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Form

990-PF

Department of the Treasury
Internal Revenue Service

Return of Private Foundation

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

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

Information about Form 990-PF and its instructions is at www.irs.gov/form990pf.

OMB No 1545-0052

2015

Open to Public Inspection

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

Name of foundation MONETA GROUP CHARITABLE FOUNDATION		A Employer identification number 43-1871586	
Number and street (or P O box number if mail is not delivered to street address) 100 S BRENTWOOD STE 500		B Telephone number (see instructions) (314) 726-2300	
City or town, state or province, country, and ZIP or foreign postal code SAINT LOUIS, MO 63105		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply <input type="checkbox"/> Initial return <input type="checkbox"/> Final return <input type="checkbox"/> Address change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/> E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/> F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
H Check type of organization <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation			
I Fair market value of all assets at end of year (from Part II, col. (c), line 16) \$ 1,606,910	J Accounting method <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ (Part I, column (d) must be on cash basis.)		

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		Revenue and expenses per books (a)	Net investment income (b)	Adjusted net income (c)	Disbursements for charitable purposes (d) (cash basis only)
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)	227,805			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch B				
	3 Interest on savings and temporary cash investments	1,497	1,497		
	4 Dividends and interest from securities	30,808	30,808		
	5a Gross rents				
	b Net rental income or (loss) _____				
	6a Net gain or (loss) from sale of assets not on line 10	35,462			
	b Gross sales price for all assets on line 6a 425,775				
	7 Capital gain net income (from Part IV, line 2) . . .		50,884		
	8 Net short-term capital gain				
	9 Income modifications				
	10a Gross sales less returns and allowances				
Operating and Administrative Expenses	b Less Cost of goods sold				
	c Gross profit or (loss) (attach schedule)				
	11 Other income (attach schedule)				
	12 Total. Add lines 1 through 11	295,572	83,189		
	13 Compensation of officers, directors, trustees, etc	0	0		0
	14 Other employee salaries and wages				
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule).	460	460		0
	b Accounting fees (attach schedule).	3,700	3,700		0
	c Other professional fees (attach schedule)				
	17 Interest				
	18 Taxes (attach schedule) (see instructions) . . .	3,813	365		0
	19 Depreciation (attach schedule) and depletion . . .				
	20 Occupancy				
	21 Travel, conferences, and meetings.				
	22 Printing and publications				
	23 Other expenses (attach schedule).	47	47		0
	24 Total operating and administrative expenses.				
	Add lines 13 through 23	8,020	4,572		0
	25 Contributions, gifts, grants paid	248,448			248,448
	26 Total expenses and disbursements. Add lines 24 and 25	256,468	4,572		248,448
	27 Subtract line 26 from line 12				
	a Excess of revenue over expenses and disbursements	39,104			
	b Net investment income (if negative, enter -0-)		78,617		
	c Adjusted net income (if negative, enter -0-) . . .				

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1	Cash—non-interest-bearing			
	2	Savings and temporary cash investments	123,192	132,840	132,840
	3	Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4	Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions).			
	7	Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8	Inventories for sale or use			
	9	Prepaid expenses and deferred charges			
	10a	Investments—U S and state government obligations (attach schedule)			
	b	Investments—corporate stock (attach schedule)	0	13,375	12,723
	c	Investments—corporate bonds (attach schedule)			
	11	Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12	Investments—mortgage loans.			
	13	Investments—other (attach schedule)	1,325,896	1,341,977	1,461,347
	14	Land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
15	Other assets (describe ▶ _____)				
16	Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		1,449,088	1,488,192	1,606,910
Liabilities	17	Accounts payable and accrued expenses			
	18	Grants payable			
	19	Deferred revenue			
	20	Loans from officers, directors, trustees, and other disqualified persons			
	21	Mortgages and other notes payable (attach schedule).			
	22	Other liabilities (describe ▶ _____)			
	23	Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.				
	24	Unrestricted			
	25	Temporarily restricted			
	26	Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds	0	0	
	28	Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
	29	Retained earnings, accumulated income, endowment, or other funds	1,449,088	1,488,192	
	30	Total net assets or fund balances (see instructions)	1,449,088	1,488,192	
31	Total liabilities and net assets/fund balances (see instructions)	1,449,088	1,488,192		

Part III Analysis of Changes in Net Assets or Fund Balances			
1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year’s return)	1	1,449,088
2	Enter amount from Part I, line 27a	2	39,104
3	Other increases not included in line 2 (itemize) ▶ _____	3	0
4	Add lines 1, 2, and 3	4	1,488,192
5	Decreases not included in line 2 (itemize) ▶ _____	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,488,192

