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DLN: 93493318044664

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

▶ Do not enter Social Security numbers on this form as it may be made public By law, the IRS generally cannot redact the information on the form ► Information about Form 990 and its instructions is at <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2013

Open to Public Inspection

		2013 (applicabl	alendar year, or tax year beginning 01-01-2013 , 2013, and ending 12 C Name of organization	2-31-2013	D Employ	yer ider	ntification number
		:hange	YOUTHBRIDGE COMMONITY FOUNDATION		43-60	64111	
Na	ne cha	ange	Doing Business As				-
Init	ıal retu	um	Number and street (or P O box if mail is not delivered to street address) Room,	/suite	E Telepho	ne numl	ber
Ter	mınate	ed	12685 OLIVE BLVD		(314)	985-6	778
Am	ended	return	City or town, state or province, country, and ZIP or foreign postal code SAINT LOUIS, MO 63141		(311)	303 0	,,,,
Г Арр	licatio	n pendır	g		G Gross re	eceipts \$	26,141,920
			F Name and address of principal officer MICHAEL HOWARD		Is this a group	return	
			12685 OLIVE BLVD		subordinates?		┌ Yes ┌ No
			ST LOUIS,MO 63141		Are all subordii	nates	┌ Yes ┌ No
I Ta	x-exer	mpt stat	IS 501(c)(3)		included? If "No," attach	a lıst	(see instructions)
J W	ebsit	e:► V	/WW YOUTHBRIDGE ORG	H(c)	Group exempti	on nun	nber 🕨
V 5	6		on V Corporation Trust Association Other ►	1 1 1 1			
K For	n or o	rganizati	on Corporation Trust Association Other	L Year	r of formation 187	// MC	State of legal domicile)
Pa	rt I	Su	mmary				
			describe the organization's mission or most significant activities NG DONORS PURSUE THEIR CHARITABLE WISHES AND HELPING	NONDROE	ITS BECOME	MORE	FINANCIALLY
		SOUN		NONPROF	TIS BECOME	MORE	FINANCIALLY
<u>နို</u>							
፼							
Governance	2	Check	this box 🔭 if the organization discontinued its operations or dispose	d of more th	nan 25% of its	net as:	sets
Activities &			r of voting members of the governing body (Part VI, line 1a)			3	1
Ħ.			r of independent voting members of the governing body (Part VI, line 1	-		4	1.
ਰੂ			number of individuals employed in calendar year 2013 (Part V, line 2a)			5	(
⋖			umber of volunteers (estimate if necessary)			6	(
	ı		nrelated business revenue from Part VIII, column (C), line 12 related business taxable income from Form 990-T, line 34			7a 7b	(
	В	Necui	Telated business taxable income from Form 990-1, line 34		Prior Year	/b	Current Year
	8	Con	ributions and grants (Part VIII, line 1h)		12,179,4	50	840,415
₫	9		ram service revenue (Part VIII, line 2g)		32,2		040,415
Reyenue	10		stment income (Part VIII, column (A), lines 3, 4, and 7d)		1,654,8		3,225,709
2	11		er revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	·	24,8		46,097
	12		I revenue—add lines 8 through 11 (must equal Part VIII, column (A), I	ıne			
			 		13,891,4		4,112,221
	13		its and similar amounts paid (Part IX, column (A), lines 1-3)		1,059,6	-	400,787
	14		efits paid to or for members (Part IX, column (A), line 4)			0	
8	15	Sala 5-1	ries, other compensation, employee benefits (Part IX, column (A), line: 0)	s	352,9	46	C
Expenses	16a	Prof	essional fundraising fees (Part IX, column (A), line 11e)			0	(
ੜੇ	ь	Tota	fundraising expenses (Part IX, column (D), line 25) ▶210,921				
ш	17	Oth	er expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		784,0	53	1,371,012
	18	Tota	l expenses Add lines 13-17 (must equal Part IX, column (A), line 25)	2,196,6	86	1,771,799
	19	Rev	enue less expenses Subtract line 18 from line 12		11,694,7	79	2,340,422
6 9. 8 9.				Begi	nning of Currer	nt	End of Year
Not Assets or Fund Balances	20	Tota	l assets (Part X, line 16)		Year 32,535,4	49	36,329,252
A.S.	21		l liabilities (Part X, line 26)	·	460,1	-	269,794
3 E	22		assets or fund balances Subtract line 21 from line 20	. '	32,075,3	-	36,059,458
Pai	t II	_	nature Block	-	0 = 70 : 0 70		
my ki	nowle rer h	dge an	If perjury, I declare that I have examined this return, including accomp d belief, it is true, correct, and complete Declaration of preparer (other knowledge **** nature of officer				
Sign Here		- ['					
	-		CHAEL HOWARD CEO pe or print name and title				
		17 '	Print/Type preparer's name Preparer's signature	Date	Check If	PTIN	
Paid	t		BRENT W STEVENS		self-employed	P01291	
Pre		er	Firm's name Fubinbrown LLP		Firm's EIN ► 43	-076531	16
Use	•		Firm's address ► ONE NORTH BRENTWOOD		Phone no (314)	290-33	300

SAINT LOUIS, MO 63105

May the IRS discuss this return with the preparer shown above? (see instructions) $\,$.

✓ Yes ☐ No

1 Briefly describe the organization's mission OUTHERIDGE COMMUNITY FOUNDATION IS A SOL(C)(3) NONPROFIT THAT EXISTS TO HELP ST LOUIS AREA CHARITIES, SPECIALLY THOSE FOCUSED ON CHILDREN AND YOUTH, BECOME STRONGER AND MORE SUSTAINABLE, TO HELP DONORS ARXIMIZE THEIR SOCIAL IMPACT AND TO HELP PROFESSIONAL ADVISORS ADMINISTER THEIR CLIENTS CHARITIABLE FUNDS 2 Did the organization undertake any significant program services during the year which were not listed on the prior form 990 or 990-E2? If "Yes," describe these new services on Schedule O 3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? If "Yes," describe these changes on Schedule O 4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported 4 (Code) (Expenses \$ 1,220,802 including grants of \$ 400,787) (Revenue \$) INCLUDES ALL ASPECTS OF WORK DEDICATED TO BUILDING STRONG, VIRBANT COMMUNITIES BY BRICUING THE RESOURCES OF GENEROUS DONORS WITH THE NEEDS FOCUSED ON SERVING CHILDREN AND YOUTH, BECOME PRAKECILLY SOURCH THESE BRITIATIES BY CLIDE BUT ARE NOT LIMITED TO PLANNED GRAING SUPPORT TO EVALUATE GRAIN SUPPORT SOURCE AND TRANSING SUPPORT SOURCE SOURC	.0111	1990 (2013)					Page Z
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	4-1	O + h =		vadula O)			
	4d		·	·) (Revenue \$)
4e Total program service expenses ► 1,220,802	4e	Total progra	m service expenses 🕨	1,220,802			

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A</i>	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 🕏	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
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		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I</i>	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV^{\square}	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? <i>If "Yes," complete Schedule D, Part V</i>	10	Yes	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
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		No
C	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
d	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.	11d	Yes	
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11f	1 00	No
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
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 and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		No
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	Yes	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23		No
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 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		No
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		No
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b	Yes	
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		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		Νo
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section $512(b)(13)$? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2 </i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

