DLN: 93493135011240

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

2019

OMB No. 1545-0047

Form **990**

Department of the Treasury

Return of Organization Exempt From Income Tax

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

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

Open to Public Inspection

		a 2010 a		inning 01-01-2019 , and ending 12-	21 2010					
		applicable:	C Name of organization	mning 01-01-2019 , and ending 12	31-2019	D Employer i	dentifica	ation number		
		change	REGIONAL CULTURAL AND PERFO	RMING ARTS						
		hange				43-136330	13			
_	itial re		Doing business as							
		rn/terminated ed return		mail is not delivered to street address) Room/s	suite	E Telephone n	umber			
		ion pending	6139 DELMAD BLVD			(314) 863	-5811			
				untry, and ZIP or foreign postal code						
			ST LOUIS, MO 63112			G Gross receip	ots \$ 7,00	12,374		
			F Name and address of princip	oal officer:	H(a) Is	this a group retur	n for			
			CELIA HOSLER 6128 DELMAR BLVD			bordinates?		□Yes 🗹 No		
			ST LOUIS, MO 63112			e all subordinates cluded?		☐ Yes ☐No		
I Ta	x-exe	mpt status:	☑ 501(c)(3) ☐ 501(c)() •	 ((insert no.)		"No," attach a list.	(see in	structions)		
J W	ebsi	te:► RAC	CSTL.ORG		H(c) Gr	oup exemption nu	mber 🟲			
					1.	1				
K For	m of c	organization:	: 🗹 Corporation 🗌 Trust 🔲 As	sociation ☐ Other ►	L Year of fo	ormation: 1985 M		legal domicile:		
Б	art I	S	mary							
	_		scribe the organization's mission	or most significant activities:						
as				E ARTS & CULTURE WITHIN THE ST. LOUI	IS, MISSOUF	RI AREA				
ž										
Ш										
) Ye	,	25% of its net asse	ets.							
3				ing body (Part VI, line 1a)		•	З	13		
න් ග	4	Number o	of independent voting members	of the governing body (Part VI, line 1b)			4	13		
Ţ.	5	Total nun	nber of individuals employed in o	calendar year 2019 (Part V, line 2a) .			5	20		
Activities & Governance	6	Total nun	mber of volunteers (estimate if n		6	15				
¥	7a	Total unr	elated business revenue from Pa	art VIII, column (C), line 12			7a	(
	b	Net unrel	lated business taxable income fro	om Form 990-T, line 39			7b	(
g _i						Prior Year	С	urrent Year		
	8	Contribut	tions and grants (Part VIII, line 1I	h)		6,513,010	1	6,988,70		
Ravenue	9	9 Program service revenue (Part VIII, line 2g)					i	13,40		
Αž	10	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)						306 26 3,561		
	11	Other rev								
	+	Total reve	:	7,002,37						
	1		nd similar amounts paid (Part IX,	4,341,071		4,514,678				
	1	·	paid to or for members (Part IX,		0					
83	1	-	other compensation, employee l	1,076,029		1,188,87				
Expenses	1		onal fundraising fees (Part IX, col	, ,,		c				
ੜੇ	1		raising expenses (Part IX, column (D)							
	1	·	penses (Part IX, column (A), line	·		1,229,163		1,410,90		
	1	•	penses. Add lines 13–17 (must ed	6,646,263	+	7,114,45				
<u>, o</u>	19	Revenue	less expenses. Subtract line 18	from line 12	Daniu u	-110,941		-112,08		
Net Assets or Fund Balances					Beginn	ing of Current Year		End of Year		
ege gaa	20	Total ass	ets (Part X, line 16)			6,646,136		6,483,48		
A A	21	Total liab	oilities (Part X, line 26)			2,897,198		2,846,63		
ŞĒ	22	Net asset	ts or fund balances. Subtract line	e 21 from line 20		3,748,938		3,636,85		
Pa	art II	Sign	ature Block							
				mined this return, including accompanying						
		e and belle ledge.	er, it is true, correct, and complet	te. Declaration of preparer (other than off	icer) is base	ed on all information	on or wn	ich preparer nas		
		******	* ure of officer			2020-05-14 Date				
Sign										
Here	=		HOSLER INTERIM EXECUTIVE DIRECT or print name and title	TOR						
		 	Print/Type preparer's name	Preparer's signature	Date	T PTII	N .			
Paid	Ч		, 1/po propurer o mullic			Check ☐ if P01	251998			
Pre		or	Firm's name BROWN SMITH WALL			self-employed Firm's EIN ► 43-100	1367			
Use	-	S.								
USE	· UI	'' y F	Firm's address ► 6 CITYPLACE DRIVE S	SUITE 900		Phone no. (314) 983	-1200			
			ST LOUIS, MO 6314	1						
May t	he IF	RS discuss	this return with the preparer sh	own above? (see instructions)			✓ Ye	s 🗆 No		

Form	990 (2	019)				Page 2
Pa	rt III	Statement of Program S	ervice Accomplis	hments		
		Check if Schedule O contains a	response or note to a	any line in this Part III		🗹
1	Briefly	describe the organization's mis		,		
LOUI ARTS ARTS INST ARTS	S CITY (SEE ! . AND C ITUTION . AND C	AND COUNTY AREA AND TO COI SCH O)THE MISSION OF THE RE ULTURAL ORGANIZATIONS BY: NS AND ACTIVITIES WITHIN ITS ULTURAL ORGANIZATIONS IMPI	NTRIBUTE TO THE EC GIONAL ARTS COMM 1. PROVIDING FUNDS BOUNDARIES, 2. PR ROVE QUALITY,4. CRE	ONOMIC DEVELOPMENT ISSION IS TO CREATE A 5 TO PROMOTE, ENCOU OMOTING AND PRESER EATING EQUAL ACCESS	E ARTS AND CULTURAL INSTITUTION OF THE AREA THROUGH A STRONG AN ENVIRONMENT THAT NURTURES RAGE AND FOSTER THE ARTS AND VING CULTURAL DIVERSITY, 3. HEL TO CULTURAL OPPORTUNITIES, 5. TO ENGAGE IN CULTURAL PLANNING	G PRESENCE OF THE ARTISTS AS WELL AS CULTURAL PING ARTISTS AND INSURING
2	Did th	e organization undertake any sig	nificant program serv	vices during the year w	hich were not listed on	
_		-				☐ Yes ☑ No
		s," describe these new services of				_ 1c3 _ 1t0
3		e organization cease conducting		changes in how it condu	ıcts, any program	
		es?		· · · · · ·		☐ Yes ☑ No
		s," describe these changes on So	hedule O.	· ·		. — :
4	Descri Sectio	be the organization's program s	ervice accomplishmer nizations are required	to report the amount of	largest program services, as measu of grants and allocations to others, t	
4a	(Code:) (Expenses \$	6,459,069	including grants of \$	4,514,678) (Revenue \$	13,406)
	•	lditional Data	, ,			, ,
4b	(Code:) (Expenses \$		including grants of \$) (Revenue \$)
4c	(Code:) (Expenses \$:	including grants of \$) (Revenue \$)
4.	Ot !		Sala a divida O N			
4d		program services (Describe in S nses \$	including grants of	\$) (Revenue \$)
4e	Total	program service expenses ▶	6,459,0	69		

18

19

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? <i>If "Yes," complete Schedule C, Part I</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? <i>If "Yes," complete Schedule C, Part II</i>	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? <i>If "Yes," complete Schedule D,</i> Part 2	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? <i>If "Yes," complete Schedule D,</i> Part III 3	8	Yes	
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? <i>If "Yes," complete Schedule D, Part V</i>	10		No
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.			
	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	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII 🥞	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII 2	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX "	11d		No
	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		No
	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

Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII,

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"

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

column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I(see instructions)

lines 1c and 8a? If "Yes," complete Schedule G, Part II

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

Nο

Nο

No

Nο

17

18

19

20a

20b

21

Yes

orm	990 (2019)			Page 4
Par	Checklist of Required Schedules (continued)			
			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
С	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		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
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? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Did the organization report any amount on Part X, line 5 or 22 for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		No
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L,</i> Part III	27		No
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV	28a		No
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		No
c	A 35% controlled entity of one or more individuals and/or organizations described in lines 28a or 28b? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	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? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		No
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		No
	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	
Pai				
	Check if Schedule O contains a response or note to any line in this Part V \dots . \dots . \dots			
			Yes	No
	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable 1a 106			ì
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable . 1b 0			

1c

Par	tV Statements Regarding Other IRS Filings and Tax Compliance (continued)			rage 3		
	Enter the number of employees reported on Form W-3, Transmittal of Wage and					
20	Tax Statements, filed for the calendar year ending with or within the year covered by this return					
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			
За	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				
	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)? If "Yes," enter the name of the foreign country:	4a		No		
	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		
	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		
	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6 b				
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		No		
	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b				
	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					
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		No		
f	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?					
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				
9	Sponsoring organizations maintaining donor advised funds.					
а	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:					
а	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:					
	Gross income from members or shareholders					
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)					
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.					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?	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					
C	Enter the amount of reserves on hand					
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				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15		No		
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O.	16		No		

Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to 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									
Se	ection 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 13								
	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 13								
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No					
3	of officers, directors or trustees, or key employees to a management company or other person?								
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	b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?								
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:								
а	The governing body?	8 a	Yes						
b	Each committee with authority to act on behalf of the governing body?	8 b	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					
Se	ection B. Policies (This Section B requests information about policies not required by the Internal Revenue	Code							
			Yes	No					
	Did the organization have local chapters, branches, or affiliates?	10a		No					
	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							
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Yes						
	Describe in Schedule O the process, if any, used by the organization to review this Form 990								
	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes						
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes						
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? <i>If "Yes," describe in Schedule O how this was done</i>	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?								
	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).								
	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?	4.51							
e-		16b							
<u>5e</u> 17	List the states with which a copy of this Form 990 is required to be filed								
18	Section 6104 requires an organization to make its Form 1023 (or 1024-A 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: ▶THE ORGANIZATION 6128 DELMAR BLVD ST LOUIS, MO 63112 (314) 863-5811								

Part VII

(17) SHERRY SISSAC

DEPUTY DIRECTOR

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 $\mbox{\rm VII}\,$. 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

- 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, of reportable compensation from the organization List all of the organization's former directo 	n and any relate rs or trustees	ed orgai that red	nizati ceive	ons. d, in	the	сара	city	as a former directo	or or trustee of the	
organization, more than \$10,000 of reportable co			organ	iizati	ion a	and ar	ny r	elated organization	S.	
See instructions for the order in which to list the										
Check this box if neither the organization no (A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	Positio tha pers	n (do an on on is	(C) o not e bo both) t che ox, u n an or/tr		ore er)	(D)	(E) Reportable compensation from related organizations (W-2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	1.00	ustee	Trustee		99	pensated				
(1) MONT LEVY CHAIRMAN		Х		х				0	0	0
(2) CHERYL DS WALKER VICE CHAIRMAN	1.00	Х		x				0	0	0
(3) ANDREA PURNELL SECRETARY	1.00	Х		х				0	0	0
(4) JOHN H RUSSELL TREASURER	1.00	Х		х				0	0	0
(5) MICHAEL SCULLY MEMBER AT LARGE	1.00	Х		x				0	0	0
(6) DR EVA FRAZER DIRECTOR	1.00	Х						0	0	0
(7) PATRICIA HAGEMAN DIRECTOR (TERM 05/2019)	1.00	Х						0	0	0
(8) ROSALIND JOHNSON DIRECTOR	1.00	х						0	0	0
(9) VINFUNG KO DIRECTOR	1.00	х						0	0	0
(10) CYNTHIA J KOHLBRY DIRECTOR	1.00	Х						0	0	0
(11) ANDREW SCAVOTTO DIRECTOR (TERM 06/2019)	1.00	Х						0	0	0
(12) ADEWALE SOLUADE DIRECTOR	1.00	Х						0	0	0
(13) KELLIE TRIVERS DIRECTOR	1.00	Х						0	0	0
(14) MARY WALSH DIRECTOR	1.00	Х						0	0	0
(15) DAVID CARL WILSON DIRECTOR	1.00	Х						0	0	0
(16) FELICIA SHAW EXECUTIVE DIRECTOR (RESIGN 11/2019)	40.00			x				155,830	0	23,128
	40.00	 				—				

