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Return of Private Foundation

or Section 4947(a)(1) Trust Treated as Private Foundation

▶ Do not enter social security numbers on this form as it may be made public.

OMB No 1545-0052

_	calendar year 2014 or tax year beginning MAY	1. 2014	. and ending	a.gov/form990pf. APR 30, 2015	Open to Public Inspection
	me of foundation	1, 2014	, and onding	A Employer identification	
	OSEPH & ELISE MCBRIDE CHA	RITABLE		,,,	
F	OUNDATION, INC.			43-1353387	1
Nun	nber and street (or P O box number if mail is not delivered to street	address)	Room/suite	B Telephone number	
_1	6091 SWINGLEY RIDGE ROAD,	STE 300		636-537-20	000
	y or town, state or province, country, and ZIP or foreign po		C if exemption application is p	pending, check here	
_ <u>C</u>	HESTERFIELD, MO 63017	_		<u> </u>	
G C	Check all that apply: Initial return		ormer public charity	D 1. Foreign organization	s, check here
	Final return	Amended return	_	Foreign organizations me check here and attach or	seting the 85% test.
	Address change Check type of organization: X Section 501(c)(3) exi	Name change		check here and attach o	omputation
, C	_	empt private foundation Other taxable private founda	ation	E If private foundation sta	
L Es	air market value of all assets at end of year J Accounting		Accrual	under section 507(b)(1	
	I —	her (specify)	Accidai	F If the foundation is in a under section 507(b)(1	
	\$ 46,188. (Part I, colur		basis)		(D), oncor note
	Analysis of Revenue and Expenses	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
	(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)
	1 Contributions, gifts, grants, etc., received	25,956.		N/A	
	2 Check I if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)	10,063.			
97	68 Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 11,519.	10,003.			
Revenue	7 Capital gain net income (from Part IV, line 2)		10,063.		
2	8 Net short-term capital gain		20,000		
	9 Income modifications				
	Gross sales less returns and allowances				
	b Less Cost of goods sold				
	c Gross profit or (loss)				
	11 Other income	9,163.	9,163.		STATEMENT 1
	12 Total. Add lines 1 through 11	45,182.	19,226.		
	13 Compensation of officers, directors, trustees, etc	<u> </u>	0.		0.
	14 Other employee salaries and wages 15 Pension plans, employee benefits				-
es	16a Legal fees				
enses	h Accounting fees RECEIVED				
EXP	l				
	17 Interest SEP 2 3 2015				
rrat	17 Interest SEP 2 3 2015 18 Taxes 19 Depreciation and depletion				
Operating and Administrative	19 Depreciation and depletion				
Ē	20 Occupancy OGDEN, UT				
٧	21 Travel, conferences, and meetings	·			
튭	22 Printing and publications 23 Other expenses STMT 2	13,301.	0.		13,301.
Ęį	23 Other expenses STMT 2 24 Total operating and administrative	13,301.			13,301.
era	expenses. Add lines 13 through 23	13,301.	0.		13,301.
o	25 Contributions, gifts, grants paid	14,207.		 	14,207.
	26 Total expenses and disbursements.				<u> </u>
	Add lines 24 and 25	27,508.	0.	'	27,508.
	27 Subtract line 26 from line 12:				
	& Excess of revenue over expenses and disbursements	17,674.			
	b Net investment income (if negative, enter -0-)		19,226.		-
429K	C Adjusted net income (if negative, enter -0-)			N/A	L
42350 11-24	01 4-14 LHA For Paperwork Reduction Act Notice, see i	instructions.			Form 990-PF (2014)