αI	Check if Schedule O contains a response or note to any line in this Part V			г
	Check if Schedule O contains a response of note to any line in this rait v	•	Yes	No
1	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 8			
	Enter the number of Forms W-2G included in line 1a Enter -0 - if not applicable 1b 0			
	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable	1		
	gaming (gambling) winnings to prize winners?	1c		
1	Enter the number of employees reported on Form W-3, Transmittal of Wage and			
	Tax Statements, filed for the calendar year ending with or within the year covered by this return	,		
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	1		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b		
		_		
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		N
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b		
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial			
	account)?	4a		N
	If "Yes," enter the name of the foreign country 🕨			
	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and Financial Accounts			
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		N
	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		N
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			
		5c		
1	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	6a		N
	organization solicit any contributions that were not tax deductible as charitable contributions?	<u> </u>	1	
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b		
	Organizations that may receive deductible contributions under section 170(c).			
	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and	7a		N
	services provided to the payor?			
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		N
	If "Yes," indicate the number of Forms 8282 filed during the year	4		
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit			
	contract?	7e		
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7 f		
	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as			
	required?	7g		
	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a	7h		
	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		
	Sponsoring organizations maintaining donor advised funds.			
	Did the organization make any taxable distributions under section 4966?	9a		
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
	Section 501(c)(7) organizations. Enter			
	Initiation fees and capital contributions included on Part VIII, line 12 10a			
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club	1		
	facilities	1		
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders	1		
	Gross income from other sources (Do not net amounts due or paid to other sources			
	against amounts due or received from them)............. 11b	-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the			
	year	1		
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		
	Note. See the instructions for additional information the organization must report on Schedule O	<u> </u>	1	
	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			
	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	ĺ	l N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14a		<u>``</u>

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

Check if Schedule O contains a	esponse or note to ar	v line in this Part VI .							

ection A. Governing Body and Management			
		Yes	No
Enter the number of voting members of the governing body at the end of the tax year			
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
Enter the number of voting members included in line 1a, above, who are independent			
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		Νo
Did the organization delegate control over management duties customarily performed by or under the direct	3		No
Did the organization make any significant changes to its governing documents since the prior Form 990 was	4		 No
	5		No.
	6		No No
· ·			
more members of the governing body?	7a		No_
or persons other than the governing body?	7b		N o
Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
The governing body?	8a	Yes	
Each committee with authority to act on behalf of the governing body?	8b	Yes	
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		No
ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ıe Cod	e.)
		Yes	No
Did the organization have local chapters, branches, or affiliates?	10a		No
If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
Describe in Schedule O the process, if any, used by the organization to review this Form 990			
Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe	12c	Yes	
Did the organization have a written whistleblower policy?	13	Yes	
Did the organization have a written document retention and destruction policy?	14	Yes	
Did the process for determining compensation of the following persons include a review and approval by			
	15a	Yes	
	15b	Yes	
Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a	16a		No
If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
alla C Piada			
ection C. Disclosure			
List the States with which a copy of this Form 990 is required to be filed.			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. Enter the number of voting members included in line 1a, above, who are independent. 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? 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? Did the organization make any significant changes to its governing documents since the prior Form 990 was filed? Did the organization have members or stockholders? Did the organization have members or stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Each committee with authority to act on behalf of the governing body? Is there any officer, director, trustee, or key employee listed in Part VIII, Section A, who cannot be reached at the organization is mailing address? If "Yes," provide the names and addresses in Schedule O. Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization is exempt purposes? Has the organization have a writt	Inter the number of voting members of the governing body at the end of the tax year. If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are independent. Jud any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee? Jud 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? Jud the organization make any significant changes to its governing documents since the prior form 990 was filed? Jud the organization become aware during the year of a significant diversion of the organization's assets? Jud the organization have members or stockholders, or other persons who had the power to elect or appoint one or pressons of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body? Jud the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on behalf of the governing body? Bach committee with authority to act on beh	It there are material differences in voting nights among members of the governing body at the end of the tax year. If there are material differences in voting nights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule 0 Inter the number of voting members included in line 1a, above, who are independent or voting members included in line 1a, above, who are independent or force, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee and the companies of the programs of the presence of the programs of the programs of the programs of the programs of officers, directors or trustees, or key employees to a management company or other person? Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons who had the power to elect or appoint one or more persons of the governing body? But the organization contemporaneously document the meetings held or written actions undertaken during the year by the following The governing body? But the organization on themperaneously document the meetings held or written actions undertaken during the year by the following The governing body? The governing body? But the organization on the person behalf of the governing body? But the organization have with authority to act on behalf of the governing body? But the organization have local chapters, branches, or affiliates? If Yes, did the organization have written policies and procedures governing the acti

- ☐ O wn website ☐ Another's website ☐ Upon request ☐ Other (explain in Schedule O)
- 19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year
- 20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►MICHAEL HOWARD CEO 12685 OLIVE BLVD ST LOUIS, MO 63141 (314)985-6778

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

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

1a Complete this table for all persons required to be listed 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, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

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

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

(A) Name and Title	(B) Average hours per week (list any hours	more pers	than on is	one bot	not box h ar	check, unle	ess er	(D) Reportable compensation from the organization	(E) Reportable compensation from related organizations	(F) Estimated amount of other compensation
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1099- MISC)	(W- 2/1099- MISC)	from the organization and related organizations
(1) GLENN WILLEY	1 00	×						0	0	0
DIRECTOR									_	
(2) RICK KALLAUS	1 00	x		х				0	0	0
PRESIDENT								_		
(3) DENNIS G TACCHI	1 00	x						0	0	0
DIRECTOR										
(4) SAM HOPMEIER	1 00	×						0	0	0
DIRECTOR								_		
(5) LIZ KRIEGSHAUSER	1 00	х						0	0	0
DIRECTOR		_^_						Ü	Ŭ	
(6) DAN BEAN	1 00	х		Х				0	0	0
VICE PRESIDENT		_ ^		^				0	O	0
(7) MARK LAMMERT	1 00	х		Х				0	0	0
TREASURER		_^_		^				Ü	Ŭ	
(8) DOUG STANLEY	1 00	×						0	0	0
DIRECTOR		_ ^						0	0	0
(9) LIONEL J PHILIPS	1 00	х						0	0	0
DIRECTOR		_ ^						0	O	0
(10) JEFFREY MOENKHAUS	1 00	х		х				0	0	0
SECRETARY		_ ^		^				0	0	0
(11) MICHAEL HOWARD	45 00	х		Х				134,711	0	14,855
CEO		_ ^		^				134,711	0	14,633
(12) GARY F SAHRMANN	1 00								0	
DIRECTOR		Х						0	0	0
(13) KEN HARRINGTON	1 00	· ·								
DIRECTOR		Х						0	0	0
	7									
					\vdash		\vdash			
							Ш			
										Form 000 (2012)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	(A) Name and Title	(B) Average hours per week (list any hours	more t	han d n is	ne l both	oox, an c	heck unless officer stee)	;	Repor comper from organiza	table sation the tion (W-	(E) Reportable compensation from related organizations (W			ted fother ation he
		for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	2/1099	-MISC)	2/1099-MISC)		rganizati relate organiza	ed
												+		
												+		
												4		
1b	Sub-Total							 -						
C	Total from continuation sheet	s to Part VII, S	ection A	١.	•	•	•							
d	Total (add lines 1b and 1c) .				•	•				134,711	l .	0		14,855
2	Total number of individuals (in \$100,000 of reportable compe						d abov	e) w	ho receive	d more th	ian			
													T	
3	Did the organization list any f o	rmer officer du	ector o	r truc	too	kay	emple		or highes	t compan	sated amployee		Yes	No
,	on line 1a? If "Yes," complete S					•	• •	• •	, or mignes	• •	· · · ·	3		No
4	For any individual listed on line organization and related organ													
	ındıvıdual		• •	•	•	•		•				4		No
5	Did any person listed on line 1 services rendered to the organ			•					_	anızatıon • • •	or individual for	5		No
Se	ction B. Independent Co	ntractors												
1	Complete this table for your fix	ve highest comp												
	compensation from the organiz	zation Report co (A)	mpens	ation	tor	the c	alenda	arye	ear ending	with or wi	thin the organizati (B)	on's	tax year (C	
BLIDN	N S AND ASSOCIATES MANAGEMENT LLC	lame and business		IIS M	7621	<u> </u>				Des MARKETIN	cription of services	_	Compen	
	AN STANLEY 101 SOUTH HANLEY ST LO		13 31 LOC	ויו טיי	J UJI	J1					J IT MANAGEMENT FEES			169,428
												\perp		