40.00

16,985

143,455

Part VII Section A. Officers, Directors	, Trustees, K	ey Em	ploy	ees	, an	d Hig	hes	t Compens	ated	Employees (cont	inued)	
(A) Name and title	(B) Average hours per week (list any hours for related		ne bo	ox, ι n of tor/t	t che unles ficer	s pers	son	(D) Reportab compensate from the organizati (W-2/109	ion ∋ on	(E) Reportable compensatio from relate organizatior (W-2/1099	on d ns	(F) Estimated amount of oth compensatio from the organization a	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	3-	MISC)) related organizations		
(18) CELIA HOSLER	40.00			,,					0.000				
INTERIM EXECUTIVE DIRECTOR		••••		Х					8,862		0		0
											\dashv		
4.5.1.5.1						_							
1b Sub-Total	. . . 'II, Section A .		· .	•	•	:					-		
d Total (add lines 1b and 1c)	•				•	•		308,147			0		40,113
Total number of individuals (including but of reportable compensation from the organical)		those lis	sted a	abov	/e) v	/ho re	ceive	ed more than	\$100	,000			
3 Did the organization list any former offic	er director or t	rustaa	kev e	-mn	love	a orh	viahe	et compensa	tad ar	mployee on		Yes	No
line 1a? If "Yes," complete Schedule J for							_		•		3		No
4 For any individual listed on line 1a, is the organization and related organizations graindividual										he • • •	4	Yes	
5 Did any person listed on line 1a receive o services rendered to the organization? <i>If</i> "									individ	dual for	5		No
Section B. Independent Contractors													
1 Complete this table for your five highest of from the organization. Report compensat											npen	sation	
Name and b	(A) usiness address								escrip	(B) tion of services		(C) Compen	
SPRINGBOARD TO LEARNING								CONSUL					191,604
1310 PAPIN STE 402 ST LOUIS, MO 63103													
ARTS MANAGER LLC								CONSUL	TING				150,000
1300 PENNSYLVANIA NW STE 410 WASHINGTON, DC 20004													
O'MALLEY HANSEN COMMUNICATIONS								ADVERT	ISING				140,696
6677 DELMAR BLVD ST LOUIS, MO 63130													
2 Total number of independent contractors (in compensation from the organization ► 3	ncluding but not	limited	l to tl	hose	e list	ed abo	ove)	who received	l more	e than \$100,00	0 of	Form 99	2 (2010)

Page 8

Form 9										Page 9
Part	VIII				 -		orline to the Borrow			П
		Check If Sched	dule O	contains a	respo	onse or note to any	y 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
10	1a	Federated campa	aigns .		1 a			revenue		312 - 314
Contributions, Gifts, Grants and Other Similar Amounts	ŀ	b Membership dues	s	. [1 b					
Grand mo		c Fundraising even	its .	. [1c					
ifts, ar A	(d Related organiza	tions	Ĺ	1d					
m :5	•	e Government grants	(contrib	butions)	1e	6,791,042				
ons Sii	f	F All other contributio and similar amounts	ns, gifts s not inc	s, grants, cluded	1f	197,658				
buti free	١,	above g Noncash contributio	ns inclu	L Ided in I		157,030				
a do	3	lines 1a - 1f:\$			1 g					
S a	ı	h Total. Add lines :	1a-1f			•	6,988,700			
						Business Code				
an an	2a	RENTAL INCOME				531110	13,406	13,406		
Program Service Revenue		-				_				
Rev	b									
vice	С									
Ser	d									
ranı										
₽og	е									
_	f	All other program	service	e revenue.						
		Total. Add lines 2				13,406			1	
	3]	Investment income imilar amounts) .		ding divide • • •			268	3		268
	4 1	Income from invest	ment o	of tax-exer	npt bo	ond proceeds	•			
	5 F	Royalties					<u>▶</u>			
			l ⊢	(i) Rea	I	(ii) Personal				
		Gross rents	6a							
	b	Less: rental expenses	6ь							
	С	Rental income or (loss)	6c							
	d	Net rental income		ss)			-			
				(i) Securi	ties	(ii) Other				
	7a	Gross amount from sales of	7a							
		assets other than inventory								
	b	Less: cost or other basis and	7b							
		sales expenses	\vdash							
	С	Gain or (loss)	7c							
		Net gain or (loss) Gross income from fu				· · · •	_			
ņe	oa	(not including \$		of						
ven		contributions reported See Part IV, line 18			8a					
Other Revenue	b	Less: direct expen	ses .		8b					
thei	С	Net income or (los	s) fron	n fundraisi	ng ev	ents 🕨	_			
	9a	Gross income from	gaming	g activities.						
	_	See Part IV, line 19			9a					
		Less: direct expen Net income or (los			9b activit	ies				
	Ĭ	The meanie of (103	3) 11011	n ganning t		les >				
	10a	Gross sales of inve returns and allowa	entory, ances	less	10a					
		Less: cost of good			10a		-			
		Net income or (los			nvent	cory ►				
		Miscellaneo	us Rev	enue		Business Code				
	11	a								
	b									
	C									
	d	All other revenue								
	е	Total. Add lines 1	1a-11d	d		•				
	12	Total revenue. S	ee inst	ructions .	_ •		7,002,374	13,406		0 268
										Form 000 (2010)

Part IX Statement of Functional Expenses				rage 10
Section 501(c)(3) and 501(c)(4) organizations must of	complete all columns.	All other organizatio	ns must complete colu	mn (A).
Check if Schedule O contains a response or note to ar	ny line in this Part IX	<u></u>	<u> </u>	<u> \square</u>
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
Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	4,117,856	4,117,856		
2 Grants and other assistance to domestic individuals. See Part IV, line 22	396,822	396,822		
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	348,260	154,348	193,912	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	679,340	593,220	86,120	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions)	20,075	15,936	4,139	
9 Other employee benefits	68,733	58,589	10,144	
10 Payroll taxes	72,468	55,260	17,208	
11 Fees for services (non-employees):				
a Management				
b Legal	27,609		27,609	
c Accounting	108,275		108,275	
d Lobbying				
e Professional fundraising services. See Part IV, line 17				
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)	629,350	575,625	53,725	
12 Advertising and promotion	173,111	173,098	13	
13 Office expenses	59,127	21,939	37,188	
14 Information technology	63,901	47,287	16,614	
15 Royalties				
16 Occupancy	81,003	74,516	6,487	
17 Travel	30,769	14,292	16,477	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials .				
19 Conferences, conventions, and meetings	77,505	43,475	34,030	
20 Interest	14,674		14,674	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	118,738	101,138	17,600	
23 Insurance	14,767	12,402	2,365	
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 MEMBERSHIP/PUBLICATION	12,075	3,266	8,809	
b				
С				
d				
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	7,114,458	6,459,069	655,389	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				
Check here ► ☐ if following SOP 98-2 (ASC 958-720).				

Form 990 (2019)

2

3

Assets

19

20

21

Liabilities

Fund Balances

ō 29

Assets 30

27

28

31

32

33

End of year

1

2

3

4

5

6 7

8

9

10c

11

12 13

14

15

16

17

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19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

2,864,228

1,438,773

176.424

24,305

2,118,206

24,200

6,646,136

1.937.377

203,117

756.704

2.897.198

3,526,415

222,523

3,748,938

6,646,136

Beginning of year

3.683,777

1,684,309

Page **11**

6,594

2,995,974

1,453,921

15,793

1,999,468

11,737

6,483,487

218,448

2.046.585

581.600

2.846.633

3.636,854

3,636,854

6,483,487

Form 990 (2019)

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

Cash-non-interest-bearing

Savings and temporary cash investments . Pledges and grants receivable, net . . .

Accounts receivable, net Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B). Notes and loans receivable, net . . . Inventories for sale or use . Prepaid expenses and deferred charges .

10a

10b

basis. Complete Part VI of Schedule D Investments—publicly traded securities . Investments—other securities. See Part IV, line 11 .

10a Land, buildings, and equipment: cost or other b Less: accumulated depreciation 11 12 13 Investments—program-related. See Part IV, line 11

Intangible assets .

Other assets. See Part IV, line 11 . . .

14 15 16 Total assets. Add lines 1 through 15 (must equal line 34) . 17 Accounts payable and accrued expenses . 18

Grants payable . Deferred revenue . . .

Tax-exempt bond liabilities . .

Escrow or custodial account liability. Complete Part IV of Schedule D Loans and other payables to any current or former officer, director, trustee, key

employee, creator or founder, substantial contributor, or 35% controlled entity Secured mortgages and notes payable to unrelated third parties . . .

22 Unsecured notes and loans payable to unrelated third parties .

23 Other liabilities (including federal income tax, payables to related third parties,

24 25 and other liabilities not included on lines 17 - 24). Complete Part X of Schedule D

Net assets without donor restrictions

Net assets with donor restrictions .

complete lines 29 through 33.

Total net assets or fund balances

Total liabilities. Add lines 17 through 25 . .

Capital stock or trust principal, or current funds .

Total liabilities and net assets/fund balances .

26

Organizations that follow FASB ASC 958, check here <a> \square and

Organizations that do not follow FASB ASC 958, check here > \(\begin{align*} \text{and} \\ \text{and} \end{align*}

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

complete lines 27, 28, 32, and 33.

