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Form **990**

Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

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

▶ Do not enter social security numbers on this form as it may be made public
▶ Information about Form 990 and its instructions is at www IRS gov/form990

OMB No 1545-0047

2015

Open to Public Inspection

A For the 2015 calendar year, or tax year beginning 07-01-2015 , and ending 06-30-2016

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

C Name of organization
UNITED WAY OF GREATER ST LOUIS INC

Doing business as

Number and street (or P O box if mail is not delivered to street address) | Room/suite
910 North Eleventh Street

City or town, state or province, country, and ZIP or foreign postal code
Saint Louis, MO 631011018

D Employer identification number
43-0714167

E Telephone number
(314) 539-4042

G Gross receipts $ 81,612,522

F Name and address of principal officer
Orvin T Kimbrough
United Way of Greater Saint Louis
910 North 11th St
St Louis, MO 63101

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

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

H(c) Group exemption number ▶

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

J Website: ▶ www stl unitedway org

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

L Year of formation 1922

M State of legal domicile MO

Part I Summary

1 Briefly describe the organization's mission or most significant activities
United Way of Greater St Louis mobilizes the community with one goal in mind - helping people live their best possible lives

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

3	Number of voting members of the governing body (Part VI, line 1a)	**3**	180
4	Number of independent voting members of the governing body (Part VI, line 1b)	**4**	180
5	Total number of individuals employed in calendar year 2015 (Part V, line 2a)	**5**	217
6	Total number of volunteers (estimate if necessary)	**6**	600
7a	Total unrelated business revenue from Part VIII, column (C), line 12	**7a**	0
b	Net unrelated business taxable income from Form 990-T, line 34	**7b**	0

		Prior Year	Current Year
8	Contributions and grants (Part VIII, line 1h)	78,495,434	78,255,372
9	Program service revenue (Part VIII, line 2g)	0	0
10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	910,588	924,104
11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	104,405	129,599
12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	79,510,427	79,309,075
13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	63,395,345	63,077,670
14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	8,694,416	11,033,511
16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
b	Total fundraising expenses (Part IX, column (D), line 25) ▶5,322,554		
17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	4,307,193	5,153,702
18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	76,396,954	79,264,883
19	Revenue less expenses Subtract line 18 from line 12	3,113,473	44,192

		Beginning of Current Year	End of Year
20	Total assets (Part X, line 16)	90,351,083	91,737,650
21	Total liabilities (Part X, line 26)	33,894,820	38,424,266
22	Net assets or fund balances Subtract line 21 from line 20	56,456,263	53,313,384

Part II Signature Block

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

Sign Here

Signature of officer — Date: 2017-02-07

Kenneth Graesser CFO
Type or print name and title

Paid Preparer Use Only

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

Firm's name ▶ | Firm's EIN ▶

Firm's address ▶ | Phone no

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

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

United Way of Greater St Louis mobilizes the community with one goal in mind - helping people live their best possible lives

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses $ 25,777,258 including grants of $ 22,601,528) (Revenue $ 0)

PROGRAM Foster Learning --- DESCRIPTION Provides safe and nurturing environments that help children and youth reach their full potential by providing services such as early childhood education, child welfare, youth development, adoption, and after school programs --- SOME MAJOR OUTCOMES , #1- 37,554 children were free from child abuse and neglect, #2- 2,574 children were ready to enter kindergarten, #3- 13,202 children and youth improved their academic performance --- DIRECT # SERVED 552,055 [251 grants]

4b (Code) (Expenses $ 19,297,770 including grants of $ 16,957,740) (Revenue $ 0)

PROGRAM Improve Health --- DESCRIPTION Provides individuals including seniors and people with disabilities and health conditions live more independent, enriching lives by providing counseling, education, support, and advocacy services --- SOME MAJOR OUTCOMES , #1- 27,308 people experienced fewer mental, emotional, behavioral symptoms, #2- 4,079 individuals with disabilities gained independent living skills, #3- 2,905 people successfully managed their chronic health conditions --- DIRECT # SERVED 194,848 [200 grants]

4c (Code) (Expenses $ 8,402,774 including grants of $ 7,383,861) (Revenue $ 0)

PROGRAM Provide Food and Shelter --- DESCRIPTION Provides immediate basic needs to individuals and families such as food, clothing, safe havens, violence prevention, homeless and legal services --- SOME MAJOR OUTCOMES , #1- 80,689 people had their immediate basic needs met, #2- 8,624 people transitioned to an improved, stable living situation, #3- 5,248 victims of domestic violence gained strategies for safety --- DIRECT # SERVED 170,756 [107 grants]

See Additional Data

4d Other program services (Describe in Schedule O)

(Expenses $ 18,481,872 including grants of $ 12,420,307) (Revenue $ 0)

4e **Total program service expenses ▶** 71,959,674

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? *If "Yes," complete Schedule A*	1	Yes	
2	Is the organization required to complete *Schedule B, Schedule of Contributors* (see instructions)?	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? *If "Yes," complete Schedule C, Part I*	3		No
4	**Section 501(c)(3) organizations.** Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? *If "Yes," complete Schedule C, Part II*	4		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, VII, VIII, IX, or X as applicable			
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? *If "Yes," complete Schedule D, Part VI*	11a	Yes	
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VII*	11b		No
c	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part VIII*	11c		No
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? *If "Yes," complete Schedule D, Part IX*	11d		No
e	Did the organization report an amount for other liabilities in Part X, line 25? *If "Yes," complete Schedule D, Part X*	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? *If "Yes," complete Schedule D, Part X*	11f	Yes	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? *If "Yes," complete Schedule D, Parts XI and XII*	12a	Yes	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? *If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional*	12b		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? *If "Yes," complete Schedule G, Part I* (see instructions)	17		No
18	Did the organization report more than $15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? *If "Yes," complete Schedule G, Part II*	18	Yes	
19	Did the organization report more than $15,000 of gross income from gaming activities on Part VIII, line 9a? *If "Yes," complete Schedule G, Part III*	19		No
20a	Did the organization operate one or more hospital facilities? *If "Yes," complete Schedule H*	20a		No
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		

Part IV Checklist of Required Schedules *(continued)*

21	Did the organization report more than $5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? *If "Yes," complete Schedule I, Parts I and II*	**21**	Yes	
22	Did the organization report more than $5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? *If "Yes," complete Schedule I, Parts I and III*	**22**	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? *If "Yes," complete Schedule J*	**23**	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than $100,000 as of the last day of the year, that was issued after December 31, 2002? *If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a*	**24a**		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	**24b**		
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	**24c**		
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	**24d**		
25a	**Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations.** Did the organization engage in an excess benefit transaction with a disqualified person during the year? *If "Yes," complete Schedule L, Part I*	**25a**		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? *If "Yes," complete Schedule L, Part I*	**25b**		No
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? *If "Yes," complete Schedule L, Part II*	**26**		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? *If "Yes," complete Schedule L, Part III*	**27**		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28a**		No
b	A family member of a current or former officer, director, trustee, or key employee? *If "Yes," complete Schedule L, Part IV*	**28b**		No
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? *If "Yes," complete Schedule L, Part IV*	**28c**		No
29	Did the organization receive more than $25,000 in non-cash contributions? *If "Yes," complete Schedule M*	**29**	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? *If "Yes," complete Schedule M*	**30**		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? *If "Yes," complete Schedule N, Part I*	**31**		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? *If "Yes," complete Schedule N, Part II*	**32**		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301 7701-3? *If "Yes," complete Schedule R, Part I*	**33**		No
34	Was the organization related to any tax-exempt or taxable entity? *If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1*	**34**	Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	**35a**		No
b	If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? *If "Yes," complete Schedule R, Part V, line 2*	**35b**		
36	**Section 501(c)(3) organizations.** Did the organization make any transfers to an exempt non-charitable related organization? *If "Yes," complete Schedule R, Part V, line 2*	**36**		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? *If "Yes," complete Schedule R, Part VI*	**37**		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? **Note.** All Form 990 filers are required to complete Schedule O	**38**	Yes	

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

				Yes	No
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable . .	**1a**	52		
b	Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	**1b**	0		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		**1c**	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**	217		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? **Note.** If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		**2b**	Yes	
3a	Did the organization have unrelated business gross income of $1,000 or more during the year? . . .		**3a**		No
b	If "Yes," has it filed a Form 990-T for this year? *If "No" to line 3b, provide an explanation in Schedule O* . . .		**3b**		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)? . .		**4a**		No
b	If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)				
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . .		**5a**		No
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		**5b**		No
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		**5c**		
6a	Does the organization have annual gross receipts that are normally greater than $100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions? . . .		**6a**		No
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		**6b**		
7	**Organizations that may receive deductible contributions under section 170(c).**				
a	Did the organization receive a payment in excess of $75 made partly as a contribution and partly for goods and services provided to the payor?		**7a**	Yes	
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		**7b**	Yes	
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		**7c**		No
d	If "Yes," indicate the number of Forms 8282 filed during the year	**7d**			
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		**7e**		No
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . .		**7f**		No
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		**7g**		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		**7h**		
8	**Sponsoring organizations maintaining donor advised funds.** Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?		**8**		
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 related person? . . .		**9b**		
10	**Section 501(c)(7) organizations.** Enter				
a	Initiation fees and capital contributions included on Part VIII, line 12 . . .	**10a**			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	**10b**			
11	**Section 501(c)(12) organizations.** Enter				
a	Gross income from members or shareholders	**11a**			
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	**11b**			
12a	**Section 4947(a)(1) non-exempt charitable trusts.** Is the organization filing Form 990 in lieu of Form 1041?		**12a**		
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	**12b**			
13	**Section 501(c)(29) qualified nonprofit health insurance issuers.**				
a	Is the organization licensed to issue qualified health plans in more than one state? **Note.** See the instructions for additional information the organization must report on Schedule O		**13a**		
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	**13b**			
c	Enter the amount of reserves on hand	**13c**			
14a	Did the organization receive any payments for indoor tanning services during the tax year?		**14a**		No
b	If "Yes," has it filed a Form 720 to report these payments? *If "No," provide an explanation in Schedule O* . .		**14b**		

Part VI Governance, Management, and Disclosure

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

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

Section A. Governing Body and Management

				Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a	180		
	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	180		
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		Yes	
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			No
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a			No
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			No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following				
a	The governing body?	8a		Yes	
b	Each committee with authority to act on behalf of the governing body?	8b		Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? *If "Yes," provide the names and addresses in Schedule O*	9			No

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

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

Section C. Disclosure

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

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

☑ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records ▶ Kenneth A Graesser CFO 910 North Eleventh Street Saint Louis, MO 631011018 (314) 539-4042

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

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

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

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

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

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

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
See Additional Data Table										
1b **Sub-Total** ▶										
c **Total from continuation sheets to Part VII, Section A** ▶										
d **Total (add lines 1b and 1c)** ▶								1,414,666	0	507,227

2 Total number of individuals (including but not limited to those listed above) who received more than $100,000 of reportable compensation from the organization ▶ 9

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
Upic Solutions 334 Beechwood Road Suite 403 Fort Mitchell, KY 41017	IT - Hosting/maint /training	328,950
Because Really LLC 223 Ashford Drive Glen Carbon, IL 62034	Consultant - Ferguson Commission activities	106,945
Vector Communications Corp 401 S 18th St Suite 325 Saint Louis, MO 63103	Consultant - Ferguson Commission activities	103,726

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 ▶ 3

Part VIII Statement of Revenue

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

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	335,009				
	b Membership dues	0				
	c Fundraising events	0				
	d Related organizations	0				
	e Government grants (contributions)	728,553				
	f All other contributions, gifts, grants, and similar amounts not included above	77,191,810				
	g Noncash contributions included in lines 1a-1f $	3,193,334				
	h **Total.** Add lines 1a-1f		78,255,372			
Program Service Revenue		Business Code				
	2a					
	b					
	c					
	d					
	e					
	f All other program service revenue					
	g **Total.** Add lines 2a–2f		0			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		866,449	0	0	866,449
	4 Income from investment of tax-exempt bond proceeds		0	0	0	0
	5 Royalties		0	0	0	0
		(i) Real	(ii) Personal			
	6a Gross rents					
	b Less rental expenses					
	c Rental income or (loss)	0	0			
	d Net rental income or (loss)					
		(i) Securities	(ii) Other			
	7a Gross amount from sales of assets other than inventory	2,333,155	0			
	b Less cost or other basis and sales expenses	2,275,500	0			
	c Gain or (loss)	57,655	0			
	d Net gain or (loss)		57,655	0	0	57,655
	8a Gross income from fundraising events (not including $ 0 of contributions reported on line 1c) See Part IV, line 18	a 108,096				
	b Less direct expenses	b 27,947				
	c Net income or (loss) from fundraising events		80,149		0	80,149
	9a Gross income from gaming activities See Part IV, line 19	a				
	b Less direct expenses	b				
	c Net income or (loss) from gaming activities					
	10a Gross sales of inventory, less returns and allowances	a				
	b Less cost of goods sold	b				
	c Net income or (loss) from sales of inventory					
	Miscellaneous Revenue	Business Code				
	11a Campaign Processing Fees	900099	49,450	49,450	0	0
	b					
	c					
	d All other revenue		0	0	0	0
	e **Total.** Add lines 11a–11d		49,450			
	12 **Total revenue.** See Instructions		79,309,075	49,450	0	1,004,253

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns All other organizations must complete column (A)

