • • • • • • • • •	
•		

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

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

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

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

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35a (Proxy Tax), then

• S	Section 501(c)(4), (5), or (6) o	rganizations Complete Part III.			
Nam	e of organization			Employ	er identification number
	Louis Art Museum Founda				43-1374479
Pa		he organization is exempt und			organization.
1		the organization's direct and indirect			
2				> \$	
3	Volunteer hours				
		he organization is exempt und			
1		excise tax incurred by the organizat			
2		excise tax incurred by organization			
3		ed a section 4955 tax, did it file Forn	n 4720 for this ye	ar? .	. Yes No
	Was a correction made?				Yes No
	If "Yes," describe in Part				
Pa		he organization is exempt und			<u>(c)(3).</u>
1	•	y expended by the filing organization		exempt function	
_					
2		filing organization's funds contribute			
_		unction activities		•	
3	line 17b	penditures Add lines 1 and 2. Enter		m 1120-POL,	_
			• • •	. > \$	0
4		n file Form 1120-POL for this year?			Yes No
5	organization made navm	ses and employer identification num ients. For each organization listed, e	iber (EIN) of all se	ection 527 political organiz	ations to which the filing
		ontributions received that were prom			
		d fund or a political action committee			
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from	(e) Amount of political
	(a) Name	(b) Address	(6) 2.114	filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly
					delivered to a separate political organization if
					none, enter -0-
(1)					
(.,	***			C	0
(2)				_	
	· · - · · ·			C	0
(3)		<u> </u>		0	0
				<u> </u>	0
(4)					0
/E\					i
(5)				c	0
(6)					
,		i l		I ^	Ι

Page	2

Sch	edule C (Form 990 or 990-EZ) 2010					Page 2
Р	art II-A Complete if the organiza	ation is exen	npt under section	501(c)(3) and filed	Form 5768 (elec	
	under section 501(h)).				·	
A	Check ▶ If the filing organization	n belongs to a	an affiliated group.			
В	Check ▶ if the filing organization	_	- ·		ply	
	Limits on L	obbying Exp	enditures	· · · · · · · · ·	(a) Filing	(b) Affiliated
	(The term "expenditures			ed.)	organization's totals	group totals
<u>1a</u>	Total lobbying expenditures to influence	e public opinio	n (grass roots lobby	/ing)		0
b	Total lobbying expenditures to influence	e a legislative	body (direct lobbyin	g)		0
C	Total lobbying expenditures (add lines	1a and 1b) .			0	0
d	Other exempt purpose expenditures					0
е	Total exempt purpose expenditures (ad	dd lines 1c and	l 1d)		0	0
f	Lobbying nontaxable amount Enter the	e amount from	the following table i	n both		
	columns.				o	0
	If the amount on line 1e, column (a) or (b)	is: The lob	bying nontaxable am	ount is:		
	Not over \$500,000	20% of	the amount on line 1e			
	Over \$500,000 but not over \$1,000,000		0 plus 15% of the exce			
	Over \$1,000,000 but not over \$1,500,000		0 plus 10% of the exce			
	Over \$1,500,000 but not over \$17,000,000 \$225,000 plus 5% of the excess over \$1,500,000					
\perp	Over \$17,000,000	\$1,000,0				
g	Grassroots nontaxable amount (enter 2				0	0
h	Subtract line 1g from line 1a If zero or				0	0
!	Subtract line 1f from line 1c If zero or li	•			0	0
j	If there is an amount other than zero or			rganization file Form 4	720 reporting	¬
	section 4911 tax for this year?	· · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · ·	·	_ Yes <u>No</u>
	(Some organizations tha	t made a sec		do not have to com		
	Columns bere	ow. See the ir	istructions for line	s 2a through 2f on p	age 4.)	
	Lobb	ying Expendi	tures During 4-Yea	r Averaging Period		
	Calendar year (or fiscal year beginning in)	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) Total
2a	Lobbying nontaxable amount		0	0	0	0
b	Lobbying ceiling amount (150% of line 2a, column(e))					0
_c	Total lobbying expenditures		0	0	0	0
_d	Grassroots nontaxable amount		0	0	0	0
е —	Grassroots ceiling amount (150% of line 2d, column (e))			`		0
f	Grassroots lobbying expenditures					^

