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
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 01-01-2015 , and ending 12-31-2015

B Check if applicable
☐ Address change
☐ Name change
☐ Initial return
☐ Final return/terminated
☐ Amended return
☐ Application pending

C Name of organization
JEWISH FEDERATION OF ST LOUIS

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
12 MILLSTONE CAMPUS DRIVE

City or town, state or province, country, and ZIP or foreign postal code
ST LOUIS, MO 631465776

D Employer identification number
43-0652643

E Telephone number
(314) 442-0020

G Gross receipts $ 18,007,244

F Name and address of principal officer
DR ANDREW REHFELD
12 MILLSTONE CAMPUS DRIVE
ST LOUIS, MO 631465776

H(a) Is this a group return for subordinates? ☐ Yes ☑ No

H(b) Are all subordinates included? ☐ Yes ☐ No
If "No," attach a list (see instructions)

H(c) Group exemption number ▶

I Tax-exempt status ☑ 501(c)(3) ☐ 501(c) ( ) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶ WWW JEWISHINSTLOUIS ORG, WWW JFEDSTL ORG

K Form of organization ☑ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation 1947

M State of legal domicile MO

Part I Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities
PRESERVE AND ENHANCE JEWISH LIFE IN ST LOUIS, ISRAEL, AND AROUND THE WORLD

2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3	Number of voting members of the governing body (Part VI, line 1a)	3	31
4	Number of independent voting members of the governing body (Part VI, line 1b)	4	31
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	5	101
6	Total number of volunteers (estimate if necessary)	6	300
7a	Total unrelated business revenue from Part VIII, column (C), line 12	7a	-78,207
b	Net unrelated business taxable income from Form 990-T, line 34	7b	-79,034

			Prior Year	Current Year
Revenue	8	Contributions and grants (Part VIII, line 1h)	13,113,718	13,926,450
	9	Program service revenue (Part VIII, line 2g)	264,260	191,561
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	7,650,396	3,064,586
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	727,193	824,647
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	21,755,567	18,007,244
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	11,027,079	8,839,590
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	4,334,438	4,913,796
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	23,037	4,543
	b	Total fundraising expenses (Part IX, column (D), line 25) ▶2,131,017		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,270,073	4,647,448
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	19,654,627	18,405,377
	19	Revenue less expenses Subtract line 18 from line 12	2,100,940	-398,133
			Beginning of Current Year	**End of Year**
Net Assets or Fund Balances	20	Total assets (Part X, line 16)	126,447,322	115,326,193
	21	Total liabilities (Part X, line 26)	42,795,951	37,896,088
	22	Net assets or fund balances Subtract line 21 from line 20	83,651,371	77,430,105

Part II Signature Block

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Sign Here

****** 2016-11-03
Signature of officer Date

DR ANDREW REHFELD PRESIDENT AND CEO
Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name	Preparer's signature	Date	Check ☐ if self-employed	PTIN
AMY HENDLEY	AMY HENDLEY			P01300654

Firm's name ▶ CLIFTONLARSONALLEN LLP — Firm's EIN ▶ 41-0746749

Firm's address ▶ 600 WASHINGTON AVENUE SUITE 1800 ST LOUIS, MO 63101 — Phone no (314) 925-4300

May the IRS discuss this return with the preparer shown above? (see instructions) ☑ Yes ☐ No

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response or note to any line in this Part III . . . . ☑

1 Briefly describe the organization's mission

SUPPORT THE JEWISH COMMUNITY THROUGH FUNDRAISING, DISTRIBUTION OF FUNDS TO CHARITABLE ORGANIZATIONS, AND THE PROVISION OF DIRECT SERVICES AND PROGRAMS IN THE ST LOUIS AREA

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? . . . . ☑ **Yes** ☐ **No**

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? . . . . ☐ **Yes** ☑ **No**

If "Yes," describe these changes on Schedule O

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported

4a (Code) (Expenses $ 10,448,143 including grants of $ 8,839,590) (Revenue $ 19,691)

PLANNING AND ALLOCATIONS THE JEWISH FEDERATION OF ST LOUIS IS THE JEWISH COMMUNITY'S CENTRAL FUNDRAISING AND PLANNING ORGANIZATION FOUNDED IN 1901, IT IS ONE OF THE REGION'S OLDEST AND LARGEST NONPROFIT ORGANIZATIONS FUNDS ARE DISTRIBUTED TO 30 LOCAL AND 21 NATIONAL AGENCIES, PROGRAMS AND SERVICES, THREE INTERNATIONAL AGENCIES AND FOUR TARGETED AREAS - TO FEED THE HUNGRY, EDUCATE STUDENTS OF ALL AGES, CARE FOR THE YOUNG AND OLD, FIGHT ANTI-SEMITISM, PROMOTE JEWISH CULTURE AND SUPPORT JEWS IN ISRAEL AND AROUND THE WORLD TO STRENGTHEN ST LOUIS' CONNECTIONS TO ISRAEL, THE FEDERATION DIRECTLY LINKS ST LOUIS TO ISRAEL THROUGH A SISTER-CITY PROGRAM THE FEDERATION IS LED BY HUNDREDS OF VOLUNTEERS FROM ALL SECTORS OF THE COMMUNITY, WHO SERVE ON BOARDS AND COMMITTEES, RAISE FUNDS, MANAGE ENDOWMENTS, RESPOND TO EMERGENCIES, EVALUATE NEEDS AND DISTRIBUTE CHARITABLE DOLLARS TO THE FEDERATION'S FAMILY OF AGENCIES, PROGRAMS AND SERVICES LOCAL AGENCIES ARE REVIEWED AND FUNDS ALLOCATED IN THREE-YEAR CYCLES NATIONAL AND INTERNATIONAL AGENCIES ARE REVIEWED ANNUALLY THE FEDERATION'S PLANNING AND ALLOCATIONS PROCESS IS BUILT AROUND A VISION OF AN INSPIRING, CARING AND UNITED JEWISH COMMUNITY AND IS GUIDED BY THE FEDERATION'S SIX STRATEGIC PRIORITIES, ENSURING THE JEWISH IDENTITY AND ENGAGEMENT OF FUTURE GENERATIONS, CREATE A VIBRANT, EMBRACING, LOCAL JEWISH COMMUNITY THAT WILL HELP RETAIN AND BE ATTRACTIVE TO YOUNG ADULTS AND FAMILIES WITH CHILDREN, EDUCATE AND ADVOCATE FOR A STRONG ISRAEL AND SAFE JEWISH WORLD, BUILD A HUMAN SERVICES SAFETY NET TO IDENTIFY, MONITOR AND CARE FOR THE MOST VULNERABLE AND ISOLATED JEWS, RECRUIT, TRAIN AND DEVELOP EXCEPTIONAL HUMAN RESOURCES, AND STRENGTHEN AND OPTIMIZE THE COMMUNITY'S INFRASTRUCTURE TO MEET PRESENT AND FUTURE REALITIES AND CHALLENGES PLANNING AND ALLOCATIONS IS GUIDED BY COMMUNITY INPUT FROM SOME 60 LOCAL LAY LEADERS PLUS STAFF REPRESENTING A WIDE VARIETY OF AGES, INTEREST AND VIEWPOINTS WORKING WITH AGENCIES TO EXAMINE GEOGRAPHIC AND DEMOGRAPHIC SHIFTS, IDENTIFY WHERE NEEDS ARE GREATEST AND MAKE PLANS TO ADDRESS THEM EFFICIENTLY AND WITH LITTLE DUPLICATION OF SERVICES ADDITIONALLY, EFFORTS ARE DIRECTED AT STRENGTHENING THE GOVERNANCE, MANAGEMENT AND ADMINISTRATIVE STRENGTH OF OUR AGENCIES

4b (Code) (Expenses $ 3,001,346 including grants of $ 0) (Revenue $ 171,870)