2 Total number of independent contractors (including but not limited to those listed above) who received more than

\$100,000 of compensation from the organization -2

Contributions, Giffs, Grants and Other Similar Amounts	1a b c d e f
Program Service Revenue	2a b c d e f
	3 4 5 6a b c d
Other Revenue	b d 8a b c 9a
	b c 10a b
	11a b c d e

/111	Statement o	o f Revenue ule O contains a respo	nse or note to any lu	ne in this Part VIII			
	CHECK II SCHEUI	ure o contains a respo	ise of flote to any fi	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
1a	Federated cam	paigns 1a					512-514
ь		es 1b					
		ents 1c					
c							
d		zations 1d					
e	Government grants	s (contributions) 1e					
f	All other contribution similar amounts no	ons, gifts, grants, and 1f ot included above	840,415				
g		ons included in lines	556,064				
h	1a-1f \$ Total. Add lines	s 1a-1f		840,415			
			Business Code				
2a			Business code				
ь							
С	•	_					
d							
e							
f	All other progra	am service revenue					
g	Total. Add lines	s 2a-2f					
3	Investment inc	ome (ıncludıng dıvıden	ds, interest,	1,066,047			1,066,047
		ar amounts) stment of tax-exempt bond		1,066,047			1,066,047
4 5			proceeds -				
	Royalties	(ı) Real	(II) Personal				
6a	Gross rents	31,980	(,				
ь	Less rental	0					
c	expenses Rental income	31,980					
d	or (loss) Net rental inco	l me or (loss)		31,980			31,980
		(ı) Securities	(II) Other				
7a	Gross amount from sales of assets other	24,189,361					
b	than inventory Less cost or other basis and sales expenses	22,029,699					
С	Gain or (loss)	2,159,662					
d	Net gain or (los	s)		2,159,662			2,159,662
8a	Gross income f events (not inc \$						
Ь	less director	a penses b					
c		(loss) from fundraising	∟ events .				
9a	Gross income f See Part IV, lin						
Ь	Less direction	a penses b					
		(loss) from gaming acti	lvities▶-				
	Gross sales of returns and allo	inventory, less owances .					
L	lees seed 1	ado.oold b					
b c	_	oods sold . . b (loss) from sales of inv	entory •				
Ť	Miscellaneous		Business Code				
11a	MISCELLANEC	DUSINCOME	900099	14,117			14,117
ь							
С							
d		ue					
е	Total. Add lines	s 11a-11d	🔸	14,117			
12	Total revenue.	See Instructions .	· · · · •	4,112,221	0	0	3,271,806

Part	IX Statement of Functional Expenses				
Section	on $501(c)(3)$ and $501(c)(4)$ organizations must complete all columns All	other organizati	ons must comp	lete column (A)	
	Check if Schedule O contains a response or note to any line in this	Part IX		<u> </u>	지
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States See Part IV, line 21	400,787	400,787		
2	Grants and other assistance to individuals in the United States See Part IV, line 22				
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
ь	Legal				
С	Accounting	34,408		34,408	
d	Lobbying	•		,	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	203,650		203,650	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on	·		,	
	Schedule O)	618,990	471,632	73,679	73,679
12	Advertising and promotion	257,237	128,618		128,619
13	Office expenses	19,157	18,353	402	402
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	6,257	5,005	626	626
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	2,332	2,332		
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	99,246	94,284	4,962	
23	Insurance	29,510	14,755	14,755	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	OTHER ADMIN	46,706	37,364	4,671	4,671
b	MAINTENANCE	44,069	39,662	2,203	2,204
С	UTILITIES	9,450	8,010	720	720
d		<u> </u>			
e	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	1,771,799	1,220,802	340,076	210,921
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	_,,,,,,,,		2.0,070	
	educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

1 Cash-non-interest-bearing End of year End of year	Par	t X	Balance Sheet Check if Schedule O contains a response or note to any line in this Part X			_
1 Cash-monimiterest-bearing 108,00 1 502,130			eneck in benedule of contains a response of note to any line in this fare X	(A)	-	
3 Pledges and grants receivable, net 3 4		1	Cash-non-interest-bearing		1	
4 Accounts receivable, net 4		2	Savings and temporary cash investments		2	
100 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 1		3	Pledges and grants receivable, net		3	
### Page		4			4	
1		5	employees, and highest compensated employees Complete Part II of			
S	2	6	4958(f)(1)), persons described in section $4958(c)(3)(B)$, and contributing employers and sponsoring organizations of section $501(c)(9)$ voluntary employees' beneficiary		_	
S	Se					
S	Ø -					
100 Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	_					
Part VI of Schedule D 108 3,552,486 106 1,148,486 116 1,243,558 106 1,148,486,566 128 1,148,486,566 1		9		9,072	9	3,962
11 Investments—publicly traded securities 27,775,027 11 31,348,506 12 Investments—other securities See Part IV, line 11 802,153 12 482,170 13 Intrangible assets 14 15 Other assets See Part IV, line 11 2,597,640 15 2,846,068 15 Other assets See Part IV, line 11 2,597,640 15 2,846,068 16 Total assets, Add lines 1 through 15 (must equal line 34) 32,535,449 16 36,329,252 17 Accounts payable and accrued expenses 25,894 17 43,677 18 Grants payable 494,241 18 126,200 19 Deferred revenue 20 Tax-exempt bond liabilities 20 20 Escrow or custodial account liability Complete Part IV of Schedule D 21 21 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 23 25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities included on lines 17-24) Complete Part IV of Schedule 0 25 99,917 26 Total liabilities, Add lines 17 through 25 460,135 26 269,794 27 Organizations that follow SFAS 117 (ASC 958), check here and complete lines 27 through 29, and lines 33 and 34. 28 Temporarily restricted net assets 2,597,640 29 2,846,068 29 Permanently restricted net assets 2,597,640 29 2,846,068 30 Capital stock or trust principal, or current funds 31 20 Pad-in or capital surplus, or land, building or equipment fund 31 21 Pad-in or capital surplus, or land, building or equipment fund 32,075,314 33 36,058,458 31 Total net assets or fund balances 32,075,314 33 36,058,458 32 Total liabilities 33 36,058,458 33 Total liabilities 33 36,058,458 34 Total liabilities 34 34 34 3		10a	Part VI of Schedule D 3,522,486			
12 Investments—other securities See Part IV, line 11 30 13 13 14 13 14 13 14 15 14 15 15 15 15 15		Ь	Less accumulated depreciation	1,243,556	10c	1,148,426
13 Investments—program-related See Part IV, line 11 14 14 15 16 16 16 17 18 18 19 19 19 19 19 19		11		27,775,027	11	31,346,506
14		12	Investments—other securities See Part IV, line 11	802,153	12	482,170
15 Other assets See Part IV, line 11 2,597,540 15 2,846,058 16 Total assets. Add lines 1 through 15 (must equal line 34) 32,535,449 16 36,329,252 17 Accounts payable and accrued expenses 25,894 17 43,677 18 Grants payable 434,241 18 126,200 19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D 21 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 23 Secured mortgages and notes payable to unrelated third parties 23 24 Unsecured notes and loans payable to unrelated third parties 24 25 Other liabilities (including federal income tax, payables to related third parties 24 26 Total liabilities, Add lines 17 through 25 460,135 26 269,794 27 Unrestricted net assets 29,477,774 27 33,213,400 28 Temporarily restricted net assets 29,477,774 27 33,213,400 29 Permanently restricted net assets 2,597,540 29 2,846,058 29 Permanently restricted net assets 2,597,540 29 2,846,058 30 Capital stock or trust principal, or current funds 30 31 Total liabilities, add unces 1,000 principal, or current funds 31 32 Retained earnings, endowment, accumulated income, or other funds 32,075,314 33 36,059,458 31 Total net assets or fund balances 32,075,314 33 36,059,458		13	Investments—program-related See Part IV, line 11		13	
Total assets. Add lines 1 through 15 (must equal line 34) 32,535,449 16 36,329,252		14	Intangible assets		14	
17		15	Other assets See Part IV, line 11	2,597,540	15	2,846,058
18 Grants payable		16	Total assets. Add lines 1 through 15 (must equal line 34)	32,535,449	16	36,329,252
19 Deferred revenue 19 20 Tax-exempt bond liabilities 20 20 21 21 22 22 22 23 24 24 22 23 24 24		17	Accounts payable and accrued expenses	25,894	17	43,677
20 Tax-exempt bond liabilities		18	Grants payable	434,241	18	126,200
21 Escrow or custodial account liability Complete Part IV of Schedule D		19	Deferred revenue		19	
Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L		20	Tax-exempt bond liabilities		20	
Unsecured notes and loans payable to unrelated third parties	Ø	21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
Unsecured notes and loans payable to unrelated third parties	iiitie	22				
Unsecured notes and loans payable to unrelated third parties	æ		persons Complete Part II of Schedule L		22	
25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D		23	Secured mortgages and notes payable to unrelated third parties		23	
and other liabilities not included on lines 17-24) Complete Part X of Schedule D		24	Unsecured notes and loans payable to unrelated third parties		24	
26 Total liabilities. Add lines 17 through 25		25	and other liabilities not included on lines 17-24) Complete Part X of Schedule			00.047
Organizations that follow SFAS 117 (ASC 958), check here F and complete lines 27 through 29, and lines 33 and 34. 27 Unrestricted net assets						· · · · · · · · · · · · · · · · · · ·
lines 27 through 29, and lines 33 and 34. 29,477,774 27 33,213,400 28		26		460,135	26	269,794
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds			- · · · · · · · · · · · · · · · · · · ·			
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	ĕ	27	- · · ·	29 477 774	27	33 213 400
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u>छ</u>			20,,		
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	<u> </u>			2 597 540		2 846 058
complete lines 30 through 34. 30 Capital stock or trust principal, or current funds	ŭ	23	·	2,007,040	29	2,040,000
30 Capital stock or trust principal, or current funds			· · · · · · · · · · · · · · · · · · ·			
31 Paid-in or capital surplus, or land, building or equipment fund		30			30	
33 Total net assets or fund balances	φ.					
33 Total net assets or fund balances	45.					
34 Total liabilities and net assets/fund balances				32,075,314	33	36,059,458
	Ż			32.535.449	34	

