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DLN: 93493278007446

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 <u>www.IRS.gov/form990</u>

OMB No 1545-0047

2015

Open to Public Inspection

A F	or th	ne 2015 ca		inning 01-01-2015 , and ending 1	.2-31-2015				
		applicable change	C Name of organization MISSOURI BAR FOUNDATION					•	lentification number
		cnange hange	Down because				44-60	0119	30
	tial re	-	Doing business as						
Fur	nal			ox if mail is not delivered to street address)	Room/suite		E Telepho	one nu	ımber
ret	turn/te	erminated	PO BOX 119				(573)	635	-4128
☐ An	nende	d return	City or town, state or province JEFFERSON CITY, MO 65102	e, country, and ZIP or foreign postal code					- A E40 CEC
Г Ар	plicati	on pending	JETT ERSON CITT, MO 05102				G Gross r	receipt	s \$ 549,656
			F Name and address of	f principal officer		H(a) Is th			
			SEBRINA A BARRETT PO BOX 119				rdinates?		「Yes √No s 「Yes 「No
			JEFFERSON CITY, MO	65102		H(b) Are a inclu		inate	s j Yesi No
- T-		empt status	[[[[[[[[[[[[[[[[[[[. (27	If"N	o," attach	n a lis	t (see instructions)
) ◀ (insert no)	27	H(c) Grou	ıp exempt	tion n	umber ►
J W	/ebsi	ite:► N/A	4						
K For	m of o	organızatıon	Corporation Trust Ass	ociation Cother 🕨		L Year of fo	rmation 19		M State of legal domicile
Pa	rt I	Sum	ımary						МО
	_			ssion or most significant activities					
	'	TO PROM	IOTE THE ADMINISTRATI	ON OF JUSTICE AND PROVIDE A	WARDS A	ND SCHOL	ARSHIPS	5 ТО	DESERVING PEOPLE
ų.	:	INTHEL	A W PROFESSION						
Governance	:								
Ě	:								
Š	2	Check th	nis box 🔰 if the organization	on discontinued its operations or dis	sposed of n	nore than 2	5% of its	net a	issets
	٦	Number	of voting members of the go	verning hody (Part VI June 1a)				з	23
es es		3 Number of voting members of the governing body (Part VI, line 1a)							23
纟				d ın calendar year 2015 (Part V, lın				5	0
Activities &				e if necessary)	•			6	23
•				om Part VIII, column (C), line 12				7a	0
				ne from Form 990-T, line 34				7b	0
						Pric	r Year		Current Year
	8	Contr	ibutions and grants (Part V)	II, line 1h)			58,	270	49,168
ПIE	9	Progra	am service revenue (Part V	m service revenue (Part VIII, line 2g)				0	0
Revenue	10	Inves	tment income (Part VIII, co	olumn (A), lines 3, 4, and 7d)			139,	470	138,244
—	11			ı (A), lınes 5, 6d, 8c, 9c, 10c, and 1				0	0
	12	Total 12)	revenue—add lines 8 throug	h 11 (must equal Part VIII, columr	n (A), line		197,	740	187,412
	13		s and similar amounts paid	(Part IX, column (A), lines 1-3)			186,	576	86,663
	14			Part IX, column (A), line 4)				0	0
	15			ployee benefits (Part IX, column (A	(), lines			0	0
Expenses		5-10)							
蚕	16a			rt IX, column (A), line 11e)				0	0
五	b		ındraısıng expenses (Part IX, colu	• • • • • • • • • • • • • • • • • • • •				2 4 4	
	17		·	(A), lines 11a-11d, 11f-24e) .				044	38,624
	18			(must equal Part IX, column (A), li line 18 from line 12			245, -47,	\rightarrow	125,287
> °°	+	KEVEI	at less expelises subtract	10 HOM MIC 12 1 1 1 1		Basin I			
900 2000						Beginning o	or current	τ ear	End of Year
Not Assets or Fund Balances	20		assets (Part X, line 16) .				2,093,	\rightarrow	2,155,753
end Und	21		liabilities (Part X, line 26)				2,093,	0	0
	22 1€≢	22 Net assets or fund balances Subtract line 21 from line 20 **TII Signature Block**							2,155,753
Unde my k	er per nowl	nalties of	perjury, I declare that I hav belief, it is true, correct, and	e examined this return, including ac d complete Declaration of preparer					
		****	***			20	016-10-04		
Sigi	n		ature of officer				ate		
Her		SEBI	RINA BARRETT SECRETARY						
			e or print name and title						
			Print/Type preparer's name KATHLEEN A GRAESSLE	Preparer's signature KATHLEEN A GRAESSLE	Date	I Clie	ck l	PTIN	048898
Pai	d						-employed		
	par	rer	Firm's name WILLIAMS-KEEPE Firm's address 3220 WEST EDGE				n's EIN ► 4 ne no (573		
Use	e Oı	nly ˈ					IIO (3/3	,, 000	0170
			JEFFERSON CITY	, איזכס טויו					

May the IRS discuss this return with the preparer shown above? (see instructions)

. ✓ Yes ☐ No

Par	t IIII Statement of Program	Service Accomplish	nents		. 490
	Check if Schedule O contains		line in this Part III		<u> </u>
1	Briefly describe the organization's r	mission			
SUPI INCA RESE JUDI LEGA CON DOC	ELIEVE, AID AND ASSIST AS CHAERANNUATED AND IN NEED OF AIAPACITATED OR SUPERANNUATED ARCH THEREIN, THE PROMOTION CIAL PROCEEDINGS AND DECISIVAL EDUCATION, THE GRANTING OSTITUTIONAL FORM OF GOVERNMUMENTS, OBJECTS OF ART AND INISTRATION OF JUSTICE	D OR THE DEPENDENTS (D AND IN NEED OF AID, T N OF IMPROVEMENTS IN ONS, THE ELEVATION OF F SCHOLARSHIPS TO STI 1ENT, TO MAINTAIN LIBF	OF DECEASED ME THE ADVANCEME THE ADMINISTRA JUDICIAL STAN JOENTS OF LAW, RARIES, TO ACQU	MBERS OF THE BAR WHO S NT OF THE SCIENCE OF JU ITION OF JUSTICE AND EF DARDS, THE STUDY AND I THE PRESERVATION OF T JIRE PRESERVE AND EXHI	SHALL BE ILL, RISPRUDENCE AND FICIENCY OF MPROVEMENT OF HE AMERICAN BIT RARE BOOKS AND
	Did the organization undertake any	significant program service	s during the year w	hich were not listed on	
	the prior Form 990 or 990-EZ? If "Yes," describe these new service				⊤Yes ▼No
3	Did the organization cease conduction services?		_	ucts, any program	┌Yes ┌No
	If "Yes," describe these changes or	Schedule O			
4	Describe the organization's program expenses Section 501(c)(3) and 50 the total expenses, and revenue, if a)1(c)(4) organizations are i	equired to report t		
4a	(Code) (Expenses	\$ 54,464 inclu	ding grants of \$	54,464) (Revenue \$)
	GRANT PROGRAMS FOR RESEARCH AND II NON-PARTISAN COURT PLAN AND HOW IT DEVELOPMENT FOR THE SUPREME COURT	WORKS, SUPPORT NATIONAL BAI	ATION OF JUSTICE, INC R ASSOCIATIONS MID Y	CLUDING UNEMPLOYMENT CLINIC, EAR CONFERENCE AND AWARDS,	EDUCATION ON THE MISSOUR AND WEBSITE DESIGN AND
	(Code) (Expenses	\$ 32,199 inclu	ding grants of \$	32,199) (Revenue \$)
40	AWARDS AND SCHOLARSHIPS - 2 SCHOLAI INDIVIDUALS INVOLVED IN THE FIELD OF L WAS ALSO TWO LOANS FORGIVEN DURING	RSHIPS WERE GRANTED TO STUD AW IN ACCORDANCE WITH GUID	ENTS FOR THE STUDY ELINES ESTABLISHED F	OF LAW, 13 CASH AWARDS WERE OR EACH OF THE NAMED AWARDS	, DISTRIBUTED TO VARIOUS , AND OTHER AWARDS THERE
4c	(Code) (Expenses	\$ includ	ing grants of \$) (Revenue \$)
	Other program services (Describe	ın Schedule O N			
	(Expenses \$	including grants of \$) (Revenue \$)
4e	Total program service expenses ►	86,663			