Form	990 (2019)				Page 12
Pa	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		7	,002,374
2	Total expenses (must equal Part IX, column (A), line 25)	2		7	,114,458
3	Revenue less expenses. Subtract line 2 from line 1	3			112,084
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		3	,748,938
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10		3	,636,854
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				✓
				Yes	No
	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.		2-		NI-
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 separate basis, consolidated basis, or both:	on a			
	☐ 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 consolidated basis, or both:	basis,			
	☑ 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 Sche	dule O			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si Audit Act and OMB Circular A-133?	ngle	3a		No
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requiaudit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	ired	3b		

3b

Additional Data

Software ID:

Software Version:

EIN: 43-1363303

Name: REGIONAL CULTURAL AND PERFORMING ARTS

DEVELOPMENT COMMISSION

Form 990 (2019)

Form 990, Part III, Line 4a:

THE COMMISSION RECEIVES, AS CONTRIBUTIONS, 4/15 OF THE TOTAL REVENUE DERIVED FROM THE ST. LOUIS CITY AND COUNTY HOTEL/MOTEL SALES TAX. THE COMMISSION DISTRIBUTES THIS REVENUE BY FUNDING OR MAKING GRANTS TO NOT-FOR-PROFIT ORGANIZATIONS AND INDIVIDUAL ARTISTS FOR ACTIVITIES IN ST. LOUIS CITY AND COUNTY. THE COMMISSION MAKES IT POSSIBLE FOR OTHER INSTITUTIONS TO CONTINUE TO PERFORM AND FOSTER ART ACTIVITIES. SEE SCHEDULE I FOR GRANT PAYMENTS. THE COMMISSION MAKES GRANTS BASED ON COMPLETED APPLICATIONS WHICH INCLUDE THE FOLLOWING AREAS: 1)ARTISTIC MERIT 4) AUDIENCE DEVELOPMENT 2)COMMUNITY/NATIONAL IMPACT 5)CULTURAL DIVERSITY 3)EFFECTIVE/ACCOUNTABLE MANAGEMENT SEE SCHEDULE O FOR CONTINUED

PROGRAM SERVICE ACCOMPLISHMENTS. IN ADDITION, THE GRANTEES MAKE PRESENTATIONS TO THE COMMISSION AND PROMOTE THEIR ACTIVITIES. THE COMMISSION REVIEWS ALL ASPECTS OF THE ORGANIZATION BEFORE APPROVING GRANTS.

efile GRAPHIC print - DO NOT PROCESS			As Filed Data -				DLN: 93493135011240		
SCI	HED	ULE A		Public (Charity Statu	e and Dul	nlic Sunn	ort	OMB No. 1545-0047
(For	m 99		Comp		ganization is a sect	ion 501(c)(3)	organization o		2019
990E	EZ)				4947(a)(1) nonexe ▶ Attach to Form !				
		f the Treasury	▶ Go	to <u>www.irs.</u>	<i>gov/Form</i> 990 for i			ormation.	Open to Public Inspection
Nam	e of th	nue Service he organiza						Employer identific	<u> </u>
		IT COMMISSIO	PERFORMING ART N	5				43-1363303	
	rt I				s (All organization			See instructions.	
1 ne o	rganiz		•		it is: (For lines 1 thro	· ,	, ,	(A)(:)	
		·		,	sociation of churches				
2					l)(A)(ii). (Attach Sch	,			
3		·	·	·	ice organization desc			-	
4	Ш	A medical r name, city,		zation operate	d in conjunction with	a hospital descri	ibed in section :	170(b)(1)(A)(iii). E	nter the hospital's
5			ation operated (iv). (Complete		of a college or univer	rsity owned or op	perated by a gov	ernmental unit descri	bed in section 170
6	П			•	governmental unit de	scribed in sectio	on 170(b)(1)(A	\)(v).	
7	✓		ation that norm (0(b)(1)(A)(v			s support from a	governmental u	ınit or from the gener	al public described in
8	П		. , . , . , .		170(b)(1)(A)(vi).	(Complete Part I	I.)		
9					scribed in 170(b)(1) e instructions. Enter				ege or university or a
10		An organiza	ation that norm	ally receives:	(1) more than 331/3%	% of its support f	rom contribution	ns, membership fees, than 331/3% of its su	•
					ess taxable income (le mplete Part III.)	ess section 511 t	ax) from busines	sses acquired by the c	rganization after June
11		An organiza	ation organized	and operated	exclusively to test fo	r public safety. S	ee section 509	(a)(4).	
12		more public	ly supported o	rganizations d		09(a)(1) or sec	ction 509(a)(2	s of, or to carry out th). See section 509(a s 12e, 12f, and 12g.	
a		Type I. A so	supporting orga	anization opera to regularly a	ated, supervised, or c	ontrolled by its s	upported organiz	zation(s), typically by of the supporting orga	
b		Type II. A manageme	supporting org	anization supe orting organiza	tion vested in the sar			organization(s), by ha ge the supported orga	
С		Type III f	unctionally in	tegrated. A s				nd functionally integra	ted with, its
d		Type III n	on-functional integrated. Th	lly integrated le organization	I. A supporting organi	ization operated fy a distribution	in connection wi	th its supported organ an attentiveness req	
e		Check this	box if the orgai	nization receiv		nation from the I		pe I, Type II, Type II	I functionally
f	Enter		of supported of		· · · · · · · · · · · ·	-		<u> </u>	
g	Provi	de the follow	ing information	about the su	pported organization(
	(i) Name of supported organization			(ii) EIN	(iii) Type of organization (described on lines 1- 10 above (see instructions))		anization listed ing document?	(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
						Yes	No		
Tota		want D	bian A-t ti		structions for	Cat. No. 11285		Cabadul- A / T	90 or 990-EZ) 2019

	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total
	(or fiscal year beginning in) ▶	(a) 2013	(B) 2010	(0) 2017	(d) 2010	(6) 2013		(I) Total
1	Gifts, grants, contributions, and	125.000	22.424	4 400 604	45.006	4.0-		4 505 00
	membership fees received. (Do not	135,939	22,124	1,133,681	15,996	197	,658	1,505,398
_	include any "unusual grant.") . . Tax revenues levied for the						\dashv	
2	organization's benefit and either paid	5,974,527	6,340,934	6,389,553	6,497,014	6,791	042	31,993,070
	to or expended on its behalf	3,574,527	0,540,554	0,303,333	0,457,014	0,753	,042	31,333,07
3	The value of services or facilities						$\neg \dagger$	
•	furnished by a governmental unit to							
	the organization without charge							
4	Total. Add lines 1 through 3	6,110,466	6,363,058	7,523,234	6,513,010	6,988	,700	33,498,468
5	The portion of total contributions by							
_	each person (other than a							
	governmental unit or publicly							
	supported organization) included on							310,82
	line 1 that exceeds 2% of the							
	amount shown on line 11, column (f)							
6	Public support. Subtract line 5						\dashv	
0	from line 4.							33,187,64
	Section B. Total Support	'	'	'	'			
	Calendar year	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019		(f) Total
	(or fiscal year beginning in) 🟲	_ ` ′	. ,	` ,	` ′			
7	Amounts from line 4	6,110,466	6,363,058	7,523,234	6,513,010	6,988	3,700	33,498,468
8	,							
	dividends, payments received on	25,386	2,059	3,793	6,478		268	37,98
	securities loans, rents, royalties and	·	,	,	<i>'</i>			,
_	income from similar sources						\rightarrow	
9	Net income from unrelated business activities, whether or not the							
	business is regularly carried on							
10							-+	
10	or loss from the sale of capital				2,389			2,389
	assets (Explain in Part VI.)				_,			_,
11								33,538,84:
	10							33,538,84.
12	Gross receipts from related activities,	etc. (see instruction	ons)			12		110,60
13	First five years. If the Form 990 is for	or the organization	's first, second, th	ird, fourth, or fifth	tax year as a sec	tion 501(c)(3) orga	anization,
	check this box and $\boldsymbol{stop\ here}\ \boldsymbol{.}\ \boldsymbol{.}\ \boldsymbol{.}$						ightharpoons]
S	Section C. Computation of Publi	c Support Perc	entage					
14	Public support percentage for 2019 (li	ne 6, column (f) di	vided by line 11, o	column (f))		14		98.950 %
	Public support percentage for 2018 Sc					15		99.820 %
	33 1/3% support test—2019. If the						this	
100								
_	and stop here. The organization qual							
Ŀ	33 1/3% support test—2018. If th	-				•		_
	box and stop here. The organization	n qualifies as a pub	licly supported org	ganization				▶ 🗆

17a 10%-facts-and-circumstances test-2019. 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

Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly

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

in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported b 10%-facts-and-circumstances test—2018. 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.

Schedule A (Form 990 or 990-EZ) 2019

Р	art III Support Schedule for						
	(Complete only if you cl						er Part II. If
S	the organization fails to ection A. Public Support	quality under	the tests listed i	pelow, please co	ompiete Part II.)		
30	Calendar year	() 2015	(1) 2016	() 2247	(1) 2010	() 2010	(O.T.)
	(or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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						
4	under section 513 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						
L	3 received from disqualified persons Amounts included on lines 2 and 3						
D	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.)						
Se	ection B. Total Support		1				Г
	Calendar year (or fiscal year beginning in) ▶	(a) 2015	(b) 2016	(c) 2017	(d) 2018	(e) 2019	(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.						
С	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						
12	(Explain in Part VI.) Total support. (Add lines 9, 10c,						
13	11, and 12.).						
14	First five years. If the Form 990 is for	the organization	n's first, second, th	nird, fourth, or fift	h tax year as a sec	tion 501(c)(3) o	ganization <u>,</u>
	check this box and stop here						▶ ⊔
	ection C. Computation of Public S			! (6))		1 1	
15	Public support percentage for 2019 (lin		•			15	
16	Public support percentage from 2018 S	-	<u> </u>			16	
	ection D. Computation of Investr Investment income percentage for 201			line 13 column (f	:))	17	
17 10	Investment income percentage for 201	-		-		17	
18 10-	331/3% support tests—2019. If the		•			18 33 1/3% and lin	e 17 is not
	more than 33 1/3%, check this box and s						
	more than 33 1/3%, check this box and s 33 1/3% support tests—2018. If the						
ט	not more than 33 1/3%, check this box	-			•		_
20	Private foundation. If the organization	-	-				
	Frivate foundation. If the organization	ni ulu not check a	a DOX ON UNE 14, I	.a, or iad, check	, unis pox and see I	HSGRUCGONS	. 📂 📖

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

10a

answer line 10b below.

the organization had excess business holdings).

Sections A and D, and complete Part V.) Section A. All Supporting Organizations Yes No

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 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

Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below. 3a 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 Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use. 3с

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 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

4b supervised by or in connection with its supported organizations. 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 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 5a amendment to the organizing document).

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

5с 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 6

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. 6 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

Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes,"

8 complete Part I of Schedule L (Form 990 or 990-EZ). 8

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

```
Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting
```

than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its

organization had an interest? If "Yes," provide detail in Part VI.

