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Assets 19

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Form 990-EZ

**Short Form Return of Organization Exempt From Income Tax** 

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

2017

OMB No 1545-1150

Open to Public ▶ Do not enter social security numbers on this form as it may be made public. Inspection Department of the Treasury ▶ Go to www.irs.gov/Form990EZ for instructions and the latest information. Internal Revenue Service 20 A For the 2017 calendar year, or tax year beginning 2017, and ending C Name of organization B Check if applicable D Employer identification number Address change St. Louis Section American Chemical Society 43-6049918 Room/suite Name change Number and street (or P O box, if mail is not delivered to street address) E Telephone number initial return C/O Jeffrey Cornelius '1 Maybeck Place 618-792-1807 Final return/terminated City or town, state or province, country, and ZIP or foreign postal code Group Exemption Amended return Number ▶ 0945 Application pending Other (specify) Accounting Method: Check ► ✓ if the organization is not Website: ▶ stlacs.org required to attach Schedule B ◀ (insert no ) □ (Form 990, 990-EZ, or 990-PF) 3 J Tax-exempt status (check only one) — 7 501(c)(3) 501(c) (1 4947(a)(1) or K Form of organization. 

Corporation ☐ Trust Association Other L Add lines 5b, 6c, and 7b to line 9 to determine gross receipts. If gross receipts are \$200,000 or more, or if total assets (Part II, column (B) below) are \$500,000 or more, file Form 990 instead of Form 990-EZ . . . Revenue, Expenses, and Changes in Net Assets or Fund Balances (see the instructions for Part I) Check if the organization used Schedule O to respond to any question in this Part I Contributions, gifts, grants, and similar amounts received . . . . 1 29,657 í 2 Program service revenue including government fees and contracts 2 0 763 044

	3	Membership dues and assessments .f., h	3 '	21	<u>' - ' : 11,763</u>
	4	Investment income Advanced Adv	4	1. 1. 1. 1.	-≎¢ 33,044
	5a	Gross amount from sale of assets other than inventory   5a		•	li Hu
	r b	Less: cost or other basis and sales expenses	]		11
9	. с •6	Gain or (loss) from sale of assets other than inventory (Subtract line 5b from line 5a) Gaming and fundraising events	5c		-
ne	а	Gross income from gaming (attach Schedule G if greater than \$15,000)			. ,
Revenue	b	Gross income from fundraising events (not including \$ of contributions from fundraising events reported on line 1) (attach Schedule G if the sum of such gross income and contributions exceeds \$15,000)   6b		-	
	c d	Less: direct expenses from gaming and fundraising events	6d	a.	. 4. 11. 21
	7a b	Gross sales of inventory, less returns and allowances		1 .	G)
	_	(2)	7c	F	, 4
	8		1/8		9,094
	9	Total revenue. Add lines 1, 2, 3, 4, 5c, 6d, 7c, and 8	<b>(39)</b>	70¢	
	10		_		16,777
	11	Benefits paid to or for members	11	1 1+	٠,٠,٠
es	12	Grants and similar amounts paid (list in Schedule O)  Benefits paid to or for members  Salaries, other compensation, and employee benefits  Professional fees and other payments to independent contractors	12		
penses	13	Professional fees and other payments to independent contractors \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	13		21
ă	14	Occupancy, rent, utilities, and maintenance	14		

Net assets or fund balances at beginning of year (from line 27, column (A)) (must agree with

For Paperwork Reduction Act Notice, see the separate instructions.

Printing, publications, postage, and shipping

Other expenses (describe in Schedule O)

Total expenses. Add lines 10 through 16 .

Excess or (deficit) for the year (Subtract line 17 from line 9)

Other changes in net assets or fund balances (explain in Schedule O).

Net assets or fund balances at end of year. Combine lines 18 through 20

end-of-year figure reported on prior year's return) .

Cat No 106421

Form 990-EZ (2017)

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EV.