Part IV

Capital Gains and Losses for Tax on Investment Income

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)		How acquired P—Purchase (b) D—Donation	Date acquired (c) (mo , day, yr)	Date sold (d) (mo , day, yr)
1a	See Additional Data Table			
b				
c				
d				
e				

(e) Gross sales price	Depreciation allowed (f) (or allowable)	Cost or other basis (g) plus expense of sale	Gain or (loss) (h) (e) plus (f) minus (g)
a See Additional Data Table			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			Gains (Col (h) gain minus col (k), but not less than -0-) or (l) Losses (from col (h))
(i) F M V as of 12/31/69	Adjusted basis (j) as of 12/31/69	Excess of col (i) (k) over col (j), if any	
a See Additional Data Table			
b			
c			
d			
e			

2	Capital gain net income or (net capital loss)	{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }	2	50,884
3	Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		3	

Part V

Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income)
If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? ☐ Yes ☒ No
If "Yes," the foundation does not qualify under section 4940(e) Do not complete this part

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2014	227,407	1,581,523	0 143790
2013	253,917	1,457,149	0 174256
2012	163,384	1,346,607	0 121330
2011	194,229	1,308,725	0 148411
2010	147,753	1,203,609	0 122758

2	Total of line 1, column (d).	2	0 710545
3	Average distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0 142109
4	Enter the net value of noncharitable-use assets for 2015 from Part X, line 5.	4	1,604,587
5	Multiply line 4 by line 3.	5	228,026
6	Enter 1% of net investment income (1% of Part I, line 27b).	6	786
7	Add lines 5 and 6.	7	228,812
8	Enter qualifying distributions from Part XII, line 4.	8	248,448

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate See
the Part VI instructions

Part VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see page 18 of the instructions)

1a

Exempt operating foundations described in section 4940(d)(2), check here ☐ and enter "N/A" on line 1
Date of ruling or determination letter _____
(attach copy of letter if necessary—see instructions)

b

Domestic foundations that meet the section 4940(e) requirements in Part V, check here ☒ and enter 1% of Part I, line 27b

c

All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b)

2

Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

2

0

3

Add lines 1 and 2.

3

786

4

Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)

4

0

5

Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-

5

786

6

Credits/Payments

a

2015 estimated tax payments and 2014 overpayment credited to 2015

6a

2,120

b

Exempt foreign organizations—tax withheld at source

6b

c

Tax paid with application for extension of time to file (Form 8868).

6c

d

Backup withholding erroneously withheld

6d

7

Total credits and payments. Add lines 6a through 6d.

7

2,120

8

Enter any penalty for underpayment of estimated tax. Check here ☒ if Form 2220 is attached

8

9

Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed

9

10

Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid.

10

1,334

11

Enter the amount of line 10 to be Credited to 2015 estimated tax 1,334 Refunded

11

0

Part VII-AStatements Regarding Activities

1a

During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?

1a

No

b

Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)?
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.

1b

No

c

Did the foundation file Form 1120-POL for this year?

1c

No

d

Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year
(1) On the foundation \$ _____ 0 (2) On foundation managers \$ _____ 0

e

Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ _____ 0

2

Has the foundation engaged in any activities that have not previously been reported to the IRS?
If "Yes," attach a detailed description of the activities.

2

No

3

Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes

3

No

4a

Did the foundation have unrelated business gross income of \$1,000 or more during the year?

4a

No

b

If "Yes," has it filed a tax return on Form 990-T for this year?

4b

5

Was there a liquidation, termination, dissolution, or substantial contraction during the year?
If "Yes," attach the statement required by General Instruction T.

5

No

6

Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either
• By language in the governing instrument, or
• By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument?

6

Yes

7

Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.

7

Yes

8a

Enter the states to which the foundation reports or with which it is registered (see instructions)
 MO _____

b

If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? If "No," attach explanation .

8b

Yes

9

Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)?
If "Yes," complete Part XIV

9

No

10

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses.

10

No

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Part VII-A

Statements Regarding Activities *(continued)*

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions).	11		No
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW.MONETAGROUP.COM	13	Yes	
14	The books are in care of TAX STRATEGIES LLC Telephone no (314) 725-9600 Located at 100 S BRENTWOOD BLVD SUITE 500 CLAYTON MO ZIP+4 63105			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —Check here <input type="checkbox"/> and enter the amount of tax-exempt interest received or accrued during the year 15			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR) If "Yes", enter the name of the foreign country 	16	Yes	No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly) (1) Engage in the sale or exchange, or leasing of property with a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days). <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)? <input type="checkbox"/> Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>	1b		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015? <input type="checkbox"/>	1c		No
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," list the years 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions). <input type="checkbox"/>	2b		
c	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
b	If "Yes," did it have excess business holdings in 2015 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (<i>Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2015.</i>) <input type="checkbox"/>	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		No
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2015?	4b		No

Part VII-B

Statements Regarding Activities for Which Form 4720 May Be Required (Continued)

5a

During the year did the foundation pay or incur any amount to

(1)

Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?