COMMUNITY DEVELOPMENT THE FEDERATION, THROUGH MULTIPLE CHANNELS, STRIVES TO MEET THE FUTURE FINANCIAL NEEDS OF THE COMMUNITY, PROVIDE COMMUNITY EDUCATION AND ENGAGEMENT, AND DEVELOP CURRENT AND FUTURE COMMUNITY PROFESSIONALS ENDOWMENTS AND PLANNED GIVING ARE HANDLED BY THE JEWISH COMMUNITY FOUNDATION (JCF) OF ST LOUIS, LAUNCHED BY THE FEDERATION IN 2006 JCF SERVES AS THE JEWISH COMMUNITY'S CENTRAL PLACE TO ACCEPT AND MANAGE ENDOWMENTS AND PLANNED GIFTS BEQUESTS, CHARITABLE TRUSTS, ANNUITIES AND DONOR-ADVISED FUNDS JCF ALSO PROVIDES A PLACE FOR DONORS AND LOCAL AGENCIES TO BENEFIT FROM THE COORDINATED MANAGEMENT OF COMMUNITY ASSETS IT IS BACKED BY 110-PLUS YEARS OF THE FEDERATION'S SERVICE AS TRUSTEE OF THE ST LOUIS JEWISH COMMUNITY FUNDS WEBSITE WWW JCF ORG-COMMUNITY EDUCATION AND ENGAGEMENTTHE FEDERATION OFFERS AN ADULT AND TEEN EDUCATION PROGRAM WHICH THROUGH STIMULATING CLASS ENVIRONMENTS STRIVES TO STRENGTHEN THEIR JEWISH IDENTITY IN ADDITION, THE FEDERATION PROFILES TEACHER TRAINING OPPORTUNITIES FOR TEACHERS AT CONGREGATIONS ST LOUIS IS ONE OF MANY JEWISH COMMUNITIES THROUGHOUT THE COUNTRY WHICH OFFERS THE NATIONAL PJ LIBRARY PROGRAM TO ANY LOCAL FAMILY WITH CHILDREN AGED 6 MONTHS THROUGH 7 YEARS OF AGE MORE THAN 800 LOCAL FAMILIES HAVE SIGNED UP (OR SOME 1,300 CHILDREN) TO RECEIVE A FREE ($40 VALUE) JEWISH CHILDREN'S BOOK OR CD EACH MONTH FOR A YEAR IN ORDER TO BUILD A JEWISH IDENTITY THE NEXT GEN INITIATIVE IS DESIGNED TO CONNECT YOUNG ADULTS, AGES 22-40, WITH THE JEWISH FEDERATION OF ST LOUIS, JEWISH RESOURCES, AND EACH OTHER THROUGH A SERIES OF SOCIAL PROGRAMS, EDUCATIONAL OPPORTUNITIES AND INDIVIDUAL CONNECTIONS THE GOAL OF THESE IS TO CONTINUE TO BUILD A VIBRANT ST LOUIS JEWISH COMMUNITY FOR GENERATIONS TO COME THE ST LOUIS NATURALLY OCCURRING RETIREMENT COMMUNITY (NORC) SENIOR PROGRAM ST LOUIS NORC IS DESIGNED TO HELP SENIORS REMAIN INDEPENDENT IN THEIR HOMES TO AGE IN PLACE WITH SUPPORT SERVICES AND PROGRAMS/ACTIVITIES TO KEEP THEM ACTIVE AND MENTALLY ENGAGED NORC ENCOMPASSES A THREE-MILE AREA IN WEST ST LOUIS COUNTY AND HAS A CURRENT MEMBERSHIP OF 642 PEOPLE AGED 65+ THE ST LOUIS NORC OFFERS A LOW-COST ALTERNATIVE TO INSTITUTIONALIZATION LESS THAN 1% OF THE NORC'S RESIDENTS REPORT HAVING MOVED FROM THE NORC INTO NURSING HOMES AT AN AVERAGE ANNUAL COST OF $48,000 PER PERSON FOR A SEMI-PRIVATE NURSING HOME BED IN ST LOUIS (ACCORDING TO GENWORTH FINANCIAL), THE NORC PROVIDES A COST-EFFECTIVE AND DIGNIFIED OPTION WHILE MEETING THE LIFESTYLE CHOICE OF MATURE ADULTS -DEVELOPMENT OF CURRENT AND FUTURE PROFESSIONALSMANY COMMUNITY MEMBERS PARTICIPATE IN PEER GROUP ACTIVITIES SUCH AS THE YOUNG PROFESSIONALS DIVISION, AND THE MAIMONIDES, CARDOZO AND MONTEFIORE SOCITES WITH DEVELOP FUTURE COMMUNITY LEADERSTHE MILLSTONE INSTITUTE FOR JEWISH LEADERSHIP IS A COMMUNITY-WIDE EFFORT THROUGHOUT THE GREATER NON-PROFIT JEWISH COMMUNITY TO DEVELOP LEADERS, STRENGTHEN ORGANIZATIONS AND CREATE AN ENVIRONMENT FOR COLLABORATION THE INSTITUTE PROMOTES A STRONG EMPHASIS ON VOLUNTEER LEADERSHIP DEVELOPMENT PROGRAMS INCLUDE THE MILLSTONE FELLOWS FOR EMERGING AND ESTABLISHED LEADERS (PRIMARILY IN THEIR 30'S AND 40'S) THE LENS FOR YOUNG ADULTS IN THEIR 20'S, THE WOMEN'S INSTITUTE (PRIMARILY IN THEIR 50'S AND 60'S), INSPIRING YOUNG ADULT SPEAKER SERIES, THE IMPACT SERIES FOR EFFECTIVE BOARD AND WORK CULTURES AND THE BOARD PRESIDENTS' CIRCLE JPROSTL, THE PROFESSIONAL ASSOCIATION, INVOLVES STAFF MEMBERS FROM 50 JEWISH COMMUNITY ORGANIZATIONS IN TRAINING, NETWORKING AND THE SHARING OF RESOURCES PARTICIPANTS INCLUDE ALL LEVELS OF EMPLOYEES FROM FRONT-LINE TO SENIOR MANAGERS

4c (Code) (Expenses $ 789,200 including grants of $ 0) (Revenue $ 0)

HOLOCAUST MUSEUM & LEARNING CENTER THE MUSEUM AND LEARNING CENTER OPENED IN 1995 MORE THAN 30,000 PEOPLE VISIT THE MUSEUM EACH YEAR, INCLUDING 25,000 STUDENTS ADMITTANCE TO THE MUSEUM AND ALL PROGRAMS ARE FREE AND OPEN TO THE PUBLIC THE MUSEUM PROVIDES A CHRONOLOGICAL HISTORY OF THE HOLOCAUST WITH PERSONAL ACCOUNTS OF HOLOCAUST SURVIVORS WHO IMMIGRATED TO ST LOUIS A CHANGE BEGINS WITH ME EXHIBIT PROMOTES TOLERANCE AND DIVERSITY AND CHRONICLES MODERN DAY EXAMPLES OF DISCRIMINATION AND ENCOURAGES PERSONAL ACTION WITHIN THE COMMUNITY

4d Other program services (Describe in Schedule O)

(Expenses $ including grants of $) (Revenue $)

4e **Total program service expenses ▶** 14,238,689

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *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	Yes	
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? *If "Yes," complete Schedule D, Part I*	6	Yes	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? *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*	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*	9	Yes	
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? *If "Yes," complete Schedule D, Part V*	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			
a	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	Yes	
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	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	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	Yes	
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	Yes	
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		

Part IV Checklist of Required Schedules *(continued)*

			Yes	No
21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic 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 or for domestic individuals 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? *If "Yes," complete Schedule J*	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer 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		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) 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 "Yes," complete Schedule L, Part II*	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	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? *If "Yes," complete Schedule R, Part I*	33	Yes	
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	Yes	
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	Yes	
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	36		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	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response or note to any line in this Part V . . . . ☐

					Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1a	86			
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b	0			
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c		
2a	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	2a	101			
b	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	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year?			3a		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O*			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a		No
b	If "Yes," enter the name of the foreign country ▶ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			5c		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?			6a		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b		
7	**Organizations that may receive deductible contributions under section 170(c).**					
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?			7a		No
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?			7f		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?			7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?			7h		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?			8		No
9a	Did the sponsoring organization make any taxable distributions under section 4966?			9a		No
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		No
10	**Section 501(c)(7) organizations.** Enter					
a	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	**Section 501(c)(12) organizations.** Enter					
a	Gross income from members or shareholders	11a				
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11b				
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?			12a		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b				
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**					
a	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		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
c	Enter the amount of reserves on hand	13c				
14a	Did the organization receive any payments for indoor tanning services during the tax year?			14a		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O*			14b		

Part VI Governance, Management, and Disclosure

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

Check if Schedule O contains a response or note to any line in this Part VI . . . ☑

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	31		
	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	31		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2			No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3			No
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4			No
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5			No
6	Did the organization have members or stockholders?	6		Yes	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		Yes	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		Yes	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b			No
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

Section B. Policies (*This Section B requests information about policies not required by the Internal Revenue Code.*)

			Yes	No
10a	Did the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes	
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990			
12a	Did the organization have a written conflict of interest policy? *If "No," go to line 13*	12a	Yes	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? *If "Yes," describe in Schedule O how this was done*	12c	Yes	
13	Did the organization have a written whistleblower policy?	13	Yes	
14	Did the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b		No
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed▶

18 Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection Indicate how you 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

20 State the name, address, and telephone number of the person who possesses the organization's books and records
▶DONALD HANNON 12 MILLSTONE CAMPUS DRIVE ST LOUIS, MO 631465776 (314) 442-3747

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

Check if Schedule O contains a response or note to any line in this Part VII . . . . ☐

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position: Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
See Additional Data Table										

		(D)	(E)	(F)
1b	**Sub-Total** ▶			
c	**Total from continuation sheets to Part VII, Section A** ▶			
d	**Total (add lines 1b and 1c)** ▶	852,424	0	113,601

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 5

			Yes	No
3	Did the organization list any **former** officer, director or trustee, key employee, or highest compensated employee on line 1a? *If "Yes," complete Schedule J for such individual*	**3**		No
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than $150,000? *If "Yes," complete Schedule J for such individual*	**4**	Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? *If "Yes," complete Schedule J for such person*	**5**		No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than $100,000 of compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

(A) Name and business address	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than $100,000 of compensation from the organization ▶ 0

Part VIII Statement of Revenue

Check if Schedule O contains a response or note to any line 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
Contributions, Gifts, Grants and Other Similar Amounts	1a	Federated campaigns . . 1a	173,951				
	b	Membership dues 1b					
	c	Fundraising events 1c					
	d	Related organizations . . . 1d	875,374				
	e	Government grants (contributions) 1e	93,106				
	f	All other contributions, gifts, grants, and similar amounts not included above 1f	12,784,019				
	g	Noncash contributions included in lines 1a-1f $	3,943,100				
	h	**Total.** Add lines 1a-1f . . . . ▶		13,926,450			
Program Service Revenue			Business Code				
	2a	COMMUNITY DEVELOPMENT	900099	171,870	171,870		
	b	PLANNING & ALLOCATIONS	900099	19,691	19,691		
	c						
	d						
	e						
	f	All other program service revenue					
	g	**Total.** Add lines 2a–2f . . . . ▶		191,561			
Other Revenue	3	Investment income (including dividends, interest, and other similar amounts) . . . . ▶		1,577,633		-78,207	1,655,840
	4	Income from investment of tax-exempt bond proceeds . . ▶					
	5	Royalties . . . . ▶					
			(i) Real / (ii) Personal				
	6a	Gross rents	(i) 66,631				
	b	Less rental expenses	(i) 0				
	c	Rental income or (loss)	(i) 66,631				
	d	Net rental income or (loss) . . . . ▶		66,631			66,631
			(i) Securities / (ii) Other				
	7a	Gross amount from sales of assets other than inventory	(i) 1,486,953				
	b	Less cost or other basis and sales expenses	(i) 0				
	c	Gain or (loss)	(i) 1,486,953				
	d	Net gain or (loss) . . . . ▶		1,486,953			1,486,953
	8a	Gross income from fundraising events (not including $ ____ of contributions reported on line 1c) See Part IV, line 18 . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from fundraising events . . ▶					
	9a	Gross income from gaming activities See Part IV, line 19 . . . a					
	b	Less direct expenses . . . b					
	c	Net income or (loss) from gaming activities . . . ▶					
	10a	Gross sales of inventory, less returns and allowances . a					
	b	Less cost of goods sold . . b					
	c	Net income or (loss) from sales of inventory . . ▶					
		Miscellaneous Revenue	Business Code				
	11a	INTERCOMPANY ALLOCATIO	900099	588,014			588,014
	b	OTHER INCOME	900099	170,002			170,002
	c						
	d	All other revenue					
	e	**Total.** Add lines 11a–11d . . . . . . ▶		758,016			
	12	**Total revenue.** See Instructions . . . . . ▶		18,007,244	191,561	-78,207	3,967,440