Schedule C (Form 990 or 990-EZ) 2010

Schedule C (Form 990 or 990-EZ) 2010

•	(election under section 501(h)).	(6	a)	(b)
		Yes	No	Amount
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?		X	
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?		X	
C	Media advertisements?		Х	
d	Mailings to members, legislators, or the public?		X	
e f	Publications, or published or broadcast statements? Grants to other organizations for lobbying purposes?		X	
g	Grants to other organizations for lobbying purposes? Direct contact with legislators, their staffs, government officials, or a legislative body?	X	-	40,500
_	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		X	40,500
i	Other activities? If "Yes," describe in Part IV		$\frac{\hat{x}}{x}$	
i	Total Add lines 1c through 1i			40,500
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		х	
b	If "Yes," enter the amount of any tax incurred under section 4912			
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912.			
	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5),	or se	ection
	501(c)(6).			
				Yes No
1	Were substantially all (90% or more) dues received nondeductible by members?			1
2				2
3	Did the organization agree to carryover lobbying and political expenditures from the prior year?			3
1	501(c)(6) if BOTH Part III-A, lines 1 and 2 are answered "No" OR if Part III-A, "Yes." Dues, assessments and similar amounts from members		is an	
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of	. }	1	
_	political expenses for which the section 527(f) tax was paid).			
а	Current year	.	2a	
b	Carryover from last year	.	2b	
C	Total	Ī	2c	0
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	
5	Taxable amount of lobbying and political expenditures (see instructions)		5	0
Part	· · · · · · · · · · · · · · · · · · ·			
	plete this part to provide the descriptions required for Part I-A, line 1, Part I-B, line 4; Part I-C, line 5;	and Pa	art II-E	3, line 1i.
	complete this part for any additional information.			
Pan	I-B Line 1(g) In order to keep abreast of current legislation, contracts are held with two			
firms	to summarize and report on legislative matters that relate to or may impact the Foundation.			
Wher	n directed, representatives may engage in discussions about these matters with lawmakers.			
				• • • • • • • • • • • • • • • • • • • •
		-		
				• • • • • • • • • • • • • • • • • • • •

St.	Louis Art Museum Foundation	43-1374479
	Form 990 or 990-EZ) 2010	Page 4
Part IV	Supplemental Information (continued)	
	•	
	•••••	• • • • • • • • • • • • • • • • • • • •
	•••••	· · · · · · · · · · · · · · · · · · ·
	•	
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	•••••••••••••••••••••••••••••••••••••••	
	••••••	• • • • • • • • • • • • • • • • • • • •
• • • • • • • • • •		•••••

SCHEDULE D (Form 990)

Supplemental Financial Statements

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

20**10**

Open to Public Inspection

Department of the Treasury Internal Revenue Service ► Attach to Form 990. ► See separate instructions.

Employer identification number Name of the organization St. Louis Art Museum Foundation 43-1374479 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 1 Total number at end of year 2 Aggregate contributions to (during year) 3 Aggregate grants from (during year). Aggregate value at end of year 5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? Yes Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes 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 education) Preservation of an historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space 2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year Held at the End of the Tax Year 2a Total number of conservation easements 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, and not on a historic structure listed in the National Register. 3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 4 Number of states where property subject to conservation easement is located 5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year 7 8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8. 1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: (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 2 following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Revenues included in Form 990, Part VIII, line 1