9c

10a

10b

Schedule A (Form 990 or 990-EZ) 2019

9b

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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 Part VI.
```

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,"

Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether

	edule A (101111 550 01 550 E2) 2015			age 3
Pa	rt IV Supporting Organizations (continued)			
_			Yes	No
	Has the organization accepted a gift or contribution from any of the following persons?			
а	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		
	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		
S	ection B. Type I Supporting Organizations			
			Yes	No
1	Did the directors, trustees, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's directors or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove directors or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1		
2	Did the organization operate for the benefit of any supported organization other than the supported organization(s) that	-		
2	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	2		
	organization.			
S	ection C. Type II Supporting Organizations			
_			Yes	No
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of			
	each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the	1		
	supporting organization was vested in the same persons that controlled or managed the supported organization(s).			
S	ection D. All Type III Supporting Organizations		v	
_			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 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		
S	ection 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 instruct	ions):		
	The organization satisfied the Activities Test. Complete line 2 below.			
	b			
•	The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see	instru	ctions)	
2	Activities Test. Answer (a) and (b) below.	ſ	Yes	No
•	a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	2a		
ı	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? <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 Part VI. the role played by the organization in this regard.	3h		

3b

1	Type III Non-Functionally Integrated 509(a)(3) Supporting O Check here if the organization satisfied the Integral Part Test as a qualifying true.			. Part VIV. See
	Check here if the organization satisfied the Integral Part Test as a qualifying truinstructions. All other Type III non-functionally integrated supporting organization			
	Section A - Adjusted Net Income		(A) Prior Year	(B) Current Yea (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 Yea (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		
а	Average monthly value of securities	1a		
b	Average monthly cash balances	1 b		
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		

	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 2019 from Section C, line 6	

7 Total annual distributions. Add lines 1 through 6.			
8 Distributions to attentive supported organizations to who details in Part VI). See instructions	sive (provide		
9 Distributable amount for 2019 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-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions if any for years prior to 2019			

7 Total annual distributions. Add lines 1 through 6.					
Distributions to attentive supported organizations to who details in Part VI). See instructions					
9 Distributable amount for 2019 from Section C, line 6					
10 Line 8 amount divided by Line 9 amount	10 Line 8 amount divided by Line 9 amount				
Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019		
1 Distributable amount for 2019 from Section C, line 6					
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.					
3 Excess distributions carryover, if any, to 2019:					
a From 2014					
b From 2015					
c From 2016					

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2019	(iii) Distributable Amount for 2019
1 Distributable amount for 2019 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2019 (reasonable cause required explain in Part VI). See instructions.			
3 Excess distributions carryover, if any, to 2019:			
a From 2014			
b From 2015			
c From 2016			
d From 2017			
e From 2018			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2019 distributable amount			
 Carryover from 2014 not applied (see instructions) 			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
	The state of the s	·	

c From 2016		
d From 2017		
e From 2018		
Total of lines 3a through e		
g Applied to underdistributions of prior years		
n Applied to 2019 distributable amount		
Carryover from 2014 not applied (see instructions)		
Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
Applied to 2019 distributable amount		
Remainder. Subtract lines 4a and 4b from 4.		

instructions)		
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.		
4 Distributions for 2019 from Section D, line 7:		
\$		
Applied to underdistributions of prior years		
b Applied to 2019 distributable amount		
c Remainder. Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI . See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions		

C Remainder, Subtract lines 4a and 4b from 4.		
5 Remaining underdistributions for years prior to 2019, if any. Subtract lines 3g and 4a from line 2. If the amount is greater than zero, explain in Part VI. See instructions.		
6 Remaining underdistributions for 2019. Subtract lines 3h and 4b from line 1. If the amount is greater than zero, explain in Part VI. See instructions.		
7 Excess distributions carryover to 2020. Add lines 3j and 4c.		
8 Breakdown of line 7:		
a Excess from 2015		
b Excess from 2016		
c Excess from 2017		

Schedule A (Form 990 or 990-EZ) (2019)

d Excess from 2018.

e Excess from 2019.

Schedule A (I	dule A (Form 990 or 990-EZ) 2019								
	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								
990 Sched	lule A, Supplement	tal Information							
Reti	Return Reference Explanation								
	A, PART II, LINE 10, ON OF OTHER	MISCELLANEOUS REVENUE - 2018 AMOUNT: \$ 2,389.							

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OMB No. 1545-0047

SCHEDULE D

(Form 990)

1

2

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6

3

5

6

8

Supplemental Financial Statements ➤ Complete if the organization answered "Yes," on Form 990,

Open to Public Inspection

Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ► Attach to Form 990.

Department of the Treasury ▶ Go to www.irs.gov/Form990 for instructions and the latest information. Internal Revenue Service Name of the organization **Employer identification number** REGIONAL CULTURAL AND PERFORMING ARTS DEVELOPMENT COMMISSION 43-1363303 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 Total number at end of year Aggregate value of contributions to (during year) Aggregate value of grants from (during year) Aggregate value at end of year 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 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 ☐ Yes ☐ No Part II **Conservation Easements.** Complete if the organization answered "Yes" on Form 990, Part IV, line 7. 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 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 2b Number of conservation easements on a certified historic structure included in (a) 20 Number of conservation easements included in (c) acquired after 7/25/06, and not on a historic structure listed in the National Register . . . Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year 🟲 Number of states where property subject to conservation easement is located > Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) ☐ Yes 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 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. 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: 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:

 $\boldsymbol{c} \ \ \text{Leasehold improvements}$ \boldsymbol{d} Equipment

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)

e Other . .

		(101111 990) 2019											Page Z
	31111	Organizations Ma											· · · · · · · · · · · · · · · · · · ·
3		g the organization's acqu s (check all that apply):	uisition, accession	, and other	records,		any of	the fo	llowing t	hat are	a significant ι	ise of its o	collection
а	\checkmark	Public exhibition				d		Loan	or excha	ange pro	grams		
b		Scholarly research				е		Othe	r				
С		Preservation for future	generations										
4	Provi Part)	de a description of the o	organization's coll	ections and	l explain l	how the	y furtl	ner the	e organiz	ation's e	exempt purpo	se in	
5		ig the year, did the organists to be sold to raise fun										☐ Yes	☑ No
Par	t IV	Escrow and Custon Complete if the org X, line 21.			" on For	m 990	, Part	IV, li	ne 9, or	report	ed an amou	ınt on Fo	rm 990, Part
1a		e organization an agent, ded on Form 990, Part)										☐ Yes	□ No
b	If "Y∈	es," explain the arrange	ment in Part XIII	and comple	ete the fo	llowing	table:		[A	mount	
С		nning balance				_				1c			
d	-	ions during the year .							İ	1d			
е		butions during the year							h	1e			
f		ng balance							The state of the s	1f			
2a	Did tl	he organization include	an amount on Foi	m 990, Pa	rt X, line i	21, for	escrow	or cu	stodial a	ccount l	iability?	☐ Yes	□ No
b		es," explain the arrange										_	
	rt V	Endowment Fund			- 11 - 11 - 2	.,			p				
		Complete if the org		ered "Yes	" on For	m 990	, Part	IV, li	ne 10.				
				(a) Curre	nt year	(b) P	rior yea	ır	(c) Two y	ears back	(d) Three year	ars back (e	e) Four years back
1 a	Beginn	ing of year balance .											
b	Contrib	outions											
C	Net in	estment earnings, gain/	s, and losses										
d	Grants	or scholarships											
		expenditures for facilitie	es										
f	Admini	istrative expenses .											
g	End of	year balance	[
2 a		de the estimated percer d designated or quasi-er		nt year end	d balance	(line 1	g, colu	mn (a)) held as	s:			
		anent endowment >											
b		*******											
С		orarily restricted endov	***************************************		001								
3а	Are tl	percentages on lines 2a, here endowment funds nization by:	•			ion that	are h	eld an	d admini	stered f	or the		Yes No
	-	nrelated organizations										3a(-
	(ii) r	elated organizations .										3a(
b	` '	es" on 3a(ii), are the rel		s listed as i	required o	on Sche	dule R	? .				31:	
4	Desci	ribe in Part XIII the inte	nded uses of the	organizatio	n's endov	vment f	unds.						
Par	t VI	Land, Buildings, Complete if the org			" on For	m 990	, Part	IV, li	ne 11a.	See Fo	orm 990, Pa	rt X, line	10.
	Descri	iption of property	(a) Cost or oth (investme	er basis	(b) Cost						depreciation) Book value
1a	Land						13	35,213					135,213
		gs						56,609			1,165,912		1,690,697

218,677

185,851

287,427

143,101

30,457

75,576

155,394

287,427

Part VII Investments—Other Securities.) + T) / :	11h C F 000	Davit V. Bina 4.2
Complete if the organization answered "Yes" on Form 990, P (a) Description of security or category (including name of security)	(b) Book value	(c) Metho	d of valuation: -year market value
(1) Financial derivatives			
