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DLN: 93493040007875

Form **990**

Department of the Treasury Internal Revenue Service

Return of Organization Exempt From Income Tax

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

A For the 2013 calendar year, or tax year beginning 04-01-2013 , 2013, and ending 03-31-2014

OMB No 1545-0047

2013

Open to Public Inspection

☐ Addre	ck if applicable	C Name of organization ST LOUIS COMMUNITY FOUNDATION		D Employer	identification number
	ess change			43-6023	3126
Name	e change	Doing Business As			
┌ Inıtıa	ıl return	Number and street (or P O box if mail is not delivered to street address) Room/suit	e	E Telephone	numher
┌ Term	nınated	319 NORTH FOURTH ST SUITE 300			
☐ Amer	nded return	City or town, state or province, country, and ZIP or foreign postal code		(314)58	8-8200
Apple	cation pending	ST LOUIS, MO 631021930		G Gross rece	ıpts \$ 13,969,483
		F Name and address of principal officer	H(a) Is th	nis a group re	
		AMELIA AJ BOND 319 NORTH FOURTH ST SUITE 300	subo	ordinates?	┌ Yes 🗸 No
		ST LOUIS, MO 631021930	H(b) Are	all subordinat	tes
			ınclı	ıded?	
<u>T</u> Tax-	-exempt status	5	If"N	lo," attach a l	list (see instructions)
J We	bsite: 🕨 W	NW STLGIVES ORG	H(c) Gro	up exemption	number ►
K Form	of organizatio	n Corporation ✓ Trust Association Other ►	L Year of f	ormation 1915	M State of legal domicile
Part	t I Sun	ımary			МО
		describe the organization's mission or most significant activities			
		ISTER CHARITABLE FUNDS FOR THE BETTERMENT OF ST LOUIS			
ည္					
Activities & Governance					
<u>₹</u>	2 Check t	his box 🔰 if the organization discontinued its operations or disposed o	more than	25% of its ne	t assets
উ	3 Normalian	and the second s		1	a l
χ ό (/)		of voting members of the governing body (Part VI, line 1a) of independent voting members of the governing body (Part VI, line 1b)		_	3 20 4 20
≝		imber of individuals employed in calendar year 2013 (Part V, line 2a) .		· · ⊢	5 12
∄		Imber of volunteers (estimate if necessary)		_	6 0
⋖		nrelated business revenue from Part VIII, column (C), line 12		 	7a 447,287
		elated business taxable income from Form 990-T, line 34			7b 200,658
			Pri	or Year	Current Year
	8 Contr	ributions and grants (Part VIII, line 1h)		3,285,928	1,122,813
ā l	9 Progr	am service revenue (Part VIII, line 2g)		1,469,32	3 1,672,798
Revenu		tment income (Part VIII, column (A), lines 3, 4, and 7d)		3,041,03	
- 1		revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		10,81	4 484,917
		revenue—add lines 8 through 11 (must equal Part VIII, column (A), line		7,807,096	6,718,670
		s and similar amounts paid (Part IX, column (A), lines 1–3)		2,278,92	7 4,797,221
	14 Bene	fits paid to or for members (Part IX, column (A), line 4)		(0
ا ۾		ies, other compensation, employee benefits (Part IX, column (A), lines		077 20	1 052 460
Expenses	5-10 16a Profe) ssional fundraising fees (Part IX, column (A), line 11e)		977,39	1,052,460
<u>क</u>					,
		undraising expenses (Part IX, column (D), line 25) ► 39,094 r expenses (Part IX, column (A), lines 11a-11d, 11f-24e)		1,854,492	2 1,991,648
		expenses Add lines 13–17 (must equal Part IX, column (A), line 25)		5,110,81	
		nue less expenses Subtract line 18 from line 12		2,696,28	
88			Beginnir	g of Current	End of Year
E E	20 Tele-1	posts (Part V. line 16)		Year	
CARCE I		assets (Part X, line 16)		76,570,173	
AB	21 Total	liabilities (Part X, line 26)		367,22! 76,202,95	
end B				10,202,55	

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

✓ Yes ☐ No

Part TV	Check	dist of	Required	Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	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		No
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 🕏	11e		No
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	Yes	
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	Yes	
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	Yes	
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	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer 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? <i>If "Yes," complete Schedule L, Part III</i>	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		No
C	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		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? If "Yes," complete Schedule N, Part II	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	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
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? If "Yes," complete Schedule R, Part V, line 2	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	
_		F	orm 99 0	0 (2013)

GII	Chack if School 10 Coopting a vaccine as a rotate to any line in this Bart V			_
	Check if Schedule O contains a response or note to any line in this Part V	<u> </u>	Yes	<u>.</u> l No
a	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable 1a 12		. 05	
	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			
	gaming (gambling) winnings to prize winners?	1c		
3	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? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	2b	Yes	
	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	Yes	
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O	3b	Yes	
	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		100	
	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 o
	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		
	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?	Joa		IN
	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?	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to			
	file Form 8282?	7c		Ν
	If "Yes," indicate the number of Forms 8282 filed during the year 7d			
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		N
	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		N
	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 Form 1098-C?	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		N
	Sponsoring organizations maintaining donor advised funds.	0-		N.I
	Did the organization make any taxable distributions under section 4966?	9a ob		N
	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		N
	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 facilities			
	Section 501(c)(12) organizations. Enter			
	Gross income from members or shareholders			
	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			
		12-		
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? If "Yes," enter the amount of tax-exempt interest received or accrued during the	12a		
	year			
	Section 501(c)(29) qualified nonprofit health insurance issuers.			
	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O	13a		
)	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			
	Did the organization receive any payments for indoor tanning services during the tax year?	14a	İ	N
	If "Yes " has it filed a Form 720 to report these payments? If "No " provide an explanation in Schedule O	14h		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a Part VI "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 response or note to any line in this Part	VΙ														
--	----	--	--	--	--	--	--	--	--	--	--	--	--	--	--

<u> </u>	ection A. Governing Body and Management					
					Yes	No
1 a	Enter the number of voting members of the governing body at the end of the tax year	1a	20			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			-		
b	Enter the number of voting members included in line 1a, above, who are independent	1b	20			
2	Did any officer, director, trustee, or key employee have a family relationship or a bus other officer, director, trustee, or key employee?		relationship with any	2		No
3				3		No
4	Did the organization make any significant changes to its governing documents since filed?		•	4		No
5	Did the organization become aware during the year of a significant diversion of the or	กลกเร	ration's assets?	5		No
6	Did the organization have members or stockholders?	gamz		6		No
	Did the organization have members, stockholders, or other persons who had the pow	erto.	elect or appoint one or	Ť		110
74	more members of the governing body?			7a		No
b	Are any governance decisions of the organization reserved to (or subject to approval or persons other than the governing body?		members, stockholders,	7b		No
8	Did the organization contemporaneously document the meetings held or written action year by the following	ons ur	ndertaken during the			
а	The governing body?			8a	Yes	
b	Each committee with authority to act on behalf of the governing body?			8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, organization's mailing address? If "Yes," provide the names and addresses in Schedule			9		No
Se	ection B. Policies (This Section B requests information about policies not i	requi	ired by the Internal R	evenu	ıe Cod	e.)
					Yes	No
10a	Did the organization have local chapters, branches, or affiliates?			10a	Yes	No No
	Did the organization have local chapters, branches, or affiliates? If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization	ivitie	s of such chapters,	10a 10b	Yes	
b	If "Yes," did the organization have written policies and procedures governing the act	ivitie: on's e	s of such chapters, xempt purposes?	10b	Yes	
b 11a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its	ivitie on's e s gov	s of such chapters, xempt purposes? erning body before filing	10b		
b 11a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization has the organization provided a complete copy of this Form 990 to all members of its the form?	ivitie: on's e s gov orm 9	s of such chapters, xempt purposes? erning body before filing 	10b		
b 11a b 12a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Form 990 to all members.	on's es gov orm 9	s of such chapters, exempt purposes? erning body before filing	10b	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form?	on's es s government of s gove	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a	Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this Ford the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with	s gov orm 9 y inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b	Yes Yes	
b 11a b 12a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done.	s gov orm 9 y inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c	Yes Yes Yes	
b 11a b 12a b c	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy?	sy inte	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revi	on's ess governments on some some some some some some some some	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13	Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the	civities on's e s gov form 9 y inte the p ewan	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization	civities on's e s gov form 9 y inte the p ewan	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisit independent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official	ivities on's e s gov	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14	Yes Yes Yes Yes Yes Yes Yes	
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisite persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization invest in, contribute assets to, or participate in a joint venture of the organization in the organizati	civities on's e s gov	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organication follows a written policy or procedure requiring the organication follows.	civities on's e s gov form 9 y inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization. Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with in Schedule O how this was done. Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revisindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official. Other officers or key employees of the organization. If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organic participation in joint venture arrangements under applicable federal tax law, and take	civities on's e s gov form 9 y inte the p ewan e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No
b 11a b 12a c 13 14 15 a b	If "Yes," did the organization have written policies and procedures governing the act affiliates, and branches to ensure their operations are consistent with the organization Has the organization provided a complete copy of this Form 990 to all members of its the form? Describe in Schedule O the process, if any, used by the organization to review this F Did the organization have a written conflict of interest policy? If "No," go to line 13. Were officers, directors, or trustees, and key employees required to disclose annuall rise to conflicts? Did the organization regularly and consistently monitor and enforce compliance with In Schedule O how this was done Did the organization have a written whistleblower policy? Did the organization have a written document retention and destruction policy? Did the process for determining compensation of the following persons include a revindependent persons, comparability data, and contemporaneous substantiation of the The organization's CEO, Executive Director, or top management official Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions) Did the organization invest in, contribute assets to, or participate in a joint venture of taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization participation in joint venture arrangements under applicable federal tax law, and take organization's exempt status with respect to such arrangements?	ivities on's e s gov form 9 y inte the p ew an e deli	s of such chapters, exempt purposes? erning body before filing	10b 11a 12a 12b 12c 13 14 15a 15b	Yes Yes Yes Yes Yes Yes Yes	No

- (3)s only) available for public inspection Indicate how you made these available Check all that apply
 - Own 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
- State the name, physical address, and telephone number of the person who possesses the books and records of the organization ►DWIGHT CANNING 319 N 4TH STREET SUITE 300 ST LOUIS, MO 63102 (314) 588-8200