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				F
1	Total revenue (must equal Part VIII, column (A), line 12)	1		4,1	112,221
2	Total expenses (must equal Part IX, column (A), line 25)				
3	Revenue less expenses Subtract line 2 from line 1	2		1,,	771,799
,	Revenue less expenses subtract line 2 non line 1	3		2,3	340,422
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		32.0	075,314
5	Net unrealized gains (losses) on investments	-		02/	
_		5		1,3	393,033
6	Donated services and use of facilities	6			
7	Investment expenses	_ 1			
8	Prior period adjustments	7			
0		8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-	250,689
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10			059,458
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. Г
				Yes	No
1	Accounting method used to prepare the Form 990				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or revie a separate basis, consolidated basis, or both	wed or	וו		
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sepa basis, consolidated basis, or both	rate			
	▼ Separate basis				
С	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight audit, review, or compilation of its financial statements and selection of an independent accountant?	nt of th	e 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain it Schedule O	n			
3 a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in th Single Audit Act and OMB Circular A-133?	e	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits explain why in Schedule O and describe any steps taken to undergo such audits		3b		

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DLN: 93493318044664

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury Internal Revenue Service

Public Charity Status and Public Support

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

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

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

► Information about Schedule A (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

2013

Open to Public Inspection

Name of	the organization	
YOUTHBRID	DGE COMMUNITY FOUND	NOITAC

Employer identification number

43-6064111

				instructions))	Yes	No	Yes	No	Yes	No			
organizat		ization (des		(described on lines 1- 9 above or IRC section (see	col (i) lis your gove docume	ted in erning	ın col (i) o suppoi	of your	col (i) org in the U	anızed	support		
) Nam suppor		(ii) EIN	(iii) Type of organization	(iv) Is organizat		(v) Did you the organi		(vi) Is organizat		, ,	i) Am mone	ount of tary
h 		Provide	the followi	ng information about	the support	ed organiza	tion(s)						
				lled entity of a perso						[1	.1g(iii)		
		` '	•	er of a person descri	` ,					<u> </u>	l1g(ii)		
		and (III) below, the	governing body of th	e supported	organızatıo	n?				11g(i)		
			J .	irectly or indirectly o	ontrols, eith	ner alone or	together with	persons de	escribed in (ii))		Yes	No
g			kugust 17, 2 ig persons?	2006, has the organı	zation accep	pted any gif	t or contributi	on from an	y of the				
•		check t	his box							III SUPP	orting of	gainz	Γ
e f	ı	other th	nan foundat ı 509(a)(2)	ox, I certify that the ion managers and oth	ner than one	or more pu	blicly support	ed organiza	ations describ	ed in sec	tion 509	(a)(1) or
11	_	one or the box	more public that descr Type I	ganized and operated ly supported organiz- ibes the type of supp b Type II c	ations descr orting organ Type II	ribed in sect nization and II - Functior	tion 509(a)(1 complete line nally integrate) or sectiones 11e throed d	n 509(a)(2) S ugh 11h Type III - N	ee sectio on-functi	o n 509(a) onally in	(3). (Check ted
10	<u> </u>	_		ganized and operated	•	•							6
	_			ganızatıon after June 									
				oss investment inco						tax) from	busines	ses	
		receipt	s from activ	rities related to its ex	kempt functi	ons—subjec	ct to certain e	xceptions,	and (2) no mo	ore than 3	3 1/3% o	f	
9	Γ	Anorga	anization th	at normally receives	(1) more th	nan 331/3% (of its support	from contr	ıbutıons, mem	bership f	ees, and	gross	5
8	▽	An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in section 170(b)(1)(A)(vi). (Complete Part II) A community trust described in section 170(b)(1)(A)(vi) (Complete Part II)											
6 7	 			local government or	=						ا م م	- الطارا	
	_			(A)(iv). (Complete P	•								
5	Γ			erated for the benefit	t of a college	e or univers	ity owned or c	perated by	a governmen	tal unit d	escribed	ın	_
4	Γ			h organızatıon operat ıty, and state	ed in conjun	nction with a	n hospital des	cribed in s e	ection 1/0(b)((1)(A)(III). Enter	tne	
3				perative hospital sei									
2		A scho	ol described	d in section 170(b)(1	.)(A)(ii). (At	ttach Sched	lule E)						
1	\sqcap		•	ion of churches, or as				ection 170	(b)(1)(A)(i).				
The	rganı			te foundation becaus									

instructions

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.) Section A. Public Support Calendar year (or fiscal year beginning (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total in) 🟲 1 Gifts, grants, contributions, and membership fees received (Do not 171,938 193,253 176,633 12,179,450 940,415 13,661,689 include any "unusual grants ") 2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 171,938 193,253 176,633 12,179,450 940,415 13,661,689 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 204,701 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column **Public support.** Subtract line 5 from 13,456,988 line 4 Section B. Total Support Calendar year (or fiscal year (a) 2009 **(b)** 2010 (c) 2011 (d) 2012 (e) 2013 (f) Total beginning in) 🟲 171,938 176,633 193,253 12,179,450 940,415 13,661,689 Amounts from line 4 Gross income from interest, dividends, payments received on 424,794 427,670 534,992 689,541 1,098,027 securities loans, rents, royalties 3,175,024 and income from similar sources Net income from unrelated business activities, whether or not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 2,321 2,814 4,666 14,117 23,918 capital assets (Explain in Part IV) 11 Total support (Add lines 7 16,860,631 through 10) Gross receipts from related activities, etc (see instructions) 12 12 120,488 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check 13 Section C. Computation of Public Support Percentage 14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f)) 14 79 810 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 83 330 % 16a 33 1/3% support test—2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box **▶**▽ and **stop here.** The organization qualifies as a publicly supported organization b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization 17a 10%-facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported $\vdash \Gamma$ organization b 10%-facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization

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

Schedule A (Form 990 or 990-EZ) 2013 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. If the organization fails to qualify under the tests listed below, please complete Part II.) Section A. Public Support

Cale	ndar year (or fiscal year beginning in) 🟲	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not						
2	include any "unusual grants ") 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						
3	Gross receipts from activities that						
	are not an unrelated trade or						
4	business under section 513 Tax revenues levied for the						
•	organization's benefit and either						
	paid to or expended on its						
_	behalf The value of services or facilities						<u> </u>
5	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
7a	A mounts included on lines 1, 2,						
	and 3 received from disqualified persons						
ь	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						
8	Public support (Subtract line 7c						
	from line 6) ction B. Total Support						
	ndar year (or fiscal year beginning	() 2000	(1) 2010	() 2011	(1) 2012	() 2012	(C) T
				(A) 2011 I	(d) 2012	(e) 2013	(f) Total
	in) ►	(a) 2009	(b) 2010	(c) 2011	(4) 2012	(-,	(-,
9	in) ► A mounts from line 6	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(5, 2222	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	in) ► A mounts from line 6 Gross income from interest,	(a) 2009	(B) 2010	(6) 2011	(4) 2012	(0, 2000	(7,7,5,5,1)
9	in) ► A mounts from line 6	(a) 2009	(b) 2010	(6) 2011	(4) 2012	(5,232	
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated	(a) 2009	(b) 2010	(6) 2011	(4) 2012		
9 10a b	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on	(a) 2009	(b) 2010	(6) 2011	(4) 2322		
9 10a b	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)	(a) 2009	(b) 2010	(6) 2011			
9 10a b c 11	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c,	(a) 2009	(b) 2010	(c) 2011			
9 10a b c 11	In) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV)						
9 10a b c 11 12	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second				
9 10a b c 11 12 13 14	in) A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here	or the organizati	on's first, second	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage for 2013	or the organizati ic Support Pe (line 8, column (on's first, second ercentage f) divided by line	, thırd, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201	or the organization of the	on's first, second ercentage f) divided by line art III, line 15	, third, fourth, or		a 501(c)(3) orga	nization,
9 10a b c 11 12 13 14 Se 15 16 Se	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the	on's first, second ercentage f) divided by line art III, line 15 me Percenta	, third, fourth, or 13, column (f))	fifth tax year as a	a 501(c)(3) orga 15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization ic Support Performance (line 8, column (2 Schedule A, Paragraphic Performance) colors (line 10c, colors)	on's first, second ercentage f) divided by line art III, line 15 me Percentagolumn (f) divided	, third, fourth, or 13, column (f)) ge by line 13, colum	fifth tax year as a	15 16	nization,
9 10a b c 11 12 13 14 Se 15 16 Se 17 18	A mounts from line 6 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part IV) Total support. (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is f check this box and stop here ction C. Computation of Publ Public support percentage from 201 ction D. Computation of Inve	or the organization of the organization of the organization of the second of the secon	on's first, second ercentage f) divided by line art III, line 15 me Percentago olumn (f) divided A, Part III, line 1	, third, fourth, or 13, column (f)) ge by line 13, column	fifth tax year as a	15 16	nization,

33 1/3% support tests—2012. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18

is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 1 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions								
	Facts And Circumstances Test							
Retu	ırn Reference	Explanation						
		Schodulo A / Form 0	000 er 000 E7) 201					

Schedule A (Form 990 or 990-EZ) 2013

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DLN: 93493318044664

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

Supplemental Financial Statements

► Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b ► Attach to Form 990. ► See separate instructions. ► Information about Schedule D (Form 990) Open to Public

emal Revenue Service	and its instruc	tions is at <u>www.irs.gov/form990</u> .		Insp	ectior	า
Name of the orga			Emp	loyer identification nu	mber	
YOUTHBRIDGE COMP	MUNITY FOUNDATION		43-6	5064111		
Part I Orga	nizations Maintaining Donor Ad	vised Funds or Other Similar Fu			plete i	f the
	nızatıon answered "Yes" to Form 990), Part IV, line 6.				
		(a) Donor advised funds		(b) Funds and other a	ccounts	5
	r at end of year	14				4
33 3	ontributions to (during year)	664,402			100	,000
	rants from (during year)	463,822				0
	alue at end of year	15,265,475	<u> </u>		99	,920
funds are the	e organization's property, subject to the o			∀ Υα	es 「	No
used only for conferring in	r charitable purposes and not for the bene npermissible private benefit?	donor advisors in writing that grant funds c efit of the donor or donor advisor, or for any	othe	r purpose		No
		f the organization answered "Yes" to	Forn	n 990, Part IV, line	<u>/. </u>	
Preserva Protectio Preserva Complete lin			rtifie		rea	
easement on	n the last day of the tax year	Г		Held at the End of	the Ve	
a Total numbe	r of conservation easements	_	2a	Tield at the Elia of	the rec	-
	e restricted by conservation easements		2b			
_	onservation easements on a certified hist	oric structure included in (a)	2c			
d Number of co	onservation easements included in (c) ac cture listed in the National Register	quired after 8/17/06, and not on a	2d			
Number of co	onservation easements modified, transfer	red, released, extinguished, or terminated	by th	ne organization during		
the tax year	<u> </u>					
Number of st	tates where property subject to conserva	tion easement is located ►				
Does the org		the periodic monitoring, inspection, handle	— ıng of	violations, and	es 「	No
Staff and vol ►	unteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easeme	ents d	luring the year		
A mount of ex	xpenses incurred in monitoring, inspectin	g, and enforcing conservation easements	durıng	g the year		
	onservation easement reported on line 2: 170(h)(4)(B)(ii)?	(d) above satisfy the requirements of secti	on 17	70(h)(4)(B)(ı)	es 「	No
balance shee the organiza	et, and include, if applicable, the text of the took of the took of the text o		taten	nents that describes		
Com	plete if the organization answered "	· · · · · · · · · · · · · · · · · · ·				
works of art,	historical treasures, or other similar ass	116 (ASC 958), not to report in its revenu ets held for public exhibition, education, or to its financial statements that describes	rese	arch in furtherance of		
works of art,		116 (ASC 958), to report in its revenue st ets held for public exhibition, education, or se items				
(i) Revenues	s included in Form 990, Part VIII, line 1			► \$		
(ii) Assets II	ncluded in Form 990, Part X			► \$		
•	zation received or held works of art, histo ounts required to be reported under SFAS	rical treasures, or other similar assets for 3 116 (ASC 958) relating to these items	fınan	cial gain, provide the		_ -
a Revenues in	cluded in Form 990, Part VIII, line 1			F \$		