(A)			
(B)			
(C)			
(D)			
(E)			
(F)			
(G)			
(H)			
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, P (a) Description of investment	art IV, li	ne 11c. See Form 990, (b) Book value	Part X, line 13. (c) Method of valuation: Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
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, Pa	art IV, lin	ne 11d. See Form 990, Pai	
(a) Description			(b) Book value
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
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, Pa	art IV, lin	ne 11e or 11f.See Form	990, Part X, line 25.
 (a) Description of liability (1) Federal income taxes 			(b) Book value
(2)			
(3)			
(4) (5)			
(5)			
(6)			
(7)			
(8)			
(9) Total (Column (h) must equal Form 990, Part Y, col (R) line 25.)			
Total. (Column (b) must equal Form 990, Part X, col.(B) line 25.) 2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote	e to the or	ganization's financial state	
organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check h	ere if the		een provided in Part XIII Schedule D (Form 990) 2019

2

3

4

b

C 5

1 2

d

3

b

5

Part XIII

See Additional Data Table

Part XII

Schedule D (Form 990) 2019

Page 4

189,778

7,114,458

7.114.458

Schedule D (Form 990) 2019

b	Donated services and use of facilities	2b			
c	Recoveries of prior year grants	2c			
d	Other (Describe in Part XIII.)	2d	189,778		
е	Add lines 2a through 2d	·		2e	ĺ

Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)

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

Amounts included on line 1 but not on Form 990, Part VIII, line 12: Net unrealized gains (losses) on investments

Amounts included on Form 990, Part VIII, line 12, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b .

Amounts included on line 1 but not on Form 990, Part IX, line 25:

Add lines **4a** and **4b**

Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)

Total expenses and losses per audited financial statements

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b . . .

Supplemental Information

Add lines **4a** and **4b**

Donated services and use of facilities . .

Add lines 2a through 2d .

189,778

2e

3

4c

5

189,778

		•	
	i		
4a			
4b			

2b

2a 2b

2c 2d

4b

act line 2e from line 1	3	7,002,374			
nts included on Form 990, Part VIII, line 12, but not on line 1:					
ment expenses not included on Form 990, Part VIII, line 7b .	4a				
(Describe in Part XIII.)	4b				
nes 4a and 4b	• •			4c	(
evenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)				5	7,002,374
Reconciliation of Expenses per Audited Financial Statem	ents W	ith Ex	penses pe	er Return.	
Complete if the organization answered 'Yes' on Form 990, Pari	t IV, line	e 12a.			
expenses and losses per audited financial statements				1	7,304,236

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

chedule D (Form 990) 2019	Page 5
Part XIII Supplemental Info	ormation (continued)
Return Reference	Explanation

Schedule D (Form 990) 2019

Additional Data

Software ID: Software Version:

EIN: 43-1363303

Name: REGIONAL CULTURAL AND PERFORMING ARTS DEVELOPMENT COMMISSION

Supplemental Information Return Reference

Explanation

CQUIRE OTHER ITEMS FOR COLLECTIONS.

PART III, LINE 1A:

DONATED COLLECTION ITEMS AS PERMITTED BY GASB NO. 34, "BASIC FINANCIAL STATEMENTS - AND MA NAGEMENT'S DISCUSSION AND ANALYSIS - FOR STATE AND LOCAL GOVERNMENTS", THE COMMISSION DOES

NOT CAPITALIZE WORKS OF ART ACQUIRED THROUGH PURCHASES OR DONATIONS. THAT STATEMENT PROVI DES THAT WORKS OF ART NEED NOT BE RECOGNIZED IF THEY ARE ADDED TO COLLECTIONS THAT ARE HEL D FOR PUBLIC EXHIBITION, EDUCATION, OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE RATHER TH AN FINANCIAL GAIN: ARE PROTECTED, KEPT UNENCUMBERED, CARED FOR, AND PRESERVED; AND ARE SUB JECT TO A POLICY THAT REQUIRES THE PROCEEDS FROM SALES OF COLLECTION ITEMS TO BE USED TO A

Supplemental Information						
Return Reference	Explanation					
PART III, LINE 4:	THE REGIONAL ARTS COMMISSION'S ART COLLECTION IS USED TO PROVIDE VISIBILITY FOR LOCAL ARTI STS WHO ALLOW TEMPORARY EXHIBITION OF THEIR WORKS IN THE CULTURAL RESOURCE CENTER. THE WOR KS ARE AVAILABLE FOR PURCHASE AND ARTISTS RECEIVE 100% OF THE PROCEEDS.					

Supplemental Information	
Return Reference	Explanation
PART X, LINE 2:	THE COMMISSION QUALIFIES AS AS CHARITABLE ORGANIZATION AS DEFINED BY INTERNAL REVENUE CODE 501(C)(3), AND ACCORDINGLY IT IS EXEMPT FROM FEDERAL INCOME TAXES UNDER INTERNAL REVENUE CODE SECTION 501(A) AND SIMILAR PROVISIONS OF STATE LAW. THE COMMISSION FILES FEDERAL INFO RMATION RETURNS. THE STATUTES OF LIMITATIONS FOR THESE RETURNS ARE GENERALLY SUBJECT TO EX AMINATION BY THE INTERNAL REVENUE SERVICE FOR THREE YEARS FROM THE DATE THEY ARE FILED.

Supplemental Information						
Return Reference	Explanation					
PART XI, LINE 2D - OTHER ADJUSTMENTS:	ADJUSTMENT DUE TO INTERCOMPANY RENTAL REVENUE AND RENTAL EXPENSE. 189,778.					

Supplemental Information						
Return Reference	Explanation					
PART XII, LINE 2D - OTHER ADJUSTMENTS:	ADJUSTMENT DUE TO INTERCOMPANY RENTAL REVENUE AND RENTAL EXPENSE. 189,778.					

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. Schedule I

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.

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

OMB No. 1545-0047

DLN: 93493135011240

Open to Public Inspection

nternal Revenue Service							
lame of the organization	ODMING ARTS					Employer identific	ation number
DEVELOPMENT COMMISSION	DRIVING ARTS					43-1363303	
Part I General Inform	ation on Grants	and Assistance					
1 Does the organization mai						ce, and	
the selection criteria used Describe in Part IV the org							☑ Yes 🗌 No
2 Describe in Part IV the org Part III Grants and Other	•	•	-		rganization answered "Yes	" on Form 990 Part IV line	21 for any recipient
that received more	than \$5,000. Part II	can be duplicated if ad	ditional space is needed.	sittsi complete ii tile o		on rolling 550, raile 10, line	. 21, for any recipient
(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 noncash assistance	(h) Purpose of grant or assistance
1) See Additional Data							
2)							
3)							
4)							
5)							
6)							
7)							
8)							
9)							
10)							
11)							
12)							
Enter total number of sectEnter total number of othe							119
or Paperwork Reduction Act Notice							nedule I (Form 990) 2019

(Form 990)

Department of the

(1) ARTIST SUPPORT

Schedule I (Form 990) 2019

Part III

(2)

(3)

(4)

(5)

(6)

(7)

Part IV

PART I, LINE 2:

Return Reference

Schedule I (Form 990) 2019

(e) Method of valuation (book,

FMV, appraisal, other)

Page **2**

Explanation

COMMISSIONERS APPROVE THE GRANTEES AND FINAL ALLOCATION OF FUNDS.

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

(c) Amount of

cash grant

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

396,822

(d) Amount of

noncash assistance

THE REGIONAL ARTS COMMISSION (RAC) PROVIDES FINANCIAL SUPPORT FOR BOTH NON-PROFIT ORGANIZATIONS AND INDIVIDUAL ARTISTS IN ST. LOUIS CITY AND COUNTY, SINCE 1985, RAC HAS AWARDED MORE THAN 7,000 GRANTS TOTALING MORE THAN \$300 MILLION TO HELP STRENGTHEN ARTS AND CULTURE WITHIN

ITHE REGION. AS AN EXTENSION OF OUR MISSION TO PROMOTE, ENCOURAGE AND FOSTER THE ARTS, RAC ALSO PROVIDES TECHNICAL ASSISTANCE AND INETWORKING SUPPORT TO EMPOWER ARTISTS AND ORGANIZATIONS TO ENRICH THEIR PROGRAMS AND SERVE OUR COMMUNITY. ANY ORGANIZATION OR INDIVIDUAL ARTIST INTERESTED IN APPLYING FOR A GRANT FROM THE RAC MUST FIRST DETERMINE ELIGIBILITY, ORGANIZATIONS MUST FILL OUT A PRE-APPLICATION, WHICH BECOMES AVAILABLE EVERY NOVEMBER. ALL ELIGIBLE APPLICANTS WILL THEN BE INVITED TO FILL OUT A FULL APPLICATION. APPLICATIONS FOR INDIVIDUAL ARTIST GRANT OPPORTUNITIES BECOME AVAILABLE EVERY JANUARY, JULY, AND AUGUST. ALL APPLICATIONS ARE SUBMITTED THROUGH RAC'S ONLINE GRANT APPLICATION WEBSITE. FUNDING IS DETERMINED AT THE END OF A MULTI-STEP PROCESS THAT INVOLVES SEVERAL KEY PARTICIPANTS WORKING TOGETHER OVER SEVERAL MONTHS: 1. RAC STAFF REVIEWS APPLICATIONS FOR ELIGIBILITY, 2. CITIZEN REVIEW PANELISTS REVIEW AND RATE APPLICATIONS AND

CONSIDER APPEALS, 3, RAC GRANTS COMMITTEE RECOMMEND THE GRANTEES FOR FUNDING AND THE ALLOCATION OF FUNDS, 4, THE RAC BOARD OF

(b) Number of

recipients

83

Additional Data

920 NVANDEVENTER AVE ST LOUIS, MO 63108 A CALL TO CONSCIENCE INC

400 N 4TH STREET 1411

ST LOUIS, MO 63110

EIN: 43-1363303 Name: REGIONAL CULTURAL AND PERFORMING ARTS DEVELOPMENT COMMISSION Form 990, Schedule I, Part II, Grants and Other Assistance to Domestic Organizations and Domestic Governments. (a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable (book, FMV, appraisal, non-cash assistance or assistance grant cash or government assistance other)

9,000

ARTS AND CULTURE

ARTS AND CULTURE

PROGRAMS

PROGRAMS

22ND JUDICIAL CIRCUIT 43-6003231 N/A 8,000 FAMILY COURT

501(C)(3)

Software ID:

Software Version:

46-3360461

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) AFRICAN HERITAGE 43-1700909 501(C)(3) 13 500 ARTS AND CULTURE

TARTS AND CULTURE

IPROGRAMS

ASSOCIATION OF ST LOUIS INC 3547 OLIVE STREET STE 301 ST LOUIS, MO 631031000			,		PROGRAMS
ALL THE ART	47-3044270	501(C)(3)	7,250		ARTS AND

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

ALL THE ART 6100 KINGSBURY AVE

ST LOUIS, MO 63112

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

ANNONYARTS 43-1382125 501(C)(3) 10.500 3003 LOCUST STREET ST LOUIS, MO 63103

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

ST LOUIS, MO 63103

IPROGRAMS ART ST LOUIS 43-1154397 501(C)(3) 41.248 ARTS AND CULTURE PROGRAMS 1223 PINE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government ADTICA 31-1818859 501(C)(3) 10.500l ARTS AND CULTURE **IPROGRAMS**

ARTS AND CULTURE

PROGRAMS

15.750

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

501(C)(3)

	AITICA
	4601 S BROADWAY
	ST LOUIS, MO 63111
_	01 20010/110 00111

7190 MANCHESTER ROAD

MAPLEWOOD, MO 63143

45-2874353

ARTISTS FIRST

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-1532643 501(C)(3) 10.500 ARTS AND CULTURE ATREK EDUCATIONAL PROGRAMS

CORPORATION 418 FIELDCREST DR STLOUIS. MO 63119 BACH SOCIETY OF ST LOUIS 43-6050074 501(C)(3) 43.233

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

ST LOUIS, MO 63103

ARTS AND CULTURE 3547 OLIVE STREET SUITE PROGRAMS 120

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1346617 501(C)(3) 12.000l BETTER FAMILY LIFE INC IARTS AND CULTURE 5415 PAGE BLVD **IPROGRAMS**

5415 PAGE BLVD
ST LOUIS, MO 631123416

BIG RIVER ASSOCIATION
3139A SOUTH GRAND BLVD
SUITE 203

PROGRAMS

ARTS AND CULTURE PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 61-1726950 501(C)(3) 13.500 BREAD AND ROSES MISSOURI IARTS AND CULTURE 2725 CLIFTON AVENUE **IPROGRAMS**

ARTS AND CULTURE

IPROGRAMS

10.500l

ST LOUIS, MO 63139

CARONDELET COMMUNITY
BETTERMENT FEDERATION INC
6408 MICHIGAN AVENUE

ST LOUIS, MO 63111

43-1045345

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

501(C)(3)