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

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

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- 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) (B) (C) (D) (E) (E)										
(A) Name and Title	(B) A verage hours per week (list any hours for related	more pers and	than on is a dir	one bot ecto	not box h ar or/tr	offic ustee	ess er e)	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	omer	MISC)	MISC)	organization and related organizations
(1) KATHRYN L KIEFER	1 00	х						0	0	0
DIRECTOR	1 00							0	9	
(2) MITCH MEYERS	1 00	х		х				0	0	0
TREASURER (3) JOHN C FORT	1 00									
DIRECTOR	1 00	х						0	0	0
(4) LAURNA C GOODWIN	1 00							_	_	-
CHAIR	1 00	X		Х				0	0	0
(5) FRANK J GUYOL III	1 00	х						0	0	0
DIRECTOR	1 00									
(6) RICHARD SAUGET DIRECTOR	1 00	x						0	0	0
(7) JAMES M SNOWDEN JR	1 00									
		Х						0	0	0
DIRECTOR (8) BRUCE B HOLLAND	1 00									
		х						0	0	0
OJRECTOR (9) KIMBALL R MCMULLIN	1 00									
		х						0	0	0
DIRECTOR (10) REBECCA S WEAVER	1 00	-								
		х						0	0	0
DIRECTOR (11) M DARNETTA CLINKSCALE	1 00									
	1 00	x						0	0	0
DIRECTOR (12) DONALD B POLING	1 00									
•	1 00	х		Х				0	0	0
VICE CHAIR	1 00				_					
(13) STEPHEN J RAFFERTY	1 00	x		Х				0	0	0
SECRETARY	1 00									
(14) SUSAN P SULLIVAN	1 00	x						0	0	0
DIRECTOR	1 00									
(15) JO ANN H ARNOLD	1 00	×						0	0	0
DIRECTOR	1 00									
(16) CHRISTOPHER S BOND	1 00	l x						0	0	0
DIRECTOR	1 00									
(17) L B ECKELKAMP JR	1 00	×						0	0	0
DIRECTOR	1 00	,								
										Form 990 (2013)

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

	(A) Name and Title	(B) A verage hours per week (list any hours	more pers and	than on is	one bot	not bo: h ar	checl c, unle n office rustee	ess er	(D) Reportable compensation from the organization	(E) Reportable compensatio from related	n I s	(F Estim amount o compen from	ated of other sation the
		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)	-	organiz and re organiz	lated
(18)	THOMAS R COLLINS	1 00	×						0		0		0
DIRE		1 00							, and the second		\dashv		
(19)	DENNIS J JACKNEWITZ	1 00	×						0		o		0
DIREC		1 00									_		
	WINTHROP B REED	1 00	x						0		o		0
DIREC	CTOR DWIGHT D CANNING	1 00 20 00									\dashv		
					х				115,494		0		7,507
VP/CF (22) /	-O AMELIA BOND	20 00 20 00				\vdash					\dashv		
	IDENT & CEO	20 00			×				215,064		0		13,979
	SENT & SES	20 00									1		
											\dashv		
											\dashv		
											_		
											\dashv		
	0.1.7.1						<u> </u>				\perp		
1b	Sub-Total			•	•								
C	Total (add lines the and to)			•	•		<u> </u>		330,558		0		21,486
d						L	<u> </u>		·		۷		21,460
2	Total number of individuals (including b \$100,000 of reportable compensation i				ed ai	DOVE	e) who	rec	eived more than				
												Yes	No
3	Did the organization list any former offi	cer. director or	trustea	e. kev	v em	olar	vee.o	r hic	nhest compensate	d employee		103	
_	on line 1a? If "Yes," complete Schedule J			•	•		• •				3		No
4	For any individual listed on line 1a, is th	ne sum of report	able c	ompe	ensa	tion	and	the	r compensation fro	om the			
	organization and related organizations of												
	ındıvıdual			•	•	•	•	•		• • •	4	Yes	
5	Did any person listed on line 1a receive									ndividual for			
	services rendered to the organization?	i res, comple	ie Sche	auie.	э тог	suc	.n pers	on		[5		No
S-	ection B. Independent Contracto	rs											
1	Complete this table for your five highes	t compensated											
	compensation from the organization Re	port compensa								the organization			
		(A) usiness address							Description	(B) on of services		(C Comper	
												.,	
											+		
											\dashv		
											\dashv		
2	Total number of independent contractors	(including but i	not lim	ited t	o th	ose	listed	d ab	ove) who received	more than	- 1		

\$100,000 of compensation from the organization $\blacktriangleright 0$

Part V	ЛШ	Statement o	f Revenue ule O contains a respor	nse or note to any lir	ne in this Part VIII			
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
w 23	1a	Federated cam	paigns 1a					
ant m	ь	Membership du	es 1b					
9 H	c	Fundraising eve	ents 1c					
ffs, ≓A	d	Related organiz	zations 1d					
:5 <u>=</u>	e	Government grants						
Contributions, Gifts, Grants and Other Similar Amounts				1,122,813			-	-
uti.	f	similar amounts no	ons, gifts, grants, and 1f ot included above					
를	g	Noncash contribute 1a-1f \$	ons included in lines	91,320				
Cont	h	Total. Add lines	s 1a-1f		1,122,813			
				Business Code				
in le	2a	ADMINISTRATION :	SERVICE	561000	1,597,398	1,597,398		
88 ₹	ь	GRANT REVIEW FE	ES	561000	60,000	60,000		
93	c	GRANT REFUND R	EV	561000	15,400	15,400		
ē.	d							
ග 2	e							
Program Serwce Revenue	f	All other progra	am service revenue					
Ě	g	Total. Add lines	s 2a-2f		1,672,798			
	3		ome (ıncludıng dıvıden		1,699,733			1,699,733
	4		ar amounts)	F	1,033,733			1,033,733
	5	Royalties						
			(ı) Real	(11) Personal				
	6a	Gross rents						
	b	Less rental expenses						
	C	Rental income or (loss)						
	d	Net rental inco	me or (loss)					
	_	Constant and a second	(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory	8,989,222					
	b	Less cost or other basis and	7,250,813					
	c	sales expenses Gaın or (loss)	1,738,409					
	d	Net gain or (los	ss)		1,738,409			1,738,409
ii e	8a	Gross income f						
Other Revenue		s of contributions See Part IV, lin	reported on line 1c) se 18					
the i	ь	Less direct ex	penses b					
Ö	c	Net income or ((loss) from fundraising	events 🛌				
	9a	Gross Income f See Part IV, lin	rom gaming activities ne 19 a					
	b	Less direct ex	penses b					
	C	Net income or ((loss) from gamıng actı	vities				
	10a	Gross sales of returns and allo						
	ь	Less cost of g	oods sold b					
	С		(loss) from sales of inv	-				
	44	Miscellaneous		Business Code 531310	484,383		447,287	37,096
	11a b	PASSTHROUG		561000	534	534	777,207	37,090
	c	OTHER REVEN	100	232300	551	331		
	d	All other reven	ue					
	e	Total. Add lines		🕨	404.047			
	12	Total revenue.	See Instructions .	▶	484,917			n 47
	J				6,718,670	1,673,332	447,287	3,475,238

Part IX Statement of Functional Expenses
Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