Part IV	Checklist	of Red	uired	Schedules
---------	-----------	--------	-------	-----------

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	Yes	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? *	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		No
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		No
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
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		No
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, VIII, 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		No
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	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
	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
е	Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	11e		No
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		No
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a	Yes	
	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		No
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		No
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i> (see instructions)	17		N o
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
	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Par	t IV Checklist of Required Schedules (continued)			
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or 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? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
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		
	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)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	20		N
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L,	28a		No
_	Part IV	28b		No_
	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		No
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		No
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	38	Yes	

	990 (2013)					Page
Pai	Statements Regarding Other IRS Filings and Tax Complianc Check if Schedule O contains a response or note to any line in this		V			
					Yes	No
	Enter the number reported in Box 3 of Form 1096 Enter -0 - if not applicable	1a	16			
	Enter the number of Forms W-2G included in line 1a Enter-0- if not applicable	1b	0			
С	Did the organization comply with backup withholding rules for reportable payments t gaming (gambling) winnings to prize winners?		dors and reportable	1c	Yes	
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	0	2b		
b	If at least one is reported on line 2a, did the organization file all required federal employer. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file			20		
3a	Did the organization have unrelated business gross income of \$1,000 or more durin	g the	year [?]	3a		Νo
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation	on in S	Schedule O	3b		
4a	At any time during the calendar year, did the organization have an interest in, or a si over, a financial account in a foreign country (such as a bank account, securities acaccount)? \cdot .			4a		No
b	If "Yes," enter the name of the foreign country ►	k and	Financial Accounts			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during	ng the	tax year?	5a		Νo
b	Did any taxable party notify the organization that it was or is a party to a prohibited	tax sh	nelter transaction?	5b		Νo
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?			_		
6-	Does the eventuation have annual gross require that are normally greater than \$11	0000	O and did the	5c		N.a
	Does the organization have annual gross receipts that are normally greater than \$10 organization solicit any contributions that were not tax deductible as charitable contributions.	trıbutı	ons?	6a		No
	If "Yes," did the organization include with every solicitation an express statement the were not tax deductible?			6b		
	Organizations that may receive deductible contributions under section 170(c). Did the organization receive a payment in excess of \$75 made partly as a contribution.	ion an	d partly for goods and	7a		Νo
	services provided to the payor?			7a 7b		NO
	Did the organization sell, exchange, or otherwise dispose of tangible personal proper			—		
	file Form 8282?	•		7c		Νo
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 p	ersor	nal benefit contract?	7e		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal transfer of the organization.	onal b	enefit contract?	7f		No
g	If the organization received a contribution of qualified intellectual property, did the o		zatıon file Form 8899 as			N. a
h	required?	s, dıd	the organization file a	7g		No
8	Form 1098-C?			7h		
	Did a donor advised fund maintained by the sponsoring organization have excess bu during the year?	sines • •	s holdings at any time	8		
9a	Did the sponsoring organization make any taxable distributions under section 4966	?.		9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or rela	ated p	person?	9b		
10	Section 501(c)(7) organizations. Enter		I			
	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					
а	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) ın lıe	eu 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.					
а	Is the organization licensed to issue qualified health plans in more than one state?	lote. 9	See the instructions for			
L	additional information the organization must report on Schedule O		I	13a		
	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c				
	Did the organization receive any payments for indoor tanning services during the tax			14a		Νo
ь	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explana	ation ii	n Schedule O 🔒 🔒	14b		

50	ection A. Governing Body and Management	•	<u> </u>	~
36	ction 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 23			
	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 23			
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	
	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	163	No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the			
_	year by the following	0-	V	
	The governing body?	8a	Yes	
	Each committee with authority to act on behalf of the governing body?	8b	Yes	
	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		No
Se	ection B. Policies (This Section B requests information about policies not required by the Internal R	evenu		
			Yes	No
	Did the organization have local chapters, branches, or affiliates?	10a		No
11a	affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing	10b		
b	the form?	11a	Yes	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
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		No
14	Did the organization have a written document retention and destruction policy?	14		No
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?			
а	The organization's CEO, Executive Director, or top management official	15a		Νo
	Other officers or key employees of the organization	15b		N o
	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		
	ection 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

State the name, address, and telephone number of the person who possesses the organization's books and records ►KENT HOPPER 326 MONROE STREET JEFFERSON CITY, MO 65102 (573) 638-2239

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 .マ

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

- 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) A verage hours per week (list any hours for related organizations below dotted line)	more pers	than on is	one bot ect	o not check ne box, unless oth an officer ctor/trustee)		ess er e)	(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
(1) HAROLD A WALTHER	1 00	х		х				0	0	0
TREASURER	1 00					-				
(2) SUZANNE BOCELL BRADLEY PRESIDENT	1 00	×		х				0	0	0
(3) THOMAS BURKE	1 00	х		х				0	0	0
VICE-PRESIDENT		^		^				0	0	0
(4) RICHARD S BROWNLEE III MEMBER	1 00	х						0	0	0
(5) DANA TIPPIN CUTLER	1 00									
MEMBER	5 00	×						0	6,937	0
(6) ALDO J DOMINGUEZ MEMBER	1 00	х						0	0	0
(7) DOREEN D DODSON MEMBER	1 00	х						0	0	0
(8) ROBERT G RUSSELL MEMBER	1 00	х						0	0	0
(9) WILLIE JAMES EPPS JR MEMBER	1 00	х						0	0	0
(10) WADE HAMPTON FORD JR MEMBER	1 00	х						0	0	0
(11) MAURICE B GRAHAM MEMBER	1 00	х						0	0	0
(12) THERESA L F LEVINGS MEMBER	1 00	х						0	0	0
(13) DAVID P MACOUBRIE MEMBER	1 00	х						0	0	0
(14) MALCOM L ROBERTSON MEMBER	1 00	х						0	0	0
	•	•			-	-				Form 990 (2015)

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

(A) Name and Title	(B) A verage hours per week (list any hours	more pers and	than on is a dii	one bot	not box h ar	chec x, unle n offic rustee	ess er	(D) Report compens from to	able sation the ation	(E) Reportable compensation from related organizations		(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officei	Key employee	Highest compensated employee	Former	(W- 2/1 MIS		(W- 2/1099 MISC)) -	organization and related organizations
(15) SHERRY ANN ROZELL	1 00	x							0		0	0
MEMBER (16) JASON M SENGHEISER	1 00											
MEMBER		X							0		0	0
(17) JAMES E SPAIN	1 00	x							0		0	0
MEMBER (12) SCOTT LEE TEMPLETON	1.00											
(18) SCOTT LEE TEMPLETON	1 00	x							0		0	0
MEMBER (19) ROBERT C WELCH	1 00											
MEMBER		X							0		0	0
(20) DOROTHY L WHITE-COLEMAN	1 00	X							0		0	0
MEMBER (21) R LAWRENCE WARD	1 00											
MEMBER		x							0		0	0
(22) ERIK A BERGAMANIS	1 00											
EX-OFFICIO	5 00	X							0	3	,403	0
(23) PATRICIA BRECKENRIDGE	1 00	x							0		0	0
EX-OFFICIO	5 00											
(24) SEBRINA A BARRETT				×					0	178	,651	19,697
SECRETARY	50 00											
1b Sub-Total					<u>⊩</u>							
c Total from continuation sheets to Part	VII, Section A	· · ·		•	r							
d Total (add lines 1b and 1c)					•			0		188,991		19,697
Total number of individuals (including b \$100,000 of reportable compensation				ed al	bove	e) who	rec	eived more	e than			
3 Did the organization list any former offi on line 1a? If "Yes," complete Schedule J			e, key	y em	nplo	yee, o	r hıg	jhest comp	oensate	d employee		Yes No
For any individual listed on line 1a, is the organization and related organizations of individual	ne sum of report	table c								om the	4	Yes
5 Did any person listed on line 1a receive services rendered to the organization?									ion or ir	ndividual for	5	No
Section B. Independent Contracto	ors											
1 Complete this table for your five highes	t compensated											
	port compensa (A) usiness address	tion for	the	cale	nda	ryear	end	ling with o		the organization (B) on of services	on's	(C) Compensation
ivaine diu u	asiiicss auuless								осэсприс	AT OF SCIVICES		соттрепрацип
											\dashv	