Assets included in Form 990, Part X

			~
'n	а	e	Z

Pari	Organizations Maintaining C	ollections of Ar	t, Histori	ical Trea	sures, or (Other	Similar Assets	s (contin	ued)	
3 .	Using the organization's acquisition, ac	cession, and othe	r records,	check a	ny of the follo	owing	that are a signifi	cant		
	use of its collection items (check all that	it apply)								
а	Public exhibition		d 📙	Loan	or exchange	progra	ams			
b	Scholarly research		е 🗌	Other						
С	Preservation for future generation	ns								
4	Provide a description of the organization Part XIV		d explain l	how they	further the c	rganiz	ation's exempt p	ourpose i	n	
5	During the year, did the organization so	olicit or receive do	nations of	art, histo	orical treasur	es. or	other similar			
•	assets to be sold to raise funds rather t							☐ Y	es	No
Part										
	IV, line 9, or reported an amou				ization and	· Ci Cu	100 10101111	550, 1 0		
1a	Is the organization an agent, trustee, co				ntributions of	other	assets not			
	included on Form 990, Part X?					Othici	assets not	☐ Y	es 🗀	No
b	If "Yes," explain the arrangement in Pa	rt XIV and complet	te the folio	 owing tab	le:	•	•	ш.		,
	,			- ·····g ·				Amount		
С	Beginning balance					1	С			0
d	Additions during the year					1	d			
е	Distributions during the year .					1	е			
f	Ending balance					1	f			0
2a	Did the organization include an amount	on Form 990. Pa	rt X. line 2	21? .				T Y	es 🗔	No
b	If "Yes," explain the arrangement in Pai		,					Ш.		
Part	V Endowment Funds. Complete	te if the organiza	tion ansv	vered "Y	es" to Form	1 990,	Part IV, line 10).		
		(a) Current year	(b) Prior		(c) Two years		(d) Three years bac		our years	back
1a	Beginning of year balance	68,066,304		556,326	72,30	5.142				
b	Contributions	865,480		595,527		6,450				
С	Net investment earnings, gains,							1		
	and losses	11,635,328	18.	018,862	-24,18	9,258	·			
d	Grants or scholarships			0		0				***************************************
е	Other expenditures for facilities			I						
	and programs	1,885,994		45,850	4	5,078				
f	Administrative expenses .	66,799		58,561	43	0,930				
g	End of year balance	78,614,319	68,	066,304	49,55	6,326				
2	Provide the estimated percentage of the	e year end balanc	e held as							
а	Board designated or quasi-endowment	>	39%							
b	Permanent endowment	50%								
C.	Term endowment ► 119	• •								
3a	Are there endowment funds not in the p	ossession of the o	organizati	on that a	re held and a	admını	stered for the			
	organization by								Yes	No
	(i) unrelated organizations							3a(i)		X
_	` '							3a(ii)		X
b	If "Yes" to 3a(ii), are the related organiz		•			• •		3b		
4	Describe in Part XIV the intended uses									
Part		nent. See Form	990, Par	t X, line	10.		Т			
	Description of investment	(a) Cost or oth (investme		٠,,	st or other s (other)		Accumulated depreciation	(d) Bo	ook valu	e
1a	Land		0		0					0
b	Buildings		0		0		0			0
C	Leasehold improvements		0		0		0			0
d	Equipment		0		0		0			0
<u>е</u>	Other		0		0		0			0
I ota	. Add lines 1a through 1e. (Column (d) n	nust equal Form 9	90, Part X	(, column	(B), line 10(c).) .	▶			0

Part VII	Investments—Other Securitie	es. See Form 990, Part X,	line 12.	
	(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1) Financi	al derivatives	0		
	-held equity interests	0		
	•	0		
		0		
		0		
(C)		0		
(D)		0		
(E) (F)		0		
(G)		0		
(H)		O		
<u>(l)</u>		0		
	(b) must equal Form 990, Part X, col (B) line 12)	0		
Part VIII	Investments—Program Relat	ed. See Form 990, Part X	, line 13	
	(a) Description of investment type	(b) Book value	(c) Method of valu Cost or end-of-year ma	
(1)		0		
(2)		0		
(3)		0		
<u>(4)</u>		0		
(5)		0		· · · · · · · · · · · · · · · · · · ·
(6) (7)		0		
(8)		0		
(9)		0		
(10)		0		
Total (Column	(b) must equal Form 990, Part X, col (B) line 13)	0		
Part IX	Other Assets. See Form 990,	Part X, line 15		
		a) Description		(b) Book value
(1)				0
(2)			 	0
(3)				0
(4)				0
<u>(5)</u>				0
(6) (7)	····			
(8)				0
(9)				0
(10)				0
	umn (b) must equal Form 990, Part X, o		<u> </u>	0
Part X	Other Liabilities. See Form 99	0, Part X, line 25.		
1	(a) Description of liability	(b) Amount		
	al income taxes	0		
(2)		0		
(3)	strong under collt interest corresponds	193,356		
(4) Obliga (5) (gift a	ations under split interest agreements	193,356		
(6) (giit ai		0		
(7)		0		
(8)		0		
(9)		0		
(10)		0		
(11)		0		
Total (Column	(b) must equal Form 990, Part X, col (B) line 25)	193,356		

St. Louis Art Museum Foundation 43-1374479 Schedule D (Form 990) 2010 Part XI Reconciliation of Change in Net Assets from Form 990 to Audited Financial Statements 20.397.300 2 Total expenses (Form 990, Part IX, column (A), line 25) 2 33,833,834 3 Excess or (deficit) for the year Subtract line 2 from line 1 3 -13,436,534 4 4 9,514,623 5 Donated services and use of facilities 5 6 0 Investment expenses . . . 6 7 Prior period adjustments. 7 0 8 Other (Describe in Part XIV.) 8 9 9 9,514,623 10 Excess or (deficit) for the year per audited financial statements. Combine lines 3 and 9 10 -3,921,911 Part XII Reconciliation of Revenue per Audited Financial Statements With Revenue per Return Total revenue, gains, and other support per audited financial statements. 29,911,923 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12: 9.514.623 Ь 2b Recoveries of prior year grants . . . 0 2c С ď Other (Describe in Part XIV.) . . . Add lines 2a through 2d е 2e 9.514.623 3 Subtract line 2e from line 1 3 20,397,300 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1. Investment expenses not included on Form 990, Part VIII, line 7b а b Other (Describe in Part XIV) Add lines 4a and 4b . . . C 4c 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12). 20,397,300 Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return 33,833,834 2 Amounts included on line 1 but not on Form 990. Part IX. line 25: а 0 b Prior year adjustments 2b 0 С Other losses . . . 2c Other (Describe in Part XIV). . d 0 Add lines 2a through 2d e 2e 3 Subtract line 2e from line 1 3 33,833,834 4 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b. Other (Describe in Part XIV.) Add lines 4a and 4b 4c Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.) 33,833,834 Part XIV Supplemental Information 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, line 2; 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 Part V Line 4 Income from endowment funds is used to support the Saint Louis Art Museum's