75 Sh. Oh and 10h of Dock VITT. Total expenses Program service Management and Fund		Check if Schedule O contains a response or note to any line in this	Part IX	<u> </u>	<u> </u>	
### In the United States See Part IV, line 22 Grants and other assistance to individuals in the United States See Part IV, line 22 109,151				Program service	Management and	(D) Fundraising expenses
United States See Part IV, line 22 3 Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, line 15 and 16 4 Benefits paid to or for members 5 Compensation of current officers, directors, trustees, and key employees	1		4,688,070	4,688,070		
States See Part IV, lines 15 and 16	2		109,151	109,151		
5 Compensation of current officers, directors, trustees, and key employees . 380,751 323,038 57,113	3	organizations, and individuals outside the United				
Registroop Reg	4	Benefits paid to or for members				
(as defined under section 4958 (f)(11) and persons described in section 4958 (c)(3)(8) 7 Other salaries and wages 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 9 Other employee benefits 57,094 42,820 14,274 11 Fees for services (non-employees) 8 Management 661,666 661,666 9 Legal 661,666 661,666 16 Legal 7 Accounting 42,900 36,465 6,435 40 Lobbying 7 Investment management fees 9 Other (If line 11 g amount exceeds 10% of line 25, column (A) amount, list line 11 g expenses on Schedule O) 10 Advertising and promotion 11 Information technology 12 Advertising and promotion 13 Office expenses 56,291 42,218 11,256 14 Information technology 15 Royalties 16 Occupancy 80,621 60,466 16,124 17 Travel 19 Augusts of travel or entertainment expenses for any federal, state, or local public officials 19 Conferences, conventions, and meetings 10 Interest 10 Expenses Itemize expenses in line 24e a Plane 24e a mount exceeds 10% of line 25 (2,266 11,6984 4,597) 10 Travel 11 ROPESSIONAL DEVELOPMEN 11,092 11,093 11,093 22,555 11,094 2,766 11,093 11,095 22,5550 276,645 11,097 2,752,550 276,645 11,091 2,766 2,752,550 276,645 11,091 2,766 2,752,550 276,645 10 Interest 10 Interest 11 Office expenses Itemize expenses in line 24e expenses on Schedule O) 12 Advertising and promotion accounted exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O) 17 Accounted the service of	5		380,751	323,638	57,113	
Pension plan accruals and contributions (include section 401(k) and 403 (b) employer contributions) 54,261 40,696 13,365 140,776 142,870 142,774 10 Payroll taxes 54,470 46,299 8,171 11 Pees for services (non-employees)	6	(as defined under section 4958(f)(1)) and persons				
main 403 (b) employer contributions) 54,781 40,696 13,565 17,094 42,820 14,274 10 10 10 10 10 10 10 1	7	Other salaries and wages	505,884	430,001	75,883	
10 Payroll taxes 54,470 46,299 6,171 11 Fees for services (non-employees) a Management b Legal c Accounting d Lobbying	8	and 403(b) employer contributions)	54,261	40,696	13,565	
11 Fees for services (non-employees) 661,666 661,666 a Management 661,666 661,666 661,666 b Legal 53,421 45,408 8,013 c Accounting 42,900 36,465 6,435 d Lobbying Professional fundraising services See Part IV, line 17 42,900 36,465 6,435 f Investment management fees 441,814 441,814 441,814 441,814 g Cher (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 74,618 50,912 10,883 12 Advertising and promotion 150,175 129,712 11,816 13 Office expenses 56,291 42,218 11,258 14 Information technology 59,809 44,857 11,962 15 Royalties 9 11,812 3,150 16 Occupancy 80,621 60,466 16,124 17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local	9	Other employee benefits	57,094	42,820	14,274	
a Management 661,666 661,666 661,666 b Legal 53,421 45,408 8,013 c Accounting 42,900 36,465 6,435 d Lobbying 42,900 36,465 6,435 e Professional fundraising services See Part IV, line 17 1 441,814 441,814 f Investment management fees 441,814 441,814 441,814 g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O) 74,618 50,912 10,883 12 Advertising and promotion 150,175 129,712 11,816 13 Office expenses 56,291 42,218 11,258 14 Information technology 59,809 44,857 11,962 15 Royalities 80,621 60,466 16,124 17 Travel 80,621 60,466 16,124 17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22,646 16,984	10	Payroll taxes	54,470	46,299	8,171	
b Legal	11	Fees for services (non-employees)				
C Accounting 42,900 36,465 6,435 C Lobbying	а	Management	661,666	661,666		
Description	b	Legal	53,421	45,408	8,013	
Professional fundraising services See Part IV, line 17 Investment management fees	C	Accounting	42,900	36,465	6,435	
F Investment management fees	d	Lobbying				
Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	e	Professional fundraising services See Part IV, line 17				
Column (A) amount, list line 11g expenses on Schedule O)	f	Investment management fees	441,814	441,814		
12 Advertising and promotion 150,175 129,712 11,816 13 Office expenses 56,291 42,218 11,258 14 Information technology 59,809 44,857 11,962 15 Royalites 80,621 60,466 16,124 16 Occupancy 80,621 60,466 16,124 17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22,646 16,984 4,529 19 Conferences, conventions, and meetings 22,646 16,984 4,529 20 Interest 214,593 214,593 11,403 21 Payments to affiliates 214,593 214,593 11,403 22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance 13,414 10,060 2,683 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) 13,928 10,446 2,786 b DUES & MEMBERSHIPS 11,817 8,923 2,379 c MISCELLANEOUS 11,271	g	column (A) amount, list line 11g expenses on	7// 618	50 012	10.883	12,823
13 Office expenses 56,291 42,218 11,258 14 Information technology 59,809 44,857 11,962 15 Royalties 80,621 60,466 16,124 17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22,646 16,984 4,529 19 Conferences, conventions, and meetings 22,646 16,984 4,529 20 Interest 214,593 214,593 21 Payments to affiliates 214,593 214,593 22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance 13,414 10,060 2,683 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) 13,928 10,446 2,786 b DUES & MEMBERSHIPS 11,897 8,923 2,379 c MISCELLANEOUS 11,271 8,453 2,254 d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 25 Total functional expenses. Add lines 1 through 24e 7,841,329 <td< td=""><td>12</td><td></td><td>· ·</td><td>, , , , , , , , , , , , , , , , , , ,</td><td>' </td><td>8,647</td></td<>	12		· ·	, , , , , , , , , , , , , , , , , , ,	' 	8,647
14 Information technology 59,809 44,857 11,962 15 Royalties 80,621 60,466 16,124 16 Occupancy 80,621 60,466 16,124 17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22,646 16,984 4,529 19 Conferences, conventions, and meetings 22,646 16,984 4,529 20 Interest 2 2 2 2 4 4,529 20 Interest 2 2 4 4,529 4 4,529 21 Payments to affiliates 2 22,646 16,984 4,529 4 21 Payments to affiliates 2 214,593 214,593 214,593 11,403 22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance 13,414 10,060 2,683 24					 	2,815
15 Royalties		·		<u> </u>	 	2,990
16			33,003	11,037	11,502	2,330
17 Travel 15,749 11,812 3,150 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 22,646 16,984 4,529 19 Conferences, conventions, and meetings 22,646 16,984 4,529 20 Interest 214,593 214,593 21 Payments to affiliates 214,593 214,593 22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance 13,414 10,060 2,683 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) 39ECIAL EVENTS 13,928 10,446 2,786 b DUES & MEMBERSHIPS 11,897 8,923 2,379 c MISCELLANEOUS 11,271 8,453 2,254 d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 e All other expenses 2,455 1,841 491 25 Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined		,	80.621	60.466	16.124	4,031
18Payments of travel or entertainment expenses for any federal, state, or local public officials			· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	787
19 Conferences, conventions, and meetings 22,646 16,984 4,529 20 Interest 21,093 214,593 214,593 21 Payments to affiliates 214,593 214,593 214,593 22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance 13,414 10,060 2,683 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) 13,928 10,446 2,786 5 DUES & MEMBERSHIPS 11,897 8,923 2,379 MISCELLANEOUS 11,271 8,453 2,254 PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 4Il other expenses All other expenses Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined 7,841,329 7,525,590 276,645		Payments of travel or entertainment expenses for any federal,	23,7.13	11,012	3,255	
20	19		22,646	16,984	4,529	1,133
22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance	20		,	,	,	•
22 Depreciation, depletion, and amortization 57,017 42,763 11,403 23 Insurance	21	Payments to affiliates	214,593	214,593		
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) a SPECIAL EVENTS 13,928 10,446 2,786 b DUES & MEMBERSHIPS 11,897 8,923 2,379 c MISCELLANEOUS 11,271 8,453 2,254 d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 e All other expenses All other expenses All other expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	22		57,017	42,763	11,403	2,851
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) a SPECIAL EVENTS DUES & MEMBERSHIPS I1,897 MISCELLANEOUS PROFESSIONAL DEVELOPMEN All other expenses All other expenses All other expenses Total functional expenses. Add lines 1 through 24e Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	23	Insurance	13,414	10,060	2,683	671
b DUES & MEMBERSHIPS 11,897 8,923 2,379 c MISCELLANEOUS 11,271 8,453 2,254 d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 e All other expenses 2,455 1,841 491 25 Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined Incomplete the column (B) joint costs from a combined	24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10%				
c MISCELLANEOUS 11,271 8,453 2,254 d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 e All other expenses 2,455 1,841 491 25 Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined Institute of the control of the costs of t	а	SPECIAL EVENTS	13,928	10,446	2,786	696
d PROFESSIONAL DEVELOPMEN 7,363 5,522 1,473 e All other expenses 2,455 1,841 491 25 Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	b	DUES & MEMBERSHIPS	11,897	8,923	2,379	595
All other expenses 2,455 1,841 491 Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	c	MISCELLANEOUS	11,271	8,453	2,254	564
Total functional expenses. Add lines 1 through 24e 7,841,329 7,525,590 276,645 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	d	PROFESSIONAL DEVELOPMEN	7,363	5,522	1,473	368
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined	е	All other expenses	2,455	1,841	491	123
reported in column (B) joint costs from a combined	25	Total functional expenses. Add lines 1 through 24e	7,841,329	7,525,590	276,645	39,094
here ► ☐ If following SOP 98-2 (ASC 958-720)	26	reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check				

Part X Balance Sheet

		Check if Schedule O contains a response or note to any line in this $\mbox{\it Part}$	x			
				(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing		21,970		32,859
	2	Savings and temporary cash investments		3,497,570	2	2,443,278
	3	Pledges and grants receivable, net			3	
	4	Accounts receivable, net	ŀ	21,343	4	39,411
	5	Loans and other receivables from current and former officers, directors, employees, and highest compensated employees. Complete Part II of Schedule L	trustees, key		5	
Assets	6	Loans and other receivables from other disqualified persons (as defined section $4958(f)(1)$), persons described in section $4958(c)(3)(B)$, and c employers and sponsoring organizations of section $501(c)(9)$ voluntary beneficiary organizations (see instructions) Complete Part II of Schedu	ontributing employees'		6	
Š	7	Notes and loans receivable, net			7	
₹	8	Inventories for sale or use			8	
	9	Prepaid expenses and deferred charges	.	52,170	9	23,246
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a	477,502	·	_	
	ь	Less accumulated depreciation 10b	366,891	167,628	10c	110,611
	11	Investments—publicly traded securities		61,221,739	11	74,418,611
	12	Investments—other securities See Part IV, line 11	•	11,580,100	12	3,000,000
	13	Investments—program-related See Part IV, line 11	-		13	
	14	Intangible assets			14	
	15	Other assets See Part IV, line 11		7,657	15	0
	16	Total assets. Add lines 1 through 15 (must equal line 34)	F	76,570,177	16	80,068,016
	17	Accounts payable and accrued expenses		113,963	17	141,415
	18	Grants payable		231,895		243,000
	19	Deferred revenue	· .	,	19	· · ·
	20	Tax-exempt bond liabilities	-		20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D	•		21	
lities	22	Loans and other payables to current and former officers, directors, trust key employees, highest compensated employees, and disqualified	I			
Liabili		persons Complete Part II of Schedule L			22	
Ï	23	Secured mortgages and notes payable to unrelated third parties	-		23	
	24	Unsecured notes and loans payable to unrelated third parties	- H		24	
	25	Other liabilities (including federal income tax, payables to related third and other liabilities not included on lines 17-24) Complete Part X of Sc	parties,			
		D		21,367	25	0
	26	Total liabilities. Add lines 17 through 25		367,225	26	384,415
'n		Organizations that follow SFAS 117 (ASC 958), check here ▶ 🔽 and co	mplete			
<u>₽</u>		lines 27 through 29, and lines 33 and 34.				
5	27	Unrestricted net assets		76,202,952	27	79,683,601
ა 0	28	Temporarily restricted net assets	.		28	
2	29	Permanently restricted net assets			29	
Assets of Fulfil Balance		Organizations that do not follow SFAS 117 (ASC 958), check here ► Complete lines 30 through 34.	and			
Š	30	Capital stock or trust principal, or current funds			30	
į. Ž	31	Paid-in or capital surplus, or land, building or equipment fund	[31	
	32	Retained earnings, endowment, accumulated income, or other funds			32	
ž	33	Total net assets or fund balances	. [76,202,952	33	79,683,601
_	34	Total liabilities and net assets/fund balances		76,570,177	34	80,068,016

Par	Reconcilliation of Net Assets Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)	1		6,7	718,670
2	Total expenses (must equal Part IX, column (A), line 25)	2		7,8	341,329
3	Revenue less expenses Subtract line 2 from line 1	3			 L22,659
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4			202,952
5	Net unrealized gains (losses) on investments	5			503,308
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		79,6	583,601
Par	t XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				. ᅜ
				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 revi a separate basis, consolidated basis, or both	ewed o	n		
	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 sep basis, consolidated basis, or both	arate			
	☐ Separate basis ☐ Both consolidated and separate basis				
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversign audit, review, or compilation of its financial statements and selection of an independent accountant?	ht of th	ne 2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain Schedule O	ın			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in t Single Audit Act and OMB Circular A-133?	ne	За		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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As Filed Data -

DLN: 93493040007875

OMB No 1545-0047

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.