Yes

No

(2)

Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?

Yes

No

(3)

Provide a grant to an individual for travel, study, or other similar purposes?

Yes

No

(4)

Provide a grant to an organization other than a charitable, etc , organization described in section 4945(d)(4)(A)? (see instructions).

Yes

No

(5)

Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?

Yes

No

b

If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?

5b

Organizations relying on a current notice regarding disaster assistance check here.

c

If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

Yes

No

If "Yes," attach the statement required by Regulations section 53.4945–5(d).

6a

Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?

Yes

No

b

Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?

6b

No

If "Yes" to 6b, file Form 8870.

7a

At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?

Yes

No

b

If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?

7b

Part VIII

Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1

List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
See Additional Data Table				

2

Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

(a) Name and address of each employee paid more than \$50,000	Title, and average hours per week (b) devoted to position	(c) Compensation	Contributions to employee benefit plans and deferred compensation (d)	Expense account, (e) other allowances
NONE				

Total

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

0

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Part VIII

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".

(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		

Total number of others receiving over \$50,000 for professional services.	0
--	---

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1	
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments See instructions	
3	

[illegible]

Part X

Minimum Investment Return
(All domestic foundations must complete this part. Foreign foundations,see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities.	1a	1,530,103
b	Average of monthly cash balances.	1b	98,919
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	1,629,022
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	1,629,022
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	24,435
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,604,587
6	Minimum investment return. Enter 5% of line 5.	6	80,229

Part XI

Distributable Amount
(see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☒ and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	80,229
2a	Tax on investment income for 2015 from Part VI, line 5.	2a	786
b	Income tax for 2015 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	786
3	Distributable amount before adjustments Subtract line 2c from line 1.	3	79,443
4	Recoveries of amounts treated as qualifying distributions.	4	0
5	Add lines 3 and 4.	5	79,443
6	Deduction from distributable amount (see instructions).	6	0
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1.	7	79,443

Part XII

Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26.	1a	248,448
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	248,448
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions).	5	786
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	247,662
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

Part XIII

Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2014	(c) 2014	(d) 2015
1 Distributable amount for 2015 from Part XI, line 7				79,443
2 Undistributed income, if any, as of the end of 2015				
a Enter amount for 2014 only.			0	
b Total for prior years 20____, 20____, 20____		0		
3 Excess distributions carryover, if any, to 2015				
a From 2010.	88,483			
b From 2011.	129,671			
c From 2012.	97,008			
d From 2013.	182,576			
e From 2014.	152,507			
f Total of lines 3a through e.	650,245			
4 Qualifying distributions for 2015 from Part XII, line 4				
a Applied to 2014, but not more than line 2a			0	
b Applied to undistributed income of prior years (Election required—see instructions).		0		
c Treated as distributions out of corpus (Election required—see instructions).	0			
d Applied to 2015 distributable amount.				79,443
e Remaining amount distributed out of corpus	169,005			
5 Excess distributions carryover applied to 2015 (If an amount appears in column (d), the same amount must be shown in column (a).)	0			0
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	819,250			
b Prior years' undistributed income Subtract line 4b from line 2b.		0		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.		0		
d Subtract line 6c from line 6b Taxable amount—see instructions.		0		
e Undistributed income for 2014 Subtract line 4a from line 2a Taxable amount—see instructions.			0	
f Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2015.				0
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).	0			
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions).	88,483			
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a.	730,767			
10 Analysis of line 9				
a Excess from 2011.	129,671			
b Excess from 2012.	97,008			
c Excess from 2013.	182,576			
d Excess from 2014.	152,507			
e Excess from 2015.	169,005			

Part XIV

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2015, enter the date of the ruling. . . . ▶

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

		Tax year	Prior 3 years			(e) Total
		(a) 2015	(b) 2014	(c) 2013	(d) 2012	
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b	85% of line 2a					
c	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
e	Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the alternative test relied upon					
a	"Assets" alternative test—enter					
	(1) Value of all assets					
	(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.					
c	"Support" alternative test—enter					
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					

Part XV **Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)**

1 Information Regarding Foundation Managers:

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))

See Additional Data Table

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

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

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

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

CHRISTIE SCHMUKE
100 S BRENTWOOD BLVD STE 500
ST LOUIS, MO 63105
(314) 726-2300

b The form in which applications should be submitted and information and materials they should include
THERE IS A STANDARD REQUEST FOR DISTRIBUTIONS THAT CAN BE PROVIDED UPON REQUEST

c Any submission deadlines
NONE

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

NO OUTSIDE GRANT REQUESTS WILL BE SOLICITED, ONLY MONETA GROUP EMPLOYEES MAY SUBMIT REQUESTS

Part XV

Supplementary Information(continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year See Additional Data Table				
Total			3a	248,448
b Approved for future payment				
Total			3b	0