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 V	4++4	Statement o			th Dt \/ III			_
		Check if Schedu	ıle O contains a respor	ise or note to any lir	(A)	(B)	(C)	 (D)
					Total revenue	Related or	Unrelated	Revenue
						exempt	business	excluded from
						function revenue	revenue	tax under sections
								512-514
w 20	1a	Federated camp	paigns 1a					
Contributions, Giffs, Grants and Other Similar Amounts	ь	Membership du	es 1b					
ا <u>ہ</u> دی	c	Fundraising eve	ents 1c					
¥.5								
텔	d	Related organiz	ations 1d					
S.E	e	Government grants	s (contributions) 1e					
e S	f	All other contribution	ons, gifts, grants, and 1f	49,168				
토티		sımılar amounts no						
	g	Noncash contribution 1a-1f \$	ons included in lines					
Cont	h	·	s 1 a - 1 f		49,168			
o a				▶	·			
<u>9</u>				Business Code				
E	2a							
æ.	Ь							
o G	С							
er F	d		_					
ري د	e							
Program Serwoe Revenue	f	All other progra	ım service revenue					
ည့်								
_	g	Total. Add lines	32a-2f	►				
	3		ome (including dividend		143,504			143,504
	4		ar amounts) tment of tax-exempt bond ;	L	·			•
	5			-				
		Royalties	(ı) Real	(II) Personal				
	6a	Gross rents	(I) Keal	(II) Fersonal				
		01033 101103						
	ь	Less rental expenses						
	С	Rental income						
	يه ا	or (loss)	me or (loss)					
	u	Net rental incol						
	7a	Gross amount	(ı) Securities	(II) Other				
	/ a	from sales of	356,984					
		assets other than inventory						
	Ь	Less cost or other basis and	362,244					
		sales expenses Gaın or (loss)	-5,260					
	C L				-5,260			-5,260
	d o-		s)		3,200			3,200
Ē	oa	Gross income fi events (not incl	_					
5 ∣		\$						
<u>غ</u>			reported on line 1c)					
Other Revenue		See Part IV, lin	e 18 a					
ا جٌ	h	Lase direct and	•					
၁			penses b loss) from fundraising e	events				
			ı	.venca 🅦				
	94	See Part IV, lin	rom gaming activities e 19					
		,	a					
	ь	Less direct ex	penses b					
		•	loss) from gaming activ	⁄ities 				
		Gross sales of i	ī					
		returns and allo						
			a					
		Less cost of go						
	С		loss) from sales of inve					
		Miscellaneous	s Revenue	Business Code				
	11a							
	ь							
	С							
	d	All other revenu	ue					
	e	Total. Add lines	ا 11a-11d	🕨				
	12	Total reverse	See Instructions	. -				
		. o.u. ieveilue.	occinationis	•	187,412	o	0	138,244

	Chatemant of Europianal European				Page 10
	Statement of Functional Expenses	All other organiza	ations must som	valete column (A.)	
Secur	on 501(c)(3) and 501(c)(4) organizations must complete all columns			ipiete column (A)	
	Check if Schedule O contains a response or note to any line in the		(B)	(c)	<u>l</u> (D)
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	Program service expenses	Management and general expenses	Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	54,464	54,464		
2	Grants and other assistance to domestic individuals See Part IV, line 22	32,199	32,199		
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees				
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages				
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9	Other employee benefits				
10	Payroll taxes				
11	Fees for services (non-employees)				
а	Management				
b	Legal	525		525	
C	Accounting	6,200		6,200	
d	Lobbying				
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees	8,609		8,609	
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)				
12	Advertising and promotion	1,166		1,166	
13	Office expenses				
14	Information technology				
15	Royalties				
16	Occupancy				
17	Travel	1,412		1,412	
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings				
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization				
23	Insurance	3,161		3,161	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	OFFICE EXPENSE REIMBURS	15,000		15,000	
b	AWARDS AND PLAQUES	1,601		1,601	
c	CREDIT CARD FEES	700		700	
d	DUES	150		150	
e	All other expenses	100		100	
25	Total functional expenses. Add lines 1 through 24e	125,287	86,663	38,624	0
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 (A) (B) End of year Beginning of year 1 6,545 8.073 Cash-non-interest-bearing 1 2 Savings and temporary cash investments . 98,603 2 65,827 3 3 Pledges and grants receivable, net . . . 4 4 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 7 8 Inventories for sale or use . . . 8 9 9 Prepaid expenses and deferred charges . . . 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10a 10c b Less accumulated depreciation . 10b 1,934,130 2,045,503 11 11 12 12 Investments—other securities See Part IV, line 11 13 18,000 13 0 Investments—program-related See Part IV, line 11 . 14 14 36,350 36.350 **15** 15 Other assets See Part IV, line 11 2,093,628 16 16 2,155,753 **Total assets.** Add lines 1 through 15 (must equal line 34) . . **17** 17 Accounts payable and accrued expenses . 18 18 Grants payable 19 Deferred revenue 19 20 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D . jabilities 22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified 22 23 23 Secured mortgages and notes payable to unrelated third parties . . 24 24 Unsecured notes and loans payable to unrelated third parties . . . 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 25 0 26 0 26 **Total liabilities.**Add lines 17 through 25 Organizations that follow SFAS 117 (ASC 958), check here ▶

 and complete Net Assets or Fund Balances lines 27 through 29, and lines 33 and 34. 27 1,309,743 Unrestricted net assets 27 1,319,648 28 587,432 639,652 Temporarily restricted net assets 196,453 196.453 29 29 Organizations that do not follow SFAS 117 (ASC 958), check here ▶ □ and complete lines 30 through 34. 30 30 Capital stock or trust principal, or current funds 31 31 Paid-in or capital surplus, or land, building or equipment fund 32 32 Retained earnings, endowment, accumulated income, or other funds 33 2,093,628 2,155,753 Total net assets or fund balances 33 34 Total liabilities and net assets/fund balances 2.093.628 34 2.155.753

	330 (2013)				rage 12
Par	t XI Reconcilliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				୮
1	Total revenue (must equal Part VIII, column (A), line 12)		ı		
		1		1	187,412
2	Total expenses (must equal Part IX, column (A), line 25)		1		
		2		1	125,287
3	Revenue less expenses Subtract line 2 from line 1		ı		62.425
		3			62,125
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	ı	2 (93,628
5	Net unrealized gains (losses) on investments	-			333,020
3	Net unleanzed gams (losses) on investments	5	ı		
6	Donated services and use of facilities				
		6			
7	Investment expenses				
		7			
8	Prior period adjustments	8	ı		
_		°			
9	Other changes in net assets or fund balances (explain in Schedule O)	9	ı		0
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,				
10	column (B))	10	ı	2,1	155,753
Par	t XIII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII		<u> </u>		. ᅜ
				Yes	No
1	Modified Cash				
_	Accounting method used to prepare the Form 990				
	If the organization changed its method of accounting from a prior year or checked "Other," explain in				
	Schedule O		1 1	ı	ı
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a	Yes	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or review	wed o	n l		
	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		Νo
_	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a sep	arato			
	basis, consolidated basis, or both	aracc			
	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 oversig			 -	
	of the audit, review, or compilation of its financial statements and selection of an independent accountant		2c		Νo
	If the organization changed either its oversight process or selection process during the tax year, explain	n			
_	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?	ie	3a		No
h	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	ļ	

