

Form **8879-EO****IRS e-file Signature Authorization
for an Exempt Organization**

OMB No. 1545-1878

Department of the Treasury
Internal Revenue Service

For calendar year 2013, or fiscal year beginning _____, 2013, and ending _____, 20____

▶ **Do not send to the IRS. Keep for your records.****2013**▶ **Information about Form 8879-EO and its instructions is at www.irs.gov/form8879eo**

Name of exempt organization

Employer identification number

JEWISH FEDERATION OF ST. LOUIS**43-0652643**

Name and title of officer

**DR ANDREW REHFELD
PRESIDENT AND CEO****Part I Type of Return and Return Information** (Whole Dollars Only)

Check the box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. **Do not** complete more than 1 line in Part I.

1a Form 990 check here ▶ ☒	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b 19,432,386.
2a Form 990-EZ check here ▶ ☐	b Total revenue, if any (Form 990-EZ, line 9)	2b
3a Form 1120-POL check here ▶ ☐	b Total tax (Form 1120-POL, line 22)	3b
4a Form 990-PF check here ▶ ☐	b Tax based on investment income (Form 990-PF, Part VI, line 5)	4b
5a Form 8868 check here ▶ ☐	b Balance Due (Form 8868, Part I, line 3c or Part II, line 8c)	5b

Part II Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2013 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization's electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization's return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization's federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization's electronic return and, if applicable, the organization's consent to electronic funds withdrawal.

Officer's PIN: check one box only☒ I authorize **CLIFTONLARSONALLEN LLP**

ERO firm name

to enter my PIN **63146**Enter five numbers, but
do not enter all zeros

as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer of the organization, I will enter my PIN as my signature on the organization's tax year 2013 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Officer's signature ▶ _____ Date ▶ _____

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

43026013127

do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2013 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature ▶ *Andrew J. Hendly* Date ▶ *11/10/14***ERO Must Retain This Form - See Instructions****Do Not Submit This Form To the IRS Unless Requested To Do So**

LHA For Paperwork Reduction Act Notice, see instructions.
323051
10-01-13

Form **8879-EO** (2013)

16111107 131843 098-04268800 2013.04030 JEWISH FEDERATION OF ST. LO 098-0461

Form **990**Department of the Treasury
Internal Revenue Service**Return of Organization Exempt From Income Tax**

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

Do not enter Social Security numbers on this form as it may be made public.

Information about Form 990 and its instructions is at www.irs.gov/form990

OMB No. 1545-0047

2013Open to Public
Inspection**A For the 2013 calendar year, or tax year beginning****and ending****B** Check if applicable:

- ☐ Address change
☐ Name change
☐ Initial return
☐ Terminated
☐ Amended return
☐ Application pending

C Name of organization**JEWISH FEDERATION OF ST. LOUIS**

Doing Business As

Number and street (or P.O. box if mail is not delivered to street address)

12 MILLSTONE CAMPUS DRIVE

Room/suite

City or town, state or province, country, and ZIP or foreign postal code

ST. LOUIS, MO 63146-5776**F Name and address of principal officer: DR. ANDREW REHFELD
SAME AS C ABOVE****D Employer identification number****43-0652643****E Telephone number****314-442-0020****G Gross receipts \$ 44,783,230.****H(a) Is this a group return for subordinates?** ☐ Yes ☒ No**H(b) Are all subordinates included?** ☐ Yes ☒ No
If "No," attach a list. (see instructions)**H(c) Group exemption number****I Tax-exempt status:** ☒ 501(c)(3) ☐ 501(c)() (insert no.) ☐ 4947(a)(1) or ☐ 527**J Website:** **WWW.JEWISHINSTLOUIS.ORG; WWW.JFEDSTL.ORG****K Form of organization:** ☒ Corporation ☐ Trust ☐ Association ☐ Other**L Year of formation:** **1947** **M State of legal domicile:** **MO****Part I Summary**