Enter gross amounts unless otherwise indicated		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount		
1 Program service revenue						
a _____						
b _____						
c _____						
d _____						
e _____						
f _____						
g Fees and contracts from government agencies						
2 Membership dues and assessments.						
3 Interest on savings and temporary cash investments			14	1,497		
4 Dividends and interest from securities. . . .			14	30,808		
5 Net rental income or (loss) from real estate						
a Debt-financed property.						
b Not debt-financed property.						
6 Net rental income or (loss) from personal property						
7 Other investment income.						
8 Gain or (loss) from sales of assets other than inventory			18	35,462		
9 Net income or (loss) from special events						
10 Gross profit or (loss) from sales of inventory						
11 Other revenue a _____						
b _____						
c _____						
d _____						
e _____						
12 Subtotal Add columns (b), (d), and (e). . .		0		67,767		0
13 Total. Add line 12, columns (b), (d), and (e).			13			67,767

(See worksheet in line 13 instructions to verify calculations)

[illegible]

d If the answer to any of the above is "Yes," complete the following schedule. Column **(b)** should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column **(d)** the value of the goods, other assets, or services received.

	Yes	No
1a(1)		No
1a(2)		No
1b(1)		No
1b(2)		No
1b(3)		No
1b(4)		No
1b(5)		No
1b(6)		No
1c		No

[illegible]

b If "Yes," complete the following schedule

(a) Name of organization	(b) Type of organization	(c) Description of relationship

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 taxpayer) is based on all information of which preparer has any knowledge.

* * * * *

Title

May the IRS discuss this return with the preparer shown below
(see instr)? ☒ Yes ☐ No

Paid Preparer Use Only	Print/Type preparer's name JOHN J ROTH CPA	Preparer's Signature	Date	Check if self-employed <input checked="" type="checkbox"/>	PTIN P00229411
	Firm's name <input checked="" type="checkbox"/> TAX STRATEGIES LLC			Firm's EIN <input checked="" type="checkbox"/> 43-1931827	
	Firm's address <input checked="" type="checkbox"/> 100 S BRENTWOOD BLVD SUITE 500 CLAYTON, MO 63105			Phone no (314) 725-9600	

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
AQR MANAGED FUTURES FUND	P	2015-03-25	2015-11-23
ASG MANAGED FUTURES STRATEGY	P	2015-03-25	2015-11-23
BRANDES EMERGING MARKETS VALUE	P	2014-08-06	2015-03-24
CRM MID-CAP VALUE	P	2014-12-11	2015-03-24
HATTERAS HEDGED STRATEGIES	P	2014-12-30	2015-03-24
PIMCO COMMODITY	P	2014-09-18	2015-03-24
TOUCHSTONE EMERGING MARKETS	P	2015-03-25	2015-11-13
VANGUARD TOTAL STOCKMARKET INDEX	P	2015-06-25	2015-07-24
ISHARES CORE S&P 500	D	2010-12-10	2015-02-24
ISHARES CORE S&P 500	D	2011-08-03	2015-02-24

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
17,107		17,670	-563
9,985		11,241	-1,256
28,673		37,342	-8,669
16,252		15,455	797
1,382		1,355	27
147		181	-34
33,122		38,700	-5,578
1,407		1,424	-17
2,981		1,747	1,234
2,981		1,755	1,226

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			-563
			-1,256
			-8,669
			797
			27
			-34
			-5,578
			-17
			1,234
			1,226

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
MASTERCARD INC CL A	D	2009-03-13	2015-04-29
APPLE BK FOR SVGS NY 5%	P	2014-09-17	2015-12-31
AQR MANAGED FUTURES FUND	P	2012-12-04	2015-11-23
CRM MID-CAP VALUE	P	2013-12-12	2015-03-24
HATTERAS HEDGED STRATEGIES	P	2012-12-04	2015-03-24
ISHARES CORE S&P 500	D	2012-07-11	2015-11-09
JPMORGAN SMALL CAP EQUITY	P	2013-12-12	2015-07-24
PIMCO COMMODITY	P	2013-12-11	2015-03-24
VANGUARD TOTAL STOCKMARKET INDEX	P	2014-06-23	2015-07-24
CRM MID-CAP VALUE	P	2005-01-03	2015-03-24