2,600

39,280

58,657

24,901

283,367

308,268



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Derek Redmore, Director

Lisa Balbes, Councilor



Part	·			
	instructions for Part V.) Check if the organization used Schedule O to respond to any question in this	3 Part	Yes	No
33	Did the organization engage in any significant activity not previously reported to the IRS? If "Yes," provide a detailed description of each activity in Schedule O	33	103	<b>₩</b>
34	Were any significant changes made to the organizing or governing documents? If "Yes," attach a conformed copy of the amended documents if they reflect a change to the organization's name. Otherwise, explain the change on Schedule O (see instructions)	34		1
35a	Did the organization have unrelated business gross income of \$1,000 or more during the year from business activities (such as those reported on lines 2, 6a, and 7a, among others)?	35a		i
b	If "Yes" to line 35a, has the organization filed a Form 990-T for the year? If "No," provide an explanation in Schedule O	35b		1
,c	Was the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization subject to section 6033(e) notice, reporting, and proxy tax requirements during the year? If "Yes," complete Schedule C, Part III	35c		1
36	Did the organization undergo a liquidation, dissolution, termination, or significant disposition of net assets during the year? If "Yes," complete applicable parts of Schedule N	36	r	1
37a	Enter amount of political expenditures, direct or indirect, as described in the instructions ▶ 37a	<b> </b>		لـِـــــــــــــــــــــــــــــــــــ
b	Did the organization file Form 1120-POL for this year?	37b	<b></b>	<b>✓</b>
38a	Did the organization borrow from, or make any loans to, any officer, director, trustee, or key employee <b>or</b> were any such loans made in a prior year and still outstanding at the end of the tax year covered by this return?			<u> </u>
b	If "Yes," complete Schedule L, Part II and enter the total amount involved   38b	38a		-
39	Section 501(c)(7) organizations. Enter:	1		
а	Initiation fees and capital contributions included on line 9			!
b	Gross receipts, included on line 9, for public use of club facilities	1		'
40a	Section 501(c)(3) organizations. Enter amount of tax imposed on the organization during the year under: section 4911 ▶ ; section 4912 ▶ ; section 4955 ▶			
b	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in any section 4958			
	excess benefit transaction during the year, or did it engage in an excess benefit transaction in a prior year that has not been reported on any of its prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	40b		1
, C	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax imposed on organization managers or disqualified persons during the year under sections 4912, 4955, and 4958			
d	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Enter amount of tax on line 40c reimbursed by the organization			
е	All organizations. At any time during the tax year, was the organization a party to a prohibited tax shelter transaction? If "Yes," complete Form 8886-T	40e		1
41	List the states with which a copy of this return is filed ▶			
42a	The organization's books are in care of ▶ Telephone no. ▶			
<b>h</b>	Located at ► ZIP + 4 ►  At any time during the calendar year, did the organization have an interest in or a signature or other authority over		Vaa	- No.
b	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	42b	Yes	No ✓
	If "Yes," enter the name of the foreign country: ►  See the instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and			
	Financial Accounts (FBAR).			
С	At any time during the calendar year, did the organization maintain an office outside the United States?  If "Yes," enter the name of the foreign country:	42c		<b>√</b>
43 -	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-EZ in lieu of Form 1041—Check here		· . I	▶ □
	and enter the amount of tax-exempt interest received or accrued during the tax year			
44-	Did the organization mountain any depart advised frieds duppe the years If "Voe" Form 000 much be	$\vdash$	Yes	No
44a	Did the organization maintain any donor advised funds during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44a		7
b	Did the organization operate one or more hospital facilities during the year? If "Yes," Form 990 must be completed instead of Form 990-EZ	44b		1
c	Did the organization receive any payments for indoor tanning services during the year?	44c	igsqcut	.√
d	If "Yes" to line 44c, has the organization filed a Form 720 to report these payments? If "No," provide an			اہــا
AF-	explanation in Schedule O	44d		<b>√</b> .
45a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	45a	<b>  </b>	<b>/</b>
b	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," Form 990 and Schedule R may need to be completed instead of Form 990-EZ (see instructions).	45h		