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21	59,363,436	59,363,436		
2 Grants and other assistance to domestic individuals See Part IV, line 22	3,714,234	3,714,234		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16	0			
4 Benefits paid to or for members	0			
5 Compensation of current officers, directors, trustees, and key employees	1,176,909	610,940	223,314	342,655
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7 Other salaries and wages	6,718,158	3,619,576	817,433	2,281,149
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	1,408,395	733,427	151,289	523,679
9 Other employee benefits	1,183,394	640,042	140,058	403,294
10 Payroll taxes	546,655	293,090	65,890	187,675
11 Fees for services (non-employees)				
a Management	0			
b Legal	39,019	18,601	12,776	7,642
c Accounting	59,400	22,394	21,087	15,919
d Lobbying	0			
e Professional fundraising services See Part IV, line 17	0			
f Investment management fees				
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	1,350,111	1,086,734	91,251	172,126
12 Advertising and promotion	549,833	119,092	11,704	419,037
13 Office expenses	532,079	313,647	59,713	158,719
14 Information technology	628,280	390,341	64,383	173,556
15 Royalties				
16 Occupancy	389,408	186,243	73,714	129,451
17 Travel	234,936	134,005	34,494	66,437
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	93,905	55,840	9,216	28,849
20 Interest				
21 Payments to affiliates	557,500	295,196	62,273	200,031
22 Depreciation, depletion, and amortization	389,416	219,995	43,634	125,787
23 Insurance	99,940	37,677	35,479	26,784
24 Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
a				
b				
c				
d				
e All other expenses	229,875	105,164	64,947	59,764
25 **Total functional expenses.** Add lines 1 through 24e	79,264,883	71,959,674	1,982,655	5,322,554
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) Beginning of year		(B) End of year
Assets	1	Cash–non-interest-bearing	2,350	1	2,350
	2	Savings and temporary cash investments	13,771,038	2	10,036,035
	3	Pledges and grants receivable, net	27,005,507	3	29,920,870
	4	Accounts receivable, net	37,102	4	88,696
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L	0	5	0
	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	0	6	0
	7	Notes and loans receivable, net	0	7	0
	8	Inventories for sale or use	0	8	0
	9	Prepaid expenses and deferred charges	52,528	9	77,385
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D — 10a: 7,839,477			
	b	Less accumulated depreciation — 10b: 4,150,890	3,635,903	10c	3,688,587
	11	Investments—publicly traded securities	45,819,722	11	47,899,996
	12	Investments—other securities See Part IV, line 11	0	12	0
	13	Investments—program-related See Part IV, line 11	0	13	0
	14	Intangible assets	0	14	0
	15	Other assets See Part IV, line 11	26,933	15	23,731
	16	**Total assets.** Add lines 1 through 15 (must equal line 34)	90,351,083	16	91,737,650
Liabilities	17	Accounts payable and accrued expenses	1,655,253	17	1,309,671
	18	Grants payable	28,994,184	18	30,157,822
	19	Deferred revenue	0	19	0
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability Complete Part IV of Schedule D	0	21	0
	22	Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L	0	22	0
	23	Secured mortgages and notes payable to unrelated third parties	0	23	0
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	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	3,245,383	25	6,956,773
	26	**Total liabilities.** Add lines 17 through 25	33,894,820	26	38,424,266
Net Assets or Fund Balances		**Organizations that follow SFAS 117 (ASC 958), check here ▶ ☑ and complete lines 27 through 29, and lines 33 and 34.**			
	27	Unrestricted net assets	32,740,207	27	28,017,329
	28	Temporarily restricted net assets	13,307,784	28	14,129,322
	29	Permanently restricted net assets	10,408,272	29	11,166,733
		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☐ and complete lines 30 through 34.			
	30	Capital stock or trust principal, or current funds		30	
	31	Paid-in or capital surplus, or land, building or equipment fund		31	
	32	Retained earnings, endowment, accumulated income, or other funds		32	
	33	Total net assets or fund balances	56,456,263	33	53,313,384
	34	Total liabilities and net assets/fund balances	90,351,083	34	91,737,650

Part XI Reconcilliation of Net Assets

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

1	Total revenue (must equal Part VIII, column (A), line 12)	1	79,309,075
2	Total expenses (must equal Part IX, column (A), line 25)	2	79,264,883
3	Revenue less expenses Subtract line 2 from line 1	3	44,192
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	56,456,263
5	Net unrealized gains (losses) on investments	5	201,636
6	Donated services and use of facilities	6	0
7	Investment expenses	7	0
8	Prior period adjustments	8	0
9	Other changes in net assets or fund balances (explain in Schedule O)	9	-3,388,707
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	53,313,384

Part XII Financial Statements and Reporting

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

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

Additional Data

Software ID: 15000352
Software Version: v1.00
EIN: 43-0714167
Name: UNITED WAY OF GREATER ST LOUIS INC

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 10,405,901 including grants of $ 9,144,089) (Revenue $ 0)

PROGRAM Strengthen Communities --- DESCRIPTION Provides services that create and sustain strong communities through capacity building and accessible neighborhood based services, disaster relief, and affordable housing --- SOME MAJOR OUTCOMES , #1- 48,305 people were successfully linked with community resources, #2- 7,282 community service providers enhanced their knowledge, capacity, and performance, #3- 3,918 people were prepared for or successfully recovered from an emergency or disaster --- DIRECT # SERVED 36,872 [99 grants]

(Code) (Expenses $ 3,942,164 including grants of $ 3,276,218) (Revenue $ 0)

PROGRAM Establish Financial Stability --- DESCRIPTION Provides services to individuals and families to increase their income, build savings, and grow assets through post-secondary education, job training, financial literacy, and coaching --- SOME MAJOR OUTCOMES , #1- 25,335 people retained employment for at least three months, #2- 14,873 people increased their income, savings, and assets, #3- 3,705 people enrolled in or completed job training or college --- DIRECT # SERVED 77,793 [45 grants]

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 3,201,967 including grants of $ 0) (Revenue $ 0)

Case management services are United Way 2-1-1 Missouri/Southwest Illinois (United Way 2-1-1), a 24-hour multi-channel information and referral service available to residents of Missouri and Southwest Illinois by simply dialing 2-1-1 United Way 2-1-1 connects callers with community resources, volunteer opportunities and critical information during times of disaster, reducing the amount of time necessary in find needed services Trained Information and Referral Specialists assist clients in identifying and accessing critical health and human service resources United Way 2-1-1's database contains 2,500 agencies providing more than 24,000 services across its service area Established in 2007, United Way 2-1-1 has grown steadily each year in exposure and response to its callers Since its inaugural year, 2-1-1 has handled more than 1 millions calls In 2016, United Way 2-1-1 acquired the St Louis Regional Housing Helpline, resulting in total combined call volume of 177,371 for basic needs, homeless prevention, shelter referrals, crisis calls, employment services and much more

(Code) (Expenses $ 595,537 including grants of $ 0) (Revenue $ 0)

Volunteer Center The United Way manages the region's Volunteer Center It is focused on creating and facilitating meaningful service projects, skill-based and leadership opportunities, and family volunteer experiences that help people in our community The Center also provides volunteer management training to equip non-profit agencies across the state of Missouri with best practices to effectively recruit, manage and retain volunteers In 2015, the Volunteer Center worked with 16,735 volunteers on 3,089 projects which logged 142,578 hours to help people in our service area

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

(Code) (Expenses $ 336,303 including grants of $ 0) (Revenue $ 0)

Philanthropic Services Includes expenditures relating to the creation and implementation of tailored back office and advisory services for donor-directed investments that fall outside of the traditional campaign structure, including disbursement of charitable giving, development of giving strategy, impact monitoring and reporting, and management of donor directed programming [0 grants to agencies and 20 direct clients served]

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael DeCola Chair	5	X		X				0	0	0
Mrs Stephen F Brauer Vice-Chair	2	X		X				0	0	0
Dr Donald M Suggs Vice-Chair	2	X		X				0	0	0
Lawrence E Thomas Vice-Chair	2	X		X				0	0	0
Patrick J White Vice-Chair	2	X		X				0	0	0
Michael R Hogan Treasurer	2	X		X				0	0	0
Valerie E Patton Secretary	2	X		X				0	0	0
Joann M Barton Executive Cmte Member	2	X						0	0	0
Ann Beatty PhD Executive Cmte Member	2	X						0	0	0
Lynn Beckwith Jr EdD Executive Cmte Member	2	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Michael E Borgna Executive Cmte Member	2	X						0	0	0
Steven J Brackney Executive Cmte Member	2	X						0	0	0
Lynn Britton Executive Cmte Member	2	X						0	0	0
Nancy E Cross Executive Cmte Member	2	X						0	0	0
Kevin R Farrell Executive Cmte Member	2	X						0	0	0
Walter J Galvin Executive Cmte Member	2	X						0	0	0
Bruce B Holland Executive Cmte Member	2	X						0	0	0
Janet M Holloway Executive Cmte Member	2	X						0	0	0
Michael R Holmes Sr Executive Cmte Member	2	X						0	0	0
Katie A Hubbard Executive Cmte Member	2	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Rodney W Kinzinger Executive Cmte Member	2	X						0	0	0
Melissa Lackey Executive Cmte Member	2	X						0	0	0
Don G Lents Executive Cmte Member	2	X						0	0	0
Steve H Lipstein Executive Cmte Member	2	X						0	0	0
Daniel J Ludeman Executive Cmte Member	2	X						0	0	0
W Stephen Mantz Executive Cmte Member	2	X						0	0	0
Virginia McDowell Executive Cmte Member	2	X						0	0	0
Thomas J Minogue Executive Cmte Member	2	X						0	0	0
Michael L Moehn Executive Cmte Member	2	X						0	0	0
Michael F Neidorff Executive Cmte Member	2	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Kathy Osborn Executive Cmte Member	2	X						0	0	0
Penny Pennington Executive Cmte Member	2	X						0	0	0
Cassandra Sanford Executive Cmte Member	2	X						0	0	0
James R Schmersahl Executive Cmte Member	2	X						0	0	0
Ellen Sherberg Executive Cmte Member	2	X						0	0	0
Kelly A Simpson Executive Cmte Member	2	X						0	0	0
Suzanne Sitherwood Executive Cmte Member	2	X						0	0	0
Angela Sears Spittal Executive Cmte Member	2	X						0	0	0
David L Steward Executive Cmte Member	2	X						0	0	0
James D Weddle Executive Cmte Member	2	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Keith H Williamson Executive Cmte Member	2	X						0	0	0
Jackie Yoon Executive Cmte Member	2	X						0	0	0
Jeffrey P Aboussie Board Member	1	X						0	0	0
J Joe Adorjan Board Member	1	X						0	0	0
Barry D Albrecht Board Member	1	X						0	0	0
Suzie K Andrews Board Member	1	X						0	0	0
James A Auffenberg Jr Board Member	1	X						0	0	0
Marie-Helene Bernard Board Member	1	X						0	0	0
John S Beulick Board Member	1	X						0	0	0
G Carl Bisig III Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Brian J Bjorkman Board Member	1	X						0	0	0
Cory Boss Board Member	1	X						0	0	0
William Bradley Jr Board Member	1	X						0	0	0
Karen L Branding Board Member	1	X						0	0	0
Keith Burton Board Member	1	X						0	0	0
Gloria Carter-Hicks Board Member	1	X						0	0	0
Michele R Cheatham Board Member	1	X						0	0	0
Ronald Chesbrough PhD Board Member	1	X						0	0	0
Robert J Ciapciak Board Member	1	X						0	0	0
Carol M Clark Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Ralph W Clermont Board Member	1	X						0	0	0
Scott D Cochran Board Member	1	X						0	0	0
Gina Collins Board Member	1	X						0	0	0
Mark Conner Board Member	1	X						0	0	0
David A Cook Board Member	1	X						0	0	0
M Edward Cunningham Board Member	1	X						0	0	0
Mark C Darrell Board Member	1	X						0	0	0
Ron Daugherty Board Member	1	X						0	0	0
Clark S Davis Board Member	1	X						0	0	0
Kevin Demoff Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jama L Dodson Board Member	1	X						0	0	0
Benjamin F Edwards IV Board Member	1	X						0	0	0
Thomas C Erb Board Member	1	X						0	0	0
Vicki L Felker Board Member	1	X						0	0	0
Jeffrey S Fothergill Board Member	1	X						0	0	0
Catherine A French Board Member	1	X						0	0	0
Ronald A Fromm Board Member	1	X						0	0	0
Johnny Furr Jr Board Member	1	X						0	0	0
Vincent J Gaffigan Board Member	1	X						0	0	0
Michael J Gallagher Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Thomas F George PhD Board Member	1	X						0	0	0
Michael H Goebel Board Member	1	X						0	0	0
Scott R Goodman Board Member	1	X						0	0	0
Lisa Gould Board Member	1	X						0	0	0
Diann D Gross Board Member	1	X						0	0	0
Mahendra R Gupta PhD Board Member	1	X						0	0	0
Sheena R Hamilton Board Member	1	X						0	0	0
Lane Hamm Board Member	1	X						0	0	0
Frank Hamsher Board Member	1	X						0	0	0
Christopher W Hanaway Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Matthew K Harbaugh Board Member	1	X						0	0	0
Michael F Hart Board Member	1	X						0	0	0
Michael C Heim Board Member	1	X						0	0	0
Robert J Henkel Board Member	1	X						0	0	0
Wendy J Henry CPA Board Member	1	X						0	0	0
Lauren M Herring Board Member	1	X						0	0	0
Ryan L Hyman Board Member	1	X						0	0	0
Joseph F Imbs III Board Member	1	X						0	0	0
Jeff Insco Board Member	1	X						0	0	0
Steven N Ippolito Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Andrea Jackson-Jennings Board Member	1	X						0	0	0
Carmen Jacob Board Member	1	X						0	0	0
Candace O Jennings Board Member	1	X						0	0	0
Charlene Johnson Board Member	1	X						0	0	0
Karen M Jordan Board Member	1	X						0	0	0
Arindam Kar Board Member	1	X						0	0	0
Ryan R Kemper Board Member	1	X						0	0	0
Whitney M Kenter CPA Board Member	1	X						0	0	0
Mark A Kern Board Member	1	X						0	0	0
Jeffrey B Klopfenstein Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Shawn P Kormanek Board Member	1	X						0	0	0
Daniel G Korte Board Member	1	X						0	0	0
Jay Korte Board Member	1	X						0	0	0
Todd J Korte Board Member	1	X						0	0	0
Nancy L LeVault Board Member	1	X						0	0	0
Leigh Lewis Board Member	1	X						0	0	0
Keith Linderer Board Member	1	X						0	0	0
Jason M Logsdon Board Member	1	X						0	0	0
Ann C Marr Board Member	1	X						0	0	0
Kathleen M Mazzarella Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Richard H McClure Board Member	1	X						0	0	0
Edward McLaughlin Board Member	1	X						0	0	0
Kevin McNatt Board Member	1	X						0	0	0
Michael Mehringer Board Member	1	X						0	0	0
Rick A Merluzzi Board Member	1	X						0	0	0
Natasha J Mistry Board Member	1	X						0	0	0
Christopher X Moloney Board Member	1	X						0	0	0
Stacey Morse Board Member	1	X						0	0	0
Dean P Mueller Board Member	1	X						0	0	0
Patrick K Murphy Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Robert L Newmark Board Member	1	X						0	0	0
Jennifer L Nguyen PhD Board Member	1	X						0	0	0
Lisa A Nielsen Board Member	1	X						0	0	0
John O'Mara Board Member	1	X						0	0	0
Christine M Page Board Member	1	X						0	0	0
Kei Y Pang Board Member	1	X						0	0	0
Susan Piazza Board Member	1	X						0	0	0
John A Pieper PharmD Board Member	1	X						0	0	0
Jeff Pittman PhD Board Member	1	X						0	0	0
James G Powers Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
J Michael Pressimone EdD Board Member	1	X						0	0	0
Janet T Ramey CPA Board Member	1	X						0	0	0
Karlos Ramirez Board Member	1	X						0	0	0
John Ramon Board Member	1	X						0	0	0
Georgina Randazzo Board Member	1	X						0	0	0
Alexander Rodrigo Board Member	1	X						0	0	0
Ruth M Saphian Board Member	1	X						0	0	0
Michael V Sarli Board Member	1	X						0	0	0
Mark S Schmitt Board Member	1	X						0	0	0
Scott C Schnuck Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Todd R Schnuck Board Member	1	X						0	0	0
Michael J Scully Board Member	1	X						0	0	0
Shelley J Seifert Board Member	1	X						0	0	0
Rachel Seward Board Member	1	X						0	0	0
Reuben A Shelton Board Member	1	X						0	0	0
Stanley Shoun Board Member	1	X						0	0	0
Thad W Simons Board Member	1	X						0	0	0
Van Simpson Board Member	1	X						0	0	0
Mayor Francis G Slay Board Member	1	X						0	0	0
Patrick E Smith Sr Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
John R Sondag Board Member	1	X						0	0	0
Frederic M Steinbach Board Member	1	X						0	0	0
Charles A Stewart Jr CPA Board Member	1	X						0	0	0
Susan A Stith Board Member	1	X						0	0	0
R Philip Stupp Jr Board Member	1	X						0	0	0
Victor P Svec Board Member	1	X						0	0	0
Steven J Tucker Board Member	1	X						0	0	0
John P Tvrdik Board Member	1	X						0	0	0
Karen Vangyia Board Member	1	X						0	0	0
Kimberly G Walker CPA Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Dwaun J Warmack EdD Board Member	1	X						0	0	0
B Dean Webb Board Member	1	X						0	0	0
Joe E Wiley Board Member	1	X						0	0	0
Don Willey Board Member	1	X						0	0	0
Jessica B Willingham Board Member	1	X						0	0	0
Lon O Willis Board Member	1	X						0	0	0
Reverend Starsky D Wilson Board Member	1	X						0	0	0
Mark S Woolbnght Board Member	1	X						0	0	0
Mark S Wnghton PhD Board Member	1	X						0	0	0
Michael Zambrana Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Jeffrey J Boehne Executive Cmte Member	2	X						0	0	0
Veronica Coleman Executive Cmte Member	2	X						0	0	0
Francella D Jackson Executive Cmte Member	2	X						0	0	0
Joseph T Ambrose Board Member	1	X						0	0	0
Jason Arnold Board Member	1	X						0	0	0
Mark J Bethell Board Member	1	X						0	0	0
Mark O Branham Board Member	1	X						0	0	0
Marilyn K Bush Board Member	1	X						0	0	0
Elizabeth H Cohen Board Member	1	X						0	0	0
Scott H Collins Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Robert M Cox Jr Board Member	1	X						0	0	0
Gregory G Evans Board Member	1	X						0	0	0
Michele Fite Board Member	1	X						0	0	0
Steven Hill Board Member	1	X						0	0	0
Juanita H Hinshaw Board Member	1	X						0	0	0
Joan A Kelly Board Member	1	X						0	0	0
Adam Koishor Board Member	1	X						0	0	0
Ellen Krohne Board Member	1	X						0	0	0
Patrick J Lamping Board Member	1	X						0	0	0
Nancy E Laubenthal Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Mary Mack Board Member	1	X						0	0	0
David A Peacock Board Member	1	X						0	0	0
Joe Reagan Board Member	1	X						0	0	0
Lisa Richter Board Member	1	X						0	0	0
Mark A Rippeto Board Member	1	X						0	0	0
Richard M Sems Board Member	1	X						0	0	0
Pat Smith-Thurman Board Member	1	X						0	0	0
Elizabeth Stroble PhD Board Member	1	X						0	0	0
James L Tatum Board Member	1	X						0	0	0
James S Turley Board Member	1	X						0	0	0