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
13,608		2,373	11,235
25,000		24,995	5
22,878		19,920	2,958
12,648		14,179	-1,531
34,317		31,665	2,652
2,924		1,889	1,035
6,985		6,653	332
2,281		3,303	-1,022
4,043		3,212	831
41,931		36,089	5,842

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			11,235
			5
			2,958
			-1,531
			2,652
			1,035
			332
			-1,022
			831
			5,842

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns a - d

List and describe the kind(s) of property sold (e g , real estate, (a) 2-story brick warehouse, or common stock, 200 shs MLC Co)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
ISHARES CORE S&P 500	D	2011-12-09	2015-07-24
PIMCO COMMODITY	P	2009-02-23	2015-03-24
VANGUARD TOTAL STOCKMARKET INDEX	P	2007-02-20	2015-07-24
CAPITAL GAINS DIVIDENDS	P		

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns e - h

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
2,956		1,774	1,182
33,167		51,464	-18,297
74,534		50,505	24,029
34,466			34,466

Form 990PF Part IV - Capital Gains and Losses for Tax on Investment Income - Columns i - l

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
			1,182
			-18,297
			24,029
			34,466

Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
DONALD T KUKLA 1030 BARBERRY LANE KIRKWOOD,MO 63122	TRUSTEE 0 23	0	0	0
DANIEL WEST 50 BRIGHTON WAY 3S ST LOUIS,MO 63105	CHAIRMAN OF THE BOARD 0 48	0	0	0
DOUG WEBER 12134 HIBLER DR CREVE COEUR,MO 63141	TRUSTEE 0 46	0	0	0
GENE DIEDERICH 1324 LITZSINGER WOODS LANE ST LOUIS,MO 63124	TRUSTEE 0 29	0	0	0
CHRISTIE SCHMUKE 6 YELLOWSTONE COURT ST PETERS,MO 63376	MEMBER AT LARGE 0 96	0	0	0
MARK HEFFERNAN 2 RANCH LANE DES PERES,MO 63131	TREASURER 0 58	0	0	0

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

DONALD T KUKLA
DANIEL WEST
GENE DIEDERICH


Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
ALZHEIMER'S ASSOCIATION 9370 OLIVE BLVD ST LOUIS,MO 63132	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	6,500
AMERICAN PARKINSON DISEASE 660 S EUCLID AVE ST LOUIS,MO 63110	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	4,000
BOYS & GIRLS CLUBS OF GREATER ST LOUIS 2901 NORTH GRAND AVENUE ST LOUIS,MO 63107	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
CANCER SUPPORT COMMUNITY 1058 OLD DES PERES RD ST LOUIS,MO 63131	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	10,000
COCA 524 TRINITY AVENUE ST LOUIS,MO 63130	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,500
GO ST LOUIS 300 HUNTER AVE STE 107 ST LOUIS,MO 63124	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,500
GRACE PLACE WELLNESS MINISTRIES 8460 WATSON RD SUITE 136 ST LOUIS,MO 63119	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	500
GREAT CIRCLE 4485 WESTMINSTER PLACE ST LOUIS,MO 63108	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	7,500
HANNIBAL CLINIC 100 MEDICAL DR HANNIBAL,MO 63401	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	500
HAVEN OF GRACE 1225 WARREN STREET ST LOUIS,MO 63106	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	25,000
KIDS ROCK CANCER 650 MARYVILLE UNIVERSITY DRIVE ST LOUIS,MO 63141	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	10,000
MAGIC HOUSE 516 S KIRKWOOD RD ST LOUIS,MO 63122	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	25,000
MAKE A WISH 2742 NORTH 24TH STREET SUITE 400 PHOENIX,AZ 85016	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
MISSOURI COLLEGES FUND INC 3401 WEST TRUMAN BLVD SUITE 202 JEFFERSON CITY,MO 65109	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	500
MS SOCIETY - GATEWAY 1867 LACKLAND HILL PARKWAY ST LOUIS,MO 63146	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	10,000
Total				248,448