- att v Elio I illouit alloui ollouitati allou o dopottalo dalla codo / ittiadoditto
operations, art purchases, and other programs and purposes designated by the donors. The
Investment Committee recommends the harvest rate each year. The Finance Committee
recommends the budget each year. These recommendations are approved by the governing
Board. In 2010 the Board approved the use of endowment harvest for art purchases at a rate
of 2 750/.
01.5.7.57%.

Part X Line 2 Stand alone financial statements of the Foundation are not prepared. The

Foundation is presented as a blended component unit of the Saint Louis Art Museum The

SCHEDULE G (Form 990 or 990-EZ)

Supplemental Information Regarding Fundraising or Gaming Activities

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.

OMB No 1545-0047

Open to Public

Department of the Treasury Internal Revenue Service Name of the organization organization entered more than \$15,000 on Form 990-EZ, line 6a.

► Attach to Form 990 or Form 990-EZ.

► See separate instructions.

Employer identification number

St. Louis Art Museum Foundation 43-1374479 Fundraising Activities. Complete if the organization answered "Yes" to Form 990, Part IV, line 17 Part I Form 990-EZ filers are not required to complete this part Indicate whether the organization raised funds through any of the following activities. Check all that apply Mail solicitations Solicitation of non-government grants а b Internet and email solicitations f Solicitation of government grants Phone solicitations C Special fundraising events d In-person solicitations 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 services? If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least \$5,000 by the organization. (v) Amount paid to (iii) Did fundraiser have (vi) Amount paid to (i) Name and address of individual (iv) Gross receipts (or retained by) (ii) Activity (or retained by) custody or control of or entity (fundraiser) from activity fundraiser listed in contributions? organization col (I) Yes No 1 0 0 2 0 0 0 3 0 0 0 0 0 0 0 0 0 0 0 0 8 0 0 0 9 0 0 0 10 0 0 Total 0 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing.

Part II

Fundraising Events. Complete if the organization answered "Yes" to Form 990, Part IV, line 18, or reported

more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000 (c) Other events (b) Event #2 (a) Event #1 (d) Total events (add col (a) through Gala NONE col (c)) (event type) (event type) (total number) Gross receipts . . . 612,899 612,899 Less: Charitable contributions 0 0 558,899 558,899 3 Gross income (line 1 minus line 2). 54,000 Cash prizes . 0 0 Noncash prizes . . 0 0 0 0 Direct Expenses Rent/facility costs 0 Food and beverages . . . 0 0 0 0 Entertainment . . . 0 0 0 Other direct expenses 0 0 0 10 Direct expense summary Add lines 4 through 9 in column (d) 11 Net income summary Combine line 3, column (d), and line 10. 54.000 Part III Gaming. Complete if the organization answered "Yes" to Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a Revenue (b) Pull tabs/instant (d) Total gaming (add (a) Bingo (c) Other gaming bingo/progressive bingo col (a) through col (c)) Gross revenue 0 Direct Expenses Cash prizes . 0 Noncash prizes 0 Rent/facility costs . . 0 Other direct expenses. Yes Yes Yes Volunteer labor No No Direct expense summary Add lines 2 through 5 in column (d) 0) Net gaming income summary. Combine line 1, column d, and line 7 0 Enter the state(s) in which the organization operates gaming activities. a Is the organization licensed to operate gaming activities in each of these states? If "No," explain: 10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?. Yes b If "Yes," explain.