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: SOLICIT, COLLECT, DISTRIBUTE & ADMINISTER CONTRIBUTIONS FOR THE BENEFIT OF JEWISH CHARITABLE ORGS.		
	2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.		
	3 Number of voting members of the governing body (Part VI, line 1a)	3	31
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	31
	5 Total number of individuals employed in calendar year 2013 (Part V, line 2a)	5	63
	6 Total number of volunteers (estimate if necessary)	6	300
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-14,236.
b Net unrelated business taxable income from Form 990-T, line 34	7b	-16,579.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	13,784,608.	13,631,279.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	302,909.	261,388.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	4,032,375.	4,924,404.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	750,057.	615,315.
	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,869,949.	19,432,386.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	9,247,275.	10,005,214.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
Expenses	16a Professional fundraising fees (Part IX, column (A), line 11e)	4,244,060.	4,227,937.
	b Total fundraising expenses (Part IX, column (D), line 25) 1,515,335.	21,690.	19,295.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	3,257,922.	3,900,954.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	16,770,947.	18,153,400.
	19 Revenue less expenses. Subtract line 18 from line 12	2,099,002.	1,278,986.
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	111,884,990.	136,334,976.
	22 Net assets or fund balances. Subtract line 21 from line 20	31,473,136.	48,227,183.

Part II Signature Block

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

Sign Here	Signature of officer	Date
	DR. ANDREW REHFELD, PRESIDENT AND CEO	
Paid Preparer Use Only	Print/Type preparer's name AMY HENDLEY	Preparer's signature <i>Amy J. Hendley</i>
	Firm's name CLIFTON LARSON ALLEN LLP	Date 11/10/14
	Firm's address 600 WASHINGTON AVENUE, SUITE 1800 ST. LOUIS, MO 63101	Check if self-employed ☐ PTIN P01300654
		Firm's EIN 41-0746749
		Phone no. 314-925-4300

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

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒

1 Briefly describe the organization's mission:

JEWISH FEDERATION MOBILIZES THE HUMAN AND FINANCIAL RESOURCES NEEDED TO PRESERVE AND ENHANCE JEWISH LIFE IN ST. LOUIS, ISRAEL, AND AROUND THE WORLD. TO SOLICIT, COLLECT AND DISTRIBUTE CONTRIBUTIONS FOR THE BENEFIT OF ALL JEWISH CHARITABLE, SOCIAL WELFARE, CULTURAL,

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

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

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

If "Yes," describe these changes on Schedule O.

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

4a (Code:) (Expenses \$ 11,352,408. including grants of \$ 10,005,214.) (Revenue \$ 16,677.)
PLANNING AND ALLOCATIONS:

THE JEWISH FEDERATION OF ST. LOUIS IS THE JEWISH COMMUNITY'S CENTRAL FUNDRAISING AND PLANNING ADDRESS. FOUNDED IN 1901, IT IS ONE OF THE REGION'S OLDEST AND LARGEST NONPROFIT ORGANIZATIONS. FUNDS ARE DISTRIBUTED TO 30 LOCAL AND 21 NATIONAL AGENCIES, PROGRAMS AND SERVICES; THREE INTERNATIONAL AGENCIES AND FOUR TARGETED AREAS - TO FEED THE HUNGRY, EDUCATE STUDENTS OF ALL AGES, CARE FOR THE YOUNG AND OLD, FIGHT ANTI-SEMITISM, PROMOTE JEWISH CULTURE AND SUPPORT JEWS IN ISRAEL AND AROUND THE WORLD. TO STRENGTHEN ST. LOUIS' CONNECTIONS TO ISRAEL, THE FEDERATION DIRECTLY LINKS ST. LOUIS TO ISRAEL THROUGH A SISTER-CITY PROGRAM. THE FEDERATION IS LED BY HUNDREDS OF VOLUNTEERS FROM ALL SECTORS OF THE COMMUNITY, WHO SERVE ON BOARDS AND COMMITTEES,

4b (Code:) (Expenses \$ 1,029,642. including grants of \$ 0.) (Revenue \$ 244,711.)
HUMAN AND FINANCIAL RESOURCE DEVELOPMENT:

THE FEDERATION PROVIDES SKILLED, COST EFFICIENT FUNDRAISING THROUGH MULTIPLE CHANNELS TO SUPPORT THE NEEDS OF THE COMMUNITY AND TO DEVELOP PROFESSIONAL AND VOLUNTEER LEADERSHIP AND HUMAN RESOURCES.