Form 990-I	EZ (20	017)							P	age 4
		ne organization engage, directly or in						1	Yes	No
		ndidates for public office? If "Yes," of		, Part I				46	ļ	✓
Part VI		Section 501(c)(3) organizations All section 501(c)(3) organization		etione 47_49h an	d 52 a	nd complet	a tha t	ahlas f	or line	<b>_</b>
		50 and 51.	s must answer que	3110113 47 <del>- 430</del> ar	u JZ, a	ind comple	ie iiie i	abics i	OI 11110	55
		Check if the organization used Sci	hedule O to respond	to any question is	n this Pa	art VI				. 🗆
		<b>,</b>				<u></u>			Yes	No
		he organization engage in lobbying If "Yes," complete Schedule C, Par		section 501(h) elec		_	the tax	47		1
<b>48</b> Is	s the	organization a school as described ii	n section 170(b)(1)(A)(i	i)? If "Yes," comple	te Sched	dule E		48		<b>√</b>
		ne organization make any transfers t	•	•	nization	?		49a		✓
		s," was the related organization a se						49b	L	Ļ
		plete this table for the organization's byees) who each received more than								
	прк			T	<u> </u>	) Health benefit		SIILEI IV		
	(a)	Name and title of each employee	(b) Average hours per week devoted to position	(c) Reportable compensation (Forms W-2/1099-MIS	contr	ibutions to emp it plans, and de compensation	loyee (e)	Estimate other con		
		<del>.</del>								
			•							
			M100.000	<u> </u>			,		···	
		number of other employees paid ovolete this table for the organization			nt cont	ractors who	ooob ro	annund	more	than
		,000 of compensation from the orga			in cont	IACIOIS WIIO	Gacii ie	CEIVEU	111016	; tricari
	(a)	Name and business address of each independ	dent contractor	(b) Type of s	ervice		(c) Co	mpensati	on	
			•							
				· · · · · · · · · · · · · · · · · · ·			-			
d T	otal	number of other independent contra	actors each receiving	over \$100,000 .	.▶_					
		the organization complete Scheduleted Schedule A	ule A? <b>Note:</b> All se	ection 501(c)(3) or	ganizati	ons must a	_	ı ☑ Yes		No
		of perjury, I declare that I have examined this i					my know	ledge and	belief,	ıt ıs
	u, and	d complete Declaration of preparer (other than	conicer) is based on all Into	mination of which prepar	er reas any	- Miowieoge	11/111	HAI	<del></del>	
Sign		Sanature of officer				Date	<u>''  4</u>	100	2	
Here		▲ Jeffrey Cornelius, Treasurer								
		Type or print name and title								
Paid		Print/Type preparer's name	Preparer's signature		Date		ck 🗌 ıf	PTIN		
Prepar	rer					<del></del>	employed	J		
Use O	- 1	Firm's name				Firm's EIN	<u> </u>			
May the	IRS	Firm's address ▶ discuss this return with the prepare	r shown above? See	nstructions		Phone no	. •	☐ Yes		No
		and the state of t	2				• •	Form <b>99</b>		

#### SCHEDULE A (Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

Open to Public Inspection

Employer identification number

St. Louis Section American Chemical Society 436049918 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 12, check only one box.) A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i). A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990 or 990-EZ).) A hospital or a cooperative hospital service organization described in section 170(b)(1)(A)(iii). 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: 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.) A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v). 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.) A community trust described in section 170(b)(1)(A)(vi). (Complete Part II.) An agricultural research organization described in section 170(b)(1)(A)(ix) operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or 10 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.) An organization organized and operated exclusively to test for public safety. See section 509(a)(4). 12 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 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g. 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. Type II. A supporting organization supervised or controlled in connection with its supported organization(s), by having b 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. Type III functionally integrated. A supporting organization operated in connection with, and functionally integrated with, C 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. Check this box if the organization received a written determination from the IRS that it is a Type II, Type III, Type III, functionally integrated, or Type III non-functionally integrated supporting organization. Enter the number of supported organizations . . . . . . Provide the following information about the supported organization(s). (i) Name of supported organization (iii) Type of organization (iv) Is the organization (v) Amount of monetary (in FIN (vi) Amount of (described on lines 1-10 listed in your governing other support (see support (see above (see instructions)) instructions) instructions) Yes No (A) (B) (C) (D) (E)