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Par	til Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	f year
Fai	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_ -	Cash - non-interest-bearing	26,888.	46,188.	46,188.
2	2 Savings and temporary cash investments		·- -	
:	Accounts receivable ►			
	Less; allowance for doubtful accounts	1		
4	Pledges receivable ►			
	Less: allowance for doubtful accounts	1		
:	Grants receivable			
- 1 6	Receivables due from officers, directors, trustees, and other			<u> </u>
	disqualified persons			
7	_			
	Less; allowance for doubtful accounts	1		* * =
ع ا يو	Inventories for sale or use	· · · · · · · · · · · · · · · · · · ·		
Assets	Prepaid expenses and deferred charges	-		
₹ 10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
1.	Investments - land, buildings, and equipment basis			
	Less accumulated depreciation	P. Ph. Charles W. C	~ ~ ~ ~ ~ ~ ~ ~	
12	— — · · — — — — — — — — — — — — — —			
13	Company 2	170.	0.	0.
	Land, buildings, and equipment basis			
'	Less accumulated depreciation			
15				-,- -
1	Total assets (to be completed by all filers - see the			
- '`	instructions. Also, see page 1, item I)	27,058.	46,188.	46,188.
17		27,030.	10,1001	40,100
18				
Liabilities 5				
g 2			-	
22 ات	· · · ·		··· · · ·	
-"		 		
29	Total liabilities (add lines 17 through 22)	0.	0.	
+	Foundations that follow SFAS 117, check here			
	and complete lines 24 through 26 and lines 30 and 31.			
8 24	· · · · · · · · · · · · · · · · · · ·			
<u> </u>	5 Temporarily restricted	<u>-</u>		
	Permanently restricted			
	Foundations that do not follow SFAS 117, check here	-		
표	and complete lines 27 through 31.			
Assets or Fund		0.	0.	
28 28		0.	0.	
SS 29		27,058.	46,188.	
30 SE		27,058.	46,188.	
Z "	TOTAL HEL ESSES OF IMMU DETRICES	27,030.	40,100.	
31	Total liabilities and net assets/fund balances	27,058.	46,188.	
			40,100.	
Par	Analysis of Changes in Net Assets or Fund B	alances		
1 Tot	al net assets or fund balances at beginning of year - Part II, column (a), line	30		
	ust agree with end-of-year figure reported on prior year's return)		27,058.	
	er amount from Part I, line 27a	1	17,674.	
	er increases not included in line 2 (itemize) BASIS ADJUS	ZED GAIN 3	11,519.	
	I lines 1, 2, and 3	THENT ONKEALL		56,251.
	creases not included in line 2 (itemize) BASIS ADJUSTME	NΤ	4	10,063.
	al net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		5	46,188.
<u> </u>	ar not assets or rund balances at end or year time 4 minus line 3) - Part II, Co	namm (u), iiile 30		Form 990-PF (2014)
				rorm 990-PF (2014)

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		Tax on Investmen					_	
		perty sold (e.g., real estate, stock, 200 shs. MLC Co.)		(b) Ho P - D -	ow acquired Purchase Donation	(c) Date a (mo., da		(d) Date sold (mo., day, yr.)
1a 600 SHS ENTERPI	RISE FINAN	CIAL SERVICE	S CORP		D	10/3	1/14	12/05/14
b								
С								
<u>d</u>			· - <u> </u>					
<u>e</u>				<u>L.,</u>	i			
(e) Gross sales price	(f) Depreciation (or allowat		ost or other basis expense of sale		_		in or (loss (f) minus	(g)
a 11,519.			1,45	66.				10,063.
C		· -				-		
d	· ·							
e								
Complete only for assets showing	g gain in column (h) a	and owned by the foundation	n on 12/31/69) Gains (Co		
(i) F.M.V. as of 12/31/69	(j) Adjusted as of 12/31		excess of col. (i) or col. (j), if any	Ī	CO	. (k), but n Losses (ot less tha from col. (
a								10,063.
b								
C								
d								
е							_	
2 Capital gain net income or (net ca	ortal loss)	jain, also enter in Part I, lind loss), enter -0- in Part I, lin	e 7	}	2			10,063.
. •	•		• •	ノ ト				· · · ·
3 Net short-term capital gain or (los if gain, also enter in Part I, line 8,	,	ilis 1222(5) anu (6).		1				
If (loss), enter -0- in Part I, line 8	50.4 (0).			<i></i>	3		N/A	
Part V Qualification U	nder Section 4	940(e) for Reduce	d Tax on Net	Inve	stment Inc	ome		
(For optional use by domestic private	foundations subject t	o the section 4940(a) tax o	n net investment ir	ncome.)	1			
16 a a a b a a 40 40 / d) / O) a a a b a a 1 a a a a b								
If section 4940(d)(2) applies, leave th	is part biank.							
Was the foundation liable for the sect	on 4942 tax on the d	stributable amount of any	year in the base pe	rıod?				Yes X No
If "Yes," the foundation does not quali	fy under section 4940	O(e). Do not complete this p	art.					
1 Enter the appropriate amount in e	ach column for each	year; see the instructions b	efore making any e	entries.				
Base period years Calendar year (or tax year beginnir	ig in) Adjusted	(b) qualifying distributions	Net value of no	(c) oncharit	able-use assets		Distril col. (b) div	(d) oution ratio vided by col. (c))
2013		28,551			21,900			1.303699
2012		34,631	,		25,767	·		1.344006
2011		29,487.			33,284			.885921
2010		37,795			42,614			.886915
2009	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	57,056.			62,424	•		.914007
2 Total of line 1, column (d)					_	2		5.334548
3 Average distribution ratio for the 5 the foundation has been in exister			, or by the number	of year	rs .	3		1.066910
, and the second							-	
4 Enter the net value of noncharitab	e-use assets for 2014	From Part X, line 5				4		37,794.
5 Multiply line 4 by line 3						5		40,323.
6 Enter 1% of net investment income (1% of Part I, line 27b)				6		192.		
7 Add lines 5 and 6						7		40,515.
8 Enter qualifying distributions from	Part XII, line 4					8		27,508.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box	ın Part VI, line 1b, and com	plete that part usin	ıg a 1%	tax rate.			