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

Open to Public	
Inspection	

Employer identification number Name of the organization MISSOURI BAR FOUNDATION 44-6011930 Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The	organı	zation is not a private	foundation becau	seitis (Forlines 1 th	hrough 11, che	ck only one b	ox)				
1	Γ	A church, convention	n of churches, or a	association of churche	es described in	section 170(b)(1)(A)(i).				
2	Γ	A school described i	n section 170(b)(1)(A)(ii).(Attach Sch	edule E (Form	990 or 990-E	EZ))				
3	Γ	A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii).									
4	\sqcap	A medical research o	organization opera	ated in conjunction wit	th a hospital de	scribed in se	ction 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	<u> </u>		_	or governmental unit d							
7		described in section	170(b)(1)(A)(vi)	. (Complete Part II)		_	ental unit or from the ge	eneral public			
8	Г	A community trust d	escribed in sectio	on 170(b)(1)(A)(vi)(Complete Part	II)					
9	_	receipts from activit from gross investme organization after Ju	ties related to its ent income and ur ine 30, 1975 See	exempt functions—su irelated business taxa esection 509(a)(2). (C	bject to certair able income (le: Complete Part I	nexceptions, ss section 51 II)	ibutions, membership f and (2) no more than 3 1 tax) from businesses	31/3% of its support			
10		= = =	•	ed exclusively to test	•	·='					
11	굣						ctions of, or to carry ou 509(a)(2) See sectior				
a	Г	the box in lines 11a Type I. A supporting supported organization You mu	through 11d that organization ope on(s) the power to ist complete Part	describes the type of rated, supervised, or o o regularly appoint or IV, Sections A and B.	supporting org controlled by its elect a majority	anization and s supported o / of the direct	complete lines 11e, 1 rganization(s), typicall ors or trustees of the s	1f, and 11g y by giving the upporting			
Ь	,		ing organization supervised or controlled in connection with its supported organization(s), by having control or esupporting organization vested in the same persons that control or manage the supported organization(s) You								
		must complete Part			роловия ил		go ino supportou	gaa(5)			
C	~						, and functionally integ	rated with, its			
	_			tions) You must com							
d	ı				•		with its supported orga ement and an attentive				
				Part IV, Sections A			ement and an attentive	ness requirement			
е	<u>~</u>						s a Type I, Type II, Ty	pe III functionally			
				ly integrated supporti							
f	Ente	r the number of suppo	_				<u>1</u>				
g		Provide the following	ınformatıon abou	t the supported organ	ızatıon(s)						
	N a	ame of supported organization	(ii)EIN	(iii) Type of organization (described on lines 1- 9 above (see instructions))	(iv) Is the orga Isted in your docume	nızatıon governıng	(v) A mount of monetary support (see instructions)	(vi) A mount of other support (see instructions)			
					Yes	No					
(A) N	1ISSOU	RI BAR	446000796		Yes		23,664	0			
T	14						22.664				
Tota	ΙŢ						23,664				
						Cat No. 112	0.5.5				

Pa	Support Schedule for (Complete only if you Part III. If the organize	checked the bo	x on line 5, 7,	or 8 of Part I o	or if the organiz	ation failed to d	jualify under
Se	ection A. Public Support	•	•		, ,		
	Calendar year	(a)2011	(b) 2012	(c)2013	(d) 2014	(e) 2015	(f) Total
•	fiscal year beginning in) F Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	(4,72022	(-)	(9,2323	(=,===	(0)2020	(i)
	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 Total. Add lines 1 through 3						
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 ection B. Total Support						
	Calendar year						
(or	fiscal year beginning in)	(a)2011	(b) 2012	(c) 2013	(d)2014	(e) 2015	(f) ⊤otal
7	A mounts from line 4						
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9	Net income from unrelated business activities, whether or not the business is regularly carried on						
10	Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)						
11	Total support. Add lines 7 through 10						
12	Gross receipts from related activit	ies, etc (see inst	ructions)			12	
13	First five years.If the Form 990 is check this box and stop here	<u> </u>	<u> </u>				
14	ection C. Computation of Pul Public support percentage for 2019			11 column (f))		14	
15	Public support percentage for 201			: 11, Column (1))		14	
		-	•	v on line 12 and	lino 14 is 22 1/20	15	this box
	 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 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 is 10% or more, and if the organization Part VI how the organization me	— 2015. If the organization meets the fa	anization did not o	check a box on lir tances test, chec	ck this box and st	op here. Explain	orted ▶□
b	organization 10%-facts-and-circumstances test 15 is 10% or more, and if the orga Explain in Part VI how the organiza supported organization	nızatıon meets th	e "facts-and-circ	umstances" test	c, check this box a	nd stop here.	
18	Private foundation. If the organizations	ion did not check	a box on line 13	, 16a, 16b, 17a,	or 17b, check this	s box and see	- '

Schedule A (Form 990 or 990-EZ) 2015 Page 3 Support Schedule for Organizations Described in Section 509(a)(2) Part III (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 vear (a)2011 (d)2014 **(b)**2012 (c)2013 (e)2015 (f)Total (or fiscal year beginning in) 🕨 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt nurnose Gross receipts from activities that are not an unrelated trade or business under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons 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 Public support. (Subtract line 7c from line 6) Section B. Total Support Calendar year (a)2011 **(b)**2012 (c)2013 (d)2014 (e)2015 (f)Total (or fiscal year beginning in) Amounts from line 6 10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 Add lines 10a and 10b C Net income from unrelated 11 business activities not included in line 10b, whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support. (Add lines 9, 10c, 11, and 12) 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 Public support percentage for 2015 (line 8, column (f) divided by line 13, column (f)) 15 Public support percentage from 2014 Schedule A, Part III, line 15 16 Section D. Computation of Investment Income Percentage

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

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

Investment income percentage for 2015 (line 10c, column (f) divided by line 13, column (f))

Investment income percentage from 2014 Schedule A, Part III, line 17

18

►ſ

17

18

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	u chec	ked 11	d of Par
Se	I, complete Sections A and D, and complete Part V) ection A. All Supporting Organizations			
	Colon At 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	Yes	
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	Yes	
	Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below.	За		No
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.	3с		
45	n dia kanananan dia kananan dia kanana			
	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		No
D	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 $(2)^{2}$ If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported	4 c		
5a	organization was used exclusively for section 170(c)(2)(B) purposes. 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		No
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		No
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		No
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		No
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		No
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		No
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 .	9 c		No
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		No
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 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		No
ь	A family member of a person described in (a) above?	11b		No

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

Νo

Pai	Supporting Organizations (continued)			
Se	ection 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		
Se	ection 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		
Se	ection 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	Yes	
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	Yes	
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	Yes	
	sking F. Tong III Founding No. Interpreted Companies Openiesting			
	ection E. Type III Functionally-Integrated Supporting Organizations			
a b	The organization is the parent of each of its supported organizations. Complete line 3 below			
2	Activities Test Answer (a) and (b) below.		Yes	No
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	Yes	
t	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	Yes	
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? <i>Provide details in Part VI</i> .	3a		
Ŀ	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		

	Check here if the organization satisfied the Integral Part Test as a qualifying tr Type III non-functionally integrated supporting organizations must complete S			uct ions. All other
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1		
!	Recoveries of prior-year distributions	2		
	Other gross income (see instructions)	3		
	Add lines 1 through 3	4		
	Depreciation and depletion	5		
ı	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		
,	Other expenses (see instructions)	7		
1	Adjusted Net Income (subtract lines 5, 6 and 7 from line 4)	8		
	Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Yea (optional)
	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year)	1		
а	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)			
	Acquisition indebtedness applicable to non-exempt use assets	2		
	Subtract line 2 from line 1d	3		
	Cash deemed held for exempt use Enter 1-1/2% of line 3 (for greater amount, see instructions)	4		
	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
	Multiply line 5 by 035	6		
	Recoveries of prior-year distributions	7		
	Minimum Asset Amount (add line 7 to line 6)	8		
	Section C - Distributable Amount			Current Year
	Adjusted net income for prior year (from Section A, line 8, Column A)	1		
	Enter 85% of line 1	2		
	Minimum asset amount for prior year (from Section B, line 8, Column A)	3		
	Enter greater of line 2 or line 3	4		
	Income tax imposed in prior year	5		
i	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6		
	Check here if the current year is the organization's first as a non-functionally-instructions)	ntegrate	d Type III supporting o	rganızatıon (see