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Tim R Walsh Board Member	1	X						0	0	0
Patricia Whitaker Board Member	1	X						0	0	0
Richard B White MD Board Member	1	X						0	0	0
Warren J Winer Board Member	1	X						0	0	0
Lon Zimmerman Board Member	1	X						0	0	0
David C Zimmermann Board Member	1	X						0	0	0
Orvin T Kimbrough President-CEO	55			X				327,257	0	44,289
Kenneth A Graesser SVP and CFO	48			X				187,159	0	116,740
Kathy A Gardner SVP-Community Investment	48				X			158,883	0	143,163
Adeyinka A Faleti SVP-Resource Development	48				X			130,042	0	21,090

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
Erin K Budde VP-Strategic Giving and Innovation	48					X		141,311	0	31,695
Julie Russell SVP-Planning & Evaluation	48					X		127,318	0	28,781
Angela B Marino SVP-Marketing	48					X		120,538	0	26,196
Roz Sherman Voellinger VP-Labor	48					X		117,830	0	55,608
Heather B Dawson Chief of Staff	48					X		104,328	0	39,665

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SCHEDULE A (Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ **Attach to Form 990 or Form 990-EZ.**

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

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

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

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

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

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

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

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

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

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

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

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

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

11 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box in lines 11a through 11d that describes the type of supporting organization and complete lines 11e, 11f, and 11g

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

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

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

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

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

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

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

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

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Schedule A (Form 990 or 990-EZ) 2015

Part II **Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)** (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any unusual grants)	73,636,491	75,037,710	75,684,903	78,495,434	78,255,372	381,109,910
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 **Total.** Add lines 1 through 3	73,636,491	75,037,710	75,684,903	78,495,434	78,255,372	381,109,910
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)						8,755,422
6 **Public support.** Subtract line 5 from line 4						372,354,488

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2011	(b) 2012	(c) 2013	(d) 2014	(e) 2015	(f) Total
7 Amounts from line 4	73,636,491	75,037,710	75,684,903	78,495,434	78,255,372	381,109,910
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	569,140	634,006	688,404	758,030	866,449	3,516,029
9 Net income from unrelated business activities, whether or not the business is regularly carried on	0	0	0	0	0	0
10 Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI)	210,596	369,295	375,654	270,223	108,096	1,333,864
11 **Total support.** Add lines 7 through 10						385,959,803

12 Gross receipts from related activities, etc (see instructions) **12** 142,498

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

Section C. Computation of Public Support Percentage

14 Public support percentage for 2015 (line 6, column (f) divided by line 11, column (f)) **14** 96 475 %

15 Public support percentage for 2014 Schedule A, Part II, line 14 **15** 96 846 %

16a **33 1/3% support test—2015.** If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☑

b **33 1/3% support test—2014.** If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

17a **10%-facts-and-circumstances test—2015.** If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

b **10%-facts-and-circumstances test—2014.** If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and **stop here.** Explain in Part VI how the organization meets the "facts-and-circumstances" test The organization qualifies as a publicly supported organization ▶ ☐

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

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

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

Section B. Total Support

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

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

Section C. Computation of Public Support Percentage

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

Section D. Computation of Investment Income Percentage

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

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

b **33 1/3% support tests—2014.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ▶ ☐

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

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

Part IV Supporting Organizations (continued)

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally-Integrated Supporting Organizations

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

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

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

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

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

Section A - Adjusted Net Income

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

Section B - Minimum Asset Amount

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

Section C - Distributable Amount

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

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

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

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

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

Part VI **Supplemental Information.**

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

Facts And Circumstances Test

Return Reference	Explanation
Schedule A, Part II, Line 10	Amounts represent gross income from fundraising and gaming events over the last five years

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SCHEDULE D (Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

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

		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part IV Escrow and Custodial Arrangements.

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

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

			Amount
b	If "Yes," explain the arrangement in Part XIII and complete the following table		
c	Beginning balance	1c	
d	Additions during the year	1d	
e	Distributions during the year	1e	
f	Ending balance	1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

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

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

		(a)Current year	(b)Prior year	b (c)Two years back	(d)Three years back	(e)Four years back
1a	Beginning of year balance	13,479,430	11,834,049	10,841,544	9,514,304	8,992,624
b	Contributions	1,000,000	2,000,000	0	704,254	659,701
c	Net investment earnings, gains, and losses	5,478	-94,171	1,502,944	933,676	355,394
d	Grants or scholarships	0	0	0	0	0
e	Other expenditures for facilities and programs	266,462	253,948	507,439	307,690	492,415
f	Administrative expenses	7,332	6,500	3,000	3,000	1,000
g	End of year balance	14,211,114	13,479,430	11,834,049	10,841,544	9,514,304

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

- a Board designated or quasi-endowment ▶ 0 %
- b Permanent endowment ▶ 78 58 %
- c Temporarily restricted endowment ▶ 21 42 %

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

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

		Yes	No
(i) unrelated organizations	3a(i)	Yes	
(ii) related organizations	3a(ii)		No

b If "Yes" on 3a(ii), are the related organizations listed as required on Schedule R? 3b

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

Part VI Land, Buildings, and Equipment.

Complete if the organization answered 'Yes' to Form 990, Part IV, line 11a.See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c)depreciation	(d)Book value
1a Land	0	964,100		964,100
b Buildings	0	3,929,733	1,575,415	2,354,318
c Leasehold improvements	0	0	0	0
d Equipment	0	2,945,644	2,575,475	370,169
e Other	0	0	0	0
Total. Add lines 1a through 1e *(Column (d) must equal Form 990, Part X, column (B), line 10(c))* ▶				3,688,587

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
Total. *(Column (b) must equal Form 990, Part X, col (B) line 12)* ▶		

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

(a) Description of investment	(b) Book value	(c) Method of valuation Cost or end-of-year market value
Total. *(Column (b) must equal Form 990, Part X, col (B) line 13)* ▶		

Part IX **Other Assets.** Complete if the organization answered 'Yes' on Form 990, Part IV, line 11d See Form 990, Part X, line 15

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

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

1. (a) Description of liability	(b) Book value
Federal income taxes	0
Pension & post-retirement liabilities	6,678,023
Dues payable to United Way Worldwide	278,750
Total. *(Column (b) must equal Form 990, Part X, col (B) line 25)* ▶	6,956,773

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

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements			1	69,368,884
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12				
a	Net unrealized gains (losses) on investments	2a	201,636		
b	Donated services and use of facilities	2b	86,350		
c	Recoveries of prior year grants	2c	0		
d	Other (Describe in Part XIII)	2d	-417,430		
e	Add lines **2a** through **2d**			2e	-129,444
3	Subtract line **2e** from line **1**			3	69,498,328
4	Amounts included on Form 990, Part VIII, line 12, but not on line **1**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII)	4b	9,810,747		
c	Add lines **4a** and **4b**			4c	9,810,747
5	Total revenue Add lines **3** and **4c.**(This must equal Form 990, Part I, line 12)			5	79,309,075

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements			1	69,540,486
2	Amounts included on line 1 but not on Form 990, Part IX, line 25				
a	Donated services and use of facilities	2a	86,350		
b	Prior year adjustments	2b	0		
c	Other losses	2c	0		
d	Other (Describe in Part XIII)	2d	0		
e	Add lines **2a** through **2d**			2e	86,350
3	Subtract line **2e** from line **1**			3	69,454,136
4	Amounts included on Form 990, Part IX, line 25, but not on line **1:**				
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	0		
b	Other (Describe in Part XIII)	4b	9,810,747		
c	Add lines **4a** and **4b**			4c	9,810,747
5	Total expenses Add lines **3** and **4c.** (This must equal Form 990, Part I, line 18)			5	79,264,883

Part XIII Supplemental Information

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

Return Reference	Explanation
Schedule D, Part V, Line 4	Income from endowments is used to support operations and increase the amount available to fund agencies

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation
Schedule D, Part XI, Line 2d	The losses of $417,430 are due to the change in value of split interest agreements
Schedule D, Part XI, Line 4b	$9,810,747 is associated with donor designations not included as revenue on the financial statements but included with revenue on the Form 990
Schedule D, Part XII, Line 4b	$9,810,747 is associated with donor designations not included as expense on the financial statements but included with expense on the Form 990

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SCHEDULE G (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information Regarding Fundraising or Gaming Activities

Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the organization entered more than $15,000 on Form 990-EZ, line 6a

▶ Attach to Form 990 or Form 990-EZ

▶ Information about Schedule G (Form 990 or 990-EZ) and its instructions is at *www irs gov/form990*

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

Part I **Fundraising Activities.** Complete if the organization answered "Yes" on Form 990, Part IV, line 17. Form 990-EZ filers are not required to complete this part.

1 Indicate whether the organization raised funds through any of the following activities Check all that apply

a ☐ Mail solicitations
b ☐ Internet and email solicitations
c ☐ Phone solicitations
d ☐ In-person solicitations
e ☐ Solicitation of non-government grants
f ☐ Solicitation of government grants
g ☐ Special fundraising events

2a Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services? ☐ **Yes** ☐ **No**

b If "Yes," list the ten highest paid individuals or entities (fundraisers) pursuant to agreements under which the fundraiser is to be compensated at least $5,000 by the organization

	(i) Name and address of individual or entity (fundraiser)	**(ii)** Activity	**(iii)** Did fundraiser have custody or control of contributions? Yes	No	**(iv)** Gross receipts from activity	**(v)** Amount paid to (or retained by) fundraiser listed in col **(i)**	**(vi)** Amount paid to (or retained by) organization
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							
Total			▶				

3 List all states in which the organization is registered or licensed to solicit contributions or has been notified it is exempt from registration or licensing

Part II **Fundraising Events.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than $15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than $5,000.

Revenue / Direct Expenses		(a) Event #1 Trap Shoot (event type)	(b) Event #2 Chocolate, Wine & Jazz (event type)	(c) Other events 4 (total number)	(d) Total events (add col (a) through col (c))
Revenue	1 Gross receipts	29,149	27,060	51,887	108,096
	2 Less Contributions	0	0	0	0
	3 Gross income (line 1 minus line 2)	29,149	27,060	51,887	108,096
Direct Expenses	4 Cash prizes	0	0	1,349	1,349
	5 Noncash prizes	75	658	3,271	4,004
	6 Rent/facility costs	1,920	6,659	4,895	13,474
	7 Food and beverages	978	552	1,535	3,065
	8 Entertainment	0	2,900	0	2,900
	9 Other direct expenses	398	1,635	1,122	3,155
	10 Direct expense summary Add lines 4 through 9 in column (d) ▶				27,947
	11 Net income summary Subtract line 10 from line 3, column (d) ▶				80,149

Part III **Gaming.**
Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than $15,000 on Form 990-EZ, line 6a.