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 46-5065117 501(C)(3) 14.250 ARTS AND CULTURE CENTRAL PRINT

2624 NORTH 14TH ST
ST LOUIS, MO 63106

CHAMBER MUSIC SOCIETY OF
ST LOUIS
ST LOUIS
222 S CENTRAL AVE SUITE
100

PROGRAMS

ARTS AND CULTURE PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CHAMBER PROJECT ST LOUIS 26-3748900 501(C)(3) 13,500 IARTS AND CULTURE DO DOM 20000

ST LOUIS, MO 63130					PROGRAMS
CHARIS - THE ST LOUIS WOMEN'S CHORUS 204 E LOCKWOOD AVE	43-1641717	501(C)(3)	12,000		ARTS AND CULTURE PROGRAMS

WEBSTER GROVES, MO 63119

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1613716 501(C)(3) 66,003 CINEMA ST LOUIS IARTS AND CULTURE **IPROGRAMS**

ARTS AND CULTURE

IPROGRAMS

260 ST LOUIS, MO 631031000					
CIRCUS FLORA	74-2493831	501(C)(3)	40.000		

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

3401 WASHINGTON BLVD

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

PROGRAMS

CIRCUS HARMONY 4120 PARKER RD FLORISSANT, MO 63033	43-1918399	501(C)(3)	57,138		ARTS AND CULTURE PROGRAMS
CITY OF FLORISSANT	43-0666754	N/A	12.000		ARTS AND CULTURE

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

1 JAMES J EAGAN DR FLORISSANT, MO 63033

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) CITY OF ST LOUIS 43-6003231 N/A 13.500 ARTS AND CULTURE

IPROGRAMS

10701 LAMBERT INTERNATIONAL BLVD PO BOX 10212 ST LOUIS, MO 63145				PROGRAMS

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

122 WEST LOCKWOOD AVE

WEBSTER GROVES, MO 63119

43-6003996 N/A 7.000 ARTS AND CULTURE CITY OF WEBSTER GROVES

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CIVIC ARTS COMPANY 81-0975438 501(C)(3) 7.000 ARTS AND CULTURE

38 WESTMORELAND PLACE ST LOUIS, MO 63108		,,,,			PROGRAMS
COCA-CENTER OF CREATIVE ARTS	43-1395056	501(C)(3)	235,769		ARTS AND CULTURE PROGRAMS

524 IRINITY AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CONTEMPORARY ART MUSEUM 42-1202016 E01(C)(2) 156 889 ARTS AND CULTURE

PROGRAMS

ST LOUIS 3750 WASHINGTON BLVD ST LOUIS, MO 63108	45-1202010	301(0)(3)	130,003		PROGRAMS
CONTINUITY	47-2444644	501(C)(3)	13,500		ARTS AND CULTURE

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

3643 TAMM AVE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government CRAFT ALLIANCE 43-1022226 501(0)(3) 74 64N ARTS AND CULTURE

6640 DELMAR BLVD ST LOUIS, MO 631304503	43 1022220	301(0)(3)	74,040		PROGRAMS
CULTURAL FESTIVALS 225 S MERAMEC AVE SUITE 105	43-1647435	501(C)(3)	13,500		ARTS AND CULTURE PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government DANCE STIQUIS 23-7001556 501(C)(3) 79.896 ARTS AND CULTURE **IPROGRAMS**

ARTS AND CULTURE PROGRAMS

3310 SAMUEL SHEPARD DRIVE ST LOUIS, MO 63103

LADUE, MO 63124

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

DANCES OF INDIA 43-1505587 501(C)(3) 12.000 5 BLAYTONN LANE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 26-2617721 501(C)(3) 13.500 DEAF EMPOWERMENT IARTS AND CULTURE AWARENESS FOUNDATION INCI **IPROGRAMS**

IPROGRAMS

AWARENESS FOUNDATION INC
25 EAST FRISCO
ST LOUIS, MO 63119

DECEMBER PUBLISHING INC 90-0907488 501(C)(3) 10,500

ARTS AND CULTURE

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

PO BOX 16130

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

PROGRAMS

DESIGN BUILD WORKSHOP 112 ST GEORGE PLACE ST LOUIS, MO 63119	45-4670246	501(C)(3)	14,250		ARTS AND CULTURE PROGRAMS
DOUBLE HELIX CORPORATION	23-7170474	501(C)(3)	71,085		ARTS AND CULTURE

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

3524 WASHINGTON AVE ST LOUIS, MO 63103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government FOCAL POINT CORPORATION 51-0172333 501(C)(3) 10,500 IARTS AND CULTURE **IPROGRAMS**

ARTS AND CULTURE

2720 SUTTON BLVD MAPLEWOOD, MO 63143				
FREEDOM ARTS AND EDUCATION CENTER 1114 BACKER ST	46-1476978	501(C)(3)	6,250	

ST LOUIS, MO 63130

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-0815081 501(C)(3) 8.000 ARTS AND CULTURE GATEWAY FESTIVAL ORCHESTRA OF ST LOUIS PROGRAMS

11852 GOLD LEAF DR ST LOUIS, MO 63146 GATEWAY MEN'S CHORUS 43-1499328 501(C)(3) 15.000l

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

ST LOUIS, MO 63103

IARTS AND CULTURE 3547 OLIVE STREET SUITE PROGRAMS 300

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) GENE SLAY'S BOYS' CLUB OF 43-0653261 501(C)(3) 10,500 ARTS AND CULTURE

ST LOUIS INC 2524 S 11TH ST ST LOUIS, MO 63104					PROGRAM
GRACE HILL SETTLEMENT	23-7216273	501(C)(3)	12,000		ARTS AND

ST LOUIS, MO 63107

ND CULTURE HOUSE IPROGRAMS 2125 BISSELL ST

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

3221 MCKELVEY RD SUITE 106

ST LOUIS, MO 63044

HEARDING CATS COLLECTIVE 142 WILLOW BROOK DR ST LOUIS, MO 63146	27-1480800	501(C)(3)	10,500		ARTS AND CULTURE PROGRAMS
HEC-TV INC	81-1991919	501(C)(3)	10,500		ARTS AND CULTURE

IPROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government HERBERT HOOVER BOYS AND 43-6061693 501(C)(3) 13.500 IARTS AND CULTURE

LITEDANIE FESTIVAL INC	27 4244702	E04(C)(2)	12.000		ADTC AND
GIRLS CLUB OF ST LOUIS INC 2901 N GRAND AVE ST LOUIS, MO 63107					PROGRAMS

FLORISSANT, MO 63032

IARTS AND CULTURE HISPANIC FESTIVAL INC 37-1344792 501(C)(3) 12.0001 PO BOX 764 PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 47-2623191 501(C)(3) 8.0001 IGNITE THEATRE COMPANY IARTS AND CULTURE DETO CHEC AVE **IPROGRAMS**

ARTS AND CULTURE

15.000l

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

501(C)(3)

ST LOUIS, MO 63116	
INTERNATIONAL INSTITUTE OF METROPOLITAN ST LOUIS 3401 ARSENAL ST	43-06526

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

PROGRAMS

INTERSECT ARTS CENTER 3636 TEXAS AVE ST LOUIS, MO 63118	81-3708769	501(C)(3)	14,250		ARTS AND CULTURE PROGRAMS
JAZZ ST LOUIS	43-1761629	501(C)(3)	168,171		ARTS AND CULTURE

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

JAZZ ST LOUIS 43-1761629 3536 WASHINGTON AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-0681477 501(C)(3) 12.000l JCC ST LOUIS IARTS AND CULTURE **IPROGRAMS**

2 MILLSTONE CAMPUS DRIVE ST LOUIS, MO 63146 KARLOVSKY & COMPANY 90-0895575 501(C)(3) 7.000 DANCE

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

ARTS AND CULTURE **IPROGRAMS** 7346 MELROSE AVE ST LOUIS, MO 63130

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, non-cash assistance or assistance organization if applicable grant cash or government assistance other) LANDMARKS ASSOCIATION OF 43-6036899 501(C)(3) 24,654 ARTS AND CULTURE

PROGRAMS

ST LOUIS INC 911 WASHINGTON AVENUE SUITE 170 ST LOUIS, MO 63101					PROGRAMS
LAUMEIER SCULPTURE PARK	43-1131429	501(C)(3)	130,077		ARTS AND CULTURE

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

ST LOUIS, MO 63127

12580 ROTT RD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-1928128 501(C)(3) 13.500 ARTS AND CULTURE LEMP NEIGHBORHOOD ARTS CENTER **IPROGRAMS** 3301 LEMP AVE

3301 LEMP AVE ST LOUIS, MO 63118

MATHEWS-DICKEY BOYS' & 43-6060717 501(C)(3) 12,000

ARTS AND CULTURE GIRLS' CLUB
4245 N KINGSHIGHWAY

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

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

ARTS AND CULTURE PROGRAMS

MAX & LOUIE PRODUCTIONS 15 TOPTON WAY 1C ST LOUIS, MO 63105	27-5056041	501(C)(3)	10,500		ARTS AND CULTUR PROGRAMS
METRO THEATER COMPANY	23-7309552	501(C)(3)	73,777		ARTS AND CULTUR

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

3311 WASHINGTON AVE ST LOUIS, MO 63103

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-1095885 501(C)(3) 22.388 ARTS AND CULTURE MID AMERICA DANCE COMPANY (MADCO) **IPROGRAMS** 1 UNIVERSITY BLVD 243 AAB

IARTS AND CULTURE

IPROGRAMS

9.100

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

501(C)(3)

ST LOUIS, MO 63121

MIDWEST ARTIST PROJECT
SERVICES

PO BOX 2226 ST LOUIS, MO 63158 46-1501100

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government MISSOLIRI CHAMBER MUSIC 27-3473749 501(0)(3) 10 500 ARTS AND CULTURE

NATIONAL BLUES MUSEUM	27 4252742	504(0)(0)	10.500		4.D.T.C. 4.N.D.
211 S ELM AVENUE ST LOUIS, MO 63119					11100101110
INC					PROGRAMS

ST LOUIS, MO 63101

IARTS AND CULTURE NATIONAL BLUES MUSEUM 27-4259743 501(C)(3) 10.5001 615 WASHINGTON AVE PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance assistance other) or government NEW THEATER 12-1502865 E01(C)(3) 12 0001 TARTS AND CULTURE

3800-A KEOKUK STREET ST LOUIS, MO 63116	43-1393803	301(C)(3)	12,000		PROGRAMS

ST LOUIS, MO 63130

IARTS AND CULTURE NEW MUSIC CIRCLE 43-6050206 501(C)(3)| 12,0001 760 HARVARD AVE PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government OHMKARAM 77-0681228 501(C)(3) 10.500 IARTS AND CULTURE

7365 MACLEOD LANE DARDENNE PRAIRIE, MO 63368		,,,,,			PROGRAM
ODEDA THEATDE OF CT LOUIC	42 0021050	E01(C)(2)	100 401		ADTC AND

ST LOUIS, MO 63119

IARTS AND CULTURE OPERA THEATRE OF ST LOUIS 43-0821958 501(C)(3)| 198,491 210 HAZEL AVENUE PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (a) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government OPOJAZ INC 13-3285442 501(C)(3) 9.0001 ARTS AND CULTURE

PROGRAMS

4125 JUNIATA STREET B **IPROGRAMS** ST LOUIS, MO 63116 19.064 ARTS AND CULTURE

PERENNIAL 3762 S BROADWAY

ST LOUIS, MO 63118

80-0638085 501(C)(3)

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) PHILHARMONIC SOCIETY OF 43-6002754 501(C)(3) 7.000 ARTS AND CULTURE AMS

ST LOUIS PO BOX 220437 ST LOUIS, MO 63122					PROGRAMS
PHOTOGRAPHIC ARTS AND	36-6142675	501(C)(3)	30,262		ARTS AND CULTURE

ST LOUIS, MO 63103

IPROGRAMS SCIENCES FOUNDATION 3415 OLIVE STREET

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 47-4084512 501(C)(3) 26,841 PIANOS FOR PEOPLE IARTS AND CULTURE 2120 CHEDOVEE STREET I DD C C D A M C

ST LOUIS, MO 63118					PROGRAMS
PRISON PERFORMING ARTS 3547 OLIVE STREET SUITE 250	43-1394929	501(C)(3)	13,500		ARTS AND CULTURE PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 27-1297885 501(C)(3) 59.663 RADIO ARTS FOUNDATION IARTS AND CULTURE 7711 CARONDELET SUITE 302 **IPROGRAMS**

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-1318835 501(C)(3) 10.500l SANGEETHA IARTS AND CULTURE 1872 LAZY RIDGE CT **IPROGRAMS**

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

CHESTERFLELD, MO 63006

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) SHAKESPEARE FESTIVAL ST 43-1815139 501(C)(3) 107.480 ARTS AND CULTURE LOUIS **IPROGRAMS**

ARTS AND CULTURE

IPROGRAMS

13.500

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

501(C)(3)

5715 ELIZABETH AVE
ST LOUIS, MO 63110
SHAW NEIGHBORHOOD
IMPROVEMENT ASSOCIATION

2211 S 39TH STREET ST LOUIS, MO 63110 23-7417627

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 43-1489756 501(C)(3) 139.338 SHELDON ARTS FOUNDATION IARTS AND CULTURE 3648 WASHINGTON BLVD **IPROGRAMS**

ST LOUIS, MO 63108

SOUTH BROADWAY ART PROGRAMS

ARTS AND CULTURE PROJECT
3816 SOUTH BROADWAY

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government SOUTH CITY OPEN STUDIO 43-1924074 501(C)(3) 15,000 IARTS AND CULTURE

ST LOUIS, MO 63103

IARTS AND CULTURE SPRINGBOARD TO LEARNING 43-1202003 201(C)(3) 61,554 1310 PAPIN ST SUITE 402 **IPROGRAMS**

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government STIQUERINGE 37-1653552 501(0)(3) 13 500 ARTS AND CULTURE