THE FEDERATION'S ANNUAL COMMUNITY CAMPAIGN IS THE JEWISH COMMUNITY'S LARGEST FUNDRAISING EFFORT. CAMPAIGN DONATIONS ARE RECEIVED FROM APPROXIMATELY 5,280 DONORS, MANY OF WHOM PARTICIPATE IN PEER GROUP ACTIVITIES SUCH AS WOMEN'S PHILANTHROPY, YOUNG PROFESSIONALS DIVISION AND THE MAIMONIDES, CARDOZO AND MONTEFIORE SOCIETIES WHICH DEVELOP FUTURE COMMUNITY LEADERSHIP.

4c (Code:) (Expenses \$ 599,759. including grants of \$ 0.) (Revenue \$ 0.)
HOLOCAUST MUSEUM & LEARNING CENTER:

THE MUSEUM AND LEARNING CENTER OPENED IN 1995. MORE THAN 30,000 PEOPLE VISIT THE MUSEUM EACH YEAR, INCLUDING 25,000 STUDENTS. ADMITTANCE TO THE MUSEUM AND ALL PROGRAMS ARE FREE AND OPEN TO THE PUBLIC. THE MUSEUM PROVIDES A CHRONOLOGICAL HISTORY OF THE HOLOCAUST WITH PERSONAL ACCOUNTS OF HOLOCAUST SURVIVORS WHO IMMIGRATED TO ST. LOUIS. A CHANGE BEGINS WITH ME EXHIBIT PROMOTES TOLERANCE AND DIVERSITY AND CHRONICLES MODERN DAY EXAMPLES OF DISCRIMINATION AND ENCOURAGES PERSONAL ACTION WITHIN THE COMMUNITY.

4d Other program services (Describe in Schedule O.)

(Expenses \$ 708,284. including grants of \$) (Revenue \$)

4e Total program service expenses 13,690,093.

Form 990 (2013)

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)? <i>If "Yes," complete Schedule A</i>	X	
2 Is the organization required to complete Schedule B, Schedule of Contributors?	X	
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>		X
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>	X	
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? <i>If "Yes," complete Schedule C, Part III</i>		X
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, Part I</i>	X	
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III</i>		X
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? <i>If "Yes," complete Schedule D, Part IV</i>	X	
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>	X	
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI</i>	X	
b Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII</i>	X	
c Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII</i>		X
d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X</i>	X	
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional</i>	X	
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
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? <i>If "Yes," complete Schedule F, Parts I and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts II and IV</i>	X	
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? <i>If "Yes," complete Schedule F, Parts III and IV</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I</i>	X	
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

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Part IV Checklist of Required Schedules (continued)

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

Note. All Form 990 filers are required to complete Schedule OForm **990** (2013)

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V ☐

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	42	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?		
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	63	
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)	X	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?	X	
b	If "Yes," has it filed a Form 990-T for this year? If "No," to line 3b, provide an explanation in Schedule O	X	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?		X
b	If "Yes," enter the name of the foreign country: See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?		X
c	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?		
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?		X
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?		
7	Organizations that may receive deductible contributions under section 170(c).		
a	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		
c	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d	
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?		X
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?		X
9	Sponsoring organizations maintaining donor advised funds.		
a	Did the organization make any taxable distributions under section 4966?		X
b	Did the organization make a distribution to a donor, donor advisor, or related person?		X
10	Section 501(c)(7) organizations. Enter:		
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	
11	Section 501(c)(12) organizations. Enter:		
a	Gross income from members or shareholders	11a	
b	Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them.)	11b	
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	
13	Section 501(c)(29) qualified nonprofit health insurance issuers.		
a	Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O.	13a	
b	Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13b	
c	Enter the amount of reserves on hand	13c	
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b	

Form 990 (2013)