Revenue / Direct Expenses		(a) Bingo	(b) Pull tabs/Instant bingo/progressive bingo	(c) Other gaming	(d) Total gaming (add col (a) through col (c))
Revenue	1 Gross revenue				
Direct Expenses	2 Cash prizes				
	3 Noncash prizes				
	4 Rent/facility costs				
	5 Other direct expenses				
	6 Volunteer labor	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	☐ Yes ____% ☐ No	
	7 Direct expense summary Add lines 2 through 5 in column (d) ▶				
	8 Net gaming income summary Subtract line 7 from line 1, column (d) ▶				

9 Enter the state(s) in which the organization conducts gaming activities _____

a Is the organization licensed to conduct gaming activities in each of these states? ☐ Yes ☐ No

b If "No," explain _____

10a Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year? ☐ Yes ☐ No

b If "Yes," explain _____

11 Does the organization conduct gaming activities with nonmembers? ☐ Yes ☐ No

12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No

13 Indicate the percentage of gaming activity conducted in

a The organization's facility	**13a**	%
b An outside facility	**13b**	%

14 Enter the name and address of the person who prepares the organization's gaming/special events books and records

Name ▶ .....

Address ▶ .....

15a Does the organization have a contract with a third party from whom the organization receives gaming revenue? ☐ Yes ☐ No

b If "Yes," enter the amount of gaming revenue received by the organization ▶ $ _____ and the amount of gaming revenue retained by the third party ▶ $ _____

c If "Yes," enter name and address of the third party

Name ▶ .....

Address ▶ .....

16 Gaming manager information

Name ▶ .....

Gaming manager compensation ▶ $.....

Description of services provided ▶ .....

☐ Director/officer ☐ Employee ☐ Independent contractor

17 Mandatory distributions

a Is the organization required under state law to make charitable distributions from the gaming proceeds to retain the state gaming license? ☐ Yes ☐ No

b Enter the amount of distributions required under state law distributed to other exempt organizations or spent in the organization's own exempt activities during the tax year ▶ $

Part IV **Supplemental Information.** Provide the explanations required by Part I, line 2b, columns (iii) and (v); and Part III, lines 9, 9b, 10b, 15b, 15c, 16, and 17b, as applicable. Also complete this part to provide any additional information (see instructions).

Return Reference	Explanation

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Schedule I (Form 990)

Department of the Treasury
Internal Revenue Service

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

Part I General Information on Grants and Assistance

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

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II Grants and Other Assistance to Domestic Organizations and Domestic Governments.

Complete if the organization answered "Yes" on Form 990, Part IV, line 21, for any recipient that received more than $5,000 Part II can be duplicated if additional space is needed

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
See Additional Data Table							

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table . . . . . ▶ 246

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

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

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
(1) 100 Neediest Cases Holiday Assistance Program	12358	1,371,455	0		
(2) Energy Assistance Program	6985	1,941,624	0		
(3) Emergency Assistance Payments on behalf of Individuals to Landlords, Mortgage Companies, Utilities,	1816	213,231	0		
(4) Individual Development Accounts	104	187,924	0		

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
Schedule I, Part I, Line 1	The organization completed Part IV as required listing organizations that received support The purpose of the individual grants is included When organizations received more than one grant the multiple purposes are divided by a semicolon in the response Abbreviations are used through the "Purpose of Grant" section in the interest of space Common abbreviations used are listed below ALLOC=Allocation, CG=Consolidated Giving, CE=Community Enhancement, DSGN=Designation, EDUC=Education, SVCS=Services, VIOL=Violence, STL=St Louis Division, SWID=Southwest Illinois Division, TCA=Tri-Cities Illinois Division, TPP=3rd Party Processed,
Schedule I, Part I, Line 2	Approximately 50 dedicated community volunteers familiar with community needs are members of the United Way Community Investment Committee (CIC) Leadership from this committee are members of the Board and report committee activities directly to the Board Other CIC members serve as panel chairs and oversee approximately 350 other volunteers who visit each United Way member agency annually Agencies adhere to Quality Standards developed by the volunteers and submit reports, at least annually, about their programs, governance, finance and administration to the volunteers Program information includes description, goals, measurement tools, outcomes, and analysis of results Panels review agencies based on all the core competencies from the Quality Standards As a group using guidelines they developed, these volunteers allocate to member agencies The CIC also oversees one-time funding reviewing grant requests and determining what to fund with dollars available United Way employees provide appropriate staffing to support the entire process Direct assistance is provided to individuals in a variety of ways The vast majority of such assistance is provided through the 100 Neediest Cases program, through the United Way energy assistance program (including the Ameren Missouri Dollar More and Laclede Gas Dollar Help programs) and through the federal Individual Development Accounts program In all cases above participating agencies (about 100 of them between all three programs) qualify their clients and submit requests for assistance to the United Way For 100 Neediest Cases, United Way volunteers review the cases and make allocations Anonymous cases are sent to individuals to adopt and to provide further assistance For energy assistance, allocations are made to agencies who then allocate it to clients following their own internal guidelines that have been preapproved by United Way United Way then pays utilities for all assistance granted on behalf of individuals in that program IDAs participants are case managed by participating agencies United Way pays various vendors who help individuals in this asset accumulation anti-poverty program A smaller amount of direct assistance is provided by United Way staff members for individuals who request help Assistance is generally limited to $300 and most often paid to landlords, mortgage companies, utilities and such

Additional Data

Software ID: 15000352
Software Version: v1.00
EIN: 43-0714167
Name: UNITED WAY OF GREATER ST LOUIS INC

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Alcoholic Rehabilitation Community Home 1313 21st Street Granite City, IL 62040	23-7043276	Section 501(c)(3)	75,761				TCA ALLOC - Behavioral Health, SWID ALLOC - Behavioral Health, IL BRIDGE GRANT-Behavioral Health, TPP DSGN-Behavioral Health
Alliance for Childhood Education 22052 West 66th Street Ste 200 Shawnee, KS 66226	27-3553781	Section 501(c)(3)	35,000				CG DSGN-EC Educ
Almost Home Inc 3200 St Vincent Avenue Saint Louis, MO 63104	43-1645686	Section 501(c)(3)	92,443				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Alternative Opportunities Inc 7020 Chippewa Street Saint Louis, MO 63119	43-1179041	Section 501(c)(3)	56,707				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Alzheimer's Disease and Related Disorders Association St Louis Chapter 9370 Olive Boulevard Saint Louis, MO 63132	43-1237069	Section 501(c)(3)	269,356				CONTRACT AWARD-Physical Health, TPP DSGN-Physical Health, CG DSGN-Physical Health, ADT DSGN-Physical Health
American Cancer Society 4207 Lindell Boulevard Saint Louis, MO 63108	74-1185665	Section 501(c)(3)	1,293,549				CONTRACT AWARD-Physical Health, TPP DSGN-Physical Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
American Diabetes Association 425 South Woods Mill Road Suite 110 Town And Country, MO 63017	13-1623888	Section 501(c)(3)	115,107				STL ALLOC -Physical Health, TPP DSGN-Physical Health
American Heart Association - Greater St Louis Chapter 460 North Lindbergh Boulevard Creve Coeur, MO 63141	13-5613797	Section 501(c)(3)	904,597				CONTRACT AWARD-Physical Health, TPP DSGN-Physical Health
American Lung Association of the Upper Midwest Inc 7745 Carondelet Suite 305 Saint Louis, MO 63105	43-0662525	Section 501(c)(3)	421,475				CONTRACT AWARD-Physical Health, TPP DSGN-Physical Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
American Red Cross of Central and Southern Illinois Region 1045 Outer Park Dr 62704 Springfield, IL 62704	37-0661176	Section 501(c)(3)	162,956				SWID ALLOC -Disaster Response, SWID ALLOC -Disaster Response, IL BRIDGE GRANT-Disaster Response, TPP DSGN-Disaster Response
American Red Cross of Eastern Missouri 10195 Corporate Square Drive Saint Louis, MO 63132	43-0652612	Section 501(c)(3)	3,751,961				STL ALLOC -Disaster Response, DISASTER/FLOOD RELIEF-Disaster Response, TCA ALLOC -Disaster Response, CG DSGN-Disaster Response, IL BRIDGE GRANT-Disaster Response, TPP DSGN-Disaster Response
Americorps St Louis 1315 Ann Avenue Saint Louis, MO 63104	43-1873533	Section 501(c)(3)	50,000				DISASTER/FLOOD RELIEF-Disaster Response

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Amyotrophic Lateral Sclerosis Association St Louis Regional Chapter 2258 Weldon Parkway Saint Louis, MO 63146	43-1458163	Section 501(c)(3)	191,834				STL ALLOC -Physical Health,TPP DSGN-Physical Health, CG DSGN-Physical Health
Annie Malone Children and Family Service Center 2612 Annie Malone Drive Saint Louis, MO 63113	43-0652652	Section 501(c)(3)	278,893				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare
Arthritis Foundation Heartland Region Inc 9433 Olive Boulevard Suite 100 Saint Louis, MO 63132	58-1341679	Section 501(c)(3)	80,609				STL ALLOC -Physical Health,CG DSGN-Physical Health, TPP DSGN-Physical Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Asthma and Allergy Foundation of America St Louis Chapter 1500 South Big Bend Boulevard Suite 1 South Saint Louis, MO 63117	43-1484316	Section 501(c)(3)	143,247				STL ALLOC -Physical Health,CG DSGN-Physical Health, TPP DSGN-Physical Health
Bellwether Education Partners Inc 517 Boston Post Road Unit 171 Sudbury, MA 01776	26-1914515	Section 501(c)(3)	10,000				CG DSGN-Educ
Best Buddies Missouri 10425 old Olive Street Lower Level A Creve Coeur, MO 63141	52-1614576	Section 501(c)(3)	7,000				CG DSGN-Disabilities, CG DSGN-Disabilities

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Better Family Life Inc 5415 Page Boulevard Saint Louis, MO 63112	43-1346617	Section 501(c)(3)	211,000				CG DSGN-Neighborhood Svcs, CG DSGN-Workforce Development
Beyond Housing 4156 Manchester Avenue Saint Louis, MO 63110	51-0179471	Section 501(c)(3)	100,000				SEIMER FDTN GRANT-Educ
Beyond Housing 4156 Manchester Avenue Saint Louis, MO 63110	51-0179471	Section 501(c)(3)	460,000				CG DSGN-Place-Based Collaborations

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Big Brothers Big Sisters of Eastern Missouri 501 North Grand Avenue Saint Louis, MO 63103	43-0669085	Section 501(c)(3)	503,261				STL ALLOC -Youth Development, CG DSGN-Youth Development, TPP DSGN-Youth Development, UW FERGUSON GRANT-Youth Development
Big Brothers Big Sisters of Southwestern Illinois 2726 Frank Scott Parkway West Belleville, IL 62223	37-1095468	Section 501(c)(3)	90,785				STL ALLOC -Youth Development, TCA ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development
Boy Scouts of America - Abraham Lincoln Council 5231 South Sixth Street Road Springfield, IL 62703	37-0661493	Section 501(c)(3)	7,553				SWID ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Boy Scouts of America Inc Greater St Louis Area Council 4568 West Pine Boulevard Saint Louis, MO 63108	43-0652676	Section 501(c)(3)	1,520,312				CONTRACT AWARD-Youth Development, TPP DSGN-Youth Development
Boys & Girls Club of Alton Inc 115 Jefferson Avenue Alton, IL 62002	36-4142577	Section 501(c)(3)	123,673				SWID ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development
Boys & Girls Club of Bethalto Inc 324 East Central Street Bethalto, IL 62010	37-0911129	Section 501(c)(3)	76,520				SWID ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Boys & Girls Clubs of Greater St Louis Inc 2901 North Grand Boulevard Saint Louis, MO 63107	43-6061693	Section 501(c)(3)	980,312				STL ALLOC -Youth Development, NORTH COUNTY COLLAB - Youth Development, CG DSGN-Youth Development, TPP DSGN-Youth Development
Boys & Girls Clubs of St Charles County 1211 Lindenwood Avenue Saint Charles, MO 63301	43-0714369	Section 501(c)(3)	158,578				STL ALLOC -Youth Development,CG DSGN-Youth Development, TPP DSGN-Youth Development
Bridge Outreach 1610 Olive St Saint Louis, MO 63103	26-2002068	Section 501(c)(3)	20,000				STL CMNTY RESP - Basic Needs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Bridgeway Behavioral Health Inc 118 North Second Street Suite 200 Saint Charles, MO 63301	43-1150435	Section 501(c)(3)	371,836				STL ALLOC -Behavioral Health,OTHER FUNDING-Behavioral Health, TPP DSGN-Behavioral Health
Calhoun County Council for Senior Citizens 203 Main Street Hardin, IL 62047	68-0494806	Section 501(c)(3)	8,060				SWID ALLOC -Senior Svcs,TPP DSGN-Senior Svcs, IL BRIDGE GRANT-Senior Svcs
Call for Help Inc 9400 Lebanon Road East Saint Louis, IL 62203	37-1022829	Section 501(c)(3)	198,754				STL ALLOC -Neighborhood Svcs,IL BRIDGE GRANT-Neighborhood Svcs, TPP DSGN-Neighborhood Svcs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Cardinal Ritter Senior Services 7601 Watson Road Saint Louis, MO 63119	43-0811604	Section 501(c)(3)	377,351				STL ALLOC -Senior Svcs,TPP DSGN-Senior Svcs, OTHER FUNDING-Senior Svcs
Care and Counseling Inc 12141 Ladue Road Saint Louis, MO 63141	43-0914350	Section 501(c)(3)	25,000				CG DSGN-Behavioral Health
Caritas Family Solutions 8601 West Main Street Suite 201 Belleville, IL 62223	37-0661500	Section 501(c)(3)	113,912				STL ALLOC - Behavioral Health, IL BRIDGE GRANT-Behavioral Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Casa de Salud 3200 Choteau Avenue Saint Louis, MO 63103	27-0732049	Section 501(c)(3)	25,000				CG DSGN-Physical Health
CASA of Southwestern Illinois 1801 North Belt West Belleville, IL 62226	37-1233728	Section 501(c)(3)	172,385				STL ALLOC -Child Welfare,IL BRIDGE GRANT-Child Welfare, TPP DSGN-Child Welfare
Catholic Charities of Madison County 3512 McArthur Boulevard Alton, IL 62002	37-0661499	Section 501(c)(3)	407,365				TCA ALLOC -Basic Needs, SWID ALLOC -Basic Needs, IL BRIDGE GRANT-Basic Needs, TPP DSGN-Basic Needs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Catholic Charities of St Louis 4445 Lindell Boulevard Saint Louis, MO 63108	43-0653270	Section 501(c)(3)	388,081				STL ALLOC -Basic Needs,TPP DSGN-Basic Needs, CG DSGN-Basic Needs
Catholic Family Services Inc 9200 Watson Road G-101 Saint Louis, MO 63126	43-1658498	Section 501(c)(3)	435,641				STL ALLOC -Behavioral Health, TPP DSGN-Behavioral Health
Center for Hearing & Speech 9835 Manchester Road Saint Louis, MO 63119	43-0652678	Section 501(c)(3)	419,193				STL ALLOC -Disabilities,CG DSGN-Disabilities, TPP DSGN-Disabilities