Schedule A (Form 990 or 990-EZ) 2017

Part							
	(Complete only if you checked the						alify under
· ·	Part III. If the organization fails to	o qualify unde	er the tests lis	<del></del>	lease comple	ete Part III.)	
	on A. Public Support	(=) 0010	(5) 0014	(-) 0015	(4) 0016	(a) 2017	(6 Total
	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017.	(f) Total
1	Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")		-			, ,	1
2	Tax revenues levied for the organization's benefit and either paid to or expended on its behalf			l»			
3	The value of services or facilities furnished by a governmental unit to the organization without charge			·			
4	Total. Add lines 1 through 3				1		
<b>5</b>	The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount . shown on line 11, column (f)						,,
6	Public support. Subtract line 5 from line 4						
	on B. Total Support						
Calen	dar year (or fiscal year beginning in) 🕨	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	<b>(e)</b> 2017	(f) Total
7	Amounts from line 4	<i>\'</i> .					
8	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	`			,		,
9	Net income from unrelated business activities, whether or not the business is regularly carried on			• ,		,	
10	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)			\ .	,		
11 12 13	Total support. Add lines 7 through 10 Gross receipts from related activities, etc First five years. If the Form 990 is for the	ne organizatior	n's first, secon	d, third, fourth			
<u>, ;</u>	organization, check this box and stop he				<del> </del>	· · · · · ·	· · <b>P</b> L
	on C. Computation of Public Suppor	<del></del>		' /:	<b>\</b>	144	6/
14 15	Public support percentage for 2017 (line 6		-	i i, column (i))	1	15	<u>%</u>
16a	Public support percentage from 2016 Sci 331/2% support test—2017. If the organization quality and stop here. The organization quality and stop here.	ization did not	check the box		nd line 14 is 3		
b	331/a% support test—2016. If the organithis box and stop here. The organization					is 33¹/3% or m	ore, check
17a	10%-facts-and-circumstances test—2017. 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—20 15 is 10% or more, and if the organization of Explain in Part VI how the organization of supported organization	ation meets th	e "facts-and-o	circumstances	" test, check	this box and	stop here.
18	Private foundation. If the organization du instructions	d not check a	box on line 13	, 16a, 16b, 17a	a, or 17b, chec	k this box and	see ·

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

(Complete only if you checked the box on line 10 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.)

Secti	on A. Public Support						
Calen	dar year (or fiscal year beginning in)	(a) 2013	<b>(b)</b> 2014	(c) 2015	· (d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and membership fees						
	received. (Do not include any "unusual grants.")	43008	38466	34379	40717	41420	197990
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	11231	13165	18787	12252	9094	64529
3	Gross receipts from activities that are not an unrelated trade or business under section 513	11231	1 . (	10707	12202		04023
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 7a	<b>Total.</b> Add lines 1 through 5 Amounts included on lines 1, 2, and 3	54239	51631	53166	52969	50514	262519
	received from disqualified persons .						. 1
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		,				
С	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Secti	on B. Total Support	L					
	dar year (or fiscal year beginning in) ▶	(a) 2013	<b>(b)</b> 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
9	Amounts from line 6	54239	51631	53166	52969	50514	262519
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.	21662	18459	5504	20350	33044	99019
b	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975					•	
С	Add lines 10a and 10b	21662	18459	5504	20350	33044	99019
<b>11</b> -	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	<b>Total support.</b> (Add lines 9, 10c, 11, and 12.)						
14	First five years. If the Form 990 is for th		70090 's first, second	58670  d, third, fourth,	73319 or fifth tax ye	83558 ear as a section	361538 n 501(c)(3)
_	organization, check this box and stop her			· · · · ·	· · · · ·	· · · · ·	🕨 🗌
<u>Secti</u>	on C. Computation of Public Suppor				······································	,	
15	Public support percentage for 2017 (line 8		•	3, column (f))		15	73 %
16	Public support percentage from 2016 Sch			<u></u>	<u></u> .	16	<u>79 %</u>
	on D. Computation of Investment Inc					<del></del>	
17	Investment income percentage for 2017 (I					17	27 %
18	Investment income percentage from 2016					18	21 %
19a	331/3% support tests—2017. If the organi						
	17 is not more than 331/3%, check this box 33		_			_	_
b .	331/3% support tests—2016. If the organize line 18 is not more than 331/3%, check this be						
20	Private foundation. If the organization dis					_	_

## Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I. If you checked 12a of Part I, complete Sections A and B. If you checked 12b of Part I, complete Sections A and C. If you checked 12c of Part I, complete Sections A, D, and E. If you checked 12d of Part I, complete Sections A and D, and complete Part V.)