PROGRAMS

911 WASHINGTON AVENUE SUITE 664 ST LOUIS, MO 63101	3, 1833332	301(0)(3)	13,300		PROGRAMS
ST LOUIS ACTORS' STUDIO	20-8009035	501(C)(3)	10,500		ARTS AND CULTURE

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

ST LOUIS ACTORS' STUDIO 360 N BOYLE AVE

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

PROGRAMS

ST LOUIS ARTISTS' GUILD 12 N JACKSON AVE ST LOUIS, MO 63105	43-0888412	501(C)(3)	28,851		PROGRAMS
ST LOUIS ARTWORKS	43-1735450	501(C)(3)	54,431		ARTS AND CULTURE

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

ST LOUIS ARTWORKS 43-1735450 5959 DELMAR BOULEVARD

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 23-7424849 501(C)(3) 58.562 ST LOUIS BALLET COMPANY IARTS AND CULTURE 218 THF BLVD **IPROGRAMS**

CHESTERFIELD, MO 63005

ST LOUIS BLACK REPERTORY 43-1220180 501(C)(3) 47,643

COMPANY 6662 OLIVE BLVD

ARTS AND CULTURE PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government ST LOUIS CATHEDRAL 43-1633963 501(C)(3) 36.083l IARTS AND CULTURE **IPROGRAMS**

IPROGRAMS

CONCERTS 4431 LINDELL BLVD ST LOUIS, MO 63108			
ST LOUIS CHAMBER CHORUS	43-6066145	501(C)(3)	15,000

PO BOX 11558

ST LOUIS, MO 63105

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) ST LOUIS COMMUNITY 43-1758789 501(C)(3) 20,000 ARTS AND CULTURE

FOUNDATION					PROGRAMS
2 OAK KNOLL PARK					
ST LOUIS, MO 63105					
ST LOUIS CULTURAL FLAMENCO SOCIETY	43-1413989	501(C)(3)	7,000		ARTS AND CULTURE PROGRAMS

FLAMENCO SOCIETY 6021 SCANLAN PO BOX 21818

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

ST LOUIS DANCE THEATRE 3310 SAMUEL SHEPARD DRIVE ST LOUIS, MO 63103	27-2706005	501(C)(3)	31,057		ARTS AND CULTURE PROGRAMS
ST LOUIS FASHION FUND	37-1760557	501(C)(3)	12,000		ARTS AND CULTURE

IPROGRAMS

1533 WASHINGTON AVENUE

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

PO BOX 300167 ST LOUIS, MO 63130

ST LOUIS IRISH ARTS INC 7480 WHITEHAVEN DR ST LOUIS, MO 63123	23-7444899	501(C)(3)	7,000		ARTS AND CULTURE PROGRAMS
ST LOUIS POETRY CENTER	43-6048105	501(C)(3)	9,000		ARTS AND CULTURE

PROGRAMS

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1448350 501(C)(3) 12.000l ST LOUIS SHAKESPEARE IARTS AND CULTURE 4579 LACLEDE 345 **IPROGRAMS**

4579 LACLEDE 345
ST LOUIS, MO 63108

ST LOUIS STORY STITCHERS
ARTISTS COLLECTIVE
616 DELMAR BLVD

ARTS AND CULTURE PROGRAMS

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-0666769 501(C)(3) 248.114 ARTS AND CULTURE ST LOUIS SYMPHONY ORCHESTRA (SLSO) PROGRAMS 718 N GRAND BOULEVARD

PROGRAMS

13.500

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

501(C)(3)

ST LOUIS, MO 63103 ST STEPHEN'S EPISCOPAL CHURCH

33 NORTH CLAY AVENUE FERGUSON, MO 63135

43-0666773

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government 43-1434156 501(C)(3) 163.463 STAGES ST LOUIS IARTS AND CULTURE 1023 CHESTERFIELD PARKWAY **IPROGRAMS** FAST

IPROGRAMS

55.081

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

501(C)(3)

CHESTERFIELD, MO 63017
STRAY DOG THEATRE

2336 TENNESSEE AVENUE

ST LOUIS, MO 631041734

26-0059867

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 47-4314599 501(C)(3) 12.000 ARTS AND CULTURE TENNESSEE WILLIAMS FESTIVAL ST LOUIS PROGRAMS

PROGRAMS

3224 LOCUST STREET 2J ST LOUIS, MO 63103 THAT UPPITY THEATRE 43-1568222 501(C)(3) 10,500 COMPANY

4466 W PINE BLVD 13C ST LOUIS, MO 63108

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) THE CABARET PROJECT OF ST 27-2766810 501(C)(3) 10.500 ARTS AND CULTURE LOUIS **IPROGRAMS**

7832 STANFORD AVE
ST LOUIS, MO 63130

THE FRANK LLOYD WRIGHT
HOUSE IN EBSWORTH PARK

PROGRAMS

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

120 N BALLAS ROAD ST LOUIS, MO 63122

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

PROGRAMS

THE LUMINARY INC 2701 CHEROKEE ST ST LOUIS, MO 63118	27-2137348	501(C)(3)	24,324		ARTS AND CULTURE PROGRAMS
THE MAGIC HOUSE	51-0138441	501(C)(3)	13,500		ARTS AND CULTURE

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

516 S KIRKWOOD ROAD ST LOUIS, MO 63122

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) THE MUNICIPAL THEATRE 43-0662485 501(C)(3) 13.500 ARTS AND CULTURE ASSOCIATION OF ST LOUIS **IPROGRAMS**

PROGRAMS

1 THEATRE DRIVE ST LOUIS, MO 63112 THE REPERTORY THEATRE OF 43-0970273 501(C)(3) 163.463 ST LOUIS 130 FDGAR ROAD

ST LOUIS, MO 63119

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

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 46-4305323 501(C)(3) 9.0001 ARTS AND CULTURE THE SOLID LINES PRODUCTIONS PROGRAMS

2726 ARMAND PLACE
ST LOUIS, MO 63104

THE ST LOUIS CHILDREN'S 43-1145808 501(C)(3) 85,434

CHOIRS PROGRAMS

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

2842 N BALLAS ROAD ST LOUIS, MO 631312311

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 43-1131456 501(C)(3) 21.957 ARTS AND CULTURE THE ST LOUIS CLASSICAL GUITAR SOCIETY PROGRAMS

GUITAR SOCIETY
3547 OLIVE ST SUITE 204
ST LOUIS, MO 63103

THEATRE COMMUNICATIONS 13-6160130 501(C)(3) 15,000

ARTS AND CULTURE
GROUP
PROGRAMS

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

520 EIGHTH AVENUE NEW YORK, NY 10018

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant if applicable (book, FMV, appraisal, non-cash assistance or assistance organization grant cash or government assistance other) 68-0523690 501(C)(3) 47.682 ARTS AND CULTURE UNION AVENUE OPERA THEATRE **IPROGRAMS** 733 UNION BLVD

IPROGRAMS

12.000l

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

501(C)(3)

ST LOUIS, MO 63108

UNIVERSITY CITY SYMPHONY
ORCHESTRA ASSOCIATION

7210 OLIVE BLVD ST LOUIS, MO 63130 43-0922268

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant (book, FMV, appraisal, organization if applicable grant cash non-cash assistance or assistance assistance other) or government UPSTREAM THEATER 75-3151973 501(C)(3) 12,000 IARTS AND CULTURE

PO BOX 300006 ST LOUIS, MO 63130					PROGRAMS
URBAN ARTIST ALLIANCE FOR CHILD DEVELOPMENT INC 2600 N 14TH STREET	43-1936036	501(C)(3)	12,750		ARTS AND CULTURE PROGRAMS

(b) EIN (f) Method of valuation (h) Purpose of grant if applicable (book, FMV, appraisal, organization grant cash non-cash assistance or assistance or government assistance other) VARIETY THE CHILDREN'S 43-6078016 501(C)(3) 13.500 IARTS AND CULTURE

(e) Amount of non-

(a) Description of

IPROGRAMS

CHARITY OF ST LOUIS 11840 WESTLINE INDUSTRIAL DRIVE SUITE 220 ST LOUIS, MO 63146					PROGRAMS
WINTER OPERA ST LOUIS	74-3234710	501(C)(3)	36,736		ARTS AND CULTURE

(d) Amount of cash

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

(c) IRC section

(a) Name and address of

2324 MARCONI AVENUE

(a) Name and address of (b) EIN (c) IRC section (d) Amount of cash (e) Amount of non-(f) Method of valuation (g) Description of (h) Purpose of grant organization if applicable grant cash (book, FMV, appraisal, non-cash assistance or assistance assistance other) or government 27-1280023 501(C)(3) 10.500l WORLD CHESS MUSEUM INC IARTS AND CULTURE

4652 MARYLAND AVENUE **IPROGRAMS** ST LOUIS, MO 63108 YOUNG MENS CHRISTIAN 43-0653616 501(C)(3) 7.000

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

ARTS AND CULTURE ASSOCIATION **IPROGRAMS** 326 S 21ST ST 4TH FLOOR ST LOUIS, MO 63103

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

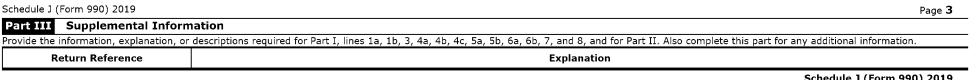
YOURWORDS STL 81-0807896 501(C)(3) 10,500 ARTS AND CULTURE 20 SOUTH SARAH ST PROGRAMS

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

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Sch	edule J	C	ompensat	ion Information	OI	MB No.	1545-0	0047	
(For	n 990)		Compensa	rustees, Key Employees, and Hig ated Employees		20	110		
		► Complete if the org		vered "Yes" on Form 990, Part IV, ı to Form 990.	, line 23.	2019			
•	tment of the Treasury	► Go to <u>www.irs.go</u>	ov/Form990 for	instructions and the latest inform	nation.	Open t	o Pul ectio		
	al Revenue Service ne of the organiz	lation			Employer identifica				
	IONAL CULTURAL A ELOPMENT COMMIS	ND PERFORMING ARTS SION			43-1363303				
Pa	rt I Questi	ons Regarding Compensa	ntion		45 1505505				
							Yes	No	
1a				f the following to or for a person liste y relevant information regarding the					
	First-class	or charter travel		Housing allowance or residence for	personal use				
	_	companions	님	Payments for business use of person					
		nification and gross-up payment	_	Health or social club dues or initiation					
	☐ Discretion	nary spending account	Ш	Personal services (e.g., maid, chauf	reur, cher)				
b				follow a written policy regarding pay ve? If "No," complete Part III to expl		1b			
2				or allowing expenses incurred by all	- 1-2	2			
	directors, truste	es, officers, including the CEO/	executive Directo	r, regarding the items checked on Lir	le la?				
3				ed to establish the compensation of the	ne				
				not check any boxes for methods CEO/Executive Director, but explain i	n Part III.				
		-							
		ation committee ent compensation consultant	H	Written employment contract Compensation survey or study					
		of other organizations	<u> </u>	Approval by the board or compensa	tion committee				
		-	_						
4	During the year related organiza		990, Part VII, Se	ction A, line 1a, with respect to the fi	lling organization or a				
а	Receive a sever	ance payment or change-of-cor	trol payment? .			4a		No	
b	Participate in, o	r receive payment from, a supp	lemental nonqual	ified retirement plan?		4b		No	
c	•			nsation arrangement?		4c		No	
	If "Yes" to any o	of lines 4a-c, list the persons an	d provide the app	plicable 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	, ,,,		, ,	the organization pay or accrue any					
	compensation c	ontingent on the revenues of:							
а	The organization	1?				5a		No	
b						5b		No	
	,	5a or 5b, describe in Part III.							
6		ed on Form 990, Part VII, Section Ontingent on the net earnings o		the organization pay or accrue any					
а	-	1?				6a		No	
b						6b		No	
7	•	6a or 6b, describe in Part III.	A line 4	the constitution was identified to the control of	J.				
7	payments not d	escribed in lines 5 and 6? If "Ye	s," describe in Pa	the organization provide any nonfixed rt III		7		No	
8	subject to the ir	nitial contract exception describe	ed in Regulations	red pursuant to a contract that was section 53.4958-4(a)(3)? If "Yes," de					
_						8		No_	
9				presumption procedure described in		9			
For F	<u>``</u>	iction Act Notice, see the Ins			0053T Schedule J		990)	2019	

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

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 (D) Nontaxable (E) Total of columns (F) Compensation in other deferred benefits (B)(i)-(D) column (B) reported (i) Base (ii) Bonus & incentive (iii) Other compensation as deferred on prior compensation compensation reportable Form 990 compensation 1 FELICIA SHAW 155,830 (i) 0 0 178,958 0 11,764 11,364 EXECUTIVE DIRECTOR (RESIGN 11/2019) 0 0 0 0 0 (ii) 0 0 2 SHERRY SISSAC 143,455 (i) 0 0 0 7.328 9,657 160,440 DEPUTY DIRECTOR 0 0 0 (ii) 0 0 0 0