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)

Check if Schedule O contains a response or note to any line in this Part IX . . . . ☐

	Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	5,464,848	5,464,848		
2	Grants and other assistance to domestic individuals See Part IV, line 22	13,630	13,630		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	3,361,112	3,361,112		
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	683,854	385,955	186,059	111,840
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	122,536			122,536
7	Other salaries and wages	2,940,414	1,268,581	578,645	1,093,188
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	545,025	300,720	88,460	155,845
9	Other employee benefits	375,248	164,100	71,243	139,905
10	Payroll taxes	246,719	111,820	50,578	84,321
11	Fees for services (non-employees)				
a	Management				
b	Legal	103,590	1,295	81,143	21,152
c	Accounting	121,721	37,000	84,721	
d	Lobbying	63,000		63,000	
e	Professional fundraising services See Part IV, line 17	4,543			4,543
f	Investment management fees	95,252		90,738	4,514
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,113,706	503,917	261,106	348,683
12	Advertising and promotion	413,092	260,082	25,977	127,033
13	Office expenses	234,929	99,721	100,299	34,909
14	Information technology	78,607	13,754	61,472	3,381
15	Royalties				
16	Occupancy	721,712	318,932	288,191	114,589
17	Travel	29,194	19,473	7,028	2,693
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	472,423	199,673	70,080	202,670
20	Interest	367,627	367,627		
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	300,476	61,915	174,317	64,244
23	Insurance	71,770	12,566	55,108	4,096
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	UNCOLLECTIBLE PLEDGE PR	154,000		154,000	
b	MISSIONS	141,953	103,284	2,768	35,901
c	AWARDS AND GRANTS	68,299	54,549	5,495	8,255
d	INTERCOMPANY ALLOCATION	0	1,039,695	-485,973	-553,722
e	All other expenses	96,097	74,440	21,216	441
25	**Total functional expenses.** Add lines 1 through 24e	18,405,377	14,238,689	2,035,671	2,131,017
26	**Joint costs.** Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ▶ ☐ if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response or note to any line in this Part X . . . . ☐

Section	Line	Description			(A) Beginning of year		(B) End of year
Assets	1	Cash-non-interest-bearing			1,417,267	1	1,358,272
	2	Savings and temporary cash investments			8,035,374	2	6,862,531
	3	Pledges and grants receivable, net			3,290,771	3	2,792,477
	4	Accounts receivable, net			351,105	4	771,591
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net			14,113,136	7	10,828,596
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			274,022	9	351,927
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	8,513,533			
	b	Less accumulated depreciation	10b	5,651,370	2,739,963	10c	2,862,163
	11	Investments—publicly traded securities			66,909,573	11	62,813,396
	12	Investments—other securities See Part IV, line 11			29,316,111	12	26,685,240
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11				15	
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)			126,447,322	16	115,326,193
Liabilities	17	Accounts payable and accrued expenses			1,061,561	17	1,031,548
	18	Grants payable			3,415,991	18	3,088,404
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability Complete Part IV of Schedule D			18,422,832	21	16,523,849
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			13,968,594	23	10,747,693
	24	Unsecured notes and loans payable to unrelated third parties			903,698	24	1,617,219
	25	Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24) Complete Part X of Schedule D			5,023,275	25	4,887,375
	26	**Total liabilities.** Add lines 17 through 25			42,795,951	26	37,896,088
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**					
	27	Unrestricted net assets			40,946,611	27	38,009,685
	28	Temporarily restricted net assets			22,802,283	28	19,506,036
	29	Permanently restricted net assets			19,902,477	29	19,914,384
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.					
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			83,651,371	33	77,430,105
	34	Total liabilities and net assets/fund balances			126,447,322	34	115,326,193

Part XI Reconcilliation of Net Assets

Check if Schedule O contains a response or note to any line in this Part XI . . . . ☑

1	Total revenue (must equal Part VIII, column (A), line 12)	1	18,007,244
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,405,377
3	Revenue less expenses Subtract line 2 from line 1	3	-398,133
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	83,651,371
5	Net unrealized gains (losses) on investments	5	-5,758,915
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	-64,218
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	77,430,105

Part XII Financial Statements and Reporting

Check if Schedule O contains a response or note to any line in this Part XII . . . . ☐

			Yes	No
1	Accounting method used to prepare the Form 990 ☐ Cash ☑ Accrual ☐ Other ______________ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?	2a		No
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both ☐ 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 separate basis, consolidated basis, or both ☐ Separate basis ☑ Consolidated basis ☐ Both consolidated and separate basis			
c	If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	2c	Yes	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits	3b		

Additional Data

Software ID:
Software Version:
EIN: 43-0652643
Name: JEWISH FEDERATION OF ST LOUIS

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
HARVEY N WALLACE VICE CHAIR, CAMPAIGN 14-15/CHAIR 15-16	10 00 0 00	X		X				0	0	0
PATRICIA F CROUGHAN CHAIR 14-15/IMMED PAST CHAIR 15-16	10 00 0 00	X		X				0	0	0
ROBERT NEWMARK VICE CHAIR, AT LGE/SECRETARY 14-15/DIRECTOR 15-16	5 50 0 00	X		X				0	0	0
GERALD P GREIMAN VICE CHAIR, STRATEGIC PLANNING	10 00 0 00	X		X				0	0	0
KEN KRANZBERG DIRECTOR 14-15/VICE CHAIR, AT-LGE, SECRETARY 15-16	7 00 1 00	X		X				0	0	0
SUE SCHLICHTER DIRECTOR 14-15/VICE CHAIR, PLANNING & ALLOC 15-16	7 00 0 00	X		X				0	0	0
DAVID KASLOW VICE CHAIR, ENDOWMENTS AND PLANNED GIVING 15-16	10 00 0 00	X		X				0	0	0
RUTH RASKAS VICE CHAIR, PLANNING & ALLOC 14-15/DIRECTOR 15-16	7 00 0 00	X		X				0	0	0
JANE ROODMAN WEISS VICE CHAIR, FINANCIAL & HR DEV 14-15	5 50 0 00	X		X				0	0	0
TIMOTHY STERN DIRECTOR 14-15/VICE CHAIR, CAMPAIGN 15-16	7 00 0 00	X		X				0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
MICHAEL OBERLANDER VICE CHAIR, FINANCE/TREASURER	10 00 0 00	X		X				0	0	0
ROBERT MILLSTONE IMMED PAST CHAIR 14-15	5 00 0 00	X		X				0	0	0
JJ FLOTKEN DIRECTOR 14-16	5 00 0 00	X						0	0	0
BURT GARLAND DIRECTOR 14-16	5 00 0 00	X						0	0	0
SUSAN K GOLDBERG DIRECTOR 15-16	5 00 0 00	X						0	0	0
RANDALL GREEN DIRECTOR 14-15	5 00 0 00	X						0	0	0
SHEILA GREENBAUM DIRECTOR 14-16	5 00 0 00	X						0	0	0
BRAD GROSS DIRECTOR 14-16	5 00 0 00	X						0	0	0
GIANNA JACOBSON DIRECTOR 14-16	5 00 0 00	X						0	0	0
SUSAN GODWIN KOFKOFF DIRECTOR 14-16	5 00 0 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
MARK LEVIN DIRECTOR 14-15	5 00 0 00	X						0	0	0
EMILY STEIN MACDONALD DIRECTOR 14-16	5 00 0 00	X						0	0	0
MICHELLE RUBIN DIRECTOR 15-16	5 00 0 00	X						0	0	0
SHERRY SHUMAN DIRECTOR 14-16	5 00 0 00	X						0	0	0
IAN SILBERMAN DIRECTOR 14-16	5 00 0 00	X						0	0	0
JEFF SPARKS DIRECTOR 14-15	5 00 0 00	X						0	0	0
MICHAEL STAENBERG DIRECTOR 14-16	5 00 1 00	X						0	0	0
RABBI SUSAN TAIVE DIRECTOR 14-16	5 00 0 00	X						0	0	0
TOBY WARTICOVSCHI DIRECTOR 14-16	5 00 0 00	X						0	0	0
SHERRI FRANK WEINTROP DIRECTOR 14-16	5 00 0 00	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
LEE WIELANSKY DIRECTOR 14-15	5 00 0 00	X						0	0	0
LISA GRAIVIER BARNES DIRECTOR 15-16	3 50 0 00	X						0	0	0
DOUGLAS BARON DIRECTOR 15-16	3 50 0 00	X						0	0	0
JOHN GREENBERG DIRECTOR 15-16	3 50 0 00	X						0	0	0
MICHAEL LEFTON DIRECTOR 15-16	3 50 0 00	X						0	0	0
LES STERMAN DIRECTOR 15-16	3 50 0 00	X						0	0	0
HANK WEBBER DIRECTOR 15-16	3 50 0 00	X						0	0	0
JOHN KALISHMAN DIRECTOR 15-16	3 50 0 00	X						0	0	0
VICTORIA SINGER DIRECTOR 15-16	3 50 0 00	X						0	0	0
DR ANDREW REHFELD PRESIDENT & CEO	40 00 3 00			X				302,602	0	35,94

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee) Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
DONALD HANNON CHIEF FINANCIAL OFFICER	40 00 0 00			X				141,022	0	10,28
STEPHEN G COHEN VICE PRESIDENT	40 00 0 00				X			173,465	0	33,33
SANDRA JANITCH-SCHWARZEN DIRECTOR OF FISCAL SERVICES	40 00 0 00					X		118,034	0	28,80
DEBORAH CHASE VICE PRESIDENT THROUGH 08/2015	40 00 0 00					X		117,301	0	5,23

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
▶ Attach to Form 990 or Form 990-EZ.
▶ Information about Schedule A (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

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

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**

2 ☐ A school described in **section 170(b)(1)(A)(ii).**(Attach Schedule E (Form 990 or 990-EZ))

3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state ____

5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7 ☑ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II)

8 ☐ A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9 ☐ An organization that normally receives (1) more than 331/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 331/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See**section 509(a)(2).** (Complete Part III)

10 ☐ An organization organized and operated exclusively to test for public safety See **section 509(a)(4).**