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

2013

Open to Public Inspection

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т	LOU	IS C	OMM	1UNΠ	ΥI	FOU	NDA	ΓΙΟΙ

Employer identification number

43-602312

Da	rt I	Reac	on for Pu	blic Charity Sta	tue (All or	nanizatione	must com	alete this i	143-6023 nart) See i		<u> </u>		
				te foundation becaus						11311 110115	· .		
1			· ·		•		-	•	-				
2	Ė	A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E)											
3	<u></u>			perative hospital se			•	n 170(b)(1)(A)(iii).				
4	<u></u>	•	A medical research organization operated in conjunction with a hospital described in section 170(b)(1)(A)(iii). Enter the										
-	•	hospita	ıl's name, cı	ity, and state			•						
5	Γ	Anorga	anızatıon op	erated for the benefi	t of a college	or universit	ty owned or o	perated by	a governmen	tal unit des	cribed in		
		sect ion	170(b)(1)((A)(iv). (Complete P	art II)								
6	Г	A feder	al, state, or	· local government or	government	al unit desc	rıbed ın secti	on 170(b)(1)(A)(v).				
7	Γ			at normally receives			support from	a governme	ental unit or f	rom the gen	eral publi	С	
8	굣			on 170(b)(1)(A)(vi). : described in sectior			nplete Part II	:)					
9	\vdash		-	at normally receives			•	-	outions, mem	bership fees	s, and gro	ss	
		_		rities related to its ex					•	· ·	-		
		ıts sup	port from gr	oss investment inco	me and unrel	ated busine	ss taxable ın	come (less	section 511	tax) from b	usinesses		
		acquire	ed by the org	ganızatıon after June	30,1975 S	ee section 5	509(a)(2). (C	omplete Pa	rt III)				
10	Γ	Anorga	anization or	ganized and operated	dexclusively	to test for p	oublic safety	See sectio	n 509(a)(4).				
11	ı	An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See section 509(a)(3). Check the box that describes the type of supporting organization and complete lines 11e through 11h a Type I b Type II c Type III - Type III - Type III - Non-functionally integrated											
e	Γ	other tl		ox, I certify that the ion managers and ot									
f		If the o	rganization this box	received a written do						III support	ing organ	ization,	
g			August 17, 2 ng persons?	2006, has the organi	zation accep	oted any gift	or contributi	on from any	of the				
			.	rectly or indirectly o	ontrols, eith	er alone or t	ogether with	persons de	scribed in (ii)	Yes	No	
		. , .		governing body of th	•		-	•	•	· .—	y(i)		
				er of a person descri		_					(ii)	 	
			•	lled entity of a perso			above?				(iii)	 	
h				ng information about									
(i) Name of supported organization		rted	ed organization		(iv) Is to organization col (i) listo your gove docume	on in ted in rning	(v) Did you the organiz in col (i) o suppor	zation f your	(vi) Is organizat col (i) org in the U	ion in janized	mon	(vii) A mount of monetary support	
				instructions))	Yes	No	Yes	No	Yes	No	7		
Total													

Schedule A (Form 990 or 990-EZ) 2013 Page 2 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 210,982 357,537 408,290 285,928 1,122,813 2,385,550 include any "unusual grants ") 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 210,982 357,537 408,290 285,928 1,122,813 2,385,550 Total. Add lines 1 through 3 The portion of total contributions by each person (other than a governmental unit or publicly 832,216 supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column Public support. Subtract line 5 from 1,553,334 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) 🟲 210,982 357,537 408,290 285,928 1,122,813 2,385,550 Amounts from line 4 Gross income from interest, dividends, payments received on 1,699,733 securities loans, rents, royalties 1,385,474 1,384,202 1,496,543 1,543,949 7,509,901 and income from similar sources Net income from unrelated business activities, whether or 2,438 2,163 3,392 447,287 455,280 not the business is regularly carried on 10 Other income Do not include gain or loss from the sale of 436 303 1,514,266 10,814 37,630 1,563,449 capital assets (Explain in Part IV) Total support (Add lines 7 11 11,914,180 through 10) Gross receipts from related activities, etc (see instructions) 12 12 6,911,820 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 13 040 % Public support percentage for 2012 Schedule A, Part II, line 14 15 15 15 700 % 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 ►V 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

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

supported organization

instructions

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	Amounts 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 17a or 17b; and Part III, line 12. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

THE ST LOUIS COMMUNITY FOUNDATION SATISFIES THE FACTS AND CIRCUMSTANCES TEST OUTLINED IN REGS 170(B)(1)(A)(I) THROUGH (VI) AND QUALIFIES AS A PUBLICLY SUPPORTED ORGANIZATION THE COMMUNITY FOUNDATION RECEIVED 13 04% OF ITS SUPPORT FROM GENERAL PUBLIC, A PERCENTAGE ABOVE THE 10% PUBLIC SUPPORT PERCENTAGE REQUIRED UNDER THE FACTS AND CIRCUMSTANCES TEST. IN ADDITION, THE COMMUNITY FOUNDATION MAINTAINS A CONTINUES AND BONA FIDE PROGRAM FOR SOLICITATION OF FUNDS FROM GENERAL PUBLIC, SEEKING GIFTS AND BEQUESTS DIRECTLY FROM A WIDE RANGE OF POTENTIAL DONORS THROUGHOUT THE COMMUNITY AND WORKING WITH LAWYERS, ACCOUNTANTS, INVESTMENT ADVISORS, TRUST OFFICERS AND OTHER WEALTH ADVISORS IN ALL PARTS OF THE COMMUNITY. TO FURTHER ENSURE THAT THE ST LOUIS COMMUNITY FOUNDATION REPRESENTS THE BROAD INTERESTS OF PUBLIC, ITS GOVERNING BODY IS COMPRISED OF MORE THAN TWENTY CIVIC LEADERS AND PROFESSIONALS REPRESENTING A BROAD CROSS-SECTION OF THE VIEWS AND INTERESTS OF THE COMMUNITY

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	OTHER REVENUE - 2009 AMOUNT \$ 436 2010 AMOUNT \$ 303 2011 AMOUNT \$ 1,253 2012 AMOUNT \$ 4,291 2013 AMOUNT \$ 534 PASSTHROUGH INCOME - 2011 AMOUNT \$ 1,513,013 2012 AMOUNT \$ 6,523 2013 AMOUNT \$ 37,096
SCHEDULE A, PART IV, LIST OF	DESCRIPTION 500 SHARES OF NON VOTING TRUE FITNESS TECHNOLOGY INC DATE 12/24/12 AMOUNT 3000000 DESCRIPTION 1 7% INTEREST IN ALEMEDA, LLC DATE 10/20/11 AMOUNT 3000375 DESCRIPTION 2 3% INTEREST IN BRENTMOOR, LLC, DATE 10/25/11 AMOUNT 4013100 DESCRIPTION 5 7% INTEREST IN HILLMAN, LLC DATE 10/20/11 AMOUNT 2009820

Schedule A (Form 990 or 990-EZ) 2013

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

DLN: 93493040007875

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

mal Revenue Service	and its instruc	ctions is at <u>www.irs.gov/form990</u> .			Inspec	tion	
lame of the orga			Emp	loyer identificati	on numbe	er	
T LOUIS COMMUNIT	Y FOUNDATION		43-6	5023126			
art I Orga	nizations Maintaining Donor Ad	vised Funds or Other Similar Fu			Comple	te ıf	the
	nization answered "Yes" to Form 990						
		(a) Donor advised funds		(b) Funds and ot	her acco	unts	
Total number	at end of year	58					
Aggregate co	ntributions to (during year)	180,439					
Aggregate gr	ants from (during year)	3,313,002					
Aggregate va	lue at end of year	25,576,640					
	nization inform all donors and donor advis organization's property, subject to the o	sors in writing that the assets held in donor organization's exclusive legal control?	radvi	sed	✓ Yes	Г	No
used only for		donor advisors in writing that grant funds c efit of the donor or donor advisor, or for any		r purpose	✓ Yes	Г	No
		f the organization answered "Yes" to	Form		<u> </u>		
Preservat Protectio Preservat Complete line	n of natural habitat tion of open space es 2a through 2d if the organization held	ganization (check all that apply) n or education)	rtified	d historic structu	re		
easement on	the last day of the tax year	_	T				
Total number	of conservation easements	<u> </u>	2-	Held at the E	na or tne	Yea	ır
		-	2a				
	e restricted by conservation easements inservation easements on a certified hist	toric structure included in (a)	2b				
		` '	2c				
	inservation easements included in (c) ac ture listed in the National Register	quired after 6/17/00, and not on a	2d				
Number of co	nservation easements modified, transfer	red, released, extinguished, or terminated	by th	e organization du	ırıng		
the tax year l	-						
Number of st	ates where property subject to conserva	tion easement is located 🛌	_				
	anization have a written policy regarding of the conservation easements it holds?	the periodic monitoring, inspection, handli	ng of	violations, and	┌ Yes	Γ	No
Staff and volu	unteer hours devoted to monitoring, inspe	ecting, and enforcing conservation easeme	nts d	uring the year			
A mount of ex	 penses 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	'0(h)(4)(B)(ı)	┌ Yes	Γ	No
balance shee		onservation easements in its revenue and e ne footnote to the organization's financial s ents					
art IIII Orga		ns of Art, Historical Treasures, o	r Oth	ner Similar As	ssets.		
If the organiz works of art,	ration elected, as permitted under SFAS 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 furtherand			
works of art,		116 (ASC 958), to report in its revenue st ets held for public exhibition, education, or se items				lıc	
(i) Revenues	included in Form 990, Part VIII, line 1			► \$			
(ii) Assets in	icluded in Form 990, Part X			► \$			
	ration received or held works of art, histo ounts required to be reported under SFAS	rical treasures, or other similar assets for 5 116 (ASC 958) relating to these items	finan	cial gain, provide	the		
Revenues inc	cluded in Form 990, Part VIII, line 1			► \$			
	. ,			• -			