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

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

☒**Section A. Governing Body and Management**

	1a	1b	Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	31			
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.		31		
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?				X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?				X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?				X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?				X
6 Did the organization have members or stockholders?			X	
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?			X	
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?			X	
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:				
a The governing body?			X	
b Each committee with authority to act on behalf of the governing body?			X	
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				X

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

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

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed **MO**

18 Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 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, physical address, and telephone number of the person who possesses the books and records of the organization: **SANDRA A. JANITCH-SCHWARZEN - 314-442-3857**
12 MILLSTONE CAMPUS DRIVE, ST. LOUIS, MO 63146-5776

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

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

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

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

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) PATRICIA CROUGHAN BOARD CHAIR	20.00 0.00	X		X				0.	0.	0.
(2) JANE ROODMAN WEISS - VICE CHAIR FINANCIAL & HUMAN RESOURCES	10.00 0.00	X		X				0.	0.	0.
(3) HARVEY WALLACE VICE CHAIR CAMPAIGN	10.00 0.00	X		X				0.	0.	0.
(4) MICHAEL OBERLANDER VICE CHAIR FINANCE/TREASURER	10.00 0.00	X		X				0.	0.	0.
(5) RUTH RASKAS VICE CHAIR PLANNING & ALLOCATIONS	10.00 0.00	X		X				0.	0.	0.
(6) GREG YAWITZ VICE CHAIR STRATEGIC PLANNING	10.00 0.00	X		X				0.	0.	0.
(7) ROBERT NEWMARK VICE CHAIR AT LARGE/SECRETARY	10.00 0.00	X		X				0.	0.	0.
(8) ROBERT MILLSTONE IMMEDIATE PAST BOARD CHAIR	10.00 0.00	X		X				0.	0.	0.
(9) SUSAN GODWIN KOFKOFF MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(10) LISA GRAIVIER BARNES MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(11) MICHAEL LITWACK MEMBER AT LARGE	5.00 1.00	X						0.	0.	0.
(12) SANFORD NEUMAN MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(13) RICK RECHT MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(14) IAN SILBERMAN MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(15) MICHAEL STAENBERG MEMBER AT LARGE	5.00 2.00	X						0.	0.	0.
(16) JULIE STERN MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.
(17) RABBI SUSAN TALVE MEMBER AT LARGE	5.00 0.00	X						0.	0.	0.

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

(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(18) LEE WIELANSKY	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(19) JJ FLOTKEN	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(20) RANDALL GREEN	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(21) TOM GREEN	5.00									
MEMBER AT LARGE	3.00	X						0.	0.	0.
(22) SHEILA GREENBAUM	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(23) C BRADLEY GROSS	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(24) JOHN KALISHMAN	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(25) DAVID KASLOW	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(26) KEN KRANZBERG	5.00									
MEMBER AT LARGE	1.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								934,855.	0.	121,059.
d Total (add lines 1b and 1c)								934,855.	0.	121,059.

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization **5**

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

Section B. Independent Contractors

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

(A) Name and business address	(B) Description of services	(C) Compensation
NONE		

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

SEE PART VII, SECTION A CONTINUATION SHEETS

Form 990 (2013)

Section A: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)										
(A) Name and title	(B) Average hours per week (list any hours for related organizations below line)	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(27) RONALD RUBIN	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(28) TODD SIWAK	5.00									
MEMBER AT LARGE	1.00	X						0.	0.	0.
(29) SHERRI FRANK WEINTROP	5.00									
MEMBER AT LARGE	0.00	X						0.	0.	0.
(30) JEFF SPARKS	5.00									
PLANNING CHAIR	0.00	X						0.	0.	0.
(31) BURT GARLAND	5.00									
PLANNING CHAIR	0.00	X						0.	0.	0.
(32) DIANE KATZMAN	5.00									
PLANNING CHAIR	0.00	X						0.	0.	0.
(33) MARK LEVIN	5.00									
PLANNING CHAIR	0.00	X						0.	0.	0.
(34) SUE SCHLICHTER	5.00									
PLANNING CHAIR	0.00	X						0.	0.	0.
(35) SHERRY SHUMAN	5.00									
WOMENS PHILANTHROPY CHAIR	0.00	X						0.	0.	0.
(36) DR. ANDREW REHFELD	40.00									
PRESIDENT & CEO	3.00			X				206,923.	0.	6,400
(37) SANDRA JANITCH-SCHWARZEN	40.00									
DIRECTOR OF FISCAL SERVICES	0.00			X				119,258.	0.	20,858
(38) BARRY ROSENBERG - FORMER	40.00									
SPECIAL COUNSEL TO THE PRESIDENT	0.00				X			282,437.	0.	40,842
(39) RUTH L. LEDERMAN - FORMER	40.00									
VP. & DIRECTOR OF DEVELOPMENT	0.00				X			158,201.	0.	18,115
(40) STEPHEN G. COHEN	40.00									
VP	0.00				X			168,036.	0.	34,844
Total to Part VII, Section A, line 1c								934,855.		121,059