Type III Non-Functionally Integr	ated 509(a)(3) Suppo	rting Organizations (c	
Section D - Distributions			Current Year
1 Amounts paid to supported organizations to accom	plish exempt purposes		
2 A mounts paid to perform activity that directly furth excess of income from activity	ers exempt purposes of supp	oorted organizations, in	
3 Administrative expenses paid to accomplish exemp			
4 A mounts paid to acquire exempt-use assets			
5 Qualified set-aside amounts (prior IRS approval re	quired)		
6 Other distributions (describe in Part VI) See instru	uctions		
7 Total annual distributions. Add lines 1 through 6			
Distributions to attentive supported organizations to details in Part VI) See instructions	to which the organization is r	esponsive (provide	
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 requiredsee instructions)			
3 Excess distributions carryover, if any, to 2015			
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			
 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 31 and 4c			
8 Breakdown of line 7			
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
PART IV, SECTION A, LINE 2	THE SUPPORTED ORGANIZATION IS THE MISSOURI BAR, AN AGENCY OF THE SUPREME COURT OF MISSOURI, THAT IS THE MANDATORY BAR FOR LAWYERS LICENSED IN THE STAT OF MISSOURI THE MISSOURI BAR RECEIVES MORE THAN ONE-THIRD OF ITS SUPPORT IN EACH TAXABLE YEAR FROM MEMBER ENROLLMENT FEES FROM PERSONS OTHER THAN DISQUALIFIED PERSONS AND RECEIVES LESS THAN ONE-THIRD OF ITS SUPPORT EACH TAXABLE YEAR FROM GROSS INVESTMENT INCOME AND UNRELATED BUSINESS INCOME
PART IV, SECTION D, LINE 3	UNDER THE ARTICLES OF ASSOCIATION AND THE BYLAWS OF THE MISSOURI BAR FOUNDATION, THE MISSOURI BAR PRESIDENT AND THE CHIEF JUSTICE OF THE SUPREME COURT OF MISSOURI SERVE AS EX OFFICIO MEMBERS OF THE FOUNDATION BOARD IN ADDITION, THE EXECUTIVE DIRECTOR OF THE MISSOURI BAR SERVES AS SECRETARY OF THE FOUNDATION THE MISSOURI BAR AND THE MISSOURI BAR FOUNDATION HAVE A HISTORIC AND CONTINUING RELATIONSHIP OF OVER 60 YEARS, AND THE OFFICERS AND TRUSTEES OF THE FOUNDATION AND THE OFFICERS AND GOVERNORS OF THE MISSOURI BAR HAVE A CLOSE WORKING RELATIONSHIP
PART IV, SECTION E, LINE 2A	THE SUPPORTED ORGANIZATION IS THE MISSOURI BAR, WHICH IS THE MANDATORY BAR FOR LAWYERS LICENSED IN THE STATE OF MISSOURI AND A QUASI-GOVERNMENTAL ORGANIZATION CREATED BY RULE 7 OF THE SUPREME COURT OF MISSOURI THE PREAMBL TO RULE 7 STATES "THAT IT IS THE "RESPONSIBILITY OF THE MEMBERS OF THE BAR OF THIS COURT AND OF ALL LAWYERS WHO PRACTICE IN THE STATE OF MISSOURI TO "STRIV! AT ALL TIMES TO UPHOLD THE HONOR AND MAINTAIN THE DIGNITY OF THE PREFESSION AND TO IMPROVE NOT ONLY THE LAW BUT THE ADMINISTRATION OF JUSTICE" IN RECOGNITION OF THAT PUBLIC OBLIGATION OWED BY THE LEGAL PROFESSION, THE COURT HEREBY PROMULGATES THIS RULE FOR THE PURPOSE OF ALDING THE LAWYERS OF MISSOURI IN THE PERFECTION OF A MEANS OF ORGANIZATION THAT WILL BEST ALD THEM IN THE DISCHARGE OF THEIR RECOGNIZED PUBLIC DUTY." UNDER ITS ARTICLES OF ORGANIZATION, "THE MISSOUR BAR FOUNDATION IS ORGANIZED, AND AT ALL TIMES THEREAFTER, IS OPERATED EXCLUSIVELY FOR THE BENEFIT OF, TO PERFORM THE FUNCTIONS OF, OR TO CONDUCT THE PURPOSES OF THE MISSOURI BAR." THE ARTICLES ITS THE FOLLOWING ENUMERATED PURPOSES. IT THE FOLLOWING ENUMERATED PURPOSES, HICH FURTHER THE MISSOUR BAR." PURPOSES. IT OR ELLEVE, ALD AND ASSIST AS CHARITABLE ACTS DESERVING MEMBERS OF THE BAR WHO SHALL BE ILL, INCAPACITATED OR SUPPERANNUATED AND IN NEED OF ALD. OR THE DEPENDENTS OF DECEASED MEMBERS OF THE BAR WHO SHALL BE ILL, INCAPACITATED OR SUPPERANNUATED OR SUPPERANNUATED AND IN NEED OF ALD. OR THE DEPENDENTS OF DECEASED MEMBERS OF THE BAR WHO SHALL BE ILL, INCAPACITATED OR SUPPERANNUATED AND IN NEED OR ALD. OR THE DEPENDENTS OF DECEASED MEMBERS OF THE BAR WHO SHALL BE ILL, INCAPACITATED OR SUPPERANNUATED AND IN NEED OR ALD. OR THE DEPENDENTS OF LAW? THE PRESERVATION OF JUSTICE AND EFFICIENCY OF JUDICIAL PROCEEDINGS AND DECIDE AND ARD AND IN NEED OF ALD. THE ADVANCEMENT OF JUDICIAL PROCEEDINGS AND DECESOR. AND A THE ADMINISTRATION OF JUSTICE AND EFFICIENCY OF JUDICIAL PROCEEDINGS AND DECESOR. AND A THE ADMINISTRATION OF JUSTICE ON STRUCK AND AND THE SUPPERM OF THE MISSOURI BAR FOU
PART IV, SECTION E, LINE 2B	THE SUPPORTED ORGANIZATION IS THE MISSOURI BAR, WHICH IS THE MANDATORY BAR FOR LAWYERS LICENSED IN THE STATE OF MISSOURI AND CREATED BY RULE 7 OF THE SUPREME COURT OF MISSOURI THE PREAMBLE TO RULE 7 STATES "THAT IT IS THE 'RESPONSIBILITY OF THE MEMBERS OF THE BAR OF THIS COURT AND OF ALL LAWYERS WHO PRACTICE IN THE STATE OF MISSOURI' TO 'STRIVE AT ALL TIMES TO UPHOLD THE HONOR AND MAINTAIN THE DIGNITY OF THE PROFESSION AND TO IMPROVE NOT ONLY THE LAW BUT THE ADMINISTRATION OF JUSTICE' IN RECOGNITION OF THAT PUBLIC OBLIGATION OWED BY THE LEGAL PROFESSION, THE COURT HEREBY PROMULGATES THIS RULE FOR THE PURPOSE OF AIDING THE LAWYERS OF MISSOURI IN THE PERFECTION OF A MEANS OF

PURPOSE OF AIDING THE LAWYERS OF MISSOURI IN THE PERFECTION OF A MEANS OF

BENEFIT OF, TO PERFORM THE FUNCTIONS OF, OR TO CONDUCT THE PURPOSES OF THE MISSOURI BAR " THE ARTICLES LIST ENUMERATED PURPOSES, DETAILED IN THE RESPONSE TO 2A ABOVE, WHICH FURTHER THE MISSOURI BAR'S PURPOSES AND WHICH WOULD HAVE