Secti	on 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 <b>Part VI</b> 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 <b>Part VI</b> 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 <b>Part VI</b> when and how the organization made the determination.	3b		
С	Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in <b>Part VI</b> 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 12a or 12b 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 <b>Part VI</b> how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.	4b		
С	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 <b>Part VI</b> 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	L	<u> </u>
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 <b>Part VI</b> , 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			
b	was accomplished (such as by amendment to the organizing document).  Type I only. Was any added or substituted supported organization part of a class already	5a		
	designated in the organization's organizing document?	5b		
6	Substitutions only. Was the substitution the result of an event beyond the organization's control?  Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) 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.	5c		
7	Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	7		
8	Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7?			
0-	If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).	8		<del>  -</del>
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 <b>Part VI.</b>	9a		
b	Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in <b>Part VI</b> .	9b		
С	Did a disqualified person (as defined in line 9a) 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 <b>Part VI.</b>	9c		
10a	Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated			
	supporting organizations)? If "Yes," answer 10b 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		

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Part	IV Supporting Organizations (continued)	, ,		. ,
			Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?  A person who directly or indirectly controls, either alone or together with persons described in (b) and (c)			
а	below, the governing body of a supported organization?	11a	<del> </del>	J
h	A family member of a person described in (a) above?	11b		
	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		
	ion 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 <b>Part VI</b> 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.		<u>,</u>	
<del></del>		2		L
Secti	ion 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 <b>Part VI</b> how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).	1		
Secti	ion 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, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) 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 <b>Part VI</b> how the organization maintained a close and continuous working relationship with the supported organization(s).			
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 <b>Part VI</b> the role the organization's supported organizations played in this regard.	3		
Secti	ion E. Type III Functionally Integrated Supporting Organizations			
1 a b	Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see   The organization satisfied the Activities Test. Complete line 2 below. The organization is the parent of each of its supported organizations. Complete line 3 below. The organization supported a governmental entity. Describe in Part VI how you supported a government entity.	h .		•
2	Activities Test. Answer (a) and (b) below.		Yes	No
а	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 <b>Part VI identify those supported organizations and explain</b> 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.			
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 <b>Part VI</b> 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.	1	<del>                                     </del>	<del> </del>
a	Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? <i>Provide details in Part VI</i> .	3a		
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 <b>Part VI</b> the role played by the organization in this regard.	3b		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Org	ani	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualifying			ain in Part VI). See
instructions. All other Type III non-functionally integrated supporting organ	izat	ons must complete Sect	
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):			
a Average monthly value of secunties	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	1	
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-functionall instructions).	y in	egrated Type III supporti	ng organization (see

Part	V Type III Non-Functionally Integrated 509(a)(3	3) Supporting Organi	zations (continued)	The state of the s
Sect	ion D - Distributions		, , ,	Current Year
1	Amounts paid to supported organizations to accomplish	1.14	4 7	
2	Amounts paid to perform activity that directly furthers exe	empt purposes of suppo	orted	1 "1"
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nızations	
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	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6		·	
10	Line 8 amount divided by line 9 amount			
S(	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а				
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount		<u> </u>	
<u>i</u> _	Carryover from 2012 not applied (see instructions)			
<u>j</u> _	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			1
4	Distributions for 2017 from	j		[
	Section D, line 7:		<del></del>	
	Applied to underdistributions of prior years			
<u>b</u> _				
<u>C</u>				
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.			
8	Breakdown of line 7:			
a	Excess from 2013			<u> </u>
<u>b</u>	Excess from 2014			
<u>c</u>	Excess from 2015			
d	Excess from 2016			
8	Excess from 2017			