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
NORTH SIDE COMMUNITY SCHOOL 3033 NORTH EUCLID ST LOUIS,MO 63115	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
OLD NEWSBOYS 900 N TUCKER BLVD 3RD FLOOR ST LOUIS,MO 63101	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	10,000
OPERATION FOOD SEARCH 6282 OLIVE BOULEVARD ST LOUIS,MO 63130	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
READY READERS 1974 INNERBELT BUSINESS CENTER DR ST LOUIS,MO 63114	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	6,000
RONALD MCDONALD HOUSE 3450 PARK AVENUE ST LOUIS,MO 63104	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	18,028
SHAKESPEARE FESTIVAL ST LOUIS 5715 ELIZABETH AVENUE ST LOUIS,MO 63110	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
SOUTHERN ILLINOIS UNIVERSITY FOUNDATION 1235 DOUGLAS DRIVE CARBONDALE,IL 62901	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	3,200
SPRINGBOARD 1310 PAPIN STREET SUITE 402 ST LOUIS,MO 63103	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
ST LOUIS AREA FOODBANK 70 CORPORATE WOODS DR BRIDGETON,MO 63044	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
ST LOUIS COMMUNITY COLLEGE 300 SOUTH BROADWAY ST LOUIS,MO 63102	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
ST LOUIS SYMPHONY 718 N GRAND BLVD ST LOUIS,MO 63103	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
ST MARY'S HEALTH CENTER FOUNDATION 6420 CLAYTON RD ST LOUIS,MO 63117	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
UNITED WAY 910 N 11TH ST ST LOUIS,MO 63101	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	15,000
VOICES FOR CHILDREN 105 S CENTRAL ST LOUIS,MO 63105	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	750
WEIDENBAUM CENTER ONE BROOKINGS DRIVE ST LOUIS,MO 63130	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
Total				248,448

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a Paid during the year				
YOUTH LEARNING CENTER 4471 OLIVE STREET ST LOUIS,MO 63108	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
CENTRAL INSTITUTE FOR THE DEAF 825 SOUTH TAYLOR AVE ST LOUIS,MO 63110	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
CHARACTERPLUS 1460 CRAIG ROAD ST LOUIS,MO 63146	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
CONCORDANCE ACADEMY 100 METROPOLITAN SQUARE SUITE 1300 ST LOUIS,MO 63102	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
CONSERVATION FEDERATION OF MISSOURI 728 W MAIN JEFFERSON CITY,MO 65101	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
COPE24 PO BOX 510409 ST LOUIS,MO 63151	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	3,800
DUGREAT RIVERS HABITAT ALLIANCE PO BOX 50014 ST LOUIS,MO 63105	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
GRACE HILL 2600 HADLEY STREET ST LOUIS,MO 63106	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
HUMANE SOCIETY 1201 MACKLIND AVE ST LOUIS,MO 63110	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
INTERNATIONAL RETT SYNDROME FOUNDATION 4600 DEVITT DRIVE CINCINNATI,OH 45246	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
KARLA SMITH FOUNDATION 14 PARK PLACE SUITE B SWANSEA,IL 62226	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	750
LUTHERAN FAMILY AND CHILDREN SERVICES 9666 OLIVE BOULEVARD SUITE 400 ST LOUIS,MO 63122	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	500
MISSOURI BAPTIST HEALTHCARE FOUNDATION 3015 NORTH BALLAS ROAD ST LOUIS,MO 63131	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
MISSOURI HISTORY MUSEUM PO BOX 11940 ST LOUIS,MO 63112	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	2,500
MISSOURI WARRIORS BASEBALL INC 14070 FORESTVALE DRIVE CHESTERFIELD,MO 63005	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	250
Total  3a				248,448

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
PETER & PAUL COMMUNITY SERVICES 2612 WYOMING STREET ST LOUIS,MO 63118	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,920
ST LOUIS LEARNING DISABILITY ASSOCIATION 13537 BARRETT PARKWAY DRIVE SUITE 110 BALLWIN,MO 63021	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
STL VILLAGE 6633 DELMAR BOULEVARD ST LOUIS,MO 63130	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,000
THE COVERING HOUSE 8702 MANCHESTER ROAD ST LOUIS,MO 63144	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	1,500
VISITING NURSE ASSOCIATION 11440 OLIVE BLVD SUITE 200 ST LOUIS,MO 63141	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	250
WOMEN'S FOUNDATION OF GREATER SAINT LOUIS 8816 MANCHESTER ROAD 286 ST LOUIS,MO 63144	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	500
WORLD PEDIATRIC PROJECT 755 S NEW BALLAS ROAD SUITE 140 ST LOUIS,MO 63141	NONE	PUBLIC CHARITY	GENERAL OPERATING FUNDS	5,000
Total.			3a	248,448

TY 2015 Accounting Fees Schedule**Name:** MONETA GROUP CHARITABLE FOUNDATION**EIN:** 43-1871586

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCTG AND TAX PREPARATION	3,700	3,700		0

TY 2015 Investments Corporate Stock Schedule

Name: MONETA GROUP CHARITABLE FOUNDATION

EIN: 43-1871586

Name of Stock	End of Year Book Value	End of Year Fair Market Value
CALERES INC	3,192	3,084
ENTERPRISE FINANCIAL SERVICES CORP	10,183	9,639