11 ☐ 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 in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization **You must complete Part IV, Sections A and B.**

b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s) **You must complete Part IV, Sections A and C.**

c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions) **You must complete Part IV, Sections A, D, and E.**

d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions) **You must complete Part IV, Sections A and D, and Part V.**

e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization

f Enter the number of supported organizations . . . . ____

g Provide the following information about the supported organization(s)

(i) Name of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the organization listed in your governing document? Yes	No	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
Total						

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990EZ. Cat No 11285F **Schedule A (Form 990 or 990-EZ) 2015**

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 in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	12,215,962	13,784,608	13,631,279	13,113,718	13,926,450	66,672,017
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	12,215,962	13,784,608	13,631,279	13,113,718	13,926,450	66,672,017
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 **Public support.** Subtract line 5 from line 4						66,672,017

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	12,215,962	13,784,608	13,631,279	13,113,718	13,926,450	66,672,017
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,330,068	1,374,492	1,778,535	2,197,908	1,655,840	8,336,843
9 Net income from unrelated business activities, whether or not the business is regularly carried on		10,590		73,673		84,263
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	634,036	722,298	580,956	667,804	758,016	3,363,110
11 **Total support.** Add lines 7 through 10						78,456,233

12 Gross receipts from related activities, etc (see instructions) | **12** | 1,286,417

13 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** . . . . . ▶ ☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) | **14** | 84 980 %

15 Public support percentage for 2014 Schedule A, Part II, line 14 | **15** | 85 640 %

16a **33 1/3% support test—2015.** 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—2014.** 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—2015.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** 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 VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

Part III **Support Schedule for Organizations Described in Section 509(a)(2)**
(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants ")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 **Total.** Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of $5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 **Public support.** (Subtract line 7c from line 6)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
13 **Total support.** (Add lines 9, 10c, 11, and 12)						

14 **First five years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ▶ ☐

Section C. Computation of Public Support Percentage

15	Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f))	15	
16	Public support percentage from 2014 Schedule A, Part III, line 15	16	

Section D. Computation of Investment Income Percentage

17	Investment income percentage for **2015** (line 10c, column (f) divided by line 13, column (f))	17	
18	Investment income percentage from **2014** Schedule A, Part III, line 17	18	

19a **33 1/3% support tests—2015.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

b **33 1/3% support tests—2014.** 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 ▶ ☐

20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions ▶ ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 11 of Part I If you checked 11a of Part I, complete Sections A and B If you checked 11b of Part I, complete Sections A and C If you checked 11c of Part I, complete Sections A, D, and E If you checked 11d of Part I, complete Sections A and D, and complete Part V)

Section A. All Supporting Organizations

			Yes	No
1	Are all of the organization's supported organizations listed by name in the organization's governing documents? *If "No," describe in **Part VI** how the supported organizations are designated If designated by class or purpose, describe the designation If historic and continuing relationship, explain*	1		
2	Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? *If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2)*	2		
3a	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? *If "Yes," answer (b) and (c) below*	3a		
b	Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? *If "Yes," describe in **Part VI** when and how the organization made the determination*	3b		
c	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? *If "Yes," explain in **Part VI** what controls the organization put in place to ensure such use*	3c		
4a	Was any supported organization not organized in the United States ("foreign supported organization")? *If "Yes" and if you checked 11a or 11b in Part I, answer (b) and (c) below*	4a		
b	Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations*	4b		
c	Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes*	4c		
5a	Did the organization add, substitute, or remove any supported organizations during the tax year? *If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)*	5a		
b	**Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?	5b		
c	**Substitutions only.** Was the substitution the result of an event beyond the organization's control?	5c		
6	Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (a) its supported organizations, (b) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (c) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in **Part VI.***	6		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in IRC 4958(c)(3)(C)), a family member of a substantial contributor, or a 35-percent controlled entity with regard to a substantial contributor? *If "Yes," complete Part I of Schedule L (Form 990)*	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? *If "Yes," complete Part II of Schedule L (Form 990)*	8		
9a	Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509 (a)(1) or (2))? *If "Yes," provide detail in **Part VI.***	9a		
b	Did one or more disqualified persons (as defined in line 9(a)) hold a controlling interest in any entity in which the supporting organization had an interest? *If "Yes," provide detail in **Part VI.***	9b		
c	Did a disqualified person (as defined in line 9(a)) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? *If "Yes," provide detail in **Part VI.***	9c		
10a	Was the organization subject to the excess business holdings rules of IRC 4943 because of IRC 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If "Yes," answer b below*	10a		
b	Did the organization have any excess business holdings in the tax year? *(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)*	10b		
11	Has the organization accepted a gift or contribution from any of the following persons?			
a	A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?	11a		
b	A family member of a person described in (a) above?	11b		
c	A 35% controlled entity of a person described in (a) or (b) above? *If "Yes" to a, b, or c, provide detail in Part VI*	11c		

Part IV **Supporting Organizations** (continued)

Section B. Type I Supporting Organizations

			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? *If "No," describe in **Part VI** how the supported organization(s) effectively operated, supervised, or controlled the organization's activities If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year*	**1**		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? *If "Yes," explain in **Part VI** how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization*	**2**		

Section C. Type II Supporting Organizations

			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? *If "No," describe in **Part VI** how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s)*	**1**		

Section D. All Type III Supporting Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (1) a written notice describing the type and amount of support provided during the prior tax year, (2) a copy of the Form 990 that was most recently filed as of the date of notification, and (3) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?	**1**		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? *If "No," explain in **Part VI** how the organization maintained a close and continuous working relationship with the supported organization(s)*	**2**		
3	By reason of the relationship described in (2), did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? *If "Yes," describe in **Part VI** the role the organization's supported organizations played in this regard*	**3**		

Section E. Type III Functionally-Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year **(see instructions)**

- **a** ☐ The organization satisfied the Activities Test Complete **line 2** below
- **b** ☐ The organization is the parent of each of its supported organizations Complete **line 3** below
- **c** ☐ The organization supported a governmental entity Describe in Part VI how you supported a government entity (see instructions)

			Yes	No
2	Activities Test **Answer (a) and (b) below.**			
a	Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? *If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities*	**2a**		
b	Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? *If "Yes," explain in **Part VI** the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement*	**2b**		
3	Parent of Supported Organizations **Answer (a) and (b) below.**			
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *Provide details in Part VI*	**3a**		
b	Did the organization exercise a substantial degree of direction over the policies, programs and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard*	**3b**		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

1 Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov 20, 1970 **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E ☐

	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	**Adjusted Net Income** (subtract lines 5, 6 and 7 from line 4)	8		

	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
c	Fair market value of other non-exempt-use assets	1c		
d	**Total** (add lines 1a, 1b, and 1c)	1d		
e	**Discount** claimed for blockage or other factors (explain in detail in Part VI) ______________			
2	Acquisition indebtedness applicable to non-exempt use assets	2		
3	Subtract line 2 from line 1d	3		
4	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 035	6		
7	Recoveries of prior-year distributions	7		
8	**Minimum Asset Amount** (add line 7 to line 6)	8		

	Section C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
2	Enter 85% of line 1	2		
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
4	Enter greater of line 2 or line 3	4		
5	Income tax imposed in prior year	5		
6	**Distributable Amount.** Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		

7 Check here if the current year is the organization's first as a non-functionally-integrated Type III supporting organization (see instructions) ☐

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI) See instructions	
7 **Total annual distributions.** Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI) See instructions	
9 Distributable amount for 2015 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2015	(iii) Distributable Amount for 2015
1 Distributable amount for 2015 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2015 (reasonable cause required--see instructions)			
3 Excess distributions carryover, if any, to 2015			
a			
b			
c			
d From 2013. . . . . ______________			
e From 2014. . . . . ______________			
f **Total** of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2015 distributable amount			
i Carryover from 2010 not applied (see instructions)			
j Remainder Subtract lines 3g, 3h, and 3i from 3f			
4 Distributions for 2015 from Section D, line 7 $ ______________________			
a Applied to underdistributions of prior years			
b Applied to 2015 distributable amount			
c Remainder Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2015, if any Subtract lines 3g and 4a from line 2 (if amount greater than zero, see instructions)			
6 Remaining underdistributions for 2015 Subtract lines 3h and 4b from line 1 (if amount greater than zero, see instructions)			
7 **Excess distributions carryover to 2016.** Add lines 3j and 4c			
8 Breakdown of line 7			
a			
b			
c Excess from 2013. . . . . ______________			
d From 2014. . . . . ______________			
e From 2015. . . . . ______________			

Part VI Supplemental Information.

Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a and 3b; Part V, line 1; Part V, Section B, line 1e; Part V Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions).

Facts And Circumstances Test

Return Reference	Explanation
SCHEDULE A, PART II, LINE 10, EXPLANATION OF OTHER INCOME	MISCELLANEOUS - 2011 AMOUNT $ 176,378 2012 AMOUNT $ 238,672 2013 AMOUNT $ 101,885 2014 AMOUNT $ 166,002 2015 AMOUNT $ 170,002 INTERCOMPANY CHARGES - 2011 AMOUNT $ 457,658 2012 AMOUNT $ 483,626 2013 AMOUNT $ 479,071 2014 AMOUNT $ 501,802 2015 AMOUNT $ 588,014

SCHEDULE C (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ.
▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

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

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

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

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

If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

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

Name of the organization	Employer identification number
JEWISH FEDERATION OF ST LOUIS	43-0652643

Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1	Provide a description of the organization's direct and indirect political campaign activities in Part IV	
2	Political expenditures ▶	$ 0
3	Volunteer hours	0

Part I-B Complete if the organization is exempt under section 501(c)(3).