ORGANIZATION THAT WILL BEST AID THEM IN THE DISCHARGE OF THEIR RECOGNIZED PUBLIC DUTY " UNDER ITS ARTICLES OF ORGANIZATION, "THE MISSOURI BAR FOUNDATION IS ORGANIZED, AND AT ALL TIMES THEREAFTER, IS OPERATED EXCLUSIVELY FOR THE

BEEN ENGAGED IN BY THE MISSOURI BAR BUT FOR THE FOUNDATION'S INVOLVEMENT Schedule A (Form 990 or 990-EZ) 2015 efile GRAPHIC print - DO NOT PROCESS | As Filed Data -

DLN: 93493278007446

OMB No 1545-0047

SCHEDULE D

(Form 990)

Department of the Treasury

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.

nal Revenue Service	Information about Schedule D	(Form 990) and its instructions is at <u>www.ir</u>	rs.gov/f	orm990. Inspection
lame of the organ			Empl	oyer identification number
			44-6	011930
		r Advised Funds or Other Similar F ed "Yes" on Form 990, Part IV, line 6.	unds o	or Accounts.
	<u>5</u> <u>-</u>	(a) Donor advised funds	(b)	Funds and other accounts
Total numbe	er at end of year		, ,	
Aggregate v year)	value of contributions to (during			
Aggregate v	value of grants from (during year)			
Aggregate v	alue at end of year			
_		advisors in writing that the assets held in do the organization's exclusive legal control?	nor advis	red ☐ Yes ☐ No
used only for c		and donor advisors in writing that grant funds benefit of the donor or donor advisor, or for a		
rt III Conse	rvation Easements. Comple	ete if the organization answered "Yes"	on Forn	n 990, Part IV, line 7.
Preservation Protection Preservation Complete lines	on of land for public use (e g , recre of natural habitat on of open space s 2a through 2d if the organization	_	certified	cally important land area I historic structure of a conservation
easement on t	he last day of the tax year			Held at the End of the Year
Total number o	of conservation easements		2a	neid at the End of the Year
Total acreage	restricted by conservation easeme	ents	2b	
Number of con	servation easements on a certified	historic structure included in (a)	2c	
	servation easements included in (ure listed in the National Register	c) acquired after 8/17/06, and not on a	2d	
Number of con tax year ▶	servation easements modified, tra	nsferred, released, extinguished, or terminat	ed by th	e organization during the
Number of stat	tes where property subject to cons	ervation easement is located 🛌		
	nization have a written policy regai I enforcement of the conservation (ding the periodic monitoring, inspection, har easements it holds?	ndling of	┌ Yes ┌ No
Staff and volur year	nteer hours devoted to monitoring,	inspecting, handling of violations, and enforc	ing cons	servation easements during the
•				
·	enses incurred in monitoring, insp	ecting, handling of violations, and enforcing o	conserva	ition easements during the year
	nservation easement reported on li	ne 2(d) above satisfy the requirements of se	ction 17	0(h)(4)
In Part XIII, d balance sheet,	escribe how the organization repor	ts conservation easements in its revenue ar of the footnote to the organization's financia		se statement, and
		ctions of Art, Historical Treasures,	or Oth	ner Similar Assets.
		ed "Yes" on Form 990, Part IV, line 8.		
works of art, hi	istorical treasures, or other similar	FAS 116 (ASC 958), not to report in its rever assets held for public exhibition, education, note to its financial statements that describe	, or resea	arch in furtherance of public
works of art, hi		FAS 116 (ASC 958), to report in its revenue r assets held for public exhibition, education, o these items		
(i) Revenue incli	uded on Form 990, Part VIII, line	1	► \$_	
ii) Assets includ	ed in Form 990, Part X			
If the organiza	tion received or held works of art,	historical treasures, or other similar assets f SFAS 116 (ASC 958) relating to these items	for financ	
Revenue inclu	ded on Form 990, Part VIII, line 1			▶ \$

Assets included in Form 990, Part X

c Net investment earnings, gains, and losses d Grants or scholarships	Par	:	Organizations Maintaining (continued)	Collections of	Art, His	torica	l Tre	asures, o	or O	ther Simila	ar Ass	ets	
b Scholarly research e Other	3			ession, and other re	cords, ch	_					nt use o	fits	
The provide a description of the organizations collections and explain how they further the organization's exempt purpose in Parx XIII 5 During the year, did the organization's collections and explain how they further the organization's exempt purpose in Parx XIII 5 During the year, did the organization solicit or receive donations of airt, historical treasures or other similar assets to be sool to trase funds retire than to be maintained as part of the organization's collection?	а	ΓP	ublic exhibition		d	l Lo	oan or	exchange	orogra	ams			
## Pervise a description of the organization's cellections and explain how they further the organization's exempt purpose in Part XIII Description Part XIII Part XIII	b	Γs	cholarly research		е	Г о	ther						
Part XIII Par	c	ГР	reservation for future generations										
## Section of Control of Part XI Section and Control of Part XI International as part of the organizations collection? Yes No	4			s collections and ex	kplaın hov	v they fu	rther	the organiz	atıon'	s exempt pur	pose in		
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part XX, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets into clouded on Form 990, Part XX. Additions during the year	5										Yes	┌ No	
Description Part XII and complete the following table Ending balance Ir Ir Ir Ir Ir Ir Ir I	Pai	t IV	Complete if the organization a		n Form	990, Pa	ırt IV	, line 9, oi	r rep	orted an an	nount c	n Forn	n 990,
Additions during the year Additions during the year But Id	1a			todian or other inte	rmediary	for cont	rıbutı	ons or othe	rasse		Yes	√ No	
Add	b	If"	Yes," explain the arrangement in Pa	art XIII and comple	te the fol	lowing t	able				Amou	nt	
Distributions during the year Finding balance If If	C	Beg	ginning balance						1c				
The finding balance	d	A d	ditions during the year						1d				
The finding balance	e								1e				
2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?	f							-	1f				
Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10. Part V Endowment Funds. Complete if the organization is seen organization in the posession of the organization is endowment funds on answered "Yes" to Form 990, Part IV, line 11. See Form 990, Part IV, line 10. Part V Endowment Funds in the passession of the organization is endowment funds or other passes. Part V Endowment funds in the passession of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. Part XIII the intended uses of the organization is endowment funds. P	2a		_	n Form 990 Part X	line 21	for escr	ow or	L Custodial a		t liability? [Vec	□ No	
Part V Endowment Funds. Complete If the organization answered "Yes" to Form 990, Part IV, line 10. Vestion		Dia ci	ie organization merade an amount o	111 om 330,1 are x,	, 21,	ior eser	011	castoaiai a	coun	e nability		, 110	
Part V Endowment Funds. Complete If the organization answered "Yes" to Form 990, Part IV, line 10. Vestion	b	If "V e	es " evoluin the arrangement in Part	XIII Check here if	the eval:	anation	hac he	en provide	d in P	art XIII			Г
1												• • •	
The percentages on lines 2a, 2b, and 2c should eagliar stand administered for the organization by 1)Four ye	ars back
c Net investment earnings, gains, and losses d Grants or scholarships	1a	Begin	nning of year balance	783,885		736,68	8	679,	746	615	5,945		602,609
Interest 10 10 10 10 10 10 10 1	b	Contr	ributions	14,932		14,52	8	28,	652	50),846		12,909
d Grants or scholarships 14,749 10,826 9,050 11,350 15,805 d Other expenditures for facilities 3,748 6,686 6,245 6,822 3,369 d Administrative expenses 3,748 6,686 6,245 6,822 3,369 d Administrative expenses 836,105 783,885 736,688 679,746 615,945 d Board designated or quasi-endowment 0 % d D Permanent endowment 76 500 % 76	c			55,785		50,18	1	43,	585	31	1,127		19,601
and programs 3,748 6,686 6,245 6,822 3,369 f Administrative expenses	d	Grant	s or scholarships	14,749		10,82	6	9,	050	11	1,350		15,805
Power belance	e		•	3,748		6,68	6	6,	245	6	5,822		3,369
Power belance	f	• Δ dmi	nistrative expenses				+		\dashv				
Board designated or quasi-endowment ▶ 0 % b Permanent endowment ▶ 23 500 % c Temporarily restricted endowment ▶ 76 500 % The percentages on lines 2a, 2b, and 2c should equal 100% 3a Are there endowment funds not in the possession of the organization by (i) unrelated organizations			'	836,105		783,88	.5	736,	688	679	9,746		615,945
b Permanent endowment ► 23 500 % c Temporarily restricted endowment ► 76 500 % 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 (i) unrelated organizations	2	Provi	de the estimated percentage of the	current year end ba	lance (lın	e 1g, co	lumn	(a)) held as			_		
Temporarily restricted endowment 76 500 % The percentages on lines 2a, 2b, and 2c should equal 100% 3a	а	Board	designated or guasi-endowment	0 %									
Temporarily restricted endowment	_												
The percentages on lines 2a, 2b, and 2c should equal 100% Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations				76 500 %									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by (i) unrelated organizations		-	ordiny reserveted endowment r)								
Yes No No No No No No No	За					hat are	held a	and adminis	tered	for the			
(ii) related organizations			•									Yes	No
If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b		(i) un	related organizations								3a(i)		No
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											3a(ii)		No
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 Land Land Land Land Land Leasehold improvements Leasehold improvements Leasehold improvements Land Land Land Land Land Land Land Land	b		-	•							. 3b		
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 (b) Cost or other basis (c) depreciation (c) depreciation (d) Book value					endowm	ent fund	s						
Land Land<	Pai	t VI			Form O	00 Dor	+ T\/	lina 115 C	'00 E	orm 000 D:	5 rt V 1	no 10	
Ia Land Land Cost or other basis (other) Buildings Cost or other basis (other) Cost or other basis (other) Image: Cost or other basis (other) Cost or other basis (other) Image: Cost or other basis (inswered res to	FORIL 9								
1a Land			2 330		(a)) Cost or of	her ba	sıs (c) depre	ciation	` ′	
b Buildings	12	Land						(our	ici)				
c Leasehold improvements					· · ⊢								
d Equipment			-		· .								
e Other			·		·								
					·							-	
******* A.O. 100=5 (A.D. 1000) (B.D. 1000) (B.D. 100) (t equal Form 000 Po	rt X colu	mn (P) I	ine 10	<u> </u>			<u> </u>	-	0