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Center for Women in Transition 7525 South Broadway Saint Louis, MO 63111	43-1799627	Section 501(c)(3)	51,246				STL ALLOC -Financial Stability, TPP DSGN-Financial Stability
Central Institute for the Deaf 825 South Taylor Avenue Saint Louis, MO 63110	43-0662456	Section 501(c)(3)	250,631				STL ALLOC - Disabilities, CG DSGN-Disabilities, CG DSGN-Disabilities, TPP DSGN-Disabilities
CFED 1 to 1 Fund - STL College Kids 1200 Market Street Room 220 Saint Louis, MO 63103	52-1141804	Section 501(c)(3)	10,000				WFA COLLEGE SVGS AWARD-Financial Stability

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
CHADS Coalition for Mental Health PO Box 510528 Saint Louis, MO 63151	20-2172260	Section 501(c)(3)	25,000				UW FERGUSON GRANT-Youth Development
Child Center Marygrove 2705 Mullanphy Lane Florissant, MO 63031	43-1024440	Section 501(c)(3)	438,517				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare
Children's Home & Aid 2133 Johnson Road Suite 101 Granite City, IL 62040	36-2167743	Section 501(c)(3)	508,081				STL ALLOC -Child Welfare, SWID ALLOC -Child Welfare, TCA ALLOC -Child Welfare, IL BRIDGE GRANT-Child Welfare, TPP DSGN-Child Welfare

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Children's Home Society of Missouri 1167 Corporate Lake Drive Saint Louis, MO 63132	43-0652622	Section 501(c)(3)	215,161				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare
Christian Activity Center Inc 540 North Sixth Street East Saint Louis, IL 62201	36-4182760	Section 501(c)(3)	20,527				GSK EAST SIDE THRIVES-Place-Based Collaborations
Circus Harmony 4120 Parker Road Florissant, MO 63033	43-1918399	Section 501(c)(3)	15,000				CG DSGN-Arts & Culture

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City Academy Inc 4175 North Kingshighway Boulevard Saint Louis, MO 63115	31-1619379	Section 501(c)(3)	12,500				WFA COLLEGE SVGS AWARD-Financial Stability, CG DSGN-Educ
City Garden Montessori School 1618 Tower Grove Avenue Saint Louis, MO 63110	43-1671014	Section 501(c)(3)	11,000				WFA COLLEGE SVGS AWARD-Financial Stability, CG DSGN-Educ
College Bound 110 North Jefferson Avenue Saint Louis, MO 63103	20-4768985	Section 501(c)(3)	77,928				STL ALLOC -Educ, CG DSGN-Educ, CG DSGN-Educ, TPP DSGN-Educ

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Collinsville Area Meals On Wheels 804 Claremont Court Collinsville,IL 62234	37-1031182	Section 501(c)(3)	8,685				SWID ALLOC -Basic Needs,TPP DSGN-Basic Needs, IL BRIDGE GRANT-Basic Needs
Community Care Center Inc 1818 Cleveland Avenue Granite City,IL 62040	37-0752347	Section 501(c)(3)	135,181				TCA ALLOC -Basic Needs,IL BRIDGE GRANT-Basic Needs, TCA CMNTY RESP -Basic Needs
Community Council of St Charles County 427 Spencer Road Saint Peters,MO 63367	43-6051722	Section 501(c)(3)	99,825				STL ALLOC -Neighborhood Svcs, TPP DSGN-Neighborhood Svcs

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Community Link 1665 North Fourth Street Breese, IL 62230	37-0955971	Section 501(c)(3)	242,040				STL ALLOC - Disabilities,IL BRIDGE GRANT-Disabilities, TPP DSGN-Disabilities
Community Living Inc 1040 St Peters Howell Road Saint Peters, MO 63376	43-1129770	Section 501(c)(3)	214,794				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Comtrea Inc 227 Main Street Festus, MO 63028	36-2800788	Section 501(c)(3)	71,492				STL ALLOC -Behavioral Health

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Concordance Academy of Leadership 211 North Broadway Suite 1300 Saint Louis, MO 63102	43-1416762	Section 501(c)(3)	447,000				CG DSGN-Workforce Development, CG DSGN-Workforce Development
Coordinated Youth and Human Services 2016 Madison Avenue Granite City, IL 62040	37-0662520	Section 501(c)(3)	199,551				TCA ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development
Cornerstone Center for Early Learning Inc 3901 Russell Boulevard Saint Louis, MO 63110	43-0923158	Section 501(c)(3)	309,642				STL ALLOC -EC Educ,STL DAY CARE-EC Educ, TPP DSGN-EC Educ

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Crider Health Center Inc 1032 Crosswinds Court Wentzville, MO 63385	43-1160049	Section 501(c)(3)	464,149				STL ALLOC - Behavioral Health, TPP DSGN-Behavioral Health
Crime Victim Advocacy Center of St Louis 539 North Grand Boulevard Suite 400 Saint Louis, MO 63103	43-1025252	Section 501(c)(3)	70,496				STL ALLOC -Legal Svcs, TPP DSGN-Legal Svcs
Crisis Food Center Inc 21 East 6th Street Alton, IL 62002	37-1054276	Section 501(c)(3)	81,255				SWID ALLOC -Basic Needs, IL BRIDGE GRANT-Basic Needs, ADT DSGN-Basic Needs, CG DSGN-Basic Needs, TPP DSGN-Basic Needs

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Delta Gamma Center for Children with Visual Impairments 1750 South Big Bend Boulevard Saint Louis, MO 63117	43-0725282	Section 501(c)(3)	73,621				STL ALLOC - Disabilities,CG DSGN-Disabilities, TPP DSGN-Disabilities
Didtechnology Inc 244 Madison Avenue Suite 306 New York, NY 10016	47-2669712	Section 501(c)(3)	10,000				CG DSGN-Youth Development
Dolly Parton Imagination Library 2700 Dollywood Parks Blvd Pigeon Forge, TN 37863	62-1348105	Section 501(c)(3)	50,222				CMNTY INVS GRANT-EC Educ

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East St Louis Park District 2950 Caseyville Avenue East Saint Louis, IL 62202	11-3836078	Section 501(c)(3)	40,000				UW FERGUSON GRANT-Youth Development
Easter Seals Midwest 13545 Barrett Parkway Drive Suite 300 Ballwin, MO 63021	43-0827160	Section 501(c)(3)	203,186				STL ALLOC - Disabilities,TPP DSGN-Disabilities, CG DSGN-Disabilities
Eisenhower Fellowship 250 South 16th Street Philadelphia, PA 19102	23-1505095	Section 501(c)(3)	25,000				CG DSGN-Educ

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Emmaus Homes Inc 3731 Mueller Road Saint Charles, MO 63301	43-0653309	Section 501(c)(3)	201,007				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Employment Connection 2838 Market Street Saint Louis, MO 63103	43-1106386	Section 501(c)(3)	489,350				STL ALLOC -Workforce Development, TPP DSGN-Workforce Development
Empower Missouri 606 East Capitol Avenue Jefferson City, MO 65101	44-0547548	Section 501(c)(3)	21,747				STL ALLOC - Neighborhood Svcs

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EnVest Foundation 343 Gold Street Apt 3310 Brooklyn, NY 11201	20-2660071	Section 501(c)(3)	6,000				CG DSGN-Youth Development
Epilepsy Foundation of Missouri and Kansas 4406 Saint Vincent Avenue Saint Louis, MO 63119	43-6048869	Section 501(c)(3)	73,333				STL ALLOC -Physical Health, TPP DSGN-Physical Health
Epworth Children and Family Services Inc 110 North Elm Avenue Saint Louis, MO 63119	43-1069741	Section 501(c)(3)	809,435				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare

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Faith in Action Edwardsville - Glen Carbon PO Box 255 903 North 2nd Street Edwardsville, IL 62025	36-4535817	Section 501(c)(3)	12,948				SWID ALLOC -Senior Svcs, IL BRIDGE GRANT-Senior Svcs
Family Resource Center 3309 South Kingshighway Boulevard Saint Louis, MO 63139	43-1071300	Section 501(c)(3)	313,690				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare
Fathers' Support Center St Louis 4411 North Newstead Avenue Saint Louis, MO 63115	43-1804267	Section 501(c)(3)	126,775				STL ALLOC -Workforce Development,TPP DSGN-Workforce Development, CG DSGN-Workforce Development

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Ferguson Florissant School District Early Education 1005 Waterford Drive Florissant, MO 63033	00-0000003	Section 501(c)(3)	216,788				CG DSGN-EC Educ, NORTH COUNTY COLLAB -Youth Development
Forum for Youth Investment 7064 Eastern Avenue NW Washington, DC 20012	52-2242472	Section 501(c)(3)	23,613				GSK EAST SIDE THRIVES-Place-Based Collaborations
Foster and Adoptive Care Coalition 1750 South Brentwood Boulevard Suite 210 Brentwood, MO 63144	43-1570225	Section 501(c)(3)	269,900				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare

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Franklin County Area United Way 301 West Front Washington,MO 63090	43-1124878	Section 501(c)(3)	25,000				DISASTER/FLOOD RELIEF-Disaster Response
Gateway EITC Community Coalition c/o United Way of Greater St Louis 910 North 11th Street Saint Louis,MO 63101	20-0323464	Section 501(c)(3)	34,474				STL CMNTY RESP - Financial Stability,UW FERGUSON GRANT-Youth Development, CMNTY INVS GRANT-Financial Stability
Gateway Region YMCA 326 South 21st Street Suite 400 Saint Louis,MO 63103	43-0653618	Section 501(c)(3)	1,841,244				STL ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development, STL DAY CARE-EC Educ, NORTH COUNTY COLLAB -Youth Development, TPP DSGN-Youth Development

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Gateway Region YMCA Tri-City Area Branch 451 Niedringhaus Avenue Granite City, IL 62040	37-0673566	Section 501(c)(3)	60,576				TCA ALLOC -Youth Development
Gene Slay's Boys' Club of St Louis Inc 2524 South 11th Street Saint Louis, MO 63104	43-0653261	Section 501(c)(3)	245,234				STL ALLOC -Youth Development, TPP DSGN-Youth Development
Girl Scouts of Central Illinois 3020 Baker Drive Springfield, IL 62703	37-0681529	Section 501(c)(3)	9,078				SWID ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development

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Girl Scouts of Eastern Missouri 2300 Ball Drive Saint Louis, MO 63146	43-0662471	Section 501(c)(3)	555,317				STL ALLOC -Youth Development,CG DSGN-Youth Development, TPP DSGN-Youth Development
Girl Scouts of Southern Illinois Four Ginger Creek Parkway Glen Carbon, IL 62034	37-0811488	Section 501(c)(3)	282,599				STL ALLOC -Youth Development, SWID ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development, TCA ALLOC -Youth Development, CG DSGN-Youth Development, TPP DSGN-Youth Development
Girls Incorporated of St Louis 3801 Nelson Drive Saint Louis, MO 63121	43-1321294	Section 501(c)(3)	426,589				STL ALLOC -Youth Development, NORTH COUNTY COLLAB - Youth Development, CG DSGN-Youth Development, TPP DSGN-Youth Development

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Glen-Ed Pantry 125 Fifth Avenue Edwardsville, IL 62025	37-1173814	Section 501(c)(3)	40,782				SWID ALLOC -Basic Needs,IL BRIDGE GRANT-Basic Needs, TPP DSGN-Basic Needs
Good Samaritan House of Granite City Inc 1825 Delmar Avenue - Rear Granite City, IL 62040	36-4177264	Section 501(c)(3)	71,293				TCA ALLOC -Basic Needs,TCA CMNTY RESP -Basic Needs, IL BRIDGE GRANT-Basic Needs
Good Shepherd Children & Family Services 1340 Partridge Avenue Saint Louis, MO 63130	43-1297933	Section 501(c)(3)	635,797				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare

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Grace Hill Settlement House 2600 Hadley Street Saint Louis, MO 63106	23-7216273	Section 501(c)(3)	966,732				STL ALLOC - Neighborhood Svcs, CG DSGN-Neighborhood Svcs, SEIMER FDTN GRANT-Educ, TPP DSGN-Neighborhood Svcs
Great Circle 330 North Gore Avenue Saint Louis, MO 63119	43-0653305	Section 501(c)(3)	707,387				STL ALLOC -Child Welfare, CG DSGN-Child Welfare, CG DSGN-Child Welfare, TPP DSGN-Child Welfare
Greater East St Louis Community Fund 518 Missouri Avenue East Saint Louis, IL 62201	37-1274971	Section 501(c)(3)	40,000				GSK EAST SIDE THRIVES-Place-Based Collaborations

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GSLCF - STL Youth Jobs GSLCF 2 Oak Knoll Park Saint Louis, MO 63105	43-1617558	Section 501(c)(3)	287,500				CG DSGN-Youth Development, CG DSGN-Youth Development
Guardian Angel Settlement Association 1127 North Vandeventer Avenue Saint Louis, MO 63113	43-0652636	Section 501(c)(3)	392,022				STL ALLOC - Neighborhood Svcs,STL DAY CARE-EC Educ, TPP DSGN-Neighborhood Svcs
Harris House Foundation 8315 South Broadway Saint Louis, MO 63111	43-1235232	Section 501(c)(3)	274,137				STL ALLOC - Behavioral Health, TPP DSGN-Behavioral Health

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Higher Heights Leadership Fund 147 Prince Street Brooklyn, NY 11201	46-3554404	Section 501(c)(3)	10,000				CG DSGN-Youth Development
Highland Area Christian Service Ministry 900 Chestnut Street Highland, IL 62249	36-4153849	Section 501(c)(3)	47,288				SWID ALLOC -Basic Needs, IL BRIDGE GRANT-Basic Needs
Human Support Services 988 North Illinois Route 3 Waterloo, IL 62298	37-0968305	Section 501(c)(3)	260,804				STL ALLOC - Disabilities,IL BRIDGE GRANT-Disabilities, TPP DSGN-Disabilities