b Assets included in Form 990, Part X

Part	III Organizations Maintaining Co	llections of Art,	Histo	rical Trea	sures, or O	ther	· Similar Ass	ets (con	tınued)
	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ls, chec	k any of the	following that a	are a	significant use o	of its	
а	Public exhibition		d [Loan or e	exchange progr	rams			
b	Scholarly research		е Г	Other					
c	Preservation for future generations								
4	Provide a description of the organization's co	ollections and explai	n how th	ey further th	ne organization	ı's ex	empt purpose ın		
	During the year, did the organization solicit		,				_	r	–
Pari	assets to be sold to raise funds rather than to Escrow and Custodial Arrang						<u>'</u>	<u>'</u>	No_
Fall	Part IV, line 9, or reported an ar					u it	es to rollil 95	,0,	
	Is the organization an agent, trustee, custoo included on Form 990, Part X?					ets n		Yes	_ _{No}
b	If "Yes," explain the arrangement in Part XI:	I and complete the	following	j table	_				
					-		Amo	ount	
С	Beginning balance				-	1c			
d	Additions during the year				-	1d			
e •	Distributions during the year				-	1e			
f	Ending balance				L	1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	217				ı	Yes	No —
	If "Yes," explain the arrangement in Part XI:				-				<u> </u>
Par	t V Endowment Funds. Complete	f the organization (a)Current year	answe (b)Prio		to Form 990, c)Two years back			e) Four yea	rs hack
1a	Beginning of year balance	18,512,133		8,397,843	18,434,668		17,478,852		,888,986
	Contributions								
С	Net investment earnings, gains, and losses	1 021 752		1 510 993	722 204		1,755,649	2	006 652
d	Grants or scholarships	1,921,753 248,726		1,510,882 184,875	733,394 261,403	+	349,055	۷,	,096,653 85,742
	Other expenditures for facilities				<u> </u>				
	and programs	728,711		1,211,717	508,816	<u> </u>	450,778		421,045
	Administrative expenses	10.155.110		2.542.422	40.007.040				470.050
_	End of year balance	19,456,449		8,512,133	18,397,843	<u> </u>	18,434,668	17,	,478,852
2	Provide the estimated percentage of the cur	rent year end balanc	e (line 1	g, column (a	a)) held as				
а	Board designated or quasi-endowment								
b	Permanent endowment ► 14 600 %								
	remporarily restricted endowment	100 %							
	The percentages in lines 2a, 2b, and 2c sho								
	Are there endowment funds not in the posse organization by	ssion of the organiza	tion tha	t are held an	id administere	d for t	the	Yes	No
	(i) unrelated organizations						3a(i)		
	(ii) related organizations						3a(ii)	No
_	If "Yes" to 3a(II), are the related organizatio	· ·				•	3b		
4	Describe in Part XIII the intended uses of the VI Land, Buildings, and Equipme				neward 'Ve	' to 1	Form 000 Dar	t TV line	
Pari	11a. See Form 990, Part X, line		ne orga	iiiizatioii ai	iiswered res		ronn 990, Par	t IV, IIIIe	3
	Description of property			(a) Cost or othersis (investment			(c) Accumulated depreciation	(d) Book	k value
1 a L	and				82	,269		1	82,269
b B	uildings		.		3,398	3,467	2,343,085	1,	055,382
c L	easehold improvements								
d E	quipment				31	,716	23,671		8,045
e 0	ther				I	,034	7,304	I	2,730
	. Add lines 1a through 1e <i>(Column (d) must e</i>		<u> </u>			,034	,,304 ⊳ -	+	148,426

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
)Financial derivatives		Cost of end-of-year market value
)Closely-held equity interests		
her		
tal. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
rt VIII Investments—Program Related. (
See Form 990, Part X, line 13.		Transwered Tes to Form 930, Furtiv, line
(a) Description of investment	(b) Book value	(c) Method of valuation
_		Cost or end-of-year market value
		<u> </u>
		<u> </u>
tal. (Column (b) must equal Form 990, Part X, col (B) line 13.)	▶	
		_ 0, Part IV, line 11d See Form 990, Part X, line 15
	on answered 'Yes' to Form 99	D, Part IV, line 11d See Form 990, Part X, line 15 (b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	
	on answered 'Yes' to Form 99	
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description	on answered 'Yes' to Form 99	(b) Book value
Other Assets. Complete if the organization (a) Description (a) Description (a) PERPETUAL TRUSTS	on answered 'Yes' to Form 990	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Described Perpetual Trusts Perpetual Trusts tal. (Column (b) must equal Form 990, Part X, col.(B) line	on answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Tal. (Column (b) must equal Form 990, Part X, col.(B) line Other Assets. Complete if the organization (a) Described to the organization (a) Described to the organization (b) PERPETUAL TRUSTS Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization (a) Described to the organization (b) Described to the organization (b) PERPETUAL TRUSTS	on answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization. Other Assets. Complete if the organization of the organization of the organization.	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization (a) Description of liability	on answered 'Yes' to Form 990 cription	(b) Book value 2,846,
tal. (Column (b) must equal Form 990, Part X, col.(B) line art X Other Liabilities. Complete if the org Form 990, Part X, line 25. (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
PERPETUAL TRUSTS tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
PERPETUAL TRUSTS (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846
PERPETUAL TRUSTS tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
PERPETUAL TRUSTS tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
PERPETUAL TRUSTS tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the org Form 990, Part X, line 25. (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25. (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Tal. (Column (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization Form 990, Part X, line 25. (a) Description of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability inderal income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability inderal income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Description (b) must equal Form 990, Part X, col.(B) line Part X Other Liabilities. Complete if the organization of liability deral income taxes	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,
Other Assets. Complete if the organization (a) Description (a) Description (b) PERPETUAL TRUSTS Part X Other Liabilities. Complete if the organization (b) Part X, Inne 25.	on answered 'Yes' to Form 990 cription 15.) Ganization answered 'Yes' to Form 990 cription	(b) Book value 2,846,

PART XII, LINE 2D - OTHER

PART XII, LINE 4B - OTHER

ADJUSTMENTS

ADJUSTMENTS

Par		evenue per Audited Financial Stat vered 'Yes' to Form 990, Part IV, line 1		nts With Revenue	per R	eturn Complete if
1	Total revenue, gains, and othe	r support per audited financial statements			1	5,910,390
2	A mounts included on line 1 bu	it not on Form 990, Part VIII, line 12				
а	Net unrealized gains on invest	ments	2a	1,393,033		
b	Donated services and use of fa	acılıtıes	2b	300,000		
c	Recoveries of prior year grants	s	2c			
d	Other (Describe in Part XIII)		2d	308,786		
e	Add lines 2a through 2d .				2e	2,001,819
3	Subtract line ${f 2e}$ from line ${f 1}$.				3	3,908,571
4	Amounts included on Form 99	0, Part VIII, line 12, but not on line 1				
a	Investment expenses not incl	uded on Form 990, Part VIII, line 7b .	4a			
b	Other (Describe in Part XIII)		4b	203,650		
c	Add lines 4a and 4b				4c	203,650
5		d 4c. (This must equal Form 990, Part I, line			5	4,112,221
Par		xpenses per Audited Financial Sta			s per	Return. Complete
		swered 'Yes' to Form 990, Part IV, line			1	1 026 246
1		raudited financial statements			-	1,926,246
2		t not on Form 990, Part IX, line 25	ا ء۔	1 200,000		
a		acilities		300,000	-	
b	, <u>-</u>		2b		+	
C			2c	F0.007	-	
d	,		2d	58,097	┪ .	250.007
e	Add lines 2a through 2d				2e	358,097
3		0. Down IV. has 25, but not on him 4.			3	1,568,149
4		0, Part IX, line 25, but not on line 1:	۱.	1		
a	•	uded on Form 990, Part VIII, line 7b	-	303.650	-	
Ь			4b	203,650	-	202650
_ C	Add lines 4a and 4b				4c	203,650
5		nd 4c. (This must equal Form 990, Part I, lin	e 18)		5	1,771,799
Prov Part		Part II, lines 3, 5, and 9, Part III, lines 1a, lines 2d and 4b, and Part XII, lines 2d and				de any additional
	Return Reference	Explanation				
PART	V, LINE 4	THE ORGANIZATION'S ENDOWMENT CONTROL C	A BO. ENDO	ARD DESIGNATED Q L WMENT FUNDS ARE L	JASI E JTILIZ	NDOWMENT ED TO SUPPORT THE
	XI, LINE 2D - OTHER STMENTS	CHANGE IN VALUE OF PERPETUAL TRU GROSS ON FINANCIAL STATEMENTS, R			ENT FE	ES SHOWN AT
	XI, LINE 4B - OTHER	INVESTMENT EXPENSES NETTED AGAI	NST IN	ICOME ON THE FINAI	VCIAL	STATEMENTS

ENDOWMENT FEES SHOWN AT GROSS ON FINANCIAL STATEMENTS, REMOVED FROM 990

INVESTMENT EXPENSES NETTED AGAINST INCOME ON THE FINANCIAL STATEMENTS

	<u> </u>	
Part XIII	Supplemental Info	ormation (continued)
Ret	turn Reference	Explanation

Schedule D (Form 990) 2013

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

Schedule I

(Form 990)

Department of the Treasury

YOUTHBRIDGE COMMUNITY FOUNDATION

Internal Revenue Service

Name of the organization

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

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

▶ Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

Employer identification number

DLN: 93493318044664

Open to Public Inspection

						43-6064111	
Part I General Information	n on Grants and	l Assistance				•	
 Does the organization maintain the selection criteria used to aw Describe in Part IV the organization 	vard the grants or as:	sıstance [?]					ר Yes □
Part II Grants and Other A Form 990, Part IV, lin							es" to
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of gra or assistance
See Additional Data Table							
2 Enter total number of section 50	1 01(c)(3) and governr	 ment organizations list	ed in the line 1 table.			▶	

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

I	Grants and Other Assistance to Individuals in the United States. Complete if the organization and	swered "Yes" to Form 99	D, Part IV, line 22.
_	Part III can be duplicated if additional space is needed.		