JOSEPH & ELISE MCBRIDE CHARITABLE

	n 990-PF (2014) FOUNDATION, INC.		13533			Page 4
Pa	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), o	r 4948	- see ins	stru	ctio	ns)
18	Exempt operating foundations described in section 4940(d)(2), check here \(\bigs \) and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)	- 1				
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%	1			3	85.
	of Part I, line 27b					
C	: All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			3	85.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			3	85.
6	Credits/Payments:					
	a 2014 estimated tax payments and 2013 overpayment credited to 2014					
b	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)		İ			
	Backup withholding erroneously withheld					
	Total credits and payments. Add lines 6a through 6d	7				0.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	1			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ 9	 		3	85.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		_		
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax					
	art VII-A Statements Regarding Activities	1		-		
18	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interv	ene in			Yes	No
	any political campaign?		⊢	1a		х
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for the defini	юп)?		1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publi	•	<u> </u>			
	distributed by the foundation in connection with the activities		ŀ			
c	Did the foundation file Form 1120-POL for this year?			1c	~	x
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
).				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	_				
	managers. ▶ \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		ļ	2		х
	If "Yes," attach a detailed description of the activities.		-	_		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	n. or		ı		
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	., .,	İ	3		х
4 a	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?			4a		X
	of "Yes," has it filed a tax return on Form 990-T for this year?	N	⊢	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		'' 	5		X
	If "Yes," attach the statement required by General Instruction T		<u> </u>	Ť		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		į			
	By language in the governing instrument, or					
	 By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the s 	tate law				
	remain in the governing instrument?			6	X	ŀ
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part	XV		7	X	
·	the second and the action of the second at any and the second at the sec		<u> </u>	•		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			l		
	MO					
p	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			_	4,	
_	of each state as required by General Instruction G? If "No," attach explanation		⊢	Bb	X	<u> </u>
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for	alendar		-		
	year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If "Yes," complete Part XIV		⊢	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses		Form	10		X

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Total number of other employees paid over \$50,000

JOSEPH & ELISE MCBRIDE CHARITABLE

FORM 990-PF (2014) FOUNDATION, INC.		.3338/ Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	n Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "N	ONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE	(5)	(c) compensation
NONE		
		-
		
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities		
<u></u>		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers produced	information such as the 1, etc.	Expenses
1 N/A		
_ 		
2		
3		
4		
Part IX-B Summary of Program-Related Investments	•	
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2.	Amount
1 N/A		
1 21/12		
Z		
All other arrays valeted investments. Contact victors		
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	▶	0.