1	Enter the amount of any excise tax incurred by the organization under section 4955 ▶	$ 0
2	Enter the amount of any excise tax incurred by organization managers under section 4955 ▶	$ 0
3	If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No
4a	Was a correction made?	☐ Yes ☐ No
b	If "Yes," describe in Part IV	

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1	Enter the amount directly expended by the filing organization for section 527 exempt function activities ▶	$
2	Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities ▶	$
3	Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b ▶	$
4	Did the filing organization file **Form 1120-POL** for this year?	☐ Yes ☐ No

5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments For each organization listed, enter the amount paid from the filing organization's funds Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(a) Name	**(b)** Address	**(c)** EIN	**(d)** Amount paid from filing organization's funds If none, enter -0-	**(e)** Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
2				
3				
4				
5				
6				

Part II-A **Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).**

A Check ▶ ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures)

B Check ▶ ☐ if the filing organization checked box A and "limited control" provisions apply

	Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)	(a) Filing organization's totals	(b) Affiliated group totals
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0	
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	104,636	
c	Total lobbying expenditures (add lines 1a and 1b)	104,636	
d	Other exempt purpose expenditures	16,191,076	
e	Total exempt purpose expenditures (add lines 1c and 1d)	16,295,712	
f	Lobbying nontaxable amount Enter the amount from the following table in both columns	964,786	

If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:
Not over $500,000	20% of the amount on line 1e
Over $500,000 but not over $1,000,000	$100,000 plus 15% of the excess over $500,000
Over $1,000,000 but not over $1,500,000	$175,000 plus 10% of the excess over $1,000,000
Over $1,500,000 but not over $17,000,000	$225,000 plus 5% of the excess over $1,500,000
Over $17,000,000	$1,000,000

		(a)	(b)
g	Grassroots nontaxable amount (enter 25% of line 1f)	241,197	
h	Subtract line 1g from line 1a If zero or less, enter -0-	0	
i	Subtract line 1f from line 1c If zero or less, enter -0-	0	
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year? ☐ Yes ☐ No		

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

Lobbying Expenditures During 4-Year Averaging Period

	Calendar year (or fiscal year beginning in)	**(a)** 2012	**(b)** 2013	**(c)** 2014	**(d)** 2015	**(e)** Total
2a	Lobbying nontaxable amount	914,139	981,903	1,000,000	964,786	3,860,828
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,791,242
c	Total lobbying expenditures	100,349	105,834	102,420	104,636	413,239
d	Grassroots nontaxable amount	228,535	245,476	250,000	241,197	965,208
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,447,812
f	Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity

		(a) Yes	(a) No	(b) Amount
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of			
a	Volunteers?			
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			
c	Media advertisements?			
d	Mailings to members, legislators, or the public?			
e	Publications, or published or broadcast statements?			
f	Grants to other organizations for lobbying purposes?			
g	Direct contact with legislators, their staffs, government officials, or a legislative body?			
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i	Other activities?			
j	Total Add lines 1c through 1i			
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b	If "Yes," enter the amount of any tax incurred under section 4912			
c	If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

			Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?	1		
2	Did the organization make only in-house lobbying expenditures of $2,000 or less?	2		
3	Did the organization agree to carry over lobbying and political expenditures from the prior year?	3		

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A, line 3, is answered "Yes."

1	Dues, assessments and similar amounts from members	1	
2	Section 162(e) nondeductible lobbying and political expenditures **(do not include amounts of political expenses for which the section 527(f) tax was paid).**		
a	Current year	2a	
b	Carryover from last year	2b	
c	Total	2c	
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5	Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and 2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Return Reference	Explanation

efile GRAPHIC print - DO NOT PROCESS	As Filed Data -	DLN: 93493316036206

SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
▶ Attach to Form 990.
Information about Schedule D (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047
2015
Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts.
Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	114	
2	Aggregate value of contributions to (during year)	3,053,517	
3	Aggregate value of grants from (during year)	1,802,393	
4	Aggregate value at end of year	7,243,665	

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☑ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☑ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply)

☐ Preservation of land for public use (e g , recreation or education)
☐ Preservation of an historically important land area
☐ Protection of natural habitat
☐ Preservation of a certified historic structure
☐ Preservation of open space

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year

			Held at the End of the Year
a	Total number of conservation easements	2a	
b	Total acreage restricted by conservation easements	2b	
c	Number of conservation easements on a certified historic structure included in (a)	2c	
d	Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d	

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶ ____________

4 Number of states where property subject to conservation easement is located ▶ ____________

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ ____________

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year
▶ $ ____________

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items

b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items

(i) Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

(ii) Assets included in Form 990, Part X ▶ $ ____________

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items

a Revenue included on Form 990, Part VIII, line 1 ▶ $ ____________

b Assets included in Form 990, Part X ▶ $ ____________

Part III **Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets** *(continued)*

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply)

a ☐ Public exhibition
b ☐ Scholarly research
c ☐ Preservation for future generations
d ☐ Loan or exchange programs
e ☐ Other

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII

5 During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV **Escrow and Custodial Arrangements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☑ No

b If "Yes," explain the arrangement in Part XIII and complete the following table

			Amount
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 Form 990, Part X, line 21, for escrow or custodial account liability? ☑ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII Check here if the explanation has been provided in Part XIII . . . . ☑

Part V **Endowment Funds.** Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

		(a) Current year	(b) Prior year	b (c) Two years back	(d) Three years back	(e) Four years back
1a	Beginning of year balance	87,055,999	88,872,202	84,267,931	73,467,620	78,156,133
b	Contributions	4,350,456	3,315,229	4,018,183	8,700,274	2,433,713
c	Net investment earnings, gains, and losses	-2,714,201	1,678,103	9,284,594	8,083,144	-1,142,787
d	Grants or scholarships	6,397,746	6,809,535	8,698,506	5,983,107	5,979,439
e	Other expenditures for facilities and programs					
f	Administrative expenses					
g	End of year balance	82,294,508	87,055,999	88,872,202	84,267,931	73,467,620

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as

a Board designated or quasi-endowment ▶ 51 000 %

b Permanent endowment ▶ 21 000 %

c Temporarily restricted endowment ▶ 28 000 %

The percentages on lines 2a, 2b, and 2c should equal 100%

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by

			Yes	No
	(i) unrelated organizations	3a(i)		No
	(ii) related organizations	3a(ii)		No
b	If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R?	3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds

Part VI **Land, Buildings, and Equipment.** Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		3,765,767	2,385,392	1,380,375
c Leasehold improvements				
d Equipment		4,747,766	3,265,978	1,481,788
e Other				
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				2,862,163

Part VII Investments—Other Securities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CSV OF LIFE INSURANCE	1,305,685	F
(B) OTHER	34,007	F
(C) PRIVATE EQUITY	6,741,461	F
(D) ABSOLUTE RETURN STRATEGIES	9,052,836	F
(E) REAL ESTATE	9,551,251	F
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶	26,685,240	

Part VIII Investments—Program Related.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation 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 answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

(a) Description	(b) Book value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 15)* . . . . ▶	

Part X Other Liabilities. Complete if the organization answered 'Yes' on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
Federal income taxes	
SPLIT INTEREST OBLIGATIONS	1,930,534
ACCRUED PENSION LIABILITY	2,956,841
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	4,887,375

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII ☑

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	11,494,878
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	-5,758,915		
b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII)	2d	-74,699		
e	Add lines **2a** through **2d**			2e	-5,833,614
3	Subtract line **2e** from line **1**			3	17,328,492
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	90,738		
b	Other (Describe in Part XIII)	4b	588,014		
c	Add lines **4a** and **4b**			4c	678,752
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	18,007,244

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.
Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	17,726,625
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a			
b	Prior year adjustments	2b			
c	Other losses	2c			
d	Other (Describe in Part XIII)	2d			
e	Add lines **2a** through **2d**			2e	0
3	Subtract line **2e** from line **1**			3	17,726,625
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	90,738		
b	Other (Describe in Part XIII)	4b	588,014		
c	Add lines **4a** and **4b**			4c	678,752
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	18,405,377

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information

Return Reference	Explanation
PART IV, LINE 2B	FUNDS HELD IN CUSTODY FOR OTHERS INCLUDE INVESTMENTS OF VARIOUS BENEFICIARY AGENCIES AND OTHER ORGANIZATIONS WHICH PARTICIPATE IN THE POOLED INVESTMENT PROGRAM OF THE FEDERATION, WHICH ARE RELATED PARTIES THESE AGENCIES AND ORGANIZATIONS RETAIN THE AUTHORITY TO WITHDRAW THESE FUNDS AT ANY TIME WITH CERTAIN ADVANCE NOTICE FUNDS HELD IN CUSTODY FOR OTHERS ALSO INCLUDE THE ESTIMATED AMOUNT TO BE DISTRIBUTED TO OTHER ORGANIZATIONS UPON THE DEATH OF A DONOR ANNUITY BENEFICIARY AND AMOUNTS TO BE DISTRIBUTED IN ACCORDANCE WITH THE PASSPORT TO ISRAEL PROGRAM

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation
PART X, LINE 2	THE FEDERATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE SERVICE AS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE AND, ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME TAXES THE FEDERATION HAS ADOPTED GUIDANCE REGARDING THE RECOGNITION OF UNCERTAIN INCOME TAX POSITIONS THE FEDERATION'S POLICY PRESCRIBES A RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR THE FINANCIAL STATEMENT RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED
PART XI, LINE 2D - OTHER ADJUSTMENTS	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -74,699
PART XI, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ALLOCATIONS 588,014
PART XII, LINE 4B - OTHER ADJUSTMENTS	INTERCOMPANY ALLOCATIONS 588,014

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

Part I General Information on Activities Outside the United States.

Complete if the organization answered "Yes" to Form 990, Part IV, line 14b.

1 **For grantmakers.** Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☑ Yes ☐ No

2 **For grantmakers.** Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

3 Activites per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1)	MIDDLE EAST & NORTH AFRICA	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	
(2)	RUSSIA AND NEIGHBORING STATES	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	
(3)	SOUTH AMERICA	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	
(4)	CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	16,716,802
(5)						
3a	Sub-total	0	0			16,716,802
b	Total from continuation sheets to Part I	0	0			0
c	**Totals** (add lines 3a and 3b)	0	0			16,716,802

Part II **Grants and Other Assistance to Organizations or Entities Outside the United States.**
Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than $5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)		RUSSIA & THE NEWLY INDEPENDENT STATES -	DISTRIBUTION TO ORGANIZATIONS IN RUSSIA & THE NEWLY INDEPENDENT STATES REGION		WIRE/CHECK		N/A	N/A
(2)		MIDDLE EAST AND NORTH AFRICA -	DISTRIBUTION TO ORGANIZATIONS IN THE MIDDLE EASTERN AND NORTH AFRICAN REGION		WIRE/CHECK		N/A	N/A
(3)		SOUTH AMERICA - ARGENTINA, BOLIVIA,	DISTRIBUTION TO ORGANIZATIONS IN SOUTH AMERICAN REGION		WIRE/CHECK		N/A	N/A
(4)			SEE PART V FOR MORE INFORMATION ON GRANTS TO ORGANIZATIONS OUTSIDE THE UNITED STATES	3,361,112	WIRE/CHECK		N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter . . . . ▶

3 Enter total number of other organizations or entities . . . . ▶

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

Part IV Foreign Forms

1	Was the organization a U S transferor of property to a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)*	☑ Yes	☐ No
2	Did the organization have an interest in a foreign trust during the tax year? *If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U S Owner (see Instructions for Forms 3520 and 3520-A, do not file with Form 990)*	☐ Yes	☑ No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? *If "Yes," the organization may be required to file Form 5471, Information Return of U S Persons with Respect to Certain Foreign Corporations (see Instructions for Form 5471)*	☐ Yes	☑ No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? *If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)*	☑ Yes	☐ No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? *If "Yes," the organization may be required to file Form 8865, Return of U S Persons with Respect to Certain Foreign Partnerships (see Instructions for Form 8865)*	☑ Yes	☐ No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? *If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713, do not file with Form 990)*	☐ Yes	☑ No

Part V **Supplemental Information**

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information (see instructions).