Part VII	Investments—Other Securities. Co See Form 990, Part X, line 12.	omplete if the or	ganization answered	d 'Yes' on Form	990, Part IV, line 11b.
	(a) Description of security or categor (including name of security)	у	(b)Book value)Method of valuation rend-of-year market value
(1)Financia	al derivatives			3323	end of year market value
	-held equity interests				
(3)0 ther					
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 12)		•		
	Investments—Program Related				
	Complete if the organization answere	d 'Yes' on Form '	990, Part IV, line 11	^{.C.} See Form 99	0, Part X, line 13.
	(a) Description of investment		(b) Book value		Method of valuation end-of-year market value
					,
Total (Colum	nn (b) must equal Form 990, Part X, col (B) line 13)		<u> </u>		
	Other Assets. Complete if the organization			line 11d See For	m 990, Part X, line 15
	(a) Desc	cription			(b) Book value
	mn (b) must equal Form 990, Part X, col.(B) line				
Part X	Other Liabilities. Complete if the org See Form 990, Part X, line 25.	ganization answe	red 'Yes' on Form 9	90, Part IV, lın	e 11e or 11f.
1.	(a) Description of liability	(b) Book va	lue		
Federal inc	ome taxes				
Total. (Colum	nn (b) must equal Form 990, Part X, col (B) line 25)	<u>* </u>			

Par	Reconciliation of Revenue per Audited Financial Statements With Revenue Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.	per Retui	rn
1	Total revenue, gains, and other support per audited financial statements	1	187,412
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
а	Net unrealized gains (losses) on investments 2a		
b	Donated services and use of facilities		
c	Recoveries of prior year grants		
d	Other (Describe in Part XIII)		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	187,412
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
а	Investment expenses not included on Form 990, Part VIII, line 7b . 4a		
b	Other (Describe in Part XIII)		
c	Add lines 4a and 4b	4c	0
5	Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)	5	187,412
Par 1	Reconciliation of Expenses per Audited Financial Statements With Expense Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	s per Ret	t urn. 125,287
2	Amounts included on line 1 but not on Form 990, Part IX, line 25	_	123,207
a	Donated services and use of facilities		
b	Prior year adjustments		
c	Other losses		
d	Other (Describe in Part XIII) 2d		
e	Add lines 2a through 2d	2e	0
3	Subtract line 2e from line 1	3	125,287
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
а			
a b	Other (Describe in Part XIII)		
	Other (Describe in Part XIII)	4c	0

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 XII, LINE 2D - OTHER ADJUSTMENTS	ROUNDING
PART V ENDOWMENT FUNDS	ENDOWMENT FUNDS HAVE BEEN ESTABLISHED FOR THE FOLLOWING PURPOSES TO PROVIDE AN AWARD FOR RENDERING OUTSTANDING SERVICE TOWARD THE INCREASE AND DIFFUSION OF JUSTICE AMONG MEN AND FOR THE GENERAL PURPOSES OF THE FOUNDATION, FOR CHARITABLE ACTIVITES IN FURTHERING THE ADVANCEMENT OF THE LAW BY CARING FOR NEEDY INDIGENT LAWYERS, TO RECOGNIZE EXCEPTIONAL SKILLS IN THE COURTROOM, TO PROVIDE SCHOLARSHIPS FOR LAW STUDENTS FROM NORTHWEST MISSOURI, TO RECOGNIZE MISSOURI BAR MEMBERS WHO HAVE DEMONSTRATED PROFESSIONALISM AND ADVOCACY SKILLS, AND TO EDUCATE MISSOURI CITIZENS ON THE JUSTICE SYSTEM OF THE UNITED STATES AND MISSOURI CONSTITUTION, THE MISSOURI COURT SYSTEM, AND THE MISSOURI JUDICIAL SELECTION PROCESS

Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2015

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Schedule I (Form 990)

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.

DLN: 93493278007446

Open to Public

Department of the Treasury Internal Revenue Service	► Inform	nation about Schedule	► Attach to Form 9 I (Form 990) and its ins		.irs.gov/form990.		Inspection
Name of the organization MISSOURI BAR FOUNDATI	O N					Employer identifi	cation number
MISSOURI BAR FOUNDATI	O N					44-6011930	
Part I General Info	rmation on Grants	and Assistance					
the selection criteria u	maintain records to subs sed to award the grants s organization's procedu	orassistance?			libility for the grants or a	ssistance, and	▼ Yes
	er Assistance to Domest ore than \$5,000 Part II				iization answered "Yes" (on Form 990, Part IV, lin	e 21, for any recipient
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) A mount of cash grant	(e) A mount of non- cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) THE MISSOURI BAR 326 MONROE STREET JEFFERSON CITY, MO 65101	44-6000796		23,664				GENERAL SUPPORT FOR PROGRAMS TO IMPROVE THE JUSTICE SYSTEM IN MISSOURI
(2) CORE LEGAL ADVOCATE 4743 TROOST KANSAS CITY, MO 6411(501(C)(3)	10,000				SUPPORT ENTITY'S UNEMPLOYMENT CLINIC AND FUND PROGRAM ASSISTANCE POSITION AND INCREASE TIME FOR
JACKSON COUNTY BA (3) ASSOCIATION PO BOX 410184 KANSAS CITY, MO 641410184	R 43-1532872	501(C)(3)	10,000				SUPPORT NATIONA ASSOCIATIONS MID YEAR CONFERENCE GERTRUDE E RUSH AWARDS FOR EVENT IN ST LOUIS
SUPREME COURT OF MISSOURI HISTORIC. (4) SOCIETY PO BOX 904 JEFFERSON CITY, MO 65102	43-1346839 AL	501(C)(3)	7,500				SUPPORT ORGANIZATION BY PROVIDING GRANT TO INVESTIGATE, DESIGN, & CREATE WEBSITE
							-
							+

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

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

Part IIII 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) A mount of cash grant	(d)A mount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
AWARDS FOR OUTSTANDING LEGAL SERVICE AND SERVICE TO THE (1) JUSTICE SYSTEM	13	14,199			
(2) FINANCIAL ASSISTANCE RELATED TO LOAN FORGIVENESS	2	18,000			

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
· · · · · · · · · · · · · · · · · · ·	THE BOARD TREASURER MAINTAINS A LEDGER DOCUMENTING THE SOURCE FOR APPROVAL OF ALL GRANTS FOUNDATION BOARD MEMBERS WORK CLOSELY WITH GRANTEES ON THE NEED FOR AND PROGRESS OF GRANTS ANY MEMBER OF THE MISSOURI BAR OR FOUNDATION MAY NOMINATE AWARD RECIPIENTS BASED ON THE CRITERIA FOR EACH AWARD AND THE FOUNDATION GOVERNING BOARD APPROVES RECIPIENTS

Schedule I (Form 990) 2015

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DLN: 93493278007446

OMB No 1545-0047

Schedule J (Form 990)

Department of the Treasury

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.