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Form 990-PF (2014) FOUNDATION, INC.	43-13	353387 Page 8
Part X Minimum Investment Return (All domestic foundations must complete this part F	Foreign foundations, see	instructions)
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
Average monthly fair market value of securities	1a	1,832.
b Average of monthly cash balances	1b	1,832. 36,538.
c Fair market value of all other assets	1c	
d Total (add lines 1a, b, and c)	1d	38,370.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	38,370.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	576.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	37,794.
6 Minimum investment return. Enter 5% of line 5	6	1,890.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating for	undations and certain	-
foreign organizations check here 🕨 🔛 and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1	1,890.
2a Tax on investment income for 2014 from Part VI, line 5	385.	
b Income tax for 2014. (This does not include the tax from Part VI.)		
c Add lines 2a and 2b	2c	385.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3	1,505.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5	1,505.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,505.
Part XII Qualifying Distributions (see instructions)	_	
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	27,508.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the:		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	27,508.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	27,508.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the 4940(e) reduction of tax in those years.	foundation qualifies for the	section

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Part XIII Undistributed Income (s	ee instructions)			
	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2013	2013	2014
1 Distributable amount for 2014 from Part XI, line 7				1,505.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2014:				
a From 2009 53,941.				
b From 2010 35,664.				
cFrom 2011 28,004.				
dFrom 2012 33,495.				
eFrom 2013 27,902.	170 006			
f Total of lines 3a through e	179,006.			
4 Qualifying distributions for 2014 from				
Part XII, line 4: ►\$ 27,508.			0.	
a Applied to 2013, but not more than line 2a				
b Applied to undistributed income of prior		0.		
years (Election required - see instructions) c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount				1,505.
e Remaining amount distributed out of corpus	26,003.			1,505.
5 Excess distributions carryover applied to 2014	0.			0.
(If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as				
indicated below:	205,009.			
8 Corpus Add lines 3f, 4c and 4e Subtract line 5	203,003.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c Enter the amount of prior years'				
undistributed income for which a notice of				
deficiency has been issued, or on which				
the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line				
4a from line 2a Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election	İ			
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009				
not applied on line 5 or line 7	53,941.		·	
9 Excess distributions carryover to 2015.	454 555			
Subtract lines 7 and 8 from line 6a	151,068.			
10 Analysis of line 9:				
a Excess from 2010 35,664.				
b Excess from 2011 28,004.]			
c Excess from 2012 33,495.				
d Excess from 2013 27, 902.				
e Excess from 2014 26,003.			<u></u>	Form 990-PF (2014)
11-29-14				101111 232U-FF F (7014)

year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest.

NONE

Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here > 1 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

MCBRIDE CHARITABLE FOUNDATION, 636-537-2000

16091 SWINGLEY RIDGE RD, STE 300, CHESTERFIELD, MO 63017

b The form in which applications should be submitted and information and materials they should include:

APPLICATIONS SHOULD BE SUBMITTED BY PRE-APPROVED FORM.

c Any submission deadlines:

NONE

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

NONE

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FOUNDATION, INC.

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Part XV Supplementary Information (continued) Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount contribution any foundation manager status of Name and address (home or business) or substantial contributor recipient a Paid during the year HOUSING DONATIONS NONE FOUNDATION PAYS MONTHLY HOUSING RENTAL ST LOUIS, MO FOR VARIOUS INDIGENT FAMILIES IN THE ST. LOUIS AREA. 650. ORGANIZATIONS TO HELP THE POOR AND NONE N/A FOUNDATION SUPPORTS INDIGENT VARIOUS ORGANIZATIONS THAT HELP THE POOR AND ST LOUIS, MO INDIGENT WITH EVERYDAY LIVING EXPENSES. 9,795. UTILITY COMPANIES (AMEREN, LACLEDE NONE N/A FOUNDATION PAYS GAS, ETC) MONTHLY UTILITY BILLS ON BEHALF OF INDIGENT ST LOUIS, MO FAMILIES IN THE ST. LOUIS AREA. 3,762. ▶ 3a 14,207. **b** Approved for future payment NONE Total