Part	Type III Non-Functionally Integrated 509(a)(3			
Secti	on D - Distributions		t *	Current Year
1	Amounts paid to supported organizations to accomplish			
2	Amounts paid to perform activity that directly furthers exe	**		
	organizations, in excess of income from activity			•
3	Administrative expenses paid to accomplish exempt purp	oses of supported orga	nizations	
4	Amounts paid to acquire exempt-use assets			
5	Qualified set-aside amounts (prior IRS approval required)			<u> </u>
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	h the organization is res	ponsive	
	(provide details in Part VI). See instructions.			
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount	··· ··· ··· ··· ··· ··· ··· ··· ··· ··		
Se	ection E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2017	(iii) Distributable Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			·
2	Underdistributions, if any, for years prior to 2017 (reasonable cause required—explain in <b>Part VI</b> ). See instructions.			
3	Excess distributions carryover, if any, to 2017			
а	, <del>,</del> , , , , , , , , , , , , , , , , ,	,	-4-	
b	From 2013			
С	From 2014			
d	From 2015			
е	From 2016			
f	Total of lines 3a through e			
g	Applied to underdistributions of prior years			
h	Applied to 2017 distributable amount		'	
i	Carryover from 2012 not applied (see instructions)			
j	Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4	Distributions for 2017 from			
	Section D, line 7:			
а	Applied to underdistributions of prior years		······································	
b	Applied to 2017 distributable amount			
С	Remainder. Subtract lines 4a and 4b from 4.			
5	Remaining underdistributions for years prior to 2017, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
6	Remaining underdistributions for 2017. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in <b>Part VI.</b> See instructions.			
7	Excess distributions carryover to 2018. Add lines 3j and 4c.		· · · · · · · · · · · · · · · · · · ·	
8	Breakdown of line 7:		· · · · · · · · · · · · · · · · · · ·	
а	Excess from 2013		· · · · · · · · · · · · · · · · · · ·	
b	Excess from 2014			
С	Excess from 2015			
d	Excess from 2016			
е	Excess from 2017			

Schedule A (Form 990 or 990-EZ) 2017

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, 2l 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.)								
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Part VI	Supplemental Information. Provide the explana III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4l B, lines 1 and 2; Part IV, Section C, line 1; Part IV 3a, and 3b; Part V, line 1; Part V, Section B, line 1 lines 2, 5, and 6. Also complete this part for any a	o, 4c, 5a, 6, 9a, , Section D, line le: Part V, Sect	9b, 9c, 11a es 2 and 3; l ion D, lines	i, 11b, and Part IV, Se 5. 6. and 8	d 11c; Part l' ection E, line B; and Part \	V, Section s 1c, 2a, 2b,
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### SCHEDULE O (Form 990 or 990-EZ)

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.

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, OMB No 1545-0047 -

Department of the Treasury Internal Revenue Service

► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

Open to Public Inspection

Name of the organization

Employer identification number

St. Louis Section American Chemical Society Pearlow 3 Count Int. vA Pit. 1 de br	ารากอร์ Waitingo เห็า อหาวระ เรีย <b>า43-6049918</b> ตาตสอร์รี ราก9
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the St.´ Louis Award dinner.	Chile Trav 1 to .41 aid this west n. rainned Frestran
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Carol Sayers, Fort Zumwalt North High School; St. Louis ACS High School Teaching	Award (\$500 וחד א ביאור לאני לאני ווארב או Tri Cook ביא לאני לאני ווארב או Tri Cook ביא לאני לאני ווארב או דיי
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Molissa Kimlinger, St. Louis University, College Student Award	\$100
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Maci Sepp, Greenvile College, College Student Award	\$100
Himani Patel, McKendree University, College Student Award	\$100
Lenny Chen, Clayton High School, High School Chemistry Contest	\$200
Andrew Withrow, Clayton High School, High School Chemistry Contest	\$200
Tong Zhao, Clayton High School, High School Chemistry Contest	\$200
Erin Kotzbauer, Clayton High School, High School Chemistry Contest	\$100
Carly Galvin, John Burroughs School, High School Chemistry Contest	\$100
Noah Sock, John Burroughs School, High School Chemistry Contest	\$100
Grants < \$100	\$1400
Plaques, Pins, Ribbons, Etc.	\$959
Reimbursements to Subsections	\$5124
Washington University Chemistry Tournament	\$1000