TY 2015 Investments - Other Schedule

Name: MONETA GROUP CHARITABLE FOUNDATION

EIN: 43-1871586

Category/ Item	Listed at Cost or FMV	Book Value	End of Year Fair Market Value
AMERICAN FUNDS EUROPACIFIC FUND	AT COST	18,706	29,094
AMERICAN FUNDS GROWTH FUND	AT COST	110,056	165,797
CRM MID CAP VALUE	AT COST	0	0
DODGE & COX STOCK FUND	AT COST	102,796	150,407
COHEN & STEERS REALTY	AT COST	6,224	6,890
JP MORGAN SM CAP EQ	AT COST	45,175	66,114
DODGE & COX INTERNATIONAL STOCK	AT COST	25,060	26,064
VANGUARD TOTAL INTL STK	AT COST	29,518	26,114
VANGUARD TOTAL STK MKT IDX	AT COST	67,524	76,449
PIMCO COMMODITY REAL RET STRAT	AT COST	0	0
T ROWE PRICE MID-CAP GROWTH	AT COST	51,781	67,912
ISHARES S&P 500 INDEX	AT COST	2,946	2,868
AQR MANAGED FUTURES STRATEGY I	AT COST	47,037	48,610
AQR MULTI-STRATEGY ALTERNATIVE I	AT COST	125,878	124,350
CBRE CLARION	AT COST	20,383	20,209
COHEN & STEERS INTL REALTY I	AT COST	8,323	7,982
HATTERAS HEDGED STRATEGIES	AT COST	0	0
ASG MANAGED FUTURES STRATEGY Y	AT COST	25,800	26,636
PALMER SQUARE ABSOLUTE RETURN	AT COST	36,966	33,147
OTHER	AT COST	1,512	0
BOND FUNDS	AT COST	152,844	143,964
CERTIFICATES OF DEPOSIT	AT COST	150,030	149,935
NUVEEN NWQ SMALL CAP VALUE	AT COST	65,118	67,900
OAKMARK INTERNATIONAL SMALL CAP	AT COST	55,535	46,136
BRANDES EMERGING MARKETS	AT COST	47,420	32,985
DIAMOND HILL SMALL-MID CAP I	AT COST	71,945	69,840
HARDING LOEVNER INSTL EMERG MKTS	AT COST	33,400	31,762
STONE RIDGE REINSURANCE RISK	AT COST	20,000	20,025
VERSUS CAP MULTI MGR REAL ESTATE	AT COST	20,000	20,157

TY 2015 Legal Fees Schedule

Name: MONETA GROUP CHARITABLE FOUNDATION

EIN: 43-1871586

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL FEES	460	460		0

TY 2015 Other Expenses Schedule

Name: MONETA GROUP CHARITABLE FOUNDATION

EIN: 43-1871586

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADMINISTRATIVE EXPENSES	47	47		0

TY 2015 Taxes Schedule**Name:** MONETA GROUP CHARITABLE FOUNDATION**EIN:** 43-1871586

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
FOREIGN TAXES ON DIVIDENDS	365	365		0
EXCISE TAXES	3,448	0		0

<div>Schedule B</div> <div>(Form 990, 990-EZ, or 990-PF)</div> <div>Department of the Treasury Internal Revenue Service</div>	<div>Schedule of Contributors</div> <div>▶ Attach to Form 990, 990-EZ, or 990-PF.</div> <div>▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.</div>	<div>OMB No 1545-0047</div> <div>2015</div>
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<div>Name of the organization</div> <div>MONETA GROUP CHARITABLE FOUNDATION</div>	<div>Employer identification number</div> <div>43-1871586</div>
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Organization type (check one)

<div>Filers of:</div> <div>Form 990 or 990-EZ</div> <div>Form 990-PF</div>	<div>Section:</div> <div><div><input type="checkbox"/> 501(c)() (enter number) organization</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust not treated as a private foundation</div><div><input type="checkbox"/> 527 political organization</div><div><input checked="" type="checkbox"/> 501(c)(3) exempt private foundation</div><div><input type="checkbox"/> 4947(a)(1) nonexempt charitable trust treated as a private foundation</div><div><input type="checkbox"/> 501(c)(3) taxable private foundation</div></div>
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Check if your organization is covered by the **General Rule** or a **Special Rule**.
Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions

General Rule

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor Complete Parts I and II See instructions for determining a contributor's total contributions

Special Rules

- ☐ For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹/₃% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of **(1)** \$5,000 or **(2)** 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III
- ☐ For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc , purposes, but no such contributions totaled more than \$1,000 If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc , purpose Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc , contributions totaling \$5,000 or more during the year ▶ \$ _____

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

Name of organization MONETA GROUP CHARITABLE FOUNDATION	Employer identification number 43-1871586
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Part I Contributors (see instructions) Use duplicate copies of Part I if additional space is needed			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	 	 \$ 	Person Payroll Noncash (Complete Part II for noncash contribution)