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 2	THE FEDERATION EXCLUSIVELY USES JEWISH FEDERATIONS OF NORTH AMERICA (JFNA) TO PERFORM GRAN TMAKING TO ORGANIZATIONS OUTSIDE THE UNITED STATES JFNA IS THE OVERSEAS GRANTMKING ORGANI ZATION FOR 155 FEDERATIONS IN THE UNITED STATES JFNA PERFORMS ALL DUE DILIGENCE WITH RESP ECT TO EVALUATING THE RECIPIENT ORGANIZATIONS TO ENSURE THEY MEET THE ELIGIBILITY CRITERIA REQUIRED TO MEET THE EQUIVALENCY OF 501(C)(3) STATUS IN THE UNITED STATES THE FEDERATION SPECIFIES CERTAIN PORTIONS FOR RECIPIENT ORGANIZATIONS IN ISRAEL, THE FORMER SOVIET UNION , AND SOUTH AMERICA, ALTHOUGH SPECIFIC DOLLAR AMOUNTS PER REGION CANNOT BE DETERMINED THE GRANT AMOUNTS REPORTED IN THE FEDERATION'S FORM 990 WILL ALSO BE REPORTED ON JFNA'S FORM 990, SCHEDULE F

990 Schedule F, Supplemental Information

Return Reference	Explanation
PART I, LINE 3	THE FEDERATION USES ACCRUAL METHOD TO ACCOUNT FOR INVESTMENTS AND EXPENDITURES OUTSIDE OF THE UNITED STATES

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, COLUMN (F)	THE AMOUNT REPORTED FOR INVESTMENTS HELD OUTSIDE OF THE UNITED STATES OF $16,716,802 REPRE SENTS THE YEAR ENDED FAIR MARKET VALUE OF INVESTED ASSETS HELD IN MANAGERS DOMICILED IN TH IS REGION

Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Information about Schedule I (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

Part I General Information on Grants and Assistance

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? . . . . . . ☑ Yes ☐ No

2 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 Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on 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 organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . ▶ 70

3 Enter total number of other organizations listed in the line 1 table . . . . ▶ 0

Part III **Grants and Other Assistance to Domestic Individuals.** Complete if the organization answered "Yes" on 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)** Amount of cash grant	**(d)** Amount of non-cash assistance	**(e)** Method of valuation (book, FMV, appraisal, other)	**(f)** Description of non-cash assistance
(1) INNOVATION FUND GRANT	2	13,630	0	N/A	N/A

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

Return Reference	**Explanation**
PART I, LINE 2	ALL BENEFICIARY ORGANIZATIONS WHICH RECEIVE GRANTS MADE THROUGH THE FEDERATION'S ALLOCATION PROGRAM HAVE A TRI-ANNUAL ORGANIZATION REVIEW THIS INCLUDES A FINANCIAL AND ADMINISTRATIVE REVIEW OF THE ORGANIZATION AND, IF APPLICABLE, A PROGRAMMATIC REVIEW AS WELL FOR GRANTS MADE THROUGH THE FEDERATION'S DONOR ADVISED FUNDS, ALL GRANTEES' 501(C)(3) STATUS IN GOOD STANDING IS CONFIRMED THE FEDERATION MONITORS THE USE OF GRANT FUNDS AWARD TO INDIVIDUALS IN THE UNITED STATES BY REQUIRING ALL GRANTEES TO SUBMIT ANNUAL PROGRESS REPORTS THAT INCLUDE INFORMATION ON NUMBER OF CLIENTS SERVED, DOLLARS SPENT, EVALUATION RESULTS, PLANS FOR THE COMING YEAR AND SUSTAINABILITY EFFORTS IF THE PROGRESS REPORTS ARE NOT SATISFACTORY, FEDERATION STAFF MEET WITH THE GRANTEE STAFF AND/OR MAKE SITE VISITS TO SEE THE PROGRAM IN ACTION SCHEDULE I, PART II * THE LARGE VARIETY IN ORGANIZATIONS RECEIVING GRANTS FROM THE FEDERATION IS DUE TO THE INCLUSION OF GRANTS MADE THROUGH DONOR ADVISED FUNDS

Additional Data

Software ID:
Software Version:
EIN: 43-0652643
Name: JEWISH FEDERATION OF ST LOUIS