scnear	Jie G (Form 990 of 990-E2) 2010 St. Louis Art Museum Foundation	43-1	<u> 3/44/9</u>	Page 3
11	Does the organization operate gaming activities with nonmembers?		Yes [No
12	Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming?		Yes [_] No
13	Indicate the percentage of gaming activity operated in:			
а	The organization's facility	13a		%
b	An outside facility	13b		<u>%</u>
14	Enter the name and address of the person who prepares the organization's gaming/special events book and records:	5		
	Name ▶	-		
	Address ▶		-	
15a	Does the organization have a contract with a third party from whom the organization receives gaming	_		_
	revenue?	· L	Yes	No
b	If "Yes," enter the amount of gaming revenue received by the organization ▶ \$ 0 and the			
c	amount of gaming revenue retained by the third party > \$0 . If "Yes," enter name and address of the third party.			
Ū	The first fame and address of the time party.			
	Name ▶			
	Address ▶			
16	Gaming manager information.			
	Name ▶			
	Gaming manager compensation ► \$0			
	Description of services provided			
	Director/officer Employee Independent contractor			
17	Mandatory distributions:			
а	Is the organization required under state law to make charitable distributions from the gaming proceeds to	_		_
	retain the state gaming license?	L	Yes	No
b	Enter the amount of distributions required under state law to be distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year \$			0
Part				<u>0</u> lumns
	·^^			
		·		
		·		
		· - -		

Schedule G (Form 990 or 990-EZ) 2010

SCHEDULE J (Form 990)

Department of the Treasury

Internal Revenue Service

Name of the organization

Compensation Information

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

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

► Attach to Form 990. ► See separate instructions.

OMB No 1545-0047

2010

Open to Public Inspection
Employer identification number

St. Louis Art Museum Foundation 43-1374479 **Questions Regarding Compensation** Part I Yes Nο 1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a? 2 3 Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply. X Compensation committee X Written employment contract X Compensation survey or study X Independent compensation consultant X Form 990 of other organizations X 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 from the organization or a related organization? 4a Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b X Participate in, or receive payment from, an equity-based compensation arrangement? . 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9. 5 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 Any related organization? . 5b If "Yes" to line 5a or 5b, describe in Part III. 6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of: The organization?. а 6a Any related organization?. 6b 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 7 8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe 8 X If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in

Regulations section 53.4958-6(c)?

9

Scriedule 3 (roill 330) 20 10

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

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. instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

		(B) Breakdown or	(B) Breakdown of W-2 and/or 1099-MISC compensation	SC compensation	(C) Retirement and	eldexetook (O)	(E) Total of columns	(E) Companyation
(A) Name		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	other deferred	benefits	(B)(I)-(D)	reported in prior Form 990 or Form 990-EZ
Drong diameter	ε	0			0	0	0	0
1 Dient Denjamin	(ii)		0	73,802	149,000	35,41	639,579	590,425
Carolvo Schmidt	Ξ	0	0	0	0	0	0	0
2 caroyii comma	(ii)	193,037			0	29,210	222,747	196,525
lames Burke	≘	0	0	0	0	0	0	
3 241163 Dailyo	<u>(ii)</u>	84,898			0	0	84,898	61,413
	€	0	0	0	0	0	0	0
4	(E)	0			0	0	0	0
	€	0	0	0	0	0	0	О
5	<u>(E)</u>				0	0	0	0
	≘	O	0	0	0	0	0	0
9	(ii)				0	0	0	0
	E	0	0	0	0	0	0	0
7	(E)	0			0	0	0	0
	Ξ	0	1	1	0	0	0	0
8	=	0			0	0	0	0
	€	0	0		0	0	0	О
6	(1)	0		0	0	0	0	0
	Ξ	0	0	1	0	0	0	0
10	(E)	0		į	0	0	0	0
	€	O	0		0	0	0	0
11	=	0			0	0	0	0
	€	0	0	0	0	0	0	0
12	(E)	0			0	0	0	0
	€	0	0	0	0	0	0	0
13	€	0			0	0	0	0
	€	0	0	0	0	O	0	0
14	€	0			0	0	0	0
	€	0	0	0	0	0	0	0
15	€	0			0	0	0	0
	€	0	0	0	0	0	0	0
16		0			0	0	0	0

Schedule J (Form 990) 2010

SCHEDULE K (Form 990)

Department of the Treasury Internal Revenue Service St Louis Art Museum Foundation

Name of the organization

Bond Issues

Partl

(a) Issuer name

A The Industrial Development Authority of the C

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Supplemental Information on Tax-Exempt Bonds

Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part V. Attach to Form 990.

▶ See separate instructions.