DLN: 93493135011240 Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing. OMB No. 1545-0047 Schedule K **Supplemental Information on Tax-Exempt Bonds** (Form 990) ▶ Complete if the organization answered "Yes" to Form 990, Part VI, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Open to Public ▶ Attach to Form 990. Department of the Treasury ▶Go to www.irs.gov/Form990 for instructions and the latest information. Inspection Internal Revenue Service Name of the organization **Employer identification number** REGIONAL CULTURAL AND PERFORMING ARTS 43-1363303 DEVELOPMENT COMMISSION Part I Bond Issues (c) CUSIP # (f) Description of purpose (g) Defeased (i) Pool (a) Issuer name (b) Issuer EIN (d) Date issued (e) Issue price (h) On behalf of financing issuer Yes No Yes No Yes No LOOP EAST COMMUNITY 71-0888097 10-01-2012 1,640,000 TO PROVIDE FUNDS TO REFUND A Х IMPROVEMENT DISTRICT BOND **Proceeds** Part ${f I}$ В C Α D 2 3 1,640,000 5 6 7 54,788 8 9 10 11 12 1,585,212 13 2012 Yes No Yes No Yes No Yes No Were the bonds issued as part of a current refunding issue of tax-exempt 14 Χ Were the bonds issued as part of an advance refunding issue of taxable 15 Χ Has the final allocation of proceeds been made? Χ 16 Does the organization maintain adequate books and records to support the final allocation of 17 Χ Part 🏻 **Private Business Use** Α R C D Yes No Yes No Yes No Yes No Was the organization a partner in a partnership, or a member of an LLC, which owned property Are there any lease arrangements that may result in private business use of bond-financed Schedule K (Form 990) 2019 For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50193E

Penalty in Lieu of Arbitrage Rebate? . . . If "No" to line 1, did the following apply?

Exception to rebate?

If "Yes" to line 2c, provide in Part VI the date the rebate computation was performed Is the bond issue a variable rate issue?

Was the hedge superintegrated?

hedge with respect to the bond issue?

the issue are remediated in accordance with the requirements under

Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and

Has the organization or the governmental issuer entered into a qualified

Private Business Use (Continued)

Schedule K (Form 990) 2019

Part III

b

d

6

8a

Part IV

b

C

Arbitrage

D

Schedule K (Form 990) 2019

No

Yes

Page **2**

If "Yes" to line 3c, does the organization routinely engage bond counsel or other outside

Enter the percentage of financed property used in a private business use by entities other than

counsel to review any research agreements relating to the financed property?

a section 501(c)(3) organization or a state or local government Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3)

nongovernmental person other than a 501(c)(3) organization since the bonds were

If "Yes" to line 8a, enter the percentage of bond-financed property sold or disposed of. . . . If "Yes" to line 8a, was any remedial action taken pursuant to Regulations sections 1.141-12

Has the organization established written procedures to ensure that all nonqualified bonds of

Does the bond issue meet the private security or payment test? . . . Has there been a sale or disposition of any of the bond-financed property to a

Are there any research agreements that may result in private business use of bond-financed

Α

No

Χ

Χ

Χ

Χ

Χ

Yes

Χ

Α

Nο

В

No

Yes

В

No

Yes

C

No

Yes

C

No

Yes

Χ

Yes

No

Explanation (A) ISSUER NAME: LOOP EAST COMMUNITY IMPROVEMENT DISTRICT (F) DESCRIPTION OF PURPOSE: TO PROVIDE FUNDS TO REFUND A BOND ISSUE FROM JUNE

R

No

Yes

Nο

Yes

Page 3

D

Nο

Yes

?	Х		
of provider			

Supplemental Information. Provide additional information for responses to questions on Schedule K. (See instructions).

Schedule K (Form 990) 2019

(GIC)? Name of

period?

Part V

Part VI

Term of GIC.

Were gross proceeds invested in a guaranteed investment contract

Were any gross proceeds invested beyond an available temporary

Has the organization established written procedures to monitor the

Procedures To Undertake Corrective Action

if self-remediation is not available under applicable regulations?

6, 2002

Has the organization established written procedures to ensure that violations of federal tax requirements are timely identified and corrected through the voluntary closing agreement program

requirements of section 148? . . .

Return Reference

SCHEDULE K, PART I, BOND ISSUES:

Was the regulatory safe harbor for establishing the fair market value of

efile GRAPHIC print - DO NOT PROCESS									DLN:	LN: 93493135011240				
SCHEDUL (Form 990 or EZ)	990-	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. Go to www.irs.gov/Form990 for the latest information.							2019 Open to Public Inspection					
Name Sethero gamization REGIONAL CULTURAL AND PERFORMING ARTS DEVELOPMENT COMMISSION 990 Schedule O, Supplemental Information									fication number					
Return Reference	Explanation													
FORM 990, PART VI, SECTION B, LINE 11B	THE FORM 990 IS PREPARED BY THE OUTSIDE ACCOUNTING FIRM AND PROVIDED TO THE EXECUTIVE DIRE CTOR AND PRESENTED TO THE FINANCE COMMITTEE FOR REVIEW. PRIOR TO FILING WITH THE IRS IT IS ALSO MADE AVAILABLE TO THE ENTIRE GOVERNING BODY.													

Return Explanation
Reference

FORM 990, PART VI, SECTION B, LINE 12C

MANY BOARD MEMBERS ALSO SERVE ON BOARDS OF OTHER ARTS AND CULTURAL INSTITUTIONS. THEY ANNU ALLY DISCLOSE BY WRITTEN NOTIFICATION OF THEIR AFFILIATIONS ON OTHER BOARDS. DURING DISCUS SIONS AND VOTING, THAT PARTICULAR BOARD MEMBER IS EXCUSED.

Return Explanation

FORM 990, PART VI, ORGANIZATIONAL CRITERIA.

LINE 15

Return Explanation

FORM 990, PART VI, SECTION C, LINE 19

Return Explanation

CHANGED FROM THE PRIOR YEAR.

LINE 2C:

FORM 990, THE ORGANIZATION HAS A COMMITTEE THAT ASSUMES RESPONSIBILITY FOR OVERSIGHT OF THE AUDIT OF PART XII, ITS FINANCIAL STATEMENTS AND SELECTION OF AN INDEPENDENT ACCOUNTANT. THE PROCESS HAS NOT

efile GRAPHIC print - DO NOT PROCESS As Filed Data -**SCHEDULE R** (Form 990)

Name of the organization

DEVELOPMENT COMMISSION

REGIONAL CULTURAL AND PERFORMING ARTS

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.

atest information.

2019

DLN: 93493135011240 OMB No. 1545-0047

> **Open to Public** Inspection

Employer identification number

43-1363303

Department of the Treasury	► Go to <u>www.irs.gov/Form990</u> for instructions and the l
Internal Revenue Service	

Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33. Part I (b) (c) (d) (e) Total income Name, address, and EIN (if applicable) of disregarded entity Primary activity Legal domicile (state End-of-year assets Direct controlling or foreign country) entity (1) LOOP EAST COMMUNITY IMPROVEMENT DISTRICT SEE PART VII OF 189,778 1,825,903 MO 6128 DELMAR BLVD SCHEDULE R ST LOUIS, MO 63112 81-4458040 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. (b) (c) (d) (g) Name, address, and EIN of related organization Primary activity Legal domicile (state Exempt Code section Public charity status Direct controlling Section 512(b) or foreign country) (if section 501(c)(3)) (13) controlled entity entity? Yes No For Paperwork Reduction Act Notice, see the Instructions for Form 990. Cat. No. 50135Y Schedule R (Form 990) 2019

Part III Identification of Related Organization one or more related organizations treated	ons Taxable as a P ed as a partnership o	artnership. during the ta	Comple x year.	te if the or	ganization	answered "	Yes" on Forr	n 990,	Part I	V, line 34,	becau	se it ha	ad
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Predomina income(rela unrelated excluded freax unde sections 5:	ated, total incor d, rom er	f Share of end-of-year assets	(h) Disproprtionate allocations?		(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Gener mana partn	alor Per ging ow	(k) ercentage wnership	
				514)			Yes	No		Yes	No		
Part IV Identification of Related Organization because it had one or more related organizations.	ons Taxable as a C anizations treated as	orporation a corporatio	or Trus n or tru	t. Complet st during t	e if the org he tax year	janization ar 	nswered "Ye	s" on F	orm 9	90, Part IV	, line	34	
(a) Name, address, and EIN of related organization	(b) Primary activity	Le don (state d	c) egal nicile or foreign ntry)	Direc		(e) Type of entity C corp, S corp, or trust)	(f) Share of total income		(g) of end- year assets	of- Percer owne	ntage	Section (13)	(i) on 512(b) controlled ntity?
			,,									Tes	
				-						Calcadada D	/ -	- 000)	

chedule R (Form 990) 2019					Pa	ge 3
Part V Transactions With Related Organizations. Complete if the organization answered	Yes" on Form 990, Pa	rt IV, line 34, 35b	o, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.					Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more relate	ed organizations listed ir	n Parts II-IV?				
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				1a		
${f b}$ Gift, grant, or capital contribution to related organization(s)				1 b		
${f c}$ Gift, grant, or capital contribution from related organization(s)				1c		
f d Loans or loan guarantees to or for related organization(s)				1d		
e Loans or loan guarantees by related organization(s)				1e		
f Dividends from related organization(s)				1f		
g Sale of assets to related organization(s)				1 g		
h Purchase of assets from related organization(s)				1h		
i Exchange of assets with related organization(s)				1 i		
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		
k Lease of facilities, equipment, or other assets from related organization(s)				1k		
I Performance of services or membership or fundraising solicitations for related organization(s)				11		
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s)				1m		
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)				1n		
o Sharing of paid employees with related organization(s)				10		
p Reimbursement paid to related organization(s) for expenses				1 p		
q Reimbursement paid by related organization(s) for expenses				1 q		
r Other transfer of cash or property to related organization(s)				1r		\vdash
$oldsymbol{s}$ Other transfer of cash or property from related organization(s)				1s		
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 tra	nsaction thresholds.			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining a	mount inv	volved	I

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	Primary activity Primary activity Legal domicile (state or foreign country)		Legal Predominant domicile income state or (related, foreign unrelated,		(e) e all partners section 501(c)(3) ganizations?	(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)	nartner?		(k) Percentage ownership	
			514)	Yes	No			Yes	No		Yes	No		
	1		1			ı				Schedul	e R (Form	990	0) 2019	

Schedule R (Form 990) 2019 Page 5 Part VII Supplemental Information Provide additional information for responses to questions on Schedule R. (see instructions). Return Reference Explanation PART I, COLUMN (B) PRIMARY ACTIVITY: ACQUIRE AND IMPROVE PROPERTY LOCATED IN CITY OF ST. LOUIS NEARLY ADJACENT TO DOWNTOWN BUSINESS DISTRICT OF UNIVERSITY CITY, MISSOURI.