Part XVI-A	Analysis of Income-Producing Activities
------------	---

er gross amounts unless otherwise indicated.	Unrelated b	Unrelated business income		y section 512, 513, or 514	(e)
•	(a) Business	(b)	(C) Exclu-	(d)	Related or exemp
Program service revenue:	code	Amount	sion code	Amount	function income
a					
b					
c					
d					
e	_				
f					
g Fees and contracts from government agencies					
Membership dues and assessments					
Interest on savings and temporary cash					
investments					
Dividends and interest from securities					
Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income			01	9,163.	
Gain or (loss) from sales of assets other				40.00	
than inventory			18	10,063.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a	_				
b					
G	_				
<u> </u>					
Subtotal. Add columns (b), (d), and (e)	_		. 	19,226.	
Total. Add tolumns (b), (d), and (e)			, • 1	13,220.	19,2
e worksheet in line 13 instructions to verify calculations.	١			13	19,2
			-		
art XVI-B Relationship of Activities	s to the Accom	plishment of	Exempt P	urposes	
ne No. Explain below how each activity for which in	ncome is reported in co	nlumn (e) of Part XV	I-A contributed	importantly to the accomp	lichment of
the foundation's exempt purposes (other th				importantly to the accomp	iisiiiileiii oi
				 	

▼	the foundation's exempt purposes (other than by providing funds for such purposes).							
3621 -24-14	Form 990-PF (201							

Part XVII	Information R Exempt Organ		sters To a	and Transactions	and Relations	hips With Nor	ncharitabl	е			
1 Did the or			of the followin	g with any other organizat	ion described in secti	on 501(c) of		Yes	No		
		-		7, relating to political orga			}	<u> </u>	<u> </u>		
	from the reporting found										
(1) Cash			•	•			1a(1)		x		
(2) Other	assets						1a(2)	_	X		
b Other tran	sactions:										
(1) Sales	of assets to a noncharita	able exempt organizat	tion				1b(1)	1	X		
(2) Purcl	nases of assets from a no	oncharitable exempt o	organization				1b(2)		X		
(3) Renta	(3) Rental of facilities, equipment, or other assets										
(4) Reimbursement arrangements											
(5) Loans or loan guarantees											
(6) Perfo	rmance of services or m	embership or fundrais	sıng solicitatio	ins			1b(6)		X		
c Sharing o	f facilities, equipment, m	ailing lists, other asse	ts, or paid em	ployees			1c		X		
d If the answ	ver to any of the above is	"Yes," complete the f	following sche	dule. Column (b) should a	lways show the fair n	narket value of the g	oods, other as	sets,			
or service	s given by the reporting	foundation. If the four	ndation receiv	ed less than fair market va	lue in any transaction	or sharing arranger	ment, show in				
column (I) the value of the goods,										
(a)Line no	(b) Amount involved	(c) Name of		e exempt organization	(d) Description	of transfers, transaction	ns, and sharing a	rrangeme	nts		
			N/A								
						- - -					
						•					
			-	-							
				-							
				_							
								-			
								·			
ın section	501(c) of the Code (other	er than section 501(c) nedule.					Yes	X] No		
	(a) Name of or	ganization		(b) Type of organization		(c) Description of re	lationship				
	N/A										
											
				ng accompanying schedules an n taxpayer) is based on all infor	mation of which prepare		May the IRS return with the shown below	he prepar v (see ins	rer		
Sigi	nature of officer or truste	e	•	Date	Title						
	Print/Type preparer's n	ame	Preparer's s	ignature	Date	Check if	PTIN				
			1/1		alulasia	self- employed					
Paid	SHAWN C. I	BECKER	1 NLa	wn 6	9/1/2015		P00970	717			
Preparer	Firm's name ► RUI		LP		•	Firm's EIN ▶ 4					
Use Only		-									
	Firm's address > O1	IE NORTH B	RENTWO	OD		T					
	SZ	AINT LOUIS	, MO 6	3105		Phone no. (3:	14) 290	-33	00		
	 						Form 99				

Schedule B (Form 990, 990-EZ,

or 990-PF) Department of the Treasury

Internal Revenue Service

Schedule of Contributors

➤ Attach to Form 990, Form 990-EZ, or Form 990-PF. Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990 ·

OMB No 1545-0047

Name of the organization

JOSEPH & ELISE MCBRIDE CHARITABLE

Employer identification number

FOUNDATION, INC. 43-1353387 Organization type (check one) Filers of: Section: Form 990 or 990-EZ ___ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt chantable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions **Special Rules** For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III 🔟 For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule 8 (Form 990, 990-EZ, or 990-PF) (2014)

Caution. An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF), but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

JOSEPH & ELISE MCBRIDE CHARITABLE
FOUNDATION, INC.