Open to Public OMB No 1545-0047

Employer identification number

43-1374479

(i) Pooled financing Yes No (h) On behalf of Yes (g) Defeased Yes No 45,994,963 Museum Expansion or addition (f) Description of purpose 8 (e) Issue price ᅙ ō 20,428,674 0 23,823,670 45,994,963 918,895 2012 4 (d) Date Issued 12/14/2009 (c) CUSIP# 85231U 43-7163465 (b) Issuer EIN

	Yes	No	Yes	Š	Yes	S S	Yes	Š
14 Were the bonds issued as part of a current refunding issue?		×						
15 Were the bonds issued as part of an advance refunding issue?		×						1
16 Has the final allocation of proceeds been made?	×							
17 Does the organization maintain adequate books and records to support								
the final allocation of proceeds?	×							
Part III Private Business Use								
		A		m	0			
 Was the organization a partner in a partnership, or a member of an LLC, 	Yes	No	Yes	No	Yes	No	Yes	2
which owned property financed by tax-exempt bonds?		×						

Working capital expenditures from proceeds

တ

Capital expenditures from proceeds

Year of substantial completion

Other unspent proceeds

Other spent proceeds

Credit enhancement from proceeds

Capitalized interest from proceeds

S 9

Proceeds in refunding escrows

Issuance costs from proceeds

Gross proceeds in reserve funds

Total proceeds of issue.

Amount of bonds legally defeased

Amount of bonds retired

Proceeds

Part II

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

Are there any lease arrangements that may result in private business use

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Schedule K (Form 990) 2010

of bond-financed property?

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St Louis Art Museum Foundation

Schedule K (Form 990) 2010

å ŝ Yes % % 8 ŝ ŝ O Yes Yes ~ % % ş ဍိ œ 8 Yes Yes % % ~ ş ž × × Yes Yes × Δ Δ Enter the percentage of financed property used in a private business use as a Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Are there any research agreements that may result in private business use of Enter the percentage of financed property used in a private business use by result of unrelated trade or business activity carried on by your organization, Were any gross proceeds invested beyond an available temporary period? Was the regulatory safe harbor for establishing the fair market value of the Are there any management or service contracts that may result in private Has the organization adopted management practices and procedures to Has the organization or the governmental issuer entered into a qualified ensure the post-issuance compliance of its tax-exempt bond liabilities? Does the organization routinely engage bond counsel or other outside another section 501(c)(3) organization, or a state or local government entities other than a section 501(c)(3) organization or a state or local counsel to review any management or service contracts or research Arbitrage Rebate, been filed with respect to the bond issue? Private Business Use (Continued) agreements relating to the financed property? 4a Were gross proceeds invested in a GIC? business use of bond-financed property? Is the bond issue a variable rate issue? hedge with respect to the bond issue? d Was the hedge superintegrated? Was the hedge terminated? bond-financed property? Total of lines 4 and 5 Arbitrage Name of provider . b Name of provider c Term of hedge. GIC satisfied? Term of GIC. government Part IV ပ ပ σ 39 م 4 ဖ S

%

in money market funds. Issuance costs are on the IRS 8038 form as \$811,419 for issuance costs and \$110,631 for credit enhancement. Issuance costs of \$93,696 were not paid in deposited in three trust accounts for payments of interest, construction costs and bond issuance costs. The Foundation paid issuance costs in 2009. The proceeds were invested Part II - The Foundation sold variable rate bonds on December 14, 2009. The variable rate bond proceeds were \$25,515,000 of the total \$45,994,963 sold. The proceeds were Supplemental Information. Complete this part to provide additional information for responses to questions on Schedule K (see instructions). and the funds were transfered to the construction costs trust account in 2010 per the terms of the Bond Trust agreement. Part V

×

Did the bond issue qualify for an exception to rebate?

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SCHEDULE M (Form 990)

Noncash Contributions

swered "Yes" on Form 29 or 30. OMB No 1545-0047

Open To Public Inspection

Employer identification number

Department of the Treasury Internal Revenue Service Name of the organization ► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

► Attach to Form 990.

St. Louis Art Museum Foundation 43-1374479 Part I Types of Property (c) (a) (b) (d) Noncash contribution Check if Number of contributions or Method of determining amounts reported on applicable items contributed noncash contribution amounts Form 990, Part VIII, line 1g 1 Art—Works of art 2 Art—Historical treasures 3 Art—Fractional interests 4 Books and publications . . . 5 Clothing and household goods 6 Cars and other vehicles . . . 7 Boats and planes. 8 Intellectual property . . . Securities—Publicly traded . 9 Х 46 161,784 Market Value day of the gift 10 Securities—Closely held stock 11 Securities—Partnership, LLC, or trust interests. 12 Securities—Miscellaneous 13 Qualified conservation contribution-Historic structures . . . 14 Qualified conservation contribution—Other 15 Real estate—Residential. 16 Real estate—Commercial 17 Real estate—Other . . . 18 Collectibles 19 Food inventory. 20 Drugs and medical supplies. 21 Taxidermy 22 Historical artifacts. 23 Scientific specimens . . . 24 Archeological artifacts . . 25 Other ► (_____) O 26 Other ► (_____) 0 ol 27 Other ▶ (_____) 0 0 28 Other ▶ (29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement Yes No 30a During the year, did the organization receive by contribution any property reported in Part I, lines 1–28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period? 30a b If "Yes," describe the arrangement in Part II. Does the organization have a gift acceptance policy that requires the review of any non-standard 31 Х 32a Does the organization hire or use third parties or related organizations to solicit, process, or sell 32a Х b If "Yes." describe in Part II If the organization did not report an amount in column (c) for a type of property for which column (a) is

checked, describe in Part II.