(a)Type of grant or assistance	(b) Number of recipients	(c) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance			
Part IV Supplemental Info	r mation. Provide the info	ormation required in Pa	rt I, line 2, Part III, col	umn (b), and any other a	dditional information.			
Return Reference Ex	planation							
PART I, LINE 2 ALI	ALL GRANTS ARE APPROVED BY THE BOARD AND FUNDS ARE UTILIZED IN SUPPORT OF QUALIFIED CHARITABLE ORGANIZATIONS THE							

ORGANIZATION HAS A GRANT APPLICATION PROCESS TO WHICH APPLYING ORGANIZATIONS MUST DEMONSTRATE HOW AND WHEN THE

INFORMATION ON THE GRANT APPLICATIONS TO THE MISSIONS AND OBJECTIVES OF YOUTHBRIDGE TO ENSURE THAT GRANT DOLLARS ARE AWARDED TO QUALIFIED CHARITABLE ORGANIZATIONS THAT SUPPORT THE OVERALL CHARITABLE MISSION OF THE FOUNDATION

FUNDS WOULD BE UTILIZED TO SUPPORT THEIR INDIVIDUAL PROGRAM MISSIONS THE BOARD OF DIRECTORS COMPARES THE

Additional Data

Software ID:

Software Version:

EIN: 43-6064111

Name: YOUTHBRIDGE COMMUNITY FOUNDATION

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

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
GLOBAL COLORS ONE LITTLE WEST 12TH ST NEW YORK, NY 10014	43-1492878	501(C)(3)	100,000				PROGRAM ACTIVITY FUNDING

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
HABITAT FOR HUMANITY TUCSON 3501 N MOUNTAIN AVE TUCSON,AZ 85705	43-1241854	501(C)(3)	75,000				HEADQUARTERS CONSTRUCTION FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
HAVEN HOUSE ST LOUIS 12685 OLIVE BLVD ST LOUIS,MO 63141	43-1735450	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
HUMANE SOCIETY OF MO 1201 MACKLIND AVE ST LOUIS,MO 63110	43-0652638	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
KIRKWOOD BAPTIST CHURCH 211 WOODLAWN AVE KIRKWOOD, MO 63122	43-1033862	501(C)(3)	34,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
MAPLEWOOD RICHMOND HEIGHTS ELEMENTARY 7539 MANCHESTER ROAD MAPLEWOOD,MO 63143	43-6002166	501(C)(3)	25,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
ST LOUIS EFFORT FOR AIDS 1027 S VANDEVENTER ST LOUIS,MO 63110	43-0955225	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING			

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CATHOLIC COMMUNITY SERVICES OF SOUTHERN ARIZONA 140 W SPEEDWAY BLVD STE 230 TUCSON,AZ 85705	86-0100880	501(C)(3)	12,500				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CATHOLIC DIOCESE OF JEFFERSON CITY 2207 W MAIN ST JEFFERSON CITY, MO 65109	30-0323063	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING				

Form 990, Schedule 1, Part 11, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
COMMUNITY FOOD BANK INC - TUSCON PO BOX 26727 TUCSON,AZ 85726	51-0192519	501(C)(3)	8,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
COMMUNITY TREATMENT INC 227 E MAIN ST FESTUS,MO 63028	36-2800788	501(C)(3)	9,128				PROGRAM ACTIVITY FUNDING			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance				
CONNECTIONS TO SUCCESS 3000 LITTLE HILLS EXPRESSWAY STE 102 ST CHARLES,MO 63301	43-1859283	501(C)(3)	10,250				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Pai	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONVOY OF HOPE 330 S PATTERSON SPRINGFIELD, MO 65802	68-0051386	501(C)(3)	19,993				PROGRAM ACTIVITY FUNDING

(a) Name and address of organization (b) EIN (c) IRC Code section organization (d) Amount of cash organization (f) Method of valuation or assistance (e) Amount of non-cash assistance or assistance (heave sentence) (heave senten											
` '	(b) EIN	` '	• •	cash	` '	non-cash assistance					
CROSSROADS COLLEGE PREPARATORY SCHOOL 500 DE BALIVIERE AVE ST LOUIS,MO 63112	23-7363267	501(C)(3)	15,000				PROGRAM ACTIVITY FUNDING				

<u>Form 990,</u> Schedule I, Pa	<u>rt II, Grants an</u>	<u>id Other Assistanc</u> e	<u>a to Governments</u>	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
DENT COUNTY ANIMAL WELFARE SOCIETY PO BOX 565 SALEM,MO 65560	43-1561296	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING

Form 990,Schedule I, Pai	rt II, Grants an	d Other Assistance	e to Governments	and Organizations	s in the United Sta	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
FOSTER CARE COALITION OF GREATER ST LOUIS INC 1750 SOUTH BRENTWOOD BOULEVARD SUITE 210 ST LOUIS,MO 63144	43-1570225	501(C)(3)	25,000				PROGRAM ACTIVITY FUNDING

(a) Name and address of organization or government or gove											
organization	(b) EIN	` '	` '	cash	valuation	non-cash assistance	` ' '				
GATEWAY CENTER FOR GIVING 1141 S 7TH ST ST LOUIS,MO 63104	43-0953940	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING				

Form 990,Schedule I, Pa	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
INCARNATE WORD FOUNDATION MISSOURI 2788 NORMANDY DR ST LOUIS,MO 63121	43-0893321	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING

(a) Name and address of or government or gov												
organization	(b) EIN	` '	` '	cash	valuation (book, FMV, appraisal,	non-cash assistance	` ' '					
OPERATION FOOD SEARCH INC 6282 OLIVE BLVD ST LOUIS,MO 63130	43-1241854	501(C)(3)	10,000				PROGRAM ACTIVITY FUNDING					

Form 990,Schedule I, Pa	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
PLANNED PARENTHOOD OF THE ST LOUIS REGION 4251 FOREST PARK AVE ST LOUIS,MO 63108	43-0652666	501(C)(3)	15,000				PROGRAM ACTIVITY FUNDING

Form 990,Schedule I, Pai	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
TOUCHPOINT AUTISM SERVICES INC 13545 BARRETT PARKWAY DRIVE SUITE 300 ST LOUIS,MO 63021	43-0827160	501(C)(3)	11,000				PROGRAM ACTIVITY FUNDING

<u>Form 990,Schedule I, Pa</u>	<u>rt II, Grants an</u>	<u>d Other Assistance</u>	<u>e to Governments</u>	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED TRIBES TECHNICAL COLLEGE 3315 UNIVERSITY DR BISMARCK,ND 58504	45-0314233	501(C)(3)	20,000				PROGRAM ACTIVITY FUNDING

Form 990,Schedule I, Pa	rt II, Grants an	d Other Assistance	e to Governments	and Organizations	<u>s in the United Sta</u>	tes	
(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
UNITED WAY OF GREATER ST LOUIS 910 N 11TH ST ST LOUIS,MO 63101	43-0714167	501(C)(3)	11,000				PROGRAM ACTIVITY FUNDING

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DLN: 93493318044664

Employer identification number

OMB No 1545-0047

Open to Public Inspection

Schedule L

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

Transactions with Interested Persons

► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ▶Information about Schedule L (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