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
ACLUEM FUND 454 WHITIER ST ST LOUIS,MO 63108	43-6070952	501(C)(3)	6,100		N/A	N/A	GENERAL SUPPORT
AISH HATORAH 457 N WOODSMILL RD CHESTERFIELD,MO 63017	43-1839464	501(C)(3)	14,080		N/A	N/A	GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION 9370 OLIVE BLVD ST LOUIS,MO 63132	43-1237069	501(C)(3)	5,100		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 JEWISH COMMITTEE 7751 CARONDOLET AVE ST LOUIS,MO 63105	13-5563393	501(C)(3)	57,544		N/A	N/A	GENERAL SUPPORT
AMERICAN JEWISH JOINT DISTRUBION COMMITTEE PO BOX 4124 NEW YORK,NY 10163	13-1656634	501(C)(3)	23,000		N/A	N/A	GENERAL SUPPORT
AMERICAN PARKINSON DISEASE ASSOCIATION 660 S EUCLID ST LOUIS,MO 63110	13-1962771	501(C)(3)	5,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 SOCIETY FOR TECHNION 55 E 59TH ST NEW YORK, NY 10022	13-0434195	501(C)(3)	22,184		N/A	N/A	GENERAL SUPPORT
AMIR 9792 EDMONDS WAY 229 EDMONDS, WA 98020	27-3114329	501(C)(3)	40,130		N/A	N/A	GENERAL SUPPORT
ANTI DEFIMATION LEAGUE 34 N BRENTWOOD BLVD 2 ST LOUIS, MO 63105	13-1818723	501(C)(3)	28,153		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 & EDUCATION COUNCIL 3547 OLIVE ST ST LOUIS, MO 63103	43-0790672	501(C)(3)	15,280		N/A	N/A	GENERAL SUPPORT
BAIS ABRAHAM CONGREGATION 6910 DELMAR ST LOUIS, MO 63130	43-0782212	501(C)(3)	7,535		N/A	N/A	GENERAL SUPPORT
BAIS YAKOV 700 NORTH AND SOUTH RD ST LOUIS, MO 63130		501(C)(3)	18,750		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 10420 OLD OLIVE ST RD ST LOUIS,MO 63141	13-1818723	501(C)(3)	73,811		N/A	N/A	GENERAL SUPPORT
BBYO PASSPORT TO THE WORLD 5185 MACARTHUR BLVD 640 WASHINGTON,DC 20016	31-1794932	501(C)(3)	5,667		N/A	N/A	GENERAL SUPPORT
BIG BROTHERS BIG SISTERS OF EASTERN MISSOURI 501 N GRAND BLVD 100 ST LOUIS,MO 63103	43-0669085	501(C)(3)	14,300		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
B'NAI AMOONA CONGREG 324 S MASON RD ST LOUIS,MO 63141	43-0706846	501(C)(3)	37,564		N/A	N/A	GENERAL SUPPORT
CAMP LIVINGSTON 8485 RIDGE RD CINCINNATI,OH 45236	31-6050765	501(C)(3)	5,406		N/A	N/A	GENERAL SUPPORT
CENTRAL AGENCY FOR JEWISH EDUCATION 12 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	23-7123583	501(C)(3)	36,096		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 ST LOUIS,MO 63108	43-1336060	501(C)(3)	17,725		N/A	N/A	GENERAL SUPPORT
CHABAD OF GREATER ST LOUIS 8124 DELMAR ST LOUIS,MO 63130	43-1287764	501(C)(3)	42,192		N/A	N/A	GENERAL SUPPORT
CHILDREN'S HOME SOCI 9445 LITZSINGER RD ST LOUIS,MO 63144	43-0652622	501(C)(3)	5,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CONGREGATION TEMPLE ISRAEL 1 RABBI ALVIAN D RUBIN DR ST LOUIS,MO 63141	43-0653290	501(C)(3)	43,715		N/A	N/A	GENERAL SUPPORT
COVENANT PLACE FOUND 8 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	43-1365901	501(C)(3)	110,308		N/A	N/A	GENERAL SUPPORT
CRAFT ALLIANCE EDUCATION CENTER 6640 DELMAR BLVD ST LOUIS,MO 63130	43-1022226	501(C)(3)	5,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CULTURAL LEADERSHIP 225 S MERAMEC 107 ST LOUIS,MO 63105	20-1269305	501(C)(3)	6,000		N/A	N/A	GENERAL SUPPORT
HF EPSTEIN HEBREW ACADEMY 1138 WARSON ROAD ST LOUIS,MO 63132	43-6001158	501(C)(3)	145,919		N/A	N/A	GENERAL SUPPORT
B'NAI B'RITH HILLEL FOUNDATION 6300 FORSYTH ST LOUIS,MO 63105	43-6065763	501(C)(3)	246,985		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
HILLEL THE FOUNDATION FOR JEWISH CAMPUS LIFE 8000 EIGHT ST NW WASHINGTON,DC 20001	52-1844823	501(C)(3)	24,777		N/A	N/A	GENERAL SUPPORT
HOLOCAUST MUSEUM & LEARNING CENTER 12 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	43-0652643	501(C)(3)	16,200		N/A	N/A	GENERAL SUPPORT
JEWISH COMMUNITY CENTER 2 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	43-0681477	501(C)(3)	1,599,080		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 COMMUNITY RELATIONS COUNCIL 12 MILLSTONE CAMPUS DR ST LOUIS,MO 63146	20-5631988	501(C)(3)	335,019		N/A	N/A	GENERAL SUPPORT
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH ST NEW YORK,NY 10016	13-1624104	501(C)(3)	17,500		N/A	N/A	GENERAL SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE 10950 SCHUETZ RD ST LOUIS,MO 63146	43-0790330	501(C)(3)	738,528		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 NATIONAL FUND 42 EAST 69TH ST NEW YORK,NY 10021	13-1659627	501(C)(3)	12,676		N/A	N/A	GENERAL SUPPORT
JEWISH PARENTS MEDIA GROUP PO BOX 31724S ST LOUIS,MO 63131	47-3318842	501(C)(3)	10,000		N/A	N/A	GENERAL SUPPORT
JEWISH TELGRAPHIC AGENCY 24 W 30TH ST 4TH FL NEW YORK,NY 01001	13-0887610	501(C)(3)	9,500		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
KOL RINAH RELIGIOUS SCHOOL 829 N HANLEY RD ST LOUIS,MO 63130	90-1003729	501(C)(3)	28,642		N/A	N/A	GENERAL SUPPORT
MERS GOODWILL 1727 LOCUST ST ST LOUIS,MO 63103	43-0652657	501(C)(3)	41,904		N/A	N/A	GENERAL SUPPORT
MIRIAM FOUNDATION 501 BACON AVE ST LOUIS,MO 63119	43-0667478	501(C)(3)	26,500		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 BOTANICAL GARDENS PO BOX 299 ST LOUIS,MO 63166	43-0666759	501(C)(3)	17,350		N/A	N/A	GENERAL SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN 8350 DELCREST DR ST LOUIS,MO 63124	43-0722936	501(C)(3)	22,320		N/A	N/A	GENERAL SUPPORT
NEVE SHALOM 6 MILLSTONE CAMPUS DR 3050 ST LOUIS,MO 63146	43-1523412	501(C)(3)	12,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NEXT DOR 5062 WATERMAN ST LOUIS,MO 63108	80-0594269	501(C)(3)	55,000		N/A	N/A	GENERAL SUPPORT
NFTY IN ISRAEL 46 BOWAN RD WARWICK,NY 10990	13-1663143	501(C)(3)	11,515		N/A	N/A	GENERAL SUPPORT
NINE NETWORK OF PUBLICATIONS 3655 OLIVE ST RD ST LOUIS,MO 63108	43-0685345	501(C)(3)	5,800		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
NORTHWESTERN MEMORIAL FOUNDATION 251 EAST HURON ST GALTER PAVILION 3-200 CHICAGO,IL 60611	36-3155315	501(C)(3)	5,000		N/A	N/A	GENERAL SUPPORT
PLANNED PARENTHOOD OF ST LOUIS 4251 FOREST PARK AVE ST LOUIS,MO 63108	43-0652666	501(C)(3)	6,150		N/A	N/A	GENERAL SUPPORT
REPERTORY THEATRE OF ST LOUIS 130 EDGAR RD ST LOUIS,MO 63119	43-0970273	501(C)(3)	6,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SAFE CONNECTIONS 2165 HAMPTON AVE ST LOUIS,MO 63139	43-1077667	501(C)(3)	10,500		N/A	N/A	GENERAL SUPPORT
SAUL MIROWITZ JEWISH COMMUNITY SCHOOL 348 S MASON RD ST LOUIS,MO 63141	43-1772004	501(C)(3)	234,197		N/A	N/A	GENERAL SUPPORT
SHAARE EMETH CONGREGATION 11645 LADUE RD ST LOUIS,MO 63141	43-0662466	501(C)(3)	28,880		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
SHIR HADASH RECONSTRUCTIONIST COMMUNITY PO BOX 1671 CLAYTON,MO 63105	20-3463256	501(C)(3)	5,000		N/A	N/A	GENERAL SUPPORT
ST LOUIS ART MUSEUM 1 FINE ARTS DR ST LOUIS,MO 63110	43-1056957	501(C)(3)	8,500		N/A	N/A	GENERAL SUPPORT
ST LOUIS CHILDREN'S HOSPITAL PO BOX 500522 ST LOUIS,MO 63150	43-1626863	501(C)(3)	26,250		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount 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 JEWISH LIGHT PO BOX 955519 ST LOUIS,MO 63195	43-0965860	501(C)(3)	83,337		N/A	N/A	GENERAL SUPPORT
ST LOUIS JEWISH STUDENT UNION 8251 MARYLAND AVE 15 ST LOUIS,MO 63105	13-5623717	501(C)(3)	33,000		N/A	N/A	GENERAL SUPPORT
ST LOUIS KOLLEL 8200 DELMAR BLVD ST LOUIS,MO 63124	43-1594954	501(C)(3)	15,000		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount 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 SYMPHONY ORCHESTRA 718 N GRAND BLVD ST LOUIS,MO 63103	43-0666769	501(C)(3)	22,200		N/A	N/A	GENERAL SUPPORT
ST LOUIS TORAH MITZION KOLLEL 7741 GANNON AVE ST LOUIS,MO 63101	56-2318455	501(C)(3)	30,000		N/A	N/A	GENERAL SUPPORT
ST LOUIS ZOO FOUNDATION ONE GOVERNMENT DR ST LOUIS,MO 63110	43-1027365	501(C)(3)	65,100		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
STAGES OF ST LOUIS 444 CHESTERFIELD CTR ST LOUIS,MO 63017	43-1434156	501(C)(3)	12,500		N/A	N/A	GENERAL SUPPORT
TEMPLE EMANUEL 12166 CONWAY RD ST LOUIS,MO 63141	43-6015404	501(C)(3)	6,165		N/A	N/A	GENERAL SUPPORT
GLADYS & HENRY CROWN CENTER 8350 DELCREST DR ST LOUIS,MO 63124	43-1695861	501(C)(3)	104,950		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
TORAH PREPRATORY SCHOOL 8000 STANFORD ST LOUIS,MO 63130	56-2318455	501(C)(3)	188,276		N/A	N/A	GENERAL SUPPORT
UNITED HEBREW CONGREGATION 13788 CONWAY RD ST LOUIS,MO 63141	43-0743415	501(C)(3)	9,435		N/A	N/A	GENERAL SUPPORT
UNITED WAY OF GREATETER ST LOUIS PO BOX 14507 ST LOUIS,MO 63178	43-0714167	501(C)(3)	29,950		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
USY 820 2ND AVE 10TH FL NEW YORK, NY 10017	13-1659707	501(C)(3)	7,742		N/A	N/A	GENERAL SUPPORT
WASHINGTON UNIVERSITY 660 S EUCLID AVE ST LOUIS, MO 63110	43-0653611	501(C)(3)	136,454		N/A	N/A	GENERAL SUPPORT
YESHIVAT KADIMAH HIGH SCHOOL 1142 N WARSON RD ST LOUIS, MO 63132	46-3021300	501(C)(3)	58,721		N/A	N/A	GENERAL SUPPORT

Form 990,Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments.

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
YOUNG ISRAEL OF ST LOUIS 8101 DELMAR BLVD ST LOUIS,MO 63130	43-0824829	501(C)(3)	18,552		N/A	N/A	GENERAL SUPPORT

Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees
▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23.
▶ Attach to Form 990.
▶ Information about Schedule J (Form 990) and its instructions is at *www.irs.gov/form990*.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

Part I Questions Regarding Compensation

			Yes	No
1a	Check the appropiate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items ☐ First-class or charter travel ☐ Housing allowance or residence for personal use ☐ Travel for companions ☐ Payments for business use of personal residence ☐ Tax idemnification and gross-up payments ☑ Health or social club dues or initiation fees ☐ Discretionary spending account ☐ Personal services (e g , maid, chauffeur, chef)			
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**	Yes	
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**	Yes	
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 on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization			
a	Receive a severance payment or change-of-control payment?	**4a**		No
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	**4b**		No
c	Participate in, or receive payment from, an equity-based compensation arrangement? If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	**4c**		No
	Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of			
a	The organization?	**5a**		No
b	Any related organization? If "Yes," on line 5a or 5b, describe in Part III	**5b**		No
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of			
a	The organization?	**6a**		No
b	Any related organization? If "Yes," on line 6a or 6b, describe in Part III	**6b**		No
7	For persons listed on 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 on 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**		No
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)?	**9**		

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

Note. The sum of columns (B)(i)-(iii) 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-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	**(ii)** Bonus & incentive compensation	**(iii)** Other reportable compensation				
1 DR ANDREW REHFELD PRESIDENT & CEO	**(i)**	257,000	40,000	5,602	29,940	6,000	338,542	0
	(ii)	0	0	0	0	0	0	0
2 DONALD HANNON CHIEF FINANCIAL OFFICER	**(i)**	139,712	0	1,310	0	10,289	151,311	0
	(ii)	0	0	0	0	0	0	0
3 STEPHEN G COHEN VICE PRESIDENT	**(i)**	170,295	0	3,170	15,327	18,009	206,801	0
	(ii)	0	0	0	0	0	0	0

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
PART I, LINE 1A	DR ANDREW REHFELD HEALTH OR SOCIAL CLUB DUES OR INITIATION FEES - NOT INCLUDED IN TAXABLE INCOME

SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

▶Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.
▶ Attach to Form 990.
▶Information about Schedule M (Form 990) and its instructions is at *www.irs.gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures .				
3 Art—Fractional interests . .				
4 Books and publications . .				
5 Clothing and household goods				
6 Cars and other vehicles . .				
7 Boats and planes				
8 Intellectual property . . .				
9 Securities—Publicly traded .	X	181	3,498,018	STOCK MARKET QUOTES
10 Securities—Closely held stock .				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous . .				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other . . .				
15 Real estate—Residential .				
16 Real estate—Commercial . .				
17 Real estate—Other . . .				
18 Collectibles				
19 Food inventory . . .				
20 Drugs and medical supplies .				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens . .				
24 Archeological artifacts . . .				
25 Other ▶ (SEE PART II)	X	1	445,082	BOOK VALUE
26 Other ▶ (____________)				
27 Other ▶ (____________)				
28 Other ▶ (____________)				