Schedule M (Form 990) (2010) St Louis Art Museum Foundation	43-1374479	_ 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.		
•		
Part I Line 9 & 32 Brokerage houses are used to sell stock gifts received. The		
Foundation's policy is to sell gifts as soon as possible after the gift is received,		
typically the same day. Stock gifts are valued using the average of the high and the low		
market price on the gift date.		
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SCHEDULE O (Form 990 or 990-EZ)

Supplemental Information to Form 990 or 990-EZ

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Employer identification number

St. Louis Art Museum Foundation 43-1374479 Form 990 Part Part VI Section A Line 6 & 7(a) The Saint Louis Art Museum is the sole member of the St Louis Art Museum Foundation. The Board of Commissioners of the Art Museum appoints the officers of the Foundation. The Director, President and Treasurer of the Board of Commissioners of the Art Museum are officers of the Foundation They serve the Foundation as President, Vice President and Treasurer of the Foundation, respectively. The Controller of the Museum also serves as the Controller of the Foundation. The Secretary of the Foundation is an attorney in residence at the firm of the Museum's counsel. Form 990 Part Part VI Section B Line 11(a) The Form 990 is reviewed by the Audit Committee of the Museum Two of the voting members of the Foundation (President and Vice President) and the Controller attend the Audit Committee meeting. The Foundation Board has delegated the review of the 990 to this committee. The Board of Directors of the Foundation receive the report of the Audit Committee's review and acknowledge it's receipt Form 990 Part Part VI Section B Line 12(c) Each member of the Art Museum Board of Commissioners, Board of Trustees, Friends Board, Key management staff and Foundation Trustees is required to disclose conflicts of interest or any potential conflicts of interest he or she may have with the Art Museum or the Foundation. Each filing is reviewed by the Museum's legal council, Director and Governance Committee and reported to the Board of Commissioners of the Museum for approval. The Foundation's governing board has delegated this responsibility to this body and is apprised of the results of this review and any actions taken Form 990 Part Part VI Section B Line 15(b) The Foundation does not have employees. The President and Controller of the Foundation serve as Director and Controller of the Art Museum. respectively, and are compensated by the Art Museum. See Part VII- Section A. Their compensation is set by the Board of Commissioners of the Art Museum. The Commission appoints an Executive Compensation Committee annually to review and recommend compensation of the Director. The Committee engages an independent compensation consultant to assist in developing

its recommendation to the Board of Commissioners. The Commission votes on the compensation of

Schedule O (Form 990 or 990-EZ) (2010)	Page 4
Name of the organization St Louis Art Museum Foundation	Employer identification number 43-1374479
the Director annually. The Committee also reviews the salaries of senior management	nt Salary
surveys and periodic studies are performed to set compensation for employees.	
Form 990 Part Part VI Section C Line 19 Governing documents, conflict of interest per	olicy and
financial statements are available to the public upon request.	
Form 990 Part Part XI Line 5 The \$9,514,623 in other changes to Net Assets is for U	nrealized
Gains recorded for the St Louis Art Museum Foundation.	
••	
	•••••
	•••••

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization St. Louis Art Museum Foundation

Part I

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

Related Organizations and Unrelated Partnerships

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

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Open to Public OMB No 1545-0047

Employer identification number

43-1374479

(g) Section 512(b)(13) controlled Yes No (f) Direct controlling × entity? Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" to Form 990, Part IV, line 34 because it had (f)
Direct controlling
entity 0 (e) End-of-year assets ٤ (e)
Public chanty status
(if section 501(c)(3)) ᅙ 0 (d) Total income (d) Exempt Code section (c)
Legal domicile (state
or foreign country) 501(c)(3) (c) Legal domicile (state or foreign country) (b) Primary activity 9 one or more related tax-exempt organizations during the tax year Primary activity Art Museum [1] Saint Louis Art Museum 43-1056957 (a) Name, address, and EIN of disregarded entity (a)Name, address, and EIN of related organization 1 Fine Arts Drive, St. Louis, MO 63110 Part II E 2 9 3 € (5) 3 ₹ 3