YOUTHBRIDGE CC	MMUNITY FOUNDA	ALION						13-60	64111			
Part I Exc	ess Benefit	Transactio	ns (sect	ion 501(c)(3) and section	n 501(c)(4)).		
											40b	
1 (a) Nam	ne of disqualifie	d person (b) Relation	nship betwee	n dısqualıfıed	(c) De:	scription	of tra	nsaction	n	(d) Corr	rected?
			person and organization proganization managers or disqualified persons during the control of th								Yes	No
												•
												•
												•
2 Enterthe	amount of tax 11	ncurred by or	ganızatıon	managers or	disqualified pe	rsons during	the yea	r unde	rsectio	n		
4958 .									> \$			
3 Enter the	amount of tax, i	fany, on line	2, above,	reımbursed b	y the organizat	ion			> \$			
							r Form 9	90, P	art IV , li	ine 26,	or if the	
(a) Name of	(b)	(c)					(g) In		(h)		(i)Wr	ıtton
interested	Relationship	Purpose of	1 ` '		` ' -		defaul		Approv	/ed	agreen	
person	with	loan					"""	-	by		3.55	
	organization								board			
									or			
				T_	4			T	commi		+	T
			10	From			Yes	No	Yes	No	Yes	No
										-	_	
											_	
											_	
											_	
											_	
											_	
otal		▶ \$										
Part IIII Gr	ants or Assi	stance Be	nefitting	Intereste	ed Persons.							
Co	mplete if the	organızatıo	n answer	ed "Yes" on	i Form 990, P	art IV, line	27.					
(a) Name of i		b) Relationsh			ınt of assıstanc	:e (d) Tyj	e of ass	istand	:e (e) Purpo	se of ass	sistanc
perso	n Ir			e								
		organiza	ation									
-												

Part IV Business Transactions Involving Interested Persons.					
Complete if the organization	tion answered "Yes" on F	Form 990, Part IV, lin	e 28a, 28b, or 28c.		
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No
(1) NORM MOENKHAUS	NORM MOENKHAUS HAS A FATHER-SON RELATIONSHIP WITH MEMBER OF THE BOARD	75,000	CONSULTING SERVICES		No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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Schedule L (Form 990 or 990-EZ) 2013

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DLN: 93493318044664

OMB No 1545-0047

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SCHEDULE M (Form 990)

Department of the Treasury Internal Revenue Service

Noncash Contributions

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

▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990.

Inspection Employer identification number

Name of the organization YOUTHBRIDGE COMMUNITY FOUNDATION				Employer identification number				
1001	COUTHBRIDGE COMMONITY FOUNDATION				43-6064111			
Pa	rt I Types of Property							
		(a) Check If applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line	(d Method of d noncash contrib	etermır		ts
1	Art—Works of art							
2	Art—Historical treasures .							
3	Art—Fractional interests							
4	Books and publications							
5	Clothing and household goods							
6	Cars and other vehicles							
7	Boats and planes							
8	Intellectual property							
9	Securities—Publicly traded .	Х	1	556,064	FAIR MARKET VAL	UE		
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	O ther ▶ ()							
26	O ther ►()							
27	O ther ▶()							
28	O ther ▶ ()							
29	Number of Forms 8283 received for which the organization comple				29			
	·		, ,	-			Yes	No
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	s 1 through 28, that			
	ıt must hold for at least three ye	ars from th	e date of the initial contribu	ition, and which is not requ	ired to be used			
	for exempt purposes for the enti	re holding p	period?			30a		No
Ŀ	If "Yes," describe the arrangem	ent in Part :	II					
31	Does the organization have a gif	ft acceptan	ce policy that requires the	review of any non-standard	contributions?	31	Yes	
32a	Does the organization hire or us contributions?	•	ies or related organizations		noncash 	32a		No
b	If "Yes," describe in Part II							
33		t an amount	: in column (c) for a type of	property for which column	(a) is checked,			

Part II Supplem

Supplemental Information. Provide the information required by Part I, lines 30b,

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

Return Reference

Explanation

Schedule M (Form 990) (2013)

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OMB No 1545-0047

Open to Public

Inspection

DLN: 93493318044664

SCHEDULE 0 (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at

www.irs.gov/form990.

Employer identification number

43-6064111

990 Schedule O, Supplemental Information

Name of the organization YOUTHBRIDGE COMMUNITY FOUNDATION

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	
FORM 990, PART VI, SECTION B, LINE 12C	WHENEVER A BOARD MEMBER INDENTIFIES A POTENTIAL CONFLICT OF INTEREST, EITHER IN THEIR OWN CASE OR IN THE CASE OF ANOTHER BOARD MEMBER, THE SITUATION MUST BE BROUGHT TO THE ATTENTIO N OF THE PRESIDENT OF THE BOARD IF A CONFLICT IS PERCEIVED TO EXIST BY THE PRESIDENT, THE MATTER WILL BE BROUGHT TO THE FULL BOARD FOR DISCUSSION THE BOARD MEMBER INVOLVED WILL B E NOTIFIED AND REMOVED FROM ANY DISCUSSION PERTAINING TO THE CONFLICT UPON RESOLUTION, TH E PARTY OR PARTIES INVOLVED WILL BE ADVISED OF THE BOARD DECISION DECISIONS ARE REQUIRED TO BE DULY RECORDED IN THE BOARD RECORDS CONFLICT OF INTEREST STATEMENTS ARE OBTAINED FRO M NEW BOARD MEMBERS AT THE FIRST BOARD MEETING THAT THEY ATTEND, AND ARE UPDATED ANNUALLY AND COLLECTED AND REVIEWED BY THE CEO
FORM 990, PART VI, SECTION B, LINE 15	THE EXECUTIVE DIRECTORS COMPENSATION IS RECOMMENDED BY THE EXECUTIVE COMMITTEE AFTER COMPE TITIVE ANALYSIS (FOR SIMILAR POSITIONS AT SIMILAR NOT-FOR-PROFIT ORGANIZATIONS) AND IN CON SIDERATION WITH EXPERIENCE AND SUBMITTED TO THE BOARD FOR APPROVAL THE ORGANIZATION DOES NOT HAVE ANY OTHER OFFICERS OR KEY EMPLOYEES THE ORGANIZATION HAS NOT REPORTED ANY EMPLOY EES FOR 2013, AS THEY HAVE ENTERED INTO AN EMPLOYMENT AGREEMENT WITH A THIRD PARTY SERVICE PROVIDER, SIMPLOY, INC
FORM 990, PART VI, SECTION C, LINE 19	THE VARIOUS DOCUMENTS ARE AVAILABLE UPON A WRITTEN REQUEST ADDRESSED FOR THE ORGANIZATION'S OFFICE
FORM 990, PART IX, LINE 11G	SIMPLOY MANAGEMENT SERVICES PROGRAM SERVICE EXPENSES 343,832 MANAGEMENT AND GENERAL EXPE NSES 73,679 FUNDRAISING EXPENSES 73,679 TOTAL EXPENSES 491,190 CONTRACT SERVICE FEES P ROGRAM SERVICE EXPENSES 127,800 MANAGEMENT AND GENERAL EXPENSES 0 FUNDRAISING EXPENSES 0 TOTAL EXPENSES 127,800
PART IX, LINE 1	DURING 2013, THE FOUNDATION RESTRUCTED A PRIOR GRANT PAYABLE AGREEMENT WITH A RECIPIENT, W ASHINGTON UNIVERSITY AS A RESULT OF THE RESTRUCTING, THE FOUNDATION REDUCED ITS GRANT PAY ABLE COMMITTMENT AND RELATED DISCOUNT ON THE GRANT PAYABLE TO THE UNIVERSITY BY \$106,297 THIS RESTRUCTURING WAS RELFECTED ON THE 990 FOR 2013 AS A REDUCTION OF GRANT EXPENSE FOR T HE CURRENT YEAR THE FULL AMOUNT WAS REPORTED AS A GRANT AND ON SCHEDULE I IN THE PRIOR YE ARS WHEN THE ORIGINAL COMMITTMENT WAS MADE TO THE UNIVERSITY
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF PERPETUAL TRUSTS 250,689
<u> </u>	1