Employer identification number

43-1353387

Part I	Contributors (see instructions) Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MCBRIDE & SON EMPLOYEES 16091 SWINGLEY RIDGE ROAD, STE 300 CHESTERFIELD, MO 63017	\$\$	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	VARIOUS OTHER CONTRIBUTORS < \$5,000	\$956.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		-	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		. \$	Person Payroll Occupate Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash (Complete Part II for noncash contributions)
423452 11-0	5-14	Schedule B (Form	990, 990-EZ, or 990-PF) (2014)

Name of organization

JOSEPH & ELISE MCBRIDE CHARITABLE
FOUNDATION. INC.

Employer identification number

43-1353387

Part II	Noncash Property (see instructions) Use duplicate copies of P	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part i	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

423453 11-05-14

Schedule B (Form 990, 990-EZ, or 990-PF) (2014) Page 4 Name of organization Employer identification number JOSEPH & ELISE MCBRIDE CHARITABLE 43-1353387 FOUNDATION, INC. Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations Part III completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this info once) Use duplicate copies of Part III if additional space is needed (a) No. from Part I (c) Use of gift (b) Purpose of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee

JOSEPH & ELISE MCBRIDE CHARITABLE FOUNDATION, INC.

43-1353387

Part XV Supplementary Information									
3a Grants and Contributions Paid During the Year Continuation of Purpose of Grant or Contribution									
NAME OF RECIPIENT - ORGANIZATIONS TO HELP THE POOR AND INDIGENT									
FOUNDATION SUPPORTS VARIOUS ORGANIZATIONS THAT HELP THE POOR AND									
INDIGENT WITH EVERYDAY LIVING EXPENSES. THEY ALSO PAY BILLS AND									
LIVING EXPENSES DIRECTLY FOR FAMILIES IN NEED.									

FORM 990-PF	OTHER	INCOME		STATEMENT 1
DESCRIPTION		(A) REVENUE PER BOOKS	(B) NET INVEST- MENT INCOME	
MISCELLANEOUS FUNDRASING CALENDAR SALES	_	2,433 6,730		
TOTAL TO FORM 990-PF, PART I,	LINE 11 =	9,163	9,163	•
FORM 990-PF	OTHER EXPENSES			STATEMENT 2
DESCRIPTION	(A) EXPENSES PER BOOKS	·		
OFFICE EXPENSES RENT-STORAGE BANK CHARGES VEHICLE EXPENSES TAXES & LICENSES CALENDAR EXPENSE PAYROLL EXPENSE	1,393 660 263 7,276 223 2,969 517		0. 0. 0. 0.	1,393. 660. 263. 7,276. 223. 2,969. 517.
TO FORM 990-PF, PG 1, LN 23	13,301		0.	13,301.
FORM 990-PF	OTHER IN	VESTMENTS		STATEMENT 3
DESCRIPTION		ALUATION METHOD	BOOK VALUE	FAIR MARKET VALUE
UBS CASH FUND, INC.	_	COST	0.	0.
TOTAL TO FORM 990-PF, PART II	, LINE 13		0.	0.

	PART VIII - LIST OF OFFICERS, DIRECTORS TRUSTEES AND FOUNDATION MANAGERS			STATEMENT 4	
NAME AND ADDRESS		TITLE AND AVRG HRS/WK			EXPENSE
MARY HUTCHISON 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017		PRESIDENT 0.00	0.	0.	0.
BEN FORD 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017	STE 300	VICE PRESIDENT 0.00	0.	0.	0.
PATRICIA KIEHL 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017	STE 300	SECRETARY 0.00	0.	0.	0.
DENISE HIGGINS 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017	STE 300	TREASURER 0.00	0.	0.	0.
JOHN F EILERMANN, JR 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017		BOARD MEMBER 0.00	0.	0.	0.
MICHAEL ARRI 16091 SWINGLEY RIDGE ROAD, CHESTERFIELD, MO 63017		BOARD MEMBER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6,	PART VIII	0.	0.	0.