b Assets included in Form 990, Part X

Part	Organizations Maintaining Co	llections of Art,	<u>His</u>	<u>tori</u>	<u>cal Tı</u>	reasu	res, or O	<u>ther</u>	Similar As	sets (c	continued)
3	Using the organization's acquisition, access collection items (check all that apply)	ion, and other record	ds, ch	neck a	any of	the follo	wing that a	ire a s	ignificant use	of its	
а	Public exhibition		d	Γ	Loan	or exch	nange progr	ams			
b	Scholarly research		e	Γ	Othe	r					
C	Preservation for future generations										
4	Provide a description of the organization's co	ollections and explai	n hov	w the	y furthe	er the o	rganızatıon	's exe	mpt purpose	ın	
5	During the year, did the organization solicit									-	-
Dov	assets to be sold to raise funds rather than to the sold to raise funds rather than to the sold to the									Yes	□ No
Pal	Part IV, line 9, or reported an an						i aliswele	u ie	S to Fulli s	,,	
1a	Is the organization an agent, trustee, custoc included on Form 990, Part X?						r other ass	ets no		┌ Yes	
b	If "Yes," explain the arrangement in Part XII	II and complete the	follov	wıng t	able						
									An	nount	
C	Beginning balance							1c			
d	Additions during the year							1d			
e	Distributions during the year							1e			
f	Ending balance							1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21?							┌ Yes	┌ No
b	If "Yes," explain the arrangement in Part XII	II Check here if the	expl	anatı	on has	been p	rovided in F	art X	III		Γ
Pa	rt V Endowment Funds. Complete										
4-	Daniman of warmhalana	(a)Current year 47,952,819	(b)	Prior y	ear 048,745	b (c) Tw	o years back 46,406,486		ree years back 41,079,258	(e)Four	years back 31,716,057
1a b	Beginning of year balance	912,065		40,0	10,131		6,247		150,482		13,067
C	Net investment earnings, gains, and losses	312,003			10,131		0,217		130,102		
		7,542,334			220,532		1,643,929		7,196,935		12,248,217
d	Grants or scholarships	1,462,398		1,2	289,324		1,023,040		1,079,575		2,334,809
e	Other expenditures for facilities and programs	407,200		-	751,164		584,166		249,877		221,069
f	Administrative expenses	786,806		- 2	286,101		400,711		375,673		342,203
g	End of year balance	53,750,814		47,9	952,819		46,048,745		46,406,486		41,079,258
2	Provide the estimated percentage of the cur	rent year end balanc	e (lır	ne 1g,	, colum	n (a)) h	neld as		•		
а	Board designated or quasi-endowment	100 000 %									
b	Permanent endowment >										
c	Temporarily restricted endowment ►										
_	The percentages in lines 2a, 2b, and 2c sho	uld equal 100%									
3a	Are there endowment funds not in the posse	ssion of the organiza	ition	that a	are hel	d and a	dmınıstered	for t	he		
	organization by									Yes	+
	(i) unrelated organizations (ii) related organizations		•	• •				•	3a(No No
b	If "Yes" to 3a(II), are the related organization							• •	3I		1
4	Describe in Part XIII the intended uses of the	·						_			
Par	t VI Land, Buildings, and Equipme		he o	rgan	ızatıoı	n answ	ered 'Yes	' to F	orm 990, Pa	rt IV, l	ine
	11a. See Form 990, Part X, line Description of property	10.		1 /2) Cost o	r other	(b)Cost or o	ther	(c) Accumulated	4 (4) 1	Book value
	Description of property				sis (inve		basis (oth		depreciation	1 (u)	JOOK Value
	Land			+				+			
	Buildings										
	Leasehold improvements						6	,823	6,8	23	0
	Equipment							,679	360,0	_	110,611
e	Other	<u></u>							·		
	I. Add lines 1a through 1e <i>(Column (d) must e</i>			ımn (l	B), line	10(c).)					110,611
									Schedule [) (Form	990) 2013

See Form 990, Part X, line 12. (a) Description of security or category	(b)Book value	(c) Method of valuation
(including name of security)	(2)2001. Turus	Cost or end-of-year market value
(1) Financial derivatives		
(2)Closely-held equity interests Other		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12)	F	
Part VIII Investments—Program Related. C	omplete ıf the organızatı	ion answered 'Yes' to Form 990, Part IV, line 11c.
See Form 990, Part X, line 13. (a) Description of investment	(b) Book value	(c) Method of valuation
(a) Description of investment	(b) Book value	Cost or end-of-year market value
Total. (Column (b) must equal Form 990, Part X, col (B) line 13)	+	
Part IX Other Assets. Complete if the organization		
(a) Descr	ription	(b) Book value
Total. (Column (b) must equal Form 990, Part X, col.(B) line 1		
Part X Other Liabilities. Complete if the organization of the organization of the property	anization answered 'Yes'	to Form 990, Part IV, line 11e or 11f. See
1 (a) Description of liability	(b) Book value	
Federal income taxes		
		-
	1	4
	+	-
Total. (Column (b) must equal Form 990, Part X, col (B) line 25)	<u> </u>	†
Total (Column (b) mast equal form 330, fart A, coll b) mic 23 /		

Part		nswered 'Yes' to Form 990, Part IV, line 12a.	егк	eturn Complete ir
1		other support per audited financial statements	1	
2	A mounts included on line	1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on in	vestments		
b	Donated services and use	of facilities		
С	Recoveries of prior year gi	rants		
d	Other (Describe in Part XI	II) 2d		
e	Add lines 2a through 2d		2e	
3	Subtract line 2e from line	1	3	
4	Amounts included on Form	n 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not	included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XI	II) 4b		
С	Add lines 4a and 4b		4c	
5	Total revenue Add lines 3	and 4c. (This must equal Form 990, Part I, line 12)	5	
Part	XIII Reconciliation o	f Expenses per Audited Financial Statements With Expenses	per	Return. Complete
		answered 'Yes' to Form 990, Part IV, line 12a.		т
1		s per audited financial statements	1	
2		1 but not on Form 990, Part IX, line 25		
а		of facilities	4	
b		<u>2b</u>	4	
С		<u>2</u> c	1	
d	Other (Describe in Part XI	<u> </u>	4	
е	-		2e	
3	Subtract line 2e from line :	L	3	
4	A mounts included on Form	n 990, Part IX, line 25, but not on line 1:		
а	·	ıncluded on Form 990, Part VIII, line 7b 4a		
b		II)	4	
С			4c	
5		3 and 4c. (This must equal Form 990, Part I, line 18)	5	
	XIII Supplemental			
	/, line 4, Part X, line 2, Par	f for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b t XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to		e any additional
	Return Reference	Explanation		
PART \	V, LINE 4	THE ST LOUIS COMMUNITY FOUNDATION USES THESE BOARD DES FOR THE PURPOSES SPECIFIED BY THE INDIVIDUAL FUND AGREEM BOARD APPROVED ANNUAL SPENDING POLICY TO DETERMINE OU DISTRIBUTION OF THESE FUNDS	1ENTS	, UTILIZING OUR
PART	X, LINE 2	THE FOUNDATION HAS ADOPTED ASC 740-10, INCOME TAXES, AS UNCERTAIN TAX POSITIONS AND HAS EVALUATED THEIR TAX POSITIONS AND HAS EVALUATED THEIR TAX POSITIONS AND HAS EVALUATED THEIR TAX POSITION TO PROVIDE THE INTERNAL REVENUE SERVICE FOUNDATION IS NOT CURRENTLY UNDER AUDIT NOR HAS THE FOUNDATION THE INTERNAL REVENUE SERVICE BASED ON THE FOUNDATION'S TAX POSITIONS, MANAGEMENT BELIEVES ALL POSITIONS THE POSITIONS THE POSITIONS THE POSITIONS THE POSITIONS THE POSITIONS HAS BEEN RECORDED AT MARCH 31,	SITIO EARS HOWE JNDA EVAL SITIO	NS TAKEN FOR ALL ARE OPEN AND VER, THE FION BEEN UATION OF THE NS TAKEN WOULD THE EFFECTS OF

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

Schedule D (Form 990) 2013

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DLN: 93493040007875

Employer identification number

OMB No 1545-0047

Schedule I (Form 990)

Department of the Treasury

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.

Open to Public **Inspection**

ST LOUIS COMMUNITY FOUNDATION 43-6023126 Part I General Information on Grants and Assistance Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and ✓ Yes Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed. (a) Name and address of **(b)** EIN (c) IRC Code (d) A mount of cash (e) A mount of non-(f) Method of (g) Description of (h) Purpose of grant organization section valuation non-cash assistance grant cash orassistance or government if applicable assistance (book, FMV, appraisal, other) See Additional Data Table

Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

83

1	Grants and Other Assistance to Individuals in the United States. Complete if the organization answered "Yes" to Form 990	Part IV,	line 22
	Part III can be duplicated if additional space is needed.		

(a)Type of grant or assistance	(b) Number of recipients	(c)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
(1) EDUCATION	33	109,151			

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

Peture Reference.

Return Reference	Explanation
PART I, LINE 2	EACH GRANT REFLECTS A COLLABORATIVE UNDERSTANDING OF THE DONOR'S CHARITABLE GOALS IN ESTABLISHING A FUND AND THE
•	COMMUNITY FOUNDATION'S UNDERSTANDING OF THE REGULATIONS THAT GOVERN CHARITABLE GRANTS, INCLUDING GRANTS TO
	INDIVIDUALS, AND THE PRACTICAL, ADMINISTRATIVE FACTS OF ASSURING APPROPRIATE RECORDKEEPING AND OVERSIGHT GRANTS
	ARE MADE ONLY TO ORGANIZATIONS WITH CONFIRMED 501(C)3, OR EQUIVALENT, NONPROFIT STATUS GUIDESTAR'S CHARITY CHECK
	IS USED TO VERIFY STATUS AND IDENTIFY SUPPORTING ORGANIZATIONS CONTINUED ON SUPPLEMENT PAGE CONTINUED FROM SCH I
	PART IV SUPPLEMENTAL INFORMAION GRANT RECIPIENTS RECEIVE WRITTEN INSTRUCTIONS ON USE OF GRANT FUNDS, FISCAL
	RESPONSIBILITY, LIABILITY, PUBLICITY AS WELL AS GRANT ACKNOWLEDGEMENT GUIDELINES ADVISORS TO DONOR ADVISED FUNDS
	RECEIVE WRITTEN GUIDELINES FOR ALLOWABLE GRANT RECOMMENDATIONS, RESTRICTIONS, AND THE PROHIBITION OF PERSONAL
	INUREMENT ADVISORS AGREE THAT NO GRANT RECOMMENDED FULFILLS A PERSONAL PLEDGE OR PROVIDES BENEFIT TO THE ADVISOR
	OR ADVISOR'S FAMILY MOST GRANTS ARE FOR GENERAL SUPPORT OF AN ORGANIZATION BUT RESTRICTED PURPOSE GRANTS ARE
	APPROVED AS WELL THE ORGANIZATION IS NOTIFIED AND REMINDED OF THE RESPONSIBILITIES OF ACCEPTING THE RESTRICTED
	GRANT IF WARRANTED, A MORE FORMAL GRANT AGREEMENT IS DRAWN UP TO SPECIFY EXPECTATIONS AND RESPONSIBILITES SOME
	RECIPIENTS OF GRANTS FROM DESIGNATED FUNDS ARE REQUIRED TO REPORT ANNUALLY ON USE OF GRANT FUNDS LACK OF
	REPORTING JEOPARDIZES SUBSEQUENT GRANTS FROM THE FOUNDATION IDENTIFICATION OF NONCOMPLIANCE WITH SPECIFIED USE
	OF FUNDS WILL RESULT IN REQUEST FOR RETURN OF GRANTS DISTRIBUTED