Schedule R (Form 990) 2010

For Paperwork Reduction Act Notice, see the Instructions for Form 990, $_{(\mathrm{HTA})}$

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Page 2

43-1374479

St. Louis Art Museum Foundation

Schedule R (Form 990) 2010

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" to Form 990, Part IV, line 34

% % % % % % % % % % 》 % % % Schedule R (Form 990) 2010 Percentage Percentage ownership ownership इ Ξ 0 0 0 Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" to Form 990, Part ž General or managing partner? end-of-year assets Yes Share of 0 0 C 0 Code V—UBI amount in box 20 of Schedule K-1 (Form 1065) 0 0 0 0 0 (f) Share of total income Disproportionate ٥ N allocations? IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year. Ξ Yes 0 0 0 0 0 (g) Share of end-of-year (e)
Type of entity
(C corp, S corp, or trust) assets because it had one or more related organizations treated as a partnership during the tax year) (d) Direct controlling 0 0 0 0 0 (r) Share of total income entity (c) Legal domicile foreign country) Predominant income (related, sections 512-514) excluded from unrelated, tax under (b) Primary activity (d)
| Direct controlling | entity (c)
Legal
domicile
(state or
foreign Name, address, and EIN of related organization Primary activity (a) Name, address, and EIN related organization Part IV € Ę (9) [2] 2 <u>E</u> (5) 2 <u>E</u> £. 35 <u>(6</u>) E

43-1374479

Part V

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

Note. Complete	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule 1. During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II_IV2	Parts II–IV2		Yes No	اه
a Receipt of	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1 a	×	1.
b Gift, grant,	Gift, grant, or capital contribution to other organization(s)		5	×	ĺ
c Gift, grant,	Gift, grant, or capital contribution from other organization(s)		10	×	
d Loans or lo	Loans or loan guarantees to or for other organization(s).		19	×	
e Loans or lo	Loans or loan guarantees by other organization(s).		1e	×	
f Sale of ass	Sale of assets to other organization(s)		+		
g Purchase c	Purchase of assets from other organization(s)	•	19	×	
	Exchange of assets.		4	×	
i Lease of fa	Lease of facilities, equipment, or other assets to other organization(s)		=	×	
i Lease of fa	Lease of facilities, equipment, or other assets from other organization(s)		÷	<u>×</u>	
k Performan	Performance of services or membership or fundraising solicitations for other organization(s)	· · ·	+	×	.[[
I Performan	Performance of services or membership or fundraising solicitations by other organization(s)		=	×	
_	Sharing of facilities, equipment, mailing lists, or other assets		Ę,	× ;	ال
n Sharing of	Sharing of paid employees		5	<u>×</u> 	ال
o Reimburse	Reimbursement paid to other organization for expenses .		10	×	
p Reimburse	Reimbursement paid by other organization for expenses .		1p	×	
q Other trans	Other transfer of cash or property to other organization(s).		- t	<u> </u>	
2 If the answ	Other transfer of cash of property from other organization(s). If the answer to any of the above is "Yes." see the instructions for information on who must complete this line, including cover	including covered relationships and transaction thresholds	saction thi	resholds	1
		(5)		(D)	1
	Name of other organization Transaction type (a-r)	Amount involved	Method of amount	Method of determining amount involved	_
(1) Saint Louis Art	(1) Saint Louis Art Museum (see 990 Part III Statement of Program Services)	33,666,857 cash	ash		1
(2)		0			1
(3)		0			
(4)		0		}	1
(5)		0		į	
(9)		0			
		Schedu	Schedule R (Form 990) 2010	m 990) 20	[윤

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

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) (b) (c) (d) (e)	(q)	(၁)	9		(e)		€	(6)	Ľ	E
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Are all partners section	rtners	Share of end-of-year	Dispropo allocal	Disproportionate allocations?	Code V—UBI amount in box 20	Gene	General or managing
		country)	501(c)(3) organizations?	(3) Ions?	assets			of Schedule K-1 (Form 1065)	ра	partner?
			Yes	S N		Yes	ş		Yes	8
(1)					0	ı		O	1.	
(2)					0					
(3)										
(4)					0					
(5)					0			0		
(9)										
(2)										
(8)										
(6)					0					
(10).					0					
(11)		i i			0			0		
(12)					0			0		
(13)					0					
(14).					0			0		
(15)					0					
(16)					0			0		

Schedule R (Form 990) 2010

Scriedule R (FC	sim 990) 2010 St. Louis Art Museum Foundation	43-13/44/9	Page 5
Part VII	Supplemental Information Complete this part to provide additional information for responses to questions on Sch instructions).		
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Schedule R (Form 990) 2010