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Humanitri 1447 E Grand Saint Louis, MO 63107	43-1470568	Section 501(c)(3)	139,915				STL ALLOC -Basic Needs
Illinois Center for Autism 548 South Ruby Lane Fairview Heights, IL 62208	37-1023452	Section 501(c)(3)	244,062				STL ALLOC - Disabilities, SWID ALLOC -Disabilities, IL BRIDGE GRANT-Disabilities, TCA ALLOC -Disabilities, TPP DSGN-Disabilities, CG DSGN-Disabilities
IMPACT CIL 2735 East Broadway Alton, IL 62002	37-1183032	Section 501(c)(3)	43,436				SWID ALLOC - Disabilities, IL BRIDGE GRANT-Disabilities

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International Institute of Metropolitan St Louis 3401 Arsenal Street Saint Louis, MO 63118	43-0652640	Section 501(c)(3)	355,976				STL ALLOC -Financial Stability, CG DSGN-Workforce Development, CG DSGN-Financial Stability, TPP DSGN-Financial Stability
Jackie Joyner Kersee Foundation 101 Jackie Joyner-Kersee Circle East Saint Louis, IL 62204	37-1347709	Section 501(c)(3)	53,256				GSK EAST SIDE THRIVES-Place-Based Collaborations, CG DSGN-Youth Development
JDRF-Greater Missouri & Southern Illinois 50 Crestwood Executive Center Suite 401 Saint Louis, MO 63126	23-1907729	Section 501(c)(3)	96,366				STL ALLOC -Physical Health,TPP DSGN-Physical Health, CG DSGN-Physical Health

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Jefferson County COAD 3875 Plass Road Suite A Festus, MO 63028	43-1699639	Section 501(c)(3)	25,000				DISASTER/FLOOD RELIEF-Disaster Response
Jewish Community Center Two Millstone Campus Drive Saint Louis, MO 63146	43-0681477	Section 501(c)(3)	972,939				STL ALLOC -Youth Development,STL DAY CARE-EC Educ, TPP DSGN-Youth Development
Jewish Family and Children's Service 10950 Schuetz Road Saint Louis, MO 63146	43-0790330	Section 501(c)(3)	772,854				STL ALLOC -Behavioral Health, TPP DSGN-Behavioral Health

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Jewish Federation of St Louis 12 Millstone Campus Drive Saint Louis, MO 63146	43-0652643	Section 501(c)(3)	255,422				STL ALLOC - Neighborhood Svcs,CG DSGN-Neighborhood Svcs, TPP DSGN-Neighborhood Svcs
Joe W Roberts Youth Club P O Box 196 Madison, IL 62060	37-1208098	Section 501(c)(3)	40,626				TCA ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, CG DSGN-Youth Development
Junior Service Club of St Clair County PO Box 23114 Belleville, IL 62223	37-6036545	Section 501(c)(3)	10,000				CG DSGN-Youth Development

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Kids In The Middle Inc 2650 South Hanley Road Suite 150 Saint Louis, MO 63144	43-1192510	Section 501(c)(3)	242,601				STL ALLOC -Behavioral Health, TPP DSGN-Behavioral Health
Kingdom House 1321 South 11th Street Saint Louis, MO 63104	43-0652648	Section 501(c)(3)	617,559				STL ALLOC - Neighborhood Svcs, STL DAY CARE-EC Educ, TPP DSGN-Neighborhood Svcs, CG DSGN-Neighborhood Svcs
KIPP St Louis 2647 Ohio Avenue Saint Louis, MO 63118	01-0916759	Section 501(c)(3)	110,000				CG DSGN-Educ, WFA COLLEGE SVGS AWARD-Financial Stability

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Kreative Kids Learning Center 121 West Elm Street Alton, IL 62002	37-0920860	Section 501(c)(3)	30,064				SWID ALLOC -EC Educ,IL BRIDGE GRANT-EC Educ, TPP DSGN-EC Educ
Land of Lincoln Legal Assistance Foundation Inc 8787 State Street Suite 201 East Saint Louis, IL 62203	37-0958448	Section 501(c)(3)	409,560				STL ALLOC -Legal Svcs, SWID ALLOC -Legal Svcs, IL BRIDGE GRANT-Legal Svcs, TCA ALLOC -Legal Svcs
Legal Services of Eastern Missouri Inc 4232 Forest Park Avenue Saint Louis, MO 63108	43-0816805	Section 501(c)(3)	643,427				STL ALLOC -Legal Svcs, TPP DSGN-Legal Svcs

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Lemay Child and Family Center 9828 South Broadway Saint Louis, MO 63125	43-1061831	Section 501(c)(3)	193,938				STL ALLOC -EC Educ,CG DSGN-EC Educ, TPP DSGN-EC Educ
Lessie Bates Davis Neighborhood House Inc 1200 North 13th Street East Saint Louis, IL 62205	37-0662522	Section 501(c)(3)	485,916				STL ALLOC - Neighborhood Svcs, STL DAY CARE-EC Educ, GSK EAST SIDE THRIVES-Place-Based Collaborations, IL BRIDGE GRANT-Neighborhood Svcs, OTHER FUNDING-Neighborhood Svcs, TPP DSGN-Neighborhood Svcs
Leu Civic Center Inc 213 North Market Street Mascoutah, IL 62258	37-1056779	Section 501(c)(3)	176,463				STL ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-EC Educ

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Lewis & Clark Community College 5800 Godfrey Road Godfrey, IL 62035	00-0000002	Section 501(c)(3)	16,500				CG DSGN-Educ
Lewis & Clark Council Inc Boy Scouts of America 335 West Main Street Belleville, IL 62220	37-0863661	Section 501(c)(3)	469,448				STL ALLOC -Youth Development, SWID ALLOC -Youth Development, TCA ALLOC -Youth Development, IL BRIDGE GRANT-Youth Development, CG DSGN-Youth Development, CG DSGN-Youth Development
LifeBridge Partnership 1187 Corporate Lake Drive Suite 100 Saint Louis, MO 63132	43-0692190	Section 501(c)(3)	142,282				STL ALLOC - Disabilities,CG DSGN-Disabilities, TPP DSGN-Disabilities

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Lincoln County Council on Aging 1380 Boone Street Troy,MO 63379	43-1136188	Section 501(c)(3)	158,502				STL ALLOC -Senior Svcs, TPP DSGN-Senior Svcs
Loyola Academy of St Louis 3851 Washington Boulevard Saint Louis,MO 63108	43-1859076	Section 501(c)(3)	11,750				WFA COLLEGE SVGS AWARD-Financial Stability, CG DSGN-Educ
Lupus Foundation of America Heartland Chapter Inc 4640 Shenandoah Avenue Saint Louis,MO 63110	51-0192362	Section 501(c)(3)	59,597				STL ALLOC -Physical Health,CG DSGN-Physical Health, TPP DSGN-Physical Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Lutheran Child and Family Services of Illinois 317 West Main Street Belleville, IL 62220	36-2167778	Section 501(c)(3)	122,766				STL ALLOC -Child Welfare, SWID ALLOC -Child Welfare, SWID CMNTY RESP -Child Welfare, IL BRIDGE GRANT-Child Welfare, TPP DSGN-Child Welfare
Lutheran Elementary School's Association 3558 South Jefferson Avenue Saint Louis, MO 63118	00-0000006	Section 501(c)(3)	20,000				WFA COLLEGE SVGS AWARD-Financial Stability
Lutheran Family and Children's Services of Missouri 9666 Olive Boulevard Suite 400 Saint Louis, MO 63132	43-0652650	Section 501(c)(3)	787,906				STL ALLOC -Child Welfare, STL DAY CARE-EC Educ, WFA COLLEGE SVGS AWARD-Financial Stability, TPP DSGN-Child Welfare

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

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Lutheran Senior Services 1150 Hanley Industrial Court Saint Louis, MO 63144	43-0654862	Section 501(c)(3)	254,045				STL ALLOC -Senior Svcs, TPP DSGN-Senior Svcs
Macoupin Center for the Developmentally Disabled 700 East Elm Street Carlinville, IL 62626	37-6052282	Section 501(c)(3)	62,037				SWID ALLOC - Disabilities, IL BRIDGE GRANT-Disabilities
Madison County Urban League Inc 408 East Broadway Alton, IL 62002	37-1028276	Section 501(c)(3)	248,934				SWID ALLOC -Basic Needs,TCA ALLOC - Basic Needs, IL BRIDGE GRANT-Basic Needs

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

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Main Street Community Center Inc 1003 North Main Street Edwardsville, IL 62025	37-0989006	Section 501(c)(3)	19,695				SWID ALLOC -Senior Svcs,SWID CMNTY RESP -Senior Svcs, IL BRIDGE GRANT-Senior Svcs
Mary Ryder Home 4361 Olive Street Saint Louis, MO 63108	43-0758611	Section 501(c)(3)	617,787				STL ALLOC -Senior Svcs,TPP DSGN-Senior Svcs, CG DSGN-Senior Svcs
Mathews-Dickey Boys & Girls Club 4245 North Kingshighway Boulevard Saint Louis, MO 63115	43-6060717	Section 501(c)(3)	390,499				STL ALLOC -Youth Development,TPP DSGN-Youth Development, CG DSGN-Youth Development

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Mental Health America of Eastern Missouri 1905 South Grand Boulevard Saint Louis, MO 63104	43-0685341	Section 501(c)(3)	199,636				STL ALLOC -Behavioral Health
Mercy Health Foundation St Louis 615 South New Ballas Road Saint Louis, MO 63141	56-2410020	Section 501(c)(3)	100,000				CG DSGN-Physical Health
MERS-Missouri Goodwill Industries 1727 Locust Street Saint Louis, MO 63103	43-0652657	Section 501(c)(3)	682,687				STL ALLOC -Workforce Development, TPP DSGN-Workforce Development

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Metro Theater Company 3311 Washington Saint Louis, MO 63103	23-7309552	Section 501(c)(3)	10,000				UW FERGUSON GRANT-Youth Development, CG DSGN-Arts & Culture
MICDS 101 North Warson Road Saint Louis, MO 63124	43-0653366	Section 501(c)(3)	250,000				CG DSGN-Educ
MindsEye Radio 9541 Church Circle Drive Belleville, IL 62223	52-2133725	Section 501(c)(3)	102,467				STL ALLOC - Disabilities, IL BRIDGE GRANT-Disabilities, CG DSGN-Disabilities, TPP DSGN-Disabilities, SWID ALLOC - Disabilities

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

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Missouri Friends of Injured Marines PO Box 220187 Saint Louis, MO 63122	26-2088725	Section 501(c)(3)	10,000				CG DSGN-Financial Stability
MOST College Saving Plan 95 Wells Avenue Suite 160 Newton, MA 02459	00-0000007	Section 501(c)(3)	26,152				WFA COLLEGE SVGS AWARD-Financial Stability
Mt Sinai Family Life Center 1200 St Louis Ave East Saint Louis, IL 62201	36-4133510	Section 501(c)(3)	19,791				GSK EAST SIDE THRIVES-Place-Based Collaborations

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NAMI St Louis 1750 South Brentwood Boulevard Suite 511 Saint Louis, MO 63144	43-1143899	Section 501(c)(3)	91,553				STL ALLOC - Behavioral Health,CG DSGN-Behavioral Health, TPP DSGN-Behavioral Health
National Council on Alcoholism and Drug Abuse - St Louis Area Inc 9355 Olive Boulevard Saint Louis, MO 63132	43-0827852	Section 501(c)(3)	487,119				STL ALLOC - Behavioral Health, TPP DSGN-Behavioral Health
National Kidney Foundation Inc 1001 Craig Road Saint Louis, MO 63146	43-6066368	Section 501(c)(3)	106,950				STL ALLOC -Physical Health, TPP DSGN-Physical Health

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National Multiple Sclerosis Society - Gateway Area Chapter 1867 Lackland Hill Parkway Saint Louis, MO 63146	13-5661935	Section 501(c)(3)	275,620				STL ALLOC -Physical Health, TPP DSGN-Physical Health
Neighborhood Houses 326 South 21st Street Suite 301 Saint Louis, MO 63103	43-0654857	Section 501(c)(3)	654,826				STL ALLOC - Neighborhood Svcs, STL DAY CARE-EC Educ
Network for Teaching Entrepreneurship 120 Wall Street 18th Floor New York, NY 10005	13-3408731	Section 501(c)(3)	15,000				CG DSGN-Educ

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NextStep for Life Inc PO Box 97 Mapaville,MO 63065	43-1204559	Section 501(c)(3)	100,322				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Nine Network of Public Media 3655 Olive Street Saint Louis,MO 63108	43-0685345	Section 501(c)(3)	50,000				UW FERGUSON GRANT-Youth Development
Normandy Schools Collaborative 3855 Lucas and Hunt Road Saint Louis,MO 63121	00-0000004	Section 501(c)(3)	90,000				NORTH COUNTY COLLAB -Youth Development

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Northside Youth And Senior Service Center Inc 4120 Maffitt Avenue Saint Louis, MO 63113	43-1028098	Section 501(c)(3)	198,574				STL ALLOC -Senior Svcs, TPP DSGN-Senior Svcs
Nurses for Newborns 7259 Lansdowne Avenue Suite 100 Saint Louis, MO 63119	43-1601329	Section 501(c)(3)	220,259				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare
Oasis Women's Center Shelter Protected Address Saint Louis Area, IL 62002	37-1017792	Section 501(c)(3)	97,855				SWID ALLOC - Domestic Viol, SWID CMNTY RESP - Domestic Viol, IL BRIDGE GRANT-Domestic Viol, ADT DSGN-Domestic Viol, CG DSGN-Domestic Viol, TPP DSGN-Domestic Viol

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Old North St Louis Restoration Group 2700 North 14th Street Saint Louis, MO 63106	43-1254052	Section 501(c)(3)	5,074				CG DSGN-Place-Based Collaborations, STL INITIATIVES-Place-Based Collaborations
Operation Blessing People That Care Inc 18 East Lorena Wood River, IL 62095	37-1206691	Section 501(c)(3)	90,542				SWID ALLOC -Basic Needs, SWID CMNTY RESP -Basic Needs, IL BRIDGE GRANT-Basic Needs, ADT DSGN-Basic Needs, CG DSGN-Basic Needs
Operation HOPE Inc 1200 Market Street Room 220 Saint Louis, MO 63103	95-4378084	Section 501(c)(3)	30,000				WFA COLLEGE SVGS AWARD-Financial Stability