Name of organization MONETA GROUP CHARITABLE FOUNDATION	Employer identification number 43-1871586
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Part II

Noncash Property

(see instructions) Use duplicate copies of Part II if additional space is needed

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	150 SHARES OF MASTERCARD	\$ 13,184	2015-04-07
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
3	340 SHARES OF ENTERPRISE FINANCIAL SERVICES CORP	\$ 10,183	2015-11-09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	14 SHARES OF ISHARES CORE S&P 500	\$ 2,957	2015-02-17
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	14 SHARES OF ISHARES CORE S&P 500	\$ 3,004	2015-05-21
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	14 SHARES OF ISHARES CORE S&P 500	\$ 2,894	2015-08-20
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
6	14 SHARES OF ISHARES CORE S&P 500	\$ 2,946	2015-11-23

Name of organization MONETA GROUP CHARITABLE FOUNDATION	Employer identification number 43-1871586
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Part III

Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of *exclusively* religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____

Use duplicate copies of Part III if additional space is needed

(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
	--		
(a) No.from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
-			
	(e) Transfer of gift		
	Transferee's name, address, and ZIP 4	Relationship of transferor to transferee	
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Additional Data

Software ID:

Software Version:

EIN: 43-1871586

Name: MONETA GROUP CHARITABLE FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<div>1</div>	<div>DAVE SADLER</div> <div>24 FLYNN FOREST LANE</div> <div>GLENDAL E, MO 63122</div>	<div>\$ 13,184</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
<div>2</div>	<div>DIANE COMPARDO</div> <div>42 BRIARCLIFF</div> <div>ST LOUIS, MO 63124</div>	<div>\$ 5,400</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
<div>3</div>	<div>DON KUKLA</div> <div>1030 BARBERRY LANE</div> <div>KIRKWOOD, MO 63122</div>	<div>\$ 10,183</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
<div>4</div>	<div>LINDA PIETROBURGO</div> <div>435 TWIN CREEK ROAD</div> <div>ST LOUIS, MO 63141</div>	<div>\$ 22,480</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
<div>5</div>	<div>STEVE FINERTY</div> <div>20 ALGONQUIN LANE</div> <div>WEBSTER GROVES, MO 63119</div>	<div>\$ 58,023</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>
<div>6</div>	<div>TIM HALLS</div> <div>634 E PACIFIC AVE</div> <div>WEBSTER GROVES, MO 63119</div>	<div>\$ 11,801</div>	<div>Person</div> <div>Payroll</div> <div>Noncash</div> <div>(Complete Part II for noncash contribution)</div>

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
<u>7</u>			Person <input checked="" type="checkbox"/>
	<u>TOM O'MEARA</u>		Payroll <input type="checkbox"/>
	<u>1953 SUNNY DRIVE</u>	<u>\$ 31,358</u>	Noncash
	<u>ST LOUIS, MO 63122</u>		(Complete Part II for noncash contribution)
<u>8</u>			Person <input checked="" type="checkbox"/>
	<u>GENE DIEDERICH</u>		Payroll <input type="checkbox"/>
	<u>1324 LITZINGER WOODS LANE</u>	<u>\$ 12,500</u>	Noncash
	<u>ST LOUIS, MO 63124</u>		(Complete Part II for noncash contribution)
<u>9</u>			Person <input checked="" type="checkbox"/>
	<u>DAN WEST</u>		Payroll <input type="checkbox"/>
	<u>50 BRIGHTON WAY 3S</u>	<u>\$ 10,000</u>	Noncash
	<u>ST LOUIS, MO 63105</u>		(Complete Part II for noncash contribution)
<u>10</u>			Person <input checked="" type="checkbox"/>
	<u>JIM BLAIR</u>		Payroll <input type="checkbox"/>
	<u>49 MANDERLEIGH ESTATE COURT</u>	<u>\$ 11,040</u>	Noncash
	<u>ST LOUIS, MO 63131</u>		(Complete Part II for noncash contribution)
<u>11</u>			Person <input checked="" type="checkbox"/>
	<u>DAVID BRECKENRIDGE</u>		Payroll <input type="checkbox"/>
	<u>84 LAKE FOREST DRIVE</u>	<u>\$ 12,000</u>	Noncash
	<u>ST LOUIS, MO 63117</u>		(Complete Part II for noncash contribution)
<u>12</u>			Person <input checked="" type="checkbox"/>
	<u>MARK HEFFERNAN</u>		Payroll <input type="checkbox"/>
	<u>2 RANCH LANE</u>	<u>\$ 7,500</u>	Noncash
	<u>DES PERES, MO 63131</u>		(Complete Part II for noncash contribution)