Additional Data

Software ID:

Software Version:

EIN: 43-6023126

Name: ST LOUIS 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
AMERICAN RED CROSS ST LOUIS AREA CHAPTER 10195 CORPORATE SQUARE ST LOUIS,MO 63132	53-0196605	501(C)(3)	6,000	0	N/A		GENERAL SUPPORT, PHILIPPINES TYPHOON RELIEF

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			
ARTS AND EDUCATION COUNCIL OF GREATER ST LOUIS 3547 OLIVE STREET ST LOUIS,MO 63103	43-0790672	501(C)(3)	12,785	0	N/A	•	ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
ASTHMA & ALLERGY FOUNDATION OF AMERICA ST LOUIS CHAPTER 1500 S BIG BEND SUITE 1S ST LOUIS,MO 63117		501(C)(3)	50,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
BANK STREET COLLEGE OF EDUCATION 610 WEST 112TH STREET NEW YORK,NY 10025	13-5562167	501(C)(3)	25,000	0	N/A	'	TO SUPPORT THE LONG TRIP			

Form 990,Schedule 1, 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			
BARNES-JEWISH HOSPITAL FOUNDATION 1001 HIGHLANDS PLAZA DR W 140 MAIL STOP 84-84-100 ST LOUIS,MO 63110	43-1648435	501(C)(3)	17,856	0	N/A		BOARD MEMBER ANNUAL GIFT, ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
CARE AND COUNSELING 12141 LADUE ROAD ST LOUIS,MO 63141	43-0914350	501(C)(3)	6,200	0	N/A		FOR PASTORAL COUNSELING SERVICES			

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			
CATHEDRAL BASILICA OF ST LOUIS 4431 LINDELL BLVD ST LOUIS,MO 63108	43-0653268	501(C)(3)	33,043	0	N/A		BENEFIT OF THE "ST LOUIS CATHEDRAL PARISH"			

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			
CATHOLIC CHARITIES OF ST LOUIS PO BOX 952393 ST LOUIS,MO 63195	43-0653270	501(C)(3)	36,643	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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				
CENTER OF CREATIVE ARTS AKA COCA 524 TRINITY AVENUE ST LOUIS,MO 63130	43-1395056	501(C)(3)	75,000	0	N/A	'	HILLMAN FUND FOR INNOVATION				

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			
CENTRAL PRESBYTERIAN CHURCH 7700 DAVIS DRIVE ST LOUIS,MO 63105	43-0688864	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
CENTRAL REFORM CONGREGATION 5020 WATERMAN AVE ST LOUIS,MO 63108	43-1336060	501(C)(3)	30,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States							
(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
CHRISTIAN BROTHERS COLLEGE HIGH SCHOOL INSTITUTIONAL ADVANCEMENT 1850 DE LA SALLE DRIVE ST LOUIS,MO 63141	43-0653280	501(C)(3)	10,000	0	N/A		BRIAN HOUGHTON MEMORIAL SCHOLARSHIP

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		
CITY ACADEMY INC 4175 N KINGSHIGHWAY ST LOUIS,MO 63115	31-1619379	501(C)(3)	21,750	0	N/A	N/A	GENERAL SUPPORT		

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			
CITY OF ST LOUIS MUNICIPAL LIBRARY DISTRICT 1415 OLIVE STREET ST LOUIS,MO 63103	43-6003232	501(C)(3)	63,900	0	N/A		ANNUAL DISTRIBUTION FOR "THE PURCHASE OF BOOKS APPROPRIATE TO THE STEEDMAN ARCHITECTURAL LIBRARY"			

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		
CLAL - THE NATIONAL JEWISH CENTER FOR LEARNING AND LEADERSHIP 440 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 10016	23-7390358	501(C)(3)	25,000	0	N/A		FOR THE DISRUPTIVE SPIRITUAL INNOVATION FUND		

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 FUNDS INC NEW YORK COMMUNITY TRUST 909 THIRD AVENUE NEW YORK, NY 10022	13-3062214	501(C)(3)	14,879	0	N/A	,	FOR THE BENEFIT OF THE SUSAN WELLS DONNELL FUND			

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			
COMMUNITY HEALTH IN PARTNERSHIP SERVICES - CHIPS 2431 N GRAND BOULEVARD ST LOUIS,MO 63106	43-1589851	501(C)(3)	21,800	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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 SCHOOL ASSOCIATION 900 LAY ROAD ST LOUIS,MO 63124	43-0653286	501(C)(3)	10,250	0	N/A	N/A	GENERAL SUPPORT			

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			
CORNERSTONE CHORALE AND BRASS INC PO BOX 249 FLORISSANT,MO 63032	43-1554774	501(C)(3)	25,000	0	N/A	,	CHALLENGE GRANT FOR THE PERIOD MARCH 15, 2014 - OCTOBER 31, 2014			

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			
CROWN CENTER FOR SENIOR LIVING 8350 DELCREST ST LOUIS,MO 63124	43-1695861	501(C)(3)	5,898	0	N/A		ANNUAL DISTRIBUTION FOR ENDOWMENT			

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			
CRUDEM FOUNDATION PO BOX 804 LUDLOW,MA 01056	43-1660199	501(C)(3)	5,200	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
CUSHING ACADEMY TRUSTEES PO BOX 8000 ASHBURNHAM,MA 01430	04-2104048	501(C)(3)	25,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(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				
DELTA GAMMA CENTER FOR CHILDREN WITH VISUAL IMPAIRMENTS 1750 S BIG BEND BLVD ST LOUIS,MO 63117	43-0725282	501(C)(3)	10,709	0	N/A	,	FOR THE MUSIC PROGRAM, IN HONOR OF ANNIE DONNELL				

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			
DONALD DANFORTH PLANT SCIENCE CENTER 975 NORTH WARSON RD ST LOUIS,MO 63132	31-1584621	501(C)(3)	12,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(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				
DRAKE UNIVERSITY OFFICE OF FINANCIAL PLANNING 2507 UNIVERSITY AVE DES MOINES,IA 50311	42-0680460	501(C)(3)	15,000	0	N/A		SUPPORT FOR BASKETBALL PRACTICE FACILITY				

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	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance			
FIRST BAPTIST CHURCH OF ST LOUIS CITY 3100 BELL AVENUE ST LOUIS,MO 63106	43-0271215	501(C)(3)	15,950	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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		
GATEWAY FESTIVAL ORCHESTRA OF ST LOUIS PO BOX 50211 ST LOUIS,MO 63105	43-0815081	501(C)(3)	10,000	0	N/A	N/A	CHALLENGE GRANT		

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			
HABITAT FOR HUMANITY ST LOUIS 3763 FOREST PARK AVENUE ST LOUIS,MO 63108	58-1735543	501(C)(3)	7,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(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				
HARVARD UNIVERSITY 124 MOUNT AUBURN CAMBRIDGE, MA 02138	04-2103580	501(C)(3)	5,300	0	N/A		ANNUAL DISTRIBUTION "FOR SCHOLARSHIPS IN THE NAME OF G [GUSTAVUS] L HARRIS				

Form 990,Schedule 1, Pa	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				
HAYIM FISCHEL EPSTEIN HEBREW ACADEMY 1138 N WARSON ROAD ST LOUIS,MO 63132	43-6001158	501(C)(3)	5,698	0	N/A		ANNUAL DISTRIBUTION "FOR THE EDUCATION OF JEWISH YOUTHS IN HEBREW"				

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			
HUMANE SOCIETY OF MISSOURI 1201 MACKLIND AVE ST LOUIS,MO 63110	43-0652638	501(C)(3)	467,640	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
JEWISH FEDERATION OF ST LOUIS 12 MILLSTONE CAMPUS DRIVE ST LOUIS,MO 63146	43-0652643	501(C)(3)	59,946	0	N/A		ANNUAL DISTRIBUTION FOR RABBINICAL STUDIES "SCHOLARSHIPS FOR THE EDUCATION OF JEWISH YOUTHS",GENERAL SUPPORT			

Form 990,Schedule I, Par	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				
JOHN BURROUGHS SCHOOL 755 SOUTH PRICE ROAD ST LOUIS,MO 63124	43-0652619	501(C)(3)	109,000	0	N/A	,	CAPITAL CAMPAIGN (2012 & 2013), SUPPORT FOR HAERTTER HALL				

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			
JUVENILE DIABETES RESEARCH FOUNDATION - ST LOUIS 50 CRESTWOOD EXECUTIVE CENTER ST LOUIS, MO 63126	23-1907729	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT			

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		
LADUE CHAPEL PRESBYTERIAN CHURCH 9450 CLAYTON ROAD ST LOUIS,MO 63124	43-0654861	501(C)(3)	9,400	0	N/A	•	FUND FOR NEW ORGAN, GENERAL SUPPORT		

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			
LEGAL SERVICES OF EASTERN MISSOURI 4232 FOREST PARK AVE ST LOUIS,MO 63108	43-0816805	501(C)(3)	11,595	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
LUTHERAN CHILD & FAMILY SERVICES OF ILLINOIS 7620 MADISON STREET RIVER FOREST,IL 60305	36-2167778	501(C)(3)	17,500	0	N/A		THIS IS A CHALLENGE GRANT FOR THE RENOVATION OF THE CHAPEL AT CAMP WARTBURG			

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			
LYON BLOW ACADEMY OF BASIC INSTRUCTION ST LOUIS PUBLIC SCHOOLS 516 LOUGHBOROUGH ST LOUIS,MO 63111	43-6003220	501(C)(3)	7,700	0	N/A		ANNUAL DISTRIBUTION "TO BE USED AND APPLIED BY THE PRINCIPAL OF SUCH SCHOOL			