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Paraquad Inc 5240 Oakland Avenue Saint Louis, MO 63110	23-7112449	Section 501(c)(3)	189,745				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Phoenix Crisis Center Inc Shelter Protected Address Saint Louis Area, IL 62040	37-1180656	Section 501(c)(3)	52,515				TCA ALLOC -Domestic Viol,IL BRIDGE GRANT-Domestic Viol, TPP DSGN-Domestic Viol
Provident Inc 2650 Olive Street Saint Louis, MO 63103	43-0652630	Section 501(c)(3)	1,946,038				STL ALLOC - Behavioral Health, TPP DSGN-Behavioral Health

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Quad City Community Development 1634 7th Street Madison,IL 62060	27-3353034	Section 501(c)(3)	6,000				TCA CMNTY RESP - Basic Needs
Queen of Peace Center 325 North Newstead Avenue Saint Louis,MO 63108	43-1528548	Section 501(c)(3)	98,156				STL ALLOC - Behavioral Health,STL DAY CARE-EC Educ, TPP DSGN-Behavioral Health
Ranken Jordan Home for Convalescent Crippled Children 11365 Dorsett Road Maryland Heights,MO 63043	43-0666765	Section 501(c)(3)	50,000				CG DSGN-Physical Health

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Rebuilding Together SouthWest Illinois 1101 Greenwood Street Madison,IL 62060	37-1311177	Section 501(c)(3)	29,953				TCA ALLOC -Basic Needs,SWID ALLOC - Basic Needs, IL BRIDGE GRANT-Basic Needs
Riverbend Family Ministries NFP 131 East Ferguson Avenue Wood River,IL 62095	26-0347023	Section 501(c)(3)	16,828				SWID ALLOC -Place-Based Collaborations, IL BRIDGE GRANT-Place-Based Collaborations
Riverbend Head Start & Family Services Inc 550 Landmarks Boulevard 3rd Floor Alton,IL 62002	37-0681548	Section 501(c)(3)	113,723				SWID ALLOC -EC Educ, IL BRIDGE GRANT-EC Educ, TCA CMNTY RESP -EC Educ, TPP DSGN-EC Educ

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Riverview Gardens School District 1370 Northumberland Drive Saint Louis, MO 63137	00-0000005	Section 501(c)(3)	15,666				NORTH COUNTY COLLAB -Youth Development
Robert Fulton Community Development Corporation Inc 5500 Dr Martin Luther King Drive Saint Louis, MO 63112	43-1751431	Section 501(c)(3)	13,856				STL CMNTY RESP - Neighborhood Svcs, UW FERGUSON GRANT-Youth Development
Safe Connections 2165 Hampton Avenue Saint Louis, MO 63139	43-1077667	Section 501(c)(3)	374,607				STL ALLOC -Domestic Viol,CG DSGN-Domestic Viol, TPP DSGN-Domestic Viol

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Saint Louis Crisis Nursery 11710 Administration Drive Suite 18 Saint Louis, MO 63146	43-1410297	Section 501(c)(3)	199,553				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare, CG DSGN-Child Welfare, CG DSGN-Child Welfare
Saint Louis Effort for AIDS Inc 1027 South Vandeventer Avenue Suite 700 Saint Louis, MO 63110	43-1395179	Section 501(c)(3)	277,894				STL ALLOC -Physical Health, TPP DSGN-Physical Health
Saint Louis Morehouse Parents Assoc 1065 Country View Drive Saint Louis, MO 63141	30-0609915	Section 501(c)(3)	5,450				CG DSGN-Educ, CG DSGN-Educ

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Scott Air Force Base Youth Programs 375 FSS/FSFY Building 4780 Scott Air Force Base, IL 62225	37-0741166	Section 501(c)(3)	35,364				STL ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development
Senior Services Plus Inc 2603 North Rodgers Avenue Alton, IL 62002	37-0975762	Section 501(c)(3)	125,444				SWID ALLOC -Senior Svcs, TCA ALLOC - Senior Svcs, STL ALLOC -Senior Svcs, IL BRIDGE GRANT-Senior Svcs, SWID CMNTY RESP -Senior Svcs, CG DSGN-Senior Svcs
Sherwood Forest Camp Inc 2708 Sutton Boulevard Saint Louis, MO 63143	43-0653401	Section 501(c)(3)	408,734				STL ALLOC -Youth Development,CG DSGN-Youth Development, TPP DSGN-Youth Development

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Sister Accord Foundation PO Box 348 Mason, OH 45040	45-3010163	Section 501(c)(3)	10,000				CG DSGN-Domestic Viol
Society of St Vincent De Paul of St Louis 1310 Papin Street Saint Louis, MO 63103	43-0652684	Section 501(c)(3)	93,195				STL ALLOC -Basic Needs, TPP DSGN-Basic Needs
Society of St Vincent De Paul Edwardsville St Boniface Church 110 North Buchanan Street Edwardsville, IL 62025	37-0706734	Section 501(c)(3)	23,882				SWID ALLOC -Basic Needs,IL BRIDGE GRANT-Basic Needs, TPP DSGN-Basic Needs

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SouthSide Early Childhood Center 2101 South Jefferson Avenue Saint Louis, MO 63104	43-0685348	Section 501(c)(3)	238,576				STL ALLOC -EC Educ, TPP DSGN-EC Educ
St Cecilia School and Academy 906 Eichelberger Saint Louis, MO 63111	45-5598827	Section 501(c)(3)	20,000				WFA COLLEGE SVGS AWARD-Financial Stability, CG DSGN-Educ
St Clair Associated Vocational Enterprises Inc 3001 Save Road Belleville, IL 62221	37-0959053	Section 501(c)(3)	127,135				STL ALLOC - Disabilities, IL BRIDGE GRANT-Disabilities, TPP DSGN-Disabilities

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St Clair County Child Advocacy Center 300 West Main Street Suite 3 Belleville,IL 62220	37-1380467	Section 501(c)(3)	79,699				STL ALLOC -Child Welfare, IL BRIDGE GRANT-Child Welfare
St Joachim & Ann Care Service 4112 McClay Road Saint Charles,MO 63304	35-2203101	Section 501(c)(3)	25,000				DISASTER/FLOOD RELIEF-Disaster Response
St John's Community Care 222 Goethe Avenue Collinsville,IL 62234	37-1184962	Section 501(c)(3)	45,267				SWID ALLOC -Senior Svcs,IL BRIDGE GRANT-Senior Svcs, TCA ALLOC -Senior Svcs

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St Joseph Institute for the Deaf 1300 Strassner Saint Louis, MO 63144	43-0653494	Section 501(c)(3)	75,286				STL ALLOC - Disabilities, TPP DSGN-Disabilities
St Louis Arc 1177 North Warson Road Saint Louis, MO 63132	43-0718811	Section 501(c)(3)	625,425				STL ALLOC - Disabilities, CG DSGN-Disabilities, TPP DSGN-Disabilities, CG DSGN-Disabilities
St Louis Area Foodbank Inc 70 Corporate Woods Drive Bridgeton, MO 63044	43-1253102	Section 501(c)(3)	374,730				STL ALLOC -Basic Needs, TPP DSGN-Basic Needs, CG DSGN-Basic Needs, ADT DSGN-Basic Needs

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St Louis Black Repertory Company 6662 Olive Boulevard Saint Louis, MO 63130	43-1220180	Section 501(c)(3)	5,500				CG DSGN-Arts & Culture
St Louis City NAACP PO Box 23455 Saint Louis, MO 63156	43-6073999	Section 501(c)(3)	25,000				CG DSGN-Legal Svcs
St Louis Community College Foundation 300 South Broadway Saint Louis, MO 63102	43-1374500	Section 501(c)(3)	10,000				CG DSGN-Educ

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St Louis Police Foundation 9761 Clayton Road Saint Louis, MO 63124	20-7509796	Section 501(c)(3)	40,000				CG DSGN-Workforce Development
St Louis Public Schools Foundation 801 North 11th Street 3rd Floor Saint Louis, MO 63101	43-1813849	Section 501(c)(3)	7,500				WFA COLLEGE SVGS AWARD-Financial Stability
St Martha's Hall Shelter Protected Address Saint Louis Area, MO 63108	43-1350160	Section 501(c)(3)	160,659				STL ALLOC -Domestic Viol, TPP DSGN-Domestic Viol

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St Martin's Child Center 6315 Garfield Avenue Saint Louis, MO 63134	42-1001293	Section 501(c)(3)	224,942				STL ALLOC -EC Educ,STL DAY CARE-EC Educ, TPP DSGN-EC Educ
St Mary's Special Services for Exceptional Children 20 Archbishop May Drive Saint Louis, MO 63119	32-0301060	Section 501(c)(3)	217,955				STL ALLOC -EC Educ,STL DAY CARE-EC Educ, TPP DSGN-EC Educ
St Patrick Center 800 North Tucker Boulevard Saint Louis, MO 63101	43-1263499	Section 501(c)(3)	527,407				CG DSGN-Basic Needs,STL ALLOC - Basic Needs, TPP DSGN-Basic Needs

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St Vincent Home for Children 7401 Florissant Road Saint Louis, MO 63121	43-0653319	Section 501(c)(3)	110,644				STL ALLOC -Child Welfare, TPP DSGN-Child Welfare
Stray Rescue of St Louis 2320 Pine Street Saint Louis, MO 63103	43-1823801	Section 501(c)(3)	8,500				CG DSGN-Physical Health, CG DSGN-Physical Health
Sudden Infant Death Syndrome Resources Inc 1120 South Sixth Street Saint Louis, MO 63104	43-1344645	Section 501(c)(3)	53,807				STL ALLOC -Physical Health,CG DSGN-Physical Health, TPP DSGN-Physical Health

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Support Dogs Inc 10955 Linpage Place Saint Louis, MO 63132	43-1379801	Section 501(c)(3)	172,377				STL ALLOC - Disabilities, TPP DSGN-Disabilities
Teach for America Inc 315 West 36th Street 7th Floor New York, NY 10018	13-3541913	Section 501(c)(3)	50,000				CG DSGN-Educ
The Crossing Church 114 North Eatherton Road Chesterfield, MO 63005	43-1546804	Section 501(c)(3)	9,000				CG DSGN-Neighborhood Svcs

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The Journey Fellowship 7701 Maryland Avenue Clayton, MO 63105	30-0174373	Section 501(c)(3)	95,000				CG DSGN-Neighborhood Svcs
The National Alliance on Mental Illness Southwestern Illinois 2100 Madison Avenue - Fourth Floor Granite City, IL 62040	37-1322048	Section 501(c)(3)	23,195				TCA ALLOC - Behavioral Health, SWID ALLOC - Behavioral Health, IL BRIDGE GRANT-Behavioral Health, TPP DSGN-Behavioral Health
The Salvation Army 1130 Hampton Avenue Saint Louis, MO 63139	43-0653584	Section 501(c)(3)	1,192,022				STL ALLOC -Basic Needs, DISASTER/FLOOD RELIEF-Disaster Response, SWID ALLOC -Basic Needs, IL BRIDGE GRANT-Basic Needs, TPP DSGN-Basic Needs, CG DSGN-Basic Needs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
The St Louis Zoo Foundation 1 Government Drive Saint Louis, MO 63110	43-1727309	Section 501(c)(3)	11,000				CG DSGN-Arts & Culture, CG DSGN-Arts & Culture
Thomas Dunn Learning Center 3113 Gasconade Street Saint Louis, MO 63118	43-6020367	Section 501(c)(3)	10,000				CG DSGN-Educ
Tri-Cities Area Association for Handicapped Inc 3127 W Chain of Rocks Road Granite City, IL 62040	37-0808241	Section 501(c)(3)	15,906				TCA ALLOC - Disabilities, IL BRIDGE GRANT-Disabilities

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Turning Point Shelter Protected Address Saint Louis Area, MO 63383	43-1667293	Section 501(c)(3)	107,594				STL ALLOC -Domestic Viol, TPP DSGN-Domestic Viol
United 4 Children 12 North Newstead Avenue Saint Louis, MO 63108	43-0953836	Section 501(c)(3)	174,965				STL ALLOC -EC Educ
United Cerebral Palsy Heartland 13975 Manchester Road Manchester, MO 63011	44-0579903	Section 501(c)(3)	445,408				STL ALLOC - Disabilities,CG DSGN-Disabilities, TPP DSGN-Disabilities

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
United Services for Children 4140 Old Mill Parkway Saint Peters, MO 63376	43-1136074	Section 501(c)(3)	323,788				STL ALLOC -EC Educ,STL DAY CARE-EC Educ, TPP DSGN-EC Educ
United Way of Greater St Louis 910 North 11th Street Saint Louis, MO 63101	43-0714167	Section 501(c)(3)	100,471				Capacity Building - Various Agency Trainings
United Way of Greater St Louis 910 North 11th Street Saint Louis, MO 63101	43-0714167	Section 501(c)(3)	34,984				Citi Financial Head Start

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
United Way of Greater St Louis 910 North 11th Street Saint Louis, MO 63101	43-0714167	Section 501(c)(3)	20,000				Capacity Building - Merger Facilitation Fund
United Way of Greater St Louis 910 North 11th Street Saint Louis, MO 63101	43-0714167	Section 501(c)(3)	10,500				Student United Way
United Way of Greater St Louis 910 North 11th Street Saint Louis, MO 63101	43-0714167	Section 501(c)(3)	6,774				Capacity Building - Various Other

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
University City Children's Center 6646 Vernon Avenue Saint Louis, MO 63130	43-0958608	Section 501(c)(3)	147,987				STL ALLOC -EC Educ,STL DAY CARE-EC Educ, CG DSGN-EC Educ
Urban Future 3145 South Grand Suite A Saint Louis, MO 63118	43-1757963	Section 501(c)(3)	290,425				CG DSGN-Youth Development
Urban K-Life of St Louis 2900 North Prairie Avenue Saint Louis, MO 63107	20-2605251	Section 501(c)(3)	6,000				CG DSGN-Youth Development, CG DSGN-Youth Development

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Urban League of Metropolitan St Louis 3701 Grandel Square Saint Louis, MO 63108	43-0653605	Section 501(c)(3)	1,066,622				STL ALLOC -Basic Needs,CG DSGN-Basic Needs, TPP DSGN-Basic Needs
Violence Prevention Center of Southwestern Illinois Shelter Protected Address Saint Louis Area, IL 62222	37-1223450	Section 501(c)(3)	146,617				STL ALLOC -Domestic Viol, IL BRIDGE GRANT-Domestic Viol, TPP DSGN-Domestic Viol, CG DSGN-Domestic Viol
Visiting Nurse Association of Greater St Louis 11440 Olive Boulevard Suite 200 Saint Louis, MO 63141	43-1280435	Section 501(c)(3)	72,897				STL ALLOC -Physical Health, TPP DSGN-Physical Health