29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0

		Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a		No
b If "Yes," describe the arrangement in Part II			
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?	32a		No
b If "Yes," describe in Part II			
33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II			

Part II 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
PART I, COLUMN (B)	THE FEDERATION REPORTS THE NUMBER OF CONTRIBUTORS ON SCHEDULE M, PART I, COLUMN (B) SCHEDULE M, PART I, LINE 25 REPORTS THE RECEIPT OF NET ASSETS OF THE CENTRAL AGENCY FOR JEWISH EDUCATION RESULTING FROM THE ACQUISITION OF THE ENTITY'S PROGRAMS

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.
▶ Attach to Form 990 or 990-EZ.
▶ Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
JEWISH FEDERATION OF ST LOUIS	43-0652643

Return Reference	Explanation
FORM 990, PART III, LINE 2	JEWISH FEDERATION ACQUIRED A DIRECT SERVICE COMMUNITY DEVELOPMENT ORGANIZATION IN JULY 2015

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 6	ANY JEWISH ADULT INDIVIDUAL (AGE EIGHTEEN OR OLDER) WHO MAKES PAYMENT OR A CONTRIBUTION OF NOT LESS THAN THIRTY DOLLARS ($30 00) TO THE FEDERATION'S ANNUAL CAMPAIGN, OR TO ANY CAMPAIGN CONDUCTED IN LIEU OF THE ANNUAL CAMPAIGN, SHALL BE A VOTING MEMBER FOR THE FISCAL YEAR IN RESPECT TO WHICH SUCH PAYMENT IS MADE AND UNTIL ADJOURNMENT OF THE ANNUAL MEETING OF THE ORGANIZATION HELD THE FOLLOWING YEAR AS A CONDITION PRECEDENT TO MEMBERSHIP, AN INDIVIDUAL SHALL AGREE (AND CONTINUE TO ABIDE BY SUCH AGREEMENT) TO RESPECT THE FEDERATION'S MISSION STATEMENT AS SET FORTH IN ARTICLE TWO OF THE FEDERATION'S BY-LAWS

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7A	AT EACH ANNUAL MEETING OF THE MEMBERS, THE MEMBERS SHALL ELECT TO FILL THE POSITIONS OF THOSE AT-LARGE TRUSTEES WHOSE TERMS ARE EXPIRING FROM A SLATE OF NOMINEES PREPARED AND PROPOSED BY THE BOARD DEVELOPMENT AND NOMINATING COMMITTEE OR FROM THOSE NOMINEE(S) PROPOSED BY TWO HUNDRED FIFTY MEMBERS OF THE FEDERATION AS DESCRIBED IN ARTICLE 7 02 OF THE BY-LAWS EACH MEMBER SHALL HAVE ONE VOTE FOR AS MANY TRUSTEES AS THERE ARE TO BE ELECTED THERE SHALL BE NO CUMULATIVE VOTING IN THE ELECTION OF TRUSTEES THE BOARD OF TRUSTEES ARE RESPONSIBLE FOR THE ELECTION OF THE AT-LARGE DIRECTORS, CONSIDER AND VOTE ON CHANGES TO THE BY-LAWS EITHER DRAFTED AND APPROVED BY THE BOARD OF DIRECTORS OR THE MEMBERS OF THE FEDERATION, APPROVE THE APPOINTMENT, BY THE PRESIDENT, OF SIX AT-LARGE TRUSTEES WHO WILL EACH SERVE ON THE BOARD DEVELOPMENT AND NOMINATING COMMITTEE, AND PARTICIPATE IN DISCUSSIONS OF COMMUNITY PRIORITIES

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 7B	THE MEMBERS OF THE FEDERATION MAY ACT TO ADD TO, ALTER, AMEND, OR REPEAL THE BY-LAWS, SUBJECT TO THE FOLLOWING TWO CONDITIONS (I) THE AFFIRMATIVE VOTE OF AT LEAST THREE-FOURTHS (3/4) OF THE MEMBERS OF THE FEDERATION PRESENT AT ANY MEETING OF THE MEMBERS AS TO WHICH NOTICE OF THE CONTEMPLATED ACTION WAS GIVEN, AND (II) THE AFFIRMATIVE VOTE OF AT LEAST TWO-THIRDS (2/3) OF THE TRUSTEES PRESENT AT ANY MEETING OF THE BOARD OF TRUSTEES AS TO WHICH NOTICE OF THE CONTEMPLATED ACTION WAS GIVEN

Return Reference	Explanation
FORM 990, PART VI, SECTION A, LINE 8B	THE ORGANIZATION DOES NOT HAVE A EXECUTIVE COMMITTEE OR SIMILAR COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE BOARD

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11	PRIOR TO THE FILING OF FORM 990, THE FEDERATION BUDGET FINANCE AND ADMINISTRATION (BF&A) COMMITTEE WILL CARRY OUT A DETAILED REVIEW OF THE FORM 990 THE BF&A COMMITTEE CHAIR, SUBSEQUENT TO THIS REVIEW, WILL PRESENT THE FORM 990 TO THE FULL BOARD FOR APPROVAL TO FILE EACH BOARD MEMBER WILL RECEIVE A FULL COPY OF THE FORM 990 PRIOR TO THIS PRESENTATION UPON APPROVAL OF THE BOARD MANAGEMENT WILL FILE THE FORM 990

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	ON AN ANNUAL BASIS, EACH DIRECTOR, TRUSTEE, OFFICER, COMMITTEE MEMBER AND EMPLOYEE WILL SIGN/UPDATE A CONFLICT OF INTEREST DISCLOSURE STATEMENT THIS STATEMENT WILL LIST ANY CONFLICTS AND AFFIRM THE PERSON'S RESPONSIBILITY ON DISCLOSURE OF A POTENTIAL CONFLICT EACH OF THE ABOVE NAMED PERSONS (OTHER THAN EMPLOYEES) MUST DISCLOSE POTENTIAL CONFLICTS TO THE FEDERATION'S BOARD CHAIR AND THE CHAIRMAN OF THE AUDIT COMMITTEE AN EMPLOYEE MUST ALSO DISCLOSE POTENTIAL CONFLICTS TO THE EXECUTIVE VICE PRESIDENT & CEO THE POTENTIAL CONFLICT/TRANSACTION WILL BE DETERMINED TO EITHER BE OR NOT BE A CONFLICT BY A MAJORITY OF THE FEDERATION BOARD MEMBERS OR COMMITTEE MEMBERS INDIVIDUALS WITH A CONFLICT WILL NOT BE ALLOWED TO PARTICIPATE IN THE DISCUSSION NOR THE VOTE ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	THE PROCESS FOR DETERMINING COMPENSATION FOR THE PRESIDENT AND CEO INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA AND SUBSTANTIATION OF THE DELIBERATION AND DECISION THE PROCESS IS COMPLETED ON AN ANNUAL BASIS THIS PROCESS WAS LAST UNDERTAKEN IN 2015 KEY EMPLOYEES AND OTHER OFFICERS OF THE FEDERATION EACH HAVE AN ANNUAL REVIEW SIGNED OFF BY THEIR SUPERVISOR COMPENSATION IS BASED ON COMPARABILITY DATA AND MEETING INTERNALLY ESTABLISHED GOALS THIS PROCESS WAS LAST UNDERTAKEN IN 2015

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	THE FEDERATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND THE FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST THE FEDERATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE

Return Reference	Explanation
FORM 990, PART XI, LINE 9	CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS -74,699 PENSION RELATED CHANGES OTHER THAN NET PERIODIC COST 289,312 CHANGE IN PERMANENTLY RESTRICTED NET ASSETS -278,831

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
JEWISH FEDERATION OF ST LOUIS

Employer identification number
43-0652643

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
(1) WOMEN'S AUXILIARY FOUNDATION FOR THE JEWISH AGED LLC 12 MILLSTONE CAMPUS DR ST LOUIS, MO 63146	PROVIDE GRANTS TO ORGAN- IZATIONS THAT SUPPORT THE JEWISH AGED IN ST LOUIS	MO	-13,349	301,648	JEWISH FEDERATION OF ST LOUIS

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	No
(1)LUBIN-GREEN FOUNDATION 12 MILLSTONE CAMPUS DR ST LOUIS, MO 63146 43-6049332	SUPPORTING FOUNDATION	MO	501(C)(3)	LINE 11A, I	JEWISH FEDERATION OF ST LOUIS	Yes	
(2)STAENBERG FAMILY FOUNDATION 2127 INNERBELT BUSINESS CTR STE 200 ST LOUIS, MO 63114 20-2055339	SUPPORTING FOUNDATION	MO	501(C)(3)	LINE 11A, I	JEWISH FEDERATION OF ST LOUIS	Yes	
(3)THE KRANZBERG FOUNDATION 12 MILLSTONE CAMPUS DR ST LOUIS, MO 63146 20-4920260	SUPPORTING FOUNDATION	MO	501(C)(3)	LINE 11A, I	JEWISH FEDERATION OF ST LOUIS	Yes	

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income(related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations? Yes	(h) No	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner? Yes	(j) No	(k) Percentage ownership

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512 (b)(13) controlled entity? Yes	(i) No
(1) REMAINDER TRUSTS (20)	TRUST INVESTMENTS	MO		T					No

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

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule

		Yes	No
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?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a		No
b Gift, grant, or capital contribution to related organization(s)	1b		No
c Gift, grant, or capital contribution from related organization(s)	1c	Yes	
d Loans or loan guarantees to or for related organization(s)	1d		No
e Loans or loan guarantees by related organization(s)	1e		No
f Dividends from related organization(s)	1f		No
g Sale of assets to related organization(s)	1g		No
h Purchase of assets from related organization(s)	1h		No
i Exchange of assets with related organization(s)	1i		No
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l	Yes	
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	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 covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LUBIN-GREEN FOUNDATION	C	234,840	CASH TRANSFER
(2) STAENBERG FAMILY FOUNDATION	C	592,474	CASH TRANSFER

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

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

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners section 501(c)(3) organizations?		(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?		(k) Percentage ownership
				Yes	No			Yes	No		Yes	No	

Part VII Supplemental Information

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

Return Reference	Explanation