Form 990, Schedule 1, 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			
MARY INSTITUTE & ST LOUIS COUNTRY DAY SCHOOL 101 N WARSON ROAD ST LOUIS,MO 63124	43-0653366	501(C)(3)	22,550	0	N/A		ANNUAL DISTRIBUTION FOR " PROVIDING PARTIAL AND FULL SCHOLARSHIPS AT MARY INSTITUTE FOR DESIRABLE AND WORTHY STUDENT, GENERAL SUPPORT			

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			
MARYVILLE UNIVERSITY 650 MARYVILLE UNIVERSITY DR ST LOUIS,MO 63141	43-0653369	501(C)(3)	100,000	0	N/A	,	MUSIC THERAPY PROGRAM OFFICE SUITE			

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			
MERCY HEALTH FOUNDATION ST LOUIS 615 S NEW BALLAS ST LOUIS, MO 63141	56-2410020	501(C)(3)	6,000	0	N/A	N/A	GENERAL SUPPORT			

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			
MIAMI CONSERVATORY OF MUSIC 2911 GRAND AVENUE SUITE 400A MIAMI,FL 33133	65-0998308	501(C)(3)	50,000	0	N/A	N/A	GENERAL SUPPORT			

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			
MISSOURI HISTORICAL SOCIETY PO BOX 11940 ST LOUIS,MO 63112	43-0654866	501(C)(3)	35,243	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
NATIONAL KIDNEY FDTN OF EASTERN MOMETRO EAST INC 1001 CRAIG ROAD SUITE 480 ST LOUIS,MO 63146	13-1673104	501(C)(3)	10,340	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
NATIONAL MARFAN FOUNDATION INC 22 MANHASSET AVENUE PORT WASHINGTON,NY 11050	52-1265361	501(C)(3)	10,000	0	N/A		GOLD SPONSOR HEARTWORKS, ST LOUIS C/O DR ALAN BRAVERMAN			

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			
NINE NETWORK OF PUBLIC MEDIA KETC CHANNEL 9 3655 OLIVE ST ST LOUIS,MO 63108	43-0685345	501(C)(3)	33,253	0	N/A	N/A	GENERAL SUPPORT			

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			
OPERA THEATRE OF SAINT LOUIS 210 HAZEL AVENUE ST LOUIS,MO 63119	43-0821958	501(C)(3)	39,269	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
PHILLIPS ACADEMY 180 MAIN STREET ANDOVER,MA 01810	04-2103579	501(C)(3)	5,300	0	N/A		ANNUAL DISTRIBUTION "FOR SCHOLARSHIPS IN THE NAME OF G [GUSTAVUS] L HARRIS			

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			
PRESBYTERY OF GIDDINGS-LOVEJOY 2236 TOWER GROVE AVENUE ST LOUIS,MO 63110	23-6393377	501(C)(3)	6,200	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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				
PROVIDENT INC 2650 OLIVE STREET ST LOUIS,MO 63103	43-0652630	501(C)(3)	18,175	0	N/A		ANNUAL DISTRIBUTION TO SUPPORT THE OPERATING EXPENSES ASSOCIATED WITH THE SOCIAL NETWORKING SITE, WWW FEELINGKINDABLUE COM				

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			
REPERTORY THEATRE OF ST LOUIS 130 EDGAR ROAD WEBSTER GROVES, MO 63119	43-0970273	501(C)(3)	11,299	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
SAINT LOUIS ART MUSEUM FOUNDATION 1 FINE ARTS DRIVE ST LOUIS,MO 63110	43-1374479	501(C)(3)	41,503	0	N/A	<i>'</i>	BEAUX ARTS COUNCIL SUPPORT			

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			
SAINT LOUIS SYMPHONY ORCHESTRA POWELL SYMPHONY HALL 718 NORTH GRAND BLVD ST LOUIS,MO 63103	43-0666769	501(C)(3)	61,778	0	N/A	•	ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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			
SAINT LOUIS UNIVERSITY 221 NORTH GRAND BLVD PRESIDENTS OFFICE DUBOURG 206 ST LOUIS,MO 63103	43-0654872	501(C)(3)	90,243	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
SALVATION ARMY 1130 HAMPTON AVENUE ST LOUIS,MO 63139	22-2406433	501(C)(3)	48,593	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT, SUPPORT FOR THE WOMEN'S AUXILIARY			

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			
SHEPHERD'S CENTER OF WEBSTERKIRKWOOD INC 1333 WEST LOCKWOOD AVENUE GLENDALE,MO 63122	43-1825056	501(C)(3)	52,000	0	N/A		MATCHING CHALLENGE GRANT FOR GENERAL SUPPORT			

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		
SOUTH CITY PREPARATORY ACADEMY 2900 SOUTH GRAND ST LOUIS,MO 63118	27-2404683	501(C)(3)	10,000	0	N/A	N/A	GENERAL SUPPORT		

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			
SPECIAL SCHOOL DISTRICT 12110 CLAYTON ROAD ST LOUIS,MO 63131	43-1900784	501(C)(3)	37,151	0	N/A	<i>'</i>	SCHOLARSHIP SUPPORT			

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		
ST ANDREW'S CHARITABLE FOUNDATION 6633 DELMAR BLVD ST LOUIS,MO 63130	26-0568165	501(C)(3)	19,500	0	N/A		SUPPORT FOR AGELESS REMARKABLE ST LOUISANS - 2013 PROGRAM SPONSOR		

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			
ST LOUIS ALTENHEIM 5408 S BROADWAY ST LOUIS,MO 63111	43-0653512	501(C)(3)	14,900	0	N/A		ANNUAL DISTRIBUTION "FOR THE PURPOSE OF PROVIDING ADDITIONAL COMFORTS FOR THE [RESIDENTS]			

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			
ST LOUIS ARC 1177 NORTH WARSON ROAD ST LOUIS,MO 63132	43-0718811	501(C)(3)	9,000	0	N/A	,	RR CAMP TEEN IN MOTION, STL SCENE PROGRAM			

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	cash	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance		
ST LOUIS CHILDREN'S HOSPITAL FOUNDATION ONE CHILDRENS PLACE ST LOUIS,MO 63110	43-1626863	501(C)(3)	15,575	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT, CAROUSEL SUPPORT		

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		
ST LOUIS MERCANTILE LIBRARY ASSOCIATION UMSLTHOMAS JEFFERSON BUILDING ONE UNIVERSITY BOULEVARD ST LOUIS, MO 63121	43-0694564	501(C)(3)	33,253	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT		

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			
ST LOUIS PUBLIC SCHOOLS BOARD OF EDUCATION 801 NORTH 11TH STREET ST LOUIS, MO 63101	43-6003220	501(C)(3)	6,400	0	N/A		ANNUAL DISTRIBUTION "TO BE DISTRIBUTED BY THE EXECUTIVE DIRECTOR OF STUDENT SUPPORT SERVICES TO MEET THE EMERGENCY NEEDS OF STUDENTS			

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 SCIENCE CENTER FOUNDATION 5050 OAKLAND AVENUE ST LOUIS,MO 63110	43-1496632	501(C)(3)	8,000	0	N/A	N/A	GENERAL SUPPORT			

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		
ST LOUIS SOCIETY FOR THE PHYSICALLY DISABLED 1187 CORPORATE LAKE DRIVE SUITE 100 100 ST LOUIS,MO 63132	43-0692190	501(C)(3)	10,340	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT		

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			
THE CHILDREN'S MERCY HOSPITAL 2401 GILLHAM ROAD KANSAS CITY,MO 64108	44-0605373	501(C)(3)	7,100	0	N/A		ANNUAL DISTRIBUTION "FOR THE CARE OF CRIPPLED CHILDREN"			

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			
THE HAVEN OF GRACE 1225 WARREN STREET ST LOUIS,MO 63106	43-1611181	501(C)(3)	25,000	0	N/A	N/A	GENERAL SUPPORT			

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States										
(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			
THE JOURNEY FELLOWSHIP 7701 MARYLAND AVENUE ST LOUIS,MO 63105	30-0174373	501(C)(3)	2,000,000	0	N/A	N/A	GENERAL SUPPORT			

-orm 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			
THE OASIS INSTITUTE 11780 BORMAN DRIVE SUITE 400 ST LOUIS,MO 63146	43-1830354	501(C)(3)	10,000	0	N/A	N/A	CHALLENGE GRANT			

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			
THE REGIONAL BUSINESS COUNCIL 7701 FORSYTH BOULEVARD SUITE 205 CLAYTON,MO 63105	43-1913803	501(C)(3)	40,000	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT			

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		
THE SOCIETY FOR THE PROPAGATION OF THE FAITH ARCHDIOCESE OF ST LOUIS 20 ARCHBISHOP MAY DRIVE ST LOUIS,MO 63119	43-0653600	501(C)(3)	10,340	0	N/A	N/A	GENERAL SUPPORT		

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States											
(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				
TRAILS REGIONAL LIBRARY 432 NORTH HOLDEN WARRENSBURG,MO 64093	43-1751370	501(C)(3)	7,000	0	N/A	N/A	GENERAL SUPPORT				

form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States												
(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					
VILLA DUCHESNEOAK HILL SCHOOL PO BOX 954764 ST LOUIS,MO 63195	43-1386584	501(C)(3)	6,800	0	N/A	N/A	GENERAL SUPPORT					

Form 990,Schedule I, Pai	rt II, Grants an	<u>d Other Assistance</u>	e to Governments	and Organization	s in the United Sta	ites	
(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
VISITING NURSE ASSOCIATION OF GREATER ST LOUIS 11440 OLIVE BLVD SUITE 200 ST LOUIS,MO 63141	43-1384263	501(C)(3)	5,075	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT

Form 990,Schedule I, Par	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						
WARRENSBURG CEMETERY 102 S HOLDEN WARRENSBURG, MO 64093	14-1160050	501(C)(3)	7,000	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT						

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					
WASHINGTON UNIVERSITY IN ST LOUIS CAMPUS BOX 1101 ST LOUIS,MO 63130	43-0653611	501(C)(3)	82,293	0	N/A	N/A	GENERAL SUPPORT					

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			
YALE UNIVERSITY 157 CHURCH STREET PO BOX 2038 NEW HAVEN,CT 06521	06-0646973	501(C)(3)	5,300	0	N/A		ANNUAL DISTRIBUTION "FOR SCHOLARSHIPS IN THE NAME OF WALTER B HARRIS			