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Voices for Children 7900 Carondelet Plaza Level Saint Louis, MO 63105	43-1807059	Section 501(c)(3)	122,721				STL ALLOC -Child Welfare,CG DSGN-Child Welfare, TPP DSGN-Child Welfare
VoteRunLead 1103 Missouri Avenue Duluth, MN 55811	46-4285577	Section 501(c)(3)	50,000				CG DSGN-Legal Svcs
VOYCE 680 Craig Road Suite 245 Saint Louis, MO 63141	43-1480438	Section 501(c)(3)	175,254				STL ALLOC -Senior Svcs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
We Stories 215 Portland Ter Saint Louis, MO 63119	47-5465628	Section 501(c)(3)	12,000				STL CMNTY RESP - Neighborhood Svcs
Webster Child Care Center at Laclede Groves 624 Lohmann Forest Lane Saint Louis, MO 63119	43-1014311	Section 501(c)(3)	205,724				STL ALLOC -EC Educ
Wesley House Association 4507 Lee Avenue Saint Louis, MO 63115	43-0653613	Section 501(c)(3)	176,656				STL ALLOC - Neighborhood Svcs, TPP DSGN- Neighborhood Svcs

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Women's Business Enterprise Alliance Texas 9800 Northwest Freeway Suite 120 Houston,TX 77092	76-0458227	Section 501(c)(3)	10,500				CG DSGN-Workforce Development
Women's Safe House Shelter Protected Address Saint Louis Area,MO 63163	43-1111319	Section 501(c)(3)	158,617				STL ALLOC -Domestic Viol, TPP DSGN-Domestic Viol, CG DSGN-Domestic Viol, CG DSGN-Domestic Viol
Wyman Center Inc 600 Kiwanis Drive Eureka,MO 63025	43-0653263	Section 501(c)(3)	986,383				STL ALLOC -Youth Development, CG DSGN-Youth Development, CG DSGN-Youth Development, GSK EAST SIDE THRIVES-Place-Based Collaborations, TPP DSGN-Youth Development

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Yash Gandhi Foundation 105 Spur Lane West Chester, PA 19382	05-0532220	Section 501(c)(3)	6,000				CG DSGN-Physical Health
Young Men's Christian Association of Edwardsville 1200 Esic Drive Edwardsville, IL 62025	37-0661259	Section 501(c)(3)	40,291				SWID ALLOC -Youth Development,IL BRIDGE GRANT-Youth Development, TPP DSGN-Youth Development
Young Men's Christian Association of Southwest Illinois 424 Lebanon Avenue Belleville, IL 62220	37-0673565	Section 501(c)(3)	21,172				SWID ALLOC -Youth Development, TPP DSGN-Youth Development

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

(a) Name and address of organization or government	**(b)** EIN	**(c)** IRC section if applicable	**(d)** Amount of cash grant	**(e)** Amount of non-cash assistance	**(f)** Method of valuation (book, FMV, appraisal, other)	**(g)** Description of non-cash assistance	**(h)** Purpose of grant or assistance
Youth and Family Center 818 Cass Avenue Saint Louis, MO 63106	43-0652663	Section 501(c)(3)	437,178				STL ALLOC -Youth Development
Youth In Need 1815 Boones Lick Road Saint Charles, MO 63301	43-1033862	Section 501(c)(3)	629,247				STL ALLOC -Child Welfare,TPP DSGN-Child Welfare, CG DSGN-Child Welfare
YWCA of Metropolitan St Louis 3820 West Pine Boulevard Saint Louis, MO 63108	43-0653616	Section 501(c)(3)	777,243				STL ALLOC -Financial Stability,CG DSGN-Financial Stability, TPP DSGN-Financial Stability

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Schedule J (Form 990)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 23.**

▶ **Attach to Form 990.**

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

Part I Questions Regarding Compensation

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

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

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

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

(A) Name and Title		**(B)** Breakdown of W-2 and/or 1099-MISC compensation			**(C)** Retirement and other deferred compensation	**(D)** Nontaxable benefits	**(E)** Total of columns (B)(i)-(D)	**(F)** Compensation in column(B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
1 Orvin T Kimbrough President-CEO	(i)	257,550	70,000	-293	41,174	3,115	371,546	0
	(ii)	0	0	0	0	0	0	0
2 Kenneth A Graesser SVP and CFO	(i)	157,569	25,000	4,590	101,573	15,167	303,899	0
	(ii)	0	0	0	0	0	0	0
3 Kathy A Gardner SVP-Community Investment	(i)	157,157	0	1,726	128,062	15,101	302,046	0
	(ii)	0	0	0	0	0	0	0
4 Roz Sherman Voellinger VP-Labor	(i)	112,914	3,758	1,158	40,918	14,690	173,438	0
	(ii)	0	0	0	0	0	0	0
5 Enn K Budde VP-Strategic Giving & Innovation	(i)	140,000	5,500	-4,189	17,384	14,311	173,006	0
	(ii)	0	0	0	0	0	0	0
6 Julie Russell SVP-Planning & Evaluation	(i)	111,100	16,110	108	14,111	14,670	156,099	0
	(ii)	0	0	0	0	0	0	0
7 Adeyinka A Faleti SVP-Resource Development	(i)	123,725	10,517	-4,200	6,275	14,815	151,132	0
	(ii)	0	0	0	0	0	0	0

Part III Supplemental Information

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

Return Reference	Explanation
Schedule J, Part I, Line 3	A Compensation Committee composed of independent Board members meets each December to review the performance of the C E O and provide a written, face to face evaluation The committee is guided by the organization's compensation committee charter and compensation philosophy and policies With the C E O excused, the committee members review salary information for chief executives of United Ways of similar size and complexity A minimum of 25 comparisons are provided per the committee's charge Base pay, benefits and bonuses are all part of the consideration The Committee's final recommendations are forwarded to the Executive Committee for their consideration/approval
Schedule J, Part I, Line 7	The organization provides bonuses to certain individuals based on performance These amounts are reflected in the compensation schedule included in the 990, Part VII and in Schedule J part II
Schedule J, Part II	The amounts included in column (C) "Retirement and other deferred compensation" include the increase in actuarial valuation of a defined benefit pension plan These amounts are higher for individuals as they approach retirement age They do not represent current cash payments

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SCHEDULE M (Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded	X	198	2,036,868	Mid Mkt Val on Gift Date
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (New Auto)	X	1	18,100	Retail Value
26 Other ► ( )				
27 Other ► ( )				
28 Other ► ( )				

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

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

Part II **Supplemental Information.**

Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

Return Reference	Explanation

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SCHEDULE O (Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization	Employer identification number
UNITED WAY OF GREATER ST LOUIS INC	43-0714167

Return Reference	Explanation
Form 990, Header, Line C	CEO / CFO Financial Statement Certification - Orvin T Kimbrough, President and CEO, and Kenneth A Graesser, Sr Vice President and CFO, certify #1) that they have review ed the audited financial statements and related IRS Form 990 of the United Way of Greater St Louis for the year ended June 30, 2016, #2) based on their know ledge, these financial statements do not contain any untrue statement of a material fact or omit any material facts necessary w hich w ould make the statements misleading and #3) based on their know ledge, these financial statements and other financial information included in these reports, fairly present, in all material respects, the financial condition, results of operation and cash flow s of the United Way of Greater St Louis as of, and for the year ended, June 30, 2016

Return Reference	Explanation
Form 990, Part V, Line 2a	217 employees includes 41 people , hired temporarily during the fall fundraising campaign and funded w ith designated corporate contributions, w hose purpose is to assist in managing the large number of United Way company campaigns

Return Reference	Explanation
Form 990, Part VI, Section A, Line 1a	The Board cycle runs on a calendar year basis w hile the 990 is on a fiscal year ending June 30 basis Of the 215 Board members listed, only the first 180 w ere actually serving on the Board as of June 30, 2016 Most others terminated Board involvement at the end of their terms on December 31, 2015 w hile some terminated earlier Active Board Members are listed first in Part VII's Board listing The Board of Directors selects from its members an Executive Committee not to exceed forty persons to be comprised of the elected officers, key committee chairmen and at-large members recommended by the Nominating Committee The Executive Committee shall have and exercise the authority of the Board of Directors in the management of the Corporation except it shall not have the pow er to fill vacancies, remove officers or Directors or amend the Articles or Bylaw s

Return Reference	Explanation
Form 990, Part VI, Section A, Line 2	Walter J Galvin, Steven H Lipstein, Patrick Smith, Michael L Moehn - combined business relationship, Steven J Tucker, Marilyn K Bush, Jackie Yoon - combined business relationship, Steven H Lipstein, Michael R Holmes, Sr , James D Weddle, Mark S Wrighton - combined business relationship, Don G Lents, Linda M Martinez, Arindam Kar, Robert L New mark - combined business relationship, Michael F Neidorff, David L Stew ard, Keith H Williamson - combined business relationship, Rodney Kinzinger, Cory Boss - combined business relationship, Robert J Ciapciak, Law rence E Thomas, James D Weddle, Veronica Coleman, Penny Pennington - combined business relationship, Jeffrey J Boehne, Steven J Brackney - combined business relationship, Michael A DeCola, Scott R Goodman, Michael R Holmes, Sr - combined business relationship, Joseph T Ambrose, Shelly J Seifert - combined business relationship, Janet M Hollow ay, Reuben A Shelton - combined business relationship, Brian J Bjorkman, Michael R Hogan - combined business relationship, Michael F Hart, Jeffery S Fothergill - combined business relationship, Scott C Schnuck, Todd R Schnuck, Lori O Willis - business & family relationship, Candice O Jennings, Dr Richard B White - combined business relationship, Valerie E Patton, Joe Reagan - combined business relationship, Ryan Hyman, Mark C Darrell, Suzanne Sitherw ood, Jessica B Willingham - combined business relationship, Dr Thomas F George, Dr Lynn Beckw ith, Jr - combined business relationship, Mark S Wrighton, Mahendra R Gupta, Kimberly G Walker - combined business relationship, Michele Cheatham, Chris Hanaw ay - combined business relationship, Jay Korte, Todd Korte - combined business relationship, Diana Gross, Ruth Saphian - combined business relationship, David L Stew ard, Ann C Marr - combined business relationship, Catherine A French, Shaw n Kormanek - combined business relationship, Joan A Kelly, Edw ard McLaughlin - combined business relationship, Scott D Cochran, Donna Kinnaird - combined business relationship, Jeffrey B Klopfenstein, Thad W Simons - combined business relationship, Mark S Schmitt, Mahendra R Gupta, PhD - combined business relationship, Thomas Minogue, Ryan Kemper - combined business relationship, Thomas Minogue - General Counsel for United Way of Greater St Louis

Return Reference	Explanation
Form 990, Part VI, Section B, Line 11b	The draft of the Form 990 w as provided to the Audit Committee and to the independent certified public accountants for review and comment prior to being disseminated to all Board members via the internet This w as all done prior to the Form 990 being finalized and submitted to the IRS

Return Reference	Explanation
Form 990, Part VI, Section B, Line 12c	Historically and during FY 16 conflict of interest survey forms w ere distributed to all Board members and employees, including key employees A regimented process helps to ensure the return of those forms Completed forms are review ed by appropriate leadership individuals so that any conflicts, real or perceived, are disclosed and appropriately addressed if necessary

Return Reference	Explanation
Form 990, Part VI, Section B, Line 15	A Compensation Committee composed of independent Board members meets each December to review the performance of the C E O and provide a w ritten, face to face evaluation The committee is guided by the organization's compensation committee charter and compensation philosophy and policies With the C E O excused, the committee members review salary information for chief executives of United Ways of similar size and complexity A minimum of 25 comparisons are provided per the committee's charge At the same meeting, but w ith the C E O in the room, the C E O recommends salary increases for all senior level staff including those listed in this 990 In addition to considering their performance, the committee members review salary information for like staff from at least 15 United Ways of similar size and complexity The C E O and the committee agree to final recommendations that go back to the Executive Committee for their consideration/approval Base pay, benefits and bonuses are all part of the consideration

Return Reference	Explanation
Form 990, Part VI, Section C, Line 19	The organization's governing documents, conflict of interest policy, audited financial statements and the IRS Form 990 are all posted on the organization's w ebsite, w w w stl unitedw ay org in the "Who We Are" / "Our Reports" section

Return Reference	Explanation
Form 990, Part IX, Line 25	Calculation of overhead expense percentage equals the management and general expenses line 25c ($1,982,655) plus fundraising expenses line 25d ($5,322,554) divided by total revenue on Form 990, Part I, Line 12 ($79,309,075) which equals 9 21%

Return Reference	Explanation
Form 990, Part XI, Line 9	Total amount of ($3,338,707) includes net unrealized losses of ($417,430) associated with the change in value of split interest agreements and pension and post-retirement plan changes other than net periodic benefit costs of ($2,921,277)

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SCHEDULE R (Form 990)

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No 1545-0047

2015

Open to Public Inspection

Name of the organization
UNITED WAY OF GREATER ST LOUIS INC

Employer identification number
43-0714167

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity? Yes	(g) No

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

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

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
(1)JE Williams Jr Trust at BoA Providence, RI 02901	Perpetual Trust	MO	N/A	T	69,643	1,606,113	100 %		No
(2)H Dunklin Tilden Trust at BoA Dallas, TX 75283	Perpetual Trust	MO	N/A	T	28,477	351,457	100 %		No

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

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

		Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of **(i)** interest, **(ii)** annuities, **(iii)** royalties, or **(iv)** rent from a controlled entity	1a	Yes	
b Gift, grant, or capital contribution to related organization(s)	1b		No
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
j Lease of facilities, equipment, or other assets to related organization(s)	1j		No
k Lease of facilities, equipment, or other assets from related organization(s)	1k		No
l Performance of services or membership or fundraising solicitations for related organization(s)	1l		No
m Performance of services or membership or fundraising solicitations by related organization(s)	1m		No
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		No
o Sharing of paid employees with related organization(s)	1o		No
p Reimbursement paid to related organization(s) for expenses	1p		No
q Reimbursement paid by related organization(s) for expenses	1q		No
r Other transfer of cash or property to related organization(s)	1r		No
s Other transfer of cash or property from related organization(s)	1s		No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved

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

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

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

Part VII Supplemental Information

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

Return Reference	Explanation