2015

Open to Public Inspection

Internal Revenue Service Name of the organization MISSOURI BAR FOUNDATION

Employer identification number

44-6011930

Pa	Questions Regarding Compensation			
			Yes	No
1a	Check the approplate 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		<u> </u>
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III			
	Compensation committee			
	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			
а	Receive a severance payment or change-of-control payment?	4a		No
ь	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?	4c		No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III			
	Only 501(c)(3), 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			
а	The organization?	5a		No
b	Any related organization?	5b		Νo
	If "Yes," on line 5a or 5b, describe in Part III			
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			
а	The organization?	6a		No
b	Any related organization?	6b		No
	If "Yes," on line 6a or 6b, describe in Part III			
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	f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and		(E) Total of columns	
		Base (i) compensation	(ii) Bonus & Incentive compensation	(iii) Other reportable compensation	other deferred compensation	benefits	(B)(ı)-(D)	column(B) reported as deferred on prior Form 990
1 SEBRINA A BARRETT SECRETARY		0	0	0	0	0	0	0
	(ii)	178,651	0	0	9,020	10,677	198,348	0

Schedule J (Form 990) 2015

Part III Supplemental Information

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

Return Reference Explanation

Schedule J (Form 990) 2015

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METHOD OF ACCOUNTING

(Form 990 or 990-EZ)

Name of the organization

Department of the Treasury

Internal Revenue Service

LINE 12

2015

OMB No. 1545-0047

DLN: 93493278007446

Employer identification number

Open to Public Inspection

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-F7 or to provide any additional information. ► Attach to Form 990 or 990-EZ.

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

www.irs.gov/form990.

MISSOURI BAR FOUNDATION 44-6011930 990 Schedule O, Supplemental Information Return Reference Explanation FORM 990. PART VI. THE BY LAWS PROVIDE THAT MEMBERSHIP IS LIMITED TO MEMBERS IN GOOD STANDING OF THE STATE BAR OF SECTION A. LINE 6 MISSOURI AND MEMBERSHIP IS DIVIDED INTO THE FOLLOWING CLASSES. LIFE MEMBERS OR FELLOWS, WHICH INCLUDES FELLOWS. LIFE FELLOWS. SUSTAINING LIFE FELLOWS. AND THE GRANDFATHER PROVISION FORM 990. PART VI. THE BY LAWS PROVIDE FOR AN ANNUAL MEETING OF THE MEMBERS FOR THE ELECTION OF TRUSTEES AND O SECTION A. LINE 7A THER BUSINESS AT THE ANNUAL MEETING OF THE MEMBERS. TRUSTEES SHALL BE ELECTED BY THE MEMB FRS TO HOLD OFFICE FOR FIVE YEARS OR UNTIL THEIR SUCCESSOR OR SUCCESSORS ARE FLECTED. FURT HER THE BOARD OF TRUSTEES SHALL APPOINT ONE TRUSTEE WHO IS UNDER THIRTY-SIX YEARS OF AGE OR WHO HAS BEEN ADMITTED TO THE PRACTICE OF LAW FOR LESS THAN TEN YEARS. AT THE TIME OF SU CH APPOINTMENT A MAJORITY VOTE OF THE MEMBERS PRESENT AND VOTING SHALL BE NECESSARY FOR E **LECTION** FORM 990. PART VI. A COPY OF THE FORM 990 WAS PROVIDED TO ALL BOARD MEMBERS PRIOR TO ITS FILING SECTION B. LINE 11 FORM 990. PART VI. BOARD MEMBERS EVALUATE ANNUALLY ANY CONFLICTS OF INTEREST SECTION B, LINE 12C FORM 990. PART VI. THE GOVERNING DOCUMENTS AND FINANCIAL STATEMENTS ARE MAINTAINED AT THE OFFICE OF THE SECRE SECTION C. LINE 19 TARY AND ARE AVAILABLE FOR INSPECTIONS BY THE PUBLIC UPON REQUEST FORM 990 PART VII. SEBRINA BARRETT IS EMPLOYED BY THE MISSOURI BAR (44-6000796), A RELATED ENTITY, FOR FORTY LINE 2 OR MORE HOURS WEEKLY HER SALARY IS PAID BY THE MISSOURI BAR FORM 990, PART XII, THE ORGANIZATION USES THE MODIFIED CASH METHOD OF ACCOUNTING LINE 1 FORM 990, PART IV. THE FOUNDATION OBTAINS INDEPENDENT AUDITED FINANCIAL STATEMENTS PREPARED ON THE MODIFIED CASH

DLN: 93493278007446

2015

OMB No 1545-0047

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.

Open to Public Inspection

MISSOURI BAR FOUNDATION				Employer	identiricat	tion number		
				44-6011	930			
Part I Identification of Disregarded Entities Com	olete if the organization	answered "Yes" on	Form 990, Par	t 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	(e) End-of-year assets	Dire	(f) ect controlling entity		
Part II Identification of Related Tax-Exempt Organ or more related tax-exempt organizations during	nizations Complete if the tax year.	ne organization ans	wered "Yes" or	n Form 990, Pa	art IV, lın	e 34 because it	had on	e
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code sect	tion Public charit (if section 50		(f) Direct controlling entity	Section (13) co ent	ontrolle itity?
(1)THE MISSOURI BAR 326 MONROE STREET JEFFERSON CITY, MO 65101 44-6000796	ADVANCE THE SCIENCE OF JURISPRUDENCE AND PROMOTE ADMINISTRATION OF JUSTICE	МО	170(B)(1)(A)(V)				Yes	No No
							-	_
							+	_
For Paperwork Reduction Act Notice, see the Instructions for Form 9	90.	Cat No 5013	5 Y			Schedule R (For	m 990) 2	2015

Schedule R (Form 990) 2015												Page 2
Part III Identification of Related Organizations Taxable a because it had one or more related organizations treate					ation answ	ered "Ye	s" on	Form	990, Part I ^v	V, lın	ne 34	ŀ
(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) ortionate ations?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	Gene man		(k) Percentag ownershi
				314)			Yes	No		Yes	No	
												-

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	No
-									<u> </u>

Part V Transactions With Related Organizations Complete if the organization answ	ered "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 i	related organizations lis	sted 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	Yes	
c Gift, grant, or capital contribution from related organization(s)				1c		No
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
${f j}$ 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
I Performance of services or membership or fundraising solicitations for related organization(s)				11		No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		No
f 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)				10		No
p Reimbursement paid to related organization(s) for expenses				1 p	Yes	
q Reimbursement paid by related organization(s) for expenses				1q		No
$m{r}$ O ther 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 complet	e this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amo	ount in	volved	
(1)THE MISSOURI BAR	В	23,664	ACTUAL COST			
(2)THE MISSOURI BAR	Р	15,000	TIME ALLOCATION			
(3)THE MISSOURI BAR	Р	679	ACTUAL COST			

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

evenue) 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
			314)	Yes	No			Yes	No		Yes	No	
												1	Ī

Part VII Supplemental Information

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

Explanation

Return Reference

Schedule R (Form 990) 2015