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				
YESHIVA HIGH SCHOOL OF ST LOUIS 1146 N WARSON ROAD ST LOUIS,MO 63132	43-1114640	501(C)(3)	5,698	0	N/A		ANNUAL DISTRIBUTION FOR GENERAL SUPPORT				

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					
UNITED WAY OF GREATER STLOUIS 910 N 11TH STREET ST LOUIS,MO 63101	43-0714167	501(C)(3)	10,244	0	N/A	N/A	GENERAL SUPPORT					

Form 990,Schedule I, Part II, Grants and Other Assistance to Governments and Organizations in the United States												
(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					
UNIVERSITY OF MISSOURI - ST LOUIS 401 WOODS HALL ST LOUIS,MO 63121	43-6003859	501(C)(3)	5,100	0	N/A		ANNUAL DISTRIBUTION "FOR THE FINANCIAL ASSISTANCE OF SUCH STUDENTS AS SHALL APPEAR TO NEED AND DESERVE SUCH ASSISTANCE WHILE PURSUING A DEGREE					

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DLN: 93493040007875

OMB No 1545-0047

Department of the Treasury

Internal Revenue Service

Schedule J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees** ► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

► Attach to Form 990. ► See separate instructions. ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Open to Public Inspection

Name of the organization ST LOUIS COMMUNITY FOUNDATION **Employer identification number**

43-6023126

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

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

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

Note. The sum of columns (B)(1)-(111) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

(A) Name and Title		(B) Breakdown of	W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation reported as deferred in prior Form 990	
		(i) Base compensation	(ii) Bonus & ıncentıve compensatıon	(iii) Other reportable compensation	other deferred compensation		(B)(ı)-(D)		
(1)AMELIA BOND PRESIDENT & CEO	(i) (ii)	215,064 0	0 0	0 0	13,979 0	0	229,043 0	0	

Schedule J (Form 990) 2013

Part III Supplemental Information

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

Return Reference **Explanation**

Schedule J (Form 990) 2013

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DLN: 93493040007875

Employer identification number

OMB No 1545-0047

Noncash Contributions

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

Department of the Treasury Internal Revenue Service

Name of the organization

SCHEDULE M

(Form 990)

► Attach to Form 990. ▶Information about Schedule M (Form 990) and its instructions is at www.irs.gov/form990. Open to Public <u>Inspection</u>

61 LC	DUIS COMMUNITY FOUNDATION				43-6	023126			
Pā	TTT 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 1g	r	(d Method of do oncash contrib	etermi	_	its
	Art—Works of art				<u> </u>				
	Art—Historical treasures .				<u> </u>				
_	Art—Fractional interests				<u> </u>				
	Books and publications								
	Clothing and household goods				<u> </u>				
	Cars and other vehicles								
	Boats and planes								
	Intellectual property								
	Securities—Publicly traded . Securities—Closely held stock .	X	2	91,320	FAIR	MARKET VAL	UE		
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								
	Real estate—Other								
	Collectibles								
	Food inventory				<u> </u>				
	Drugs and medical supplies .								
	Taxıdermy				<u> </u>				
	Historical artifacts				┡				
	Scientific specimens				<u> </u>				
	Archeological artifacts				-				
	O ther ▶ ()				 				
	Other ▶()								
	Other ► ()				 				
	Other ()	h., #h.a. a.u.a.a		. f	1				
29	Number of Forms 8283 received for which the organization comple				29			l	
30a	During the year, did the organiza	ation receiv	e by contribution any prope	erty reported in Part I, lines	1 thr	ough 28, that		Yes	No
	it must hold for at least three ye for exempt purposes for the enti				red to	be used	30a		No
ь	If "Yes," describe the arrangem	ent in Part 1	II						
31	Does the organization have a gi			review of any non-standard	contr	ibutions?	31	Yes	
32a	Does the organization hire or us	·	<u>-</u>	to solicit, process, or sell	nonca	ish			
	contributions?				•		32a		Νo
	 If "Yes," describe in Part II If the organization did not report 	t an amount	: in column (c) for a type of	property for which column ((a) is	checked,			

describe in Part II

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)

efile GRAPHIC print - DO NOT PROCESS

SCHEDULE 0

(Form 990 or 990-EZ)

ST LOUIS COMMUNITY FOUNDATION

FORM 990, PART VI, SECTION

FORM 990 PART XII LINE 2C

C, LINE 19

Department of the Treasury

Internal Revenue Service

As Filed Data -

DLN: 93493040007875

Employer identification number

43-6023126

OMB No 1545-0047

2013

Open to Public Inspection

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.

F Attach to Form 990 or 990-E2

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

Name of the organization www.irs.gov/form990.

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	DRAFT COPY OF FORM 990 WAS REVIEWED BY THE ORGANIZATION'S BOARD OF DIRECTORS PRIOR TO FILING
FORM 990, PART VI, SECTION B, LINE 12C	ORGANIZATION'S OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE ANNUALLY IN TERESTS THAT COULD GIVE RISE TO CONFLICT THE ENTITY RELIES UPON THE ANNUAL QUESTIONNAIRES COMPLETED BY THE BOARD MEMBERS IN REGARD TO MATTERS RELATED TO ANY CONFLICTS OF INTEREST THE BOARD MAY HAVE WITH THIS ENTITY
FORM 990, PART VI, SECTION B, LINE 15	EXECUTIVE COMMITTEE DETERMINES SALARY OF CEO AND STAFF IN DOING SO THEY REFERENCE THE COU NCIL ON FOUNDATIONS AND VARIOUS PEER GROUPS TO HELP DETERMINE OFFICER/KEY EMPLOYEE SALARIE S

STATEMENTS ARE AVAILABLE TO PUBLIC UPON REQUEST

PROCESSES HAVE NOT CHANGES FROM THE PRIOR YEAR

THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL

DLN: 93493040007875

2013

Open to Public Inspection

Related Organizations and Unrelated Partnerships

SCHEDULE R (Form 990)

Department of the Treasury

Internal Revenue Service

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

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

Name of the organization ST LOUIS COMMUNITY FOUNDATION

Employer identification number

43-6023126

(a)	(b)	(c)	(d)	(e)	(f)		
Name, address, and EIN (if applicable) of disregarded entity	Primary activity	Legal domicile (state or foreign country)		End-of-year assets	Direct controlling entity		
Part II Identification of Related Tax-Exempt or more related tax-exempt organizations (a) Name, address, and EIN of related organization	Organizations Complete if the during the tax year. (b) Primary activity	(c) Legal domicile (state	(d) Exempt Code sect	(e)	(f)		g)
Name, audress, and Envior related organization	Plillary activity	or foreign country)	Exempt Code sect	(if section 501(c	c)(3)) entity	(13) co	
(1) ST LOUIS COMMUNITY FOUNDATION INC	TO IMPROVE THE QUALITY OF LIFE IN THE GREATER ST	МО	501(C)(3)	LINE 8		163	No
319 N 4TH STREET	LOUIS METROPOLITAN AREA				N/A		
ST LOUIS, MO 63102 43-1758789							
(2) GREATER ST LOUIS REAL ESTATE FOUNDATION	TO ADMINISTER GIFTS OF REAL PROPERTY FOR THE	МО	501(C)(3)	LINE 11A, I	ST LOUIS COMMUNITY FOUNDATION INC	Yes	
319 N 4TH STREET	BETTERMENT OF ST LOUIS						
ST LOUIS, MO 63102 20-0089613							
(3) ALBERICI FOUNDATION	TO BENEFIT, PERFORM, AND CARRY OUT THE PURPOSES	МО	501(C)(3)	LINE 11A, I	ST LOUIS COMMUNITY FOUNDATION INC	Yes	
319 N 4TH STREET	OF THE ST LOUIS COMMUNITY FO						
ST LOUIS, MO 63102 20-3676488							<u> </u>
							+

Part III	Identification of Related Org because it had one or more rela						ation ansv	vered "Ye	es" on	Form	990, Part	IV, lu	ne 34	ļ
	(a) Name, address, and EIN of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	entity -	(e) Predominant income(related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income		(h Disprop r allocat	rtionate	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene mana part	j) eral or agıng :ner?	(k) Percentage ownership
						,			Yes	No		Yes	No	
												_		
													\square	
Part IV	Identification of Related Org line 34 because it had one or mo	ore related organız							wered	d "Yes				IV,
Na	(a) ame, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	Legal domicile te or foreign		rng (e) Type of entity (C corp, S corp, or trust)	y Share of income	total Share	(g) e of end- -year ssets		(h) ercentage wnership	(i) Section 512 (b)(13) controlled entity?		No.
							1			-	ĺ	Yes	<u>*</u>	No
												ı		

	Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				Yes	No					
1 D	1 During the tax year, did the orgranization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?										
а	Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		1	1a		No					
b	Gift, grant, or capital contribution to related organization(s)		[1	1b		No					
C	: Gift, grant, or capital contribution from related organization(s)		1	1c		No					
d	Loans or loan guarantees to or for related organization(s)		_1	1d		No					
е	Loans or loan guarantees by related organization(s)		1	1e		No					
f	Dividends from related organization(s)		_1	1f		No					
g	Sale of assets to related organization(s)		1	1g		No					
h	Purchase of assets from related organization(s)		1	1h		No					
i	Exchange of assets with related organization(s)		[1	1i		No					
j	Lease of facilities, equipment, or other assets to related organization(s)		[1	1j		No					
k	Lease of facilities, equipment, or other assets from related organization(s)		1	1k		No					
I	Performance of services or membership or fundraising solicitations for related organization(s)		[1	11	Yes						
m	m Performance of services or membership or fundraising solicitations by related organization(s)										
n	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		[1	1n	Yes						
0	Sharing of paid employees with related organization(s)		1	10	Yes						
р	Reimbursement paid to related organization(s) for expenses		1	1p		No					
q	Reimbursement paid by related organization(s) for expenses		1	1q		No					
r	Other transfer of cash or property to related organization(s)		1	1r	Yes						
s	Other transfer of cash or property from related organization(s)		[1	1s		No					
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including										
	(a) (b) Name of related organization Transaction	(c) Amount involved	(d) Method of determining amount	nt in	volved						
	type (a-s)										
		•									

Part V Transactions With Related Organizations Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

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

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

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)		(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations?		(i) Code V?UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
			314)	Yes	No			Yes	No		Yes	No	
]	
												\Box	
												\Box	
	•												

Schedule R (Form 990) 2013

Part VII Supplemental Information

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

Return Reference Explanation

Schedule R (Form 990) 2013