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a	179,475.				
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d	787,649.				
	e Government grants (contributions)	1e	113,828.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f	12,550,327.				
	g Noncash contributions included in lines 1a-1f: \$		2,682,199.				
	h Total. Add lines 1a-1f			13,631,279.			
Program Service Revenue	2 a OFFICE SERVICES	Business Code	900099	126,129.	126,129.		
	b OCCUPANCY		900099	118,582.	118,582.		
	c MEMBERSHIP DUES		900099	16,677.	16,677.		
	d						
	e						
	f All other program service revenue						
	g Total. Add lines 2a-2f			261,388.			
	Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			1,729,940.		-14,236.
4 Income from investment of tax-exempt bond proceeds							
5 Royalties							
6 a Gross rents		(i) Real	(ii) Personal				
		34,359.					
b Less: rental expenses			0.				
c Rental income or (loss)			34,359.				
d Net rental income or (loss)				34,359.			34,359.
7 a Gross amount from sales of assets other than inventory		(i) Securities	(ii) Other				
		28,545,308.					
b Less: cost or other basis and sales expenses			25,350,844.				
c Gain or (loss)			3,194,464.				
d Net gain or (loss)				3,194,464.			3,194,464.
8 a Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18		a					
b Less: direct expenses		b					
c Net income or (loss) from fundraising events							
9 a Gross income from gaming activities. See Part IV, line 19		a					
b Less: direct expenses		b					
c Net income or (loss) from gaming activities							
10 a Gross sales of inventory, less returns and allowances	a						
b Less: cost of goods sold	b						
c Net income or (loss) from sales of inventory							
Miscellaneous Revenue			Business Code				
11 a INTERCOMPANY CHARGES		900099	479,071.			479,071.	
b OTHER INCOME		900099	101,885.			101,885.	
c							
d All other revenue							
e Total. Add lines 11a-11d			580,956.				
12 Total revenue. See instructions.			19,432,386.	261,388.	-14,236.	5,553,955.	

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the United States. See Part IV, line 21	6,595,985.	6,595,985.		
2 Grants and other assistance to individuals in the United States. See Part IV, line 22				
3 Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16	3,409,229.	3,409,229.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	1,055,911.	467,798.	407,660.	180,453.
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	2,514,651.	1,491,955.	320,204.	702,492.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	147,297.	87,967.	14,103.	45,227.
9 Other employee benefits	289,895.	162,868.	44,594.	82,433.
10 Payroll taxes	220,183.	121,448.	43,213.	55,522.
11 Fees for services (non-employees):				
a Management				
b Legal	71,167.	39,716.	24,424.	7,027.
c Accounting	99,291.		99,291.	
d Lobbying	105,834.		105,834.	
e Professional fundraising services. See Part IV, line 17	19,295.			19,295.
f Investment management fees	6,453.		6,453.	
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	567,209.	357,461.	165,796.	43,952.
12 Advertising and promotion	194,357.	143,161.	14,456.	36,740.
13 Office expenses	183,964.	52,787.	105,411.	25,766.
14 Information technology				
15 Royalties				
16 Occupancy	585,874.	271,065.	264,958.	49,851.
17 Travel	18,928.	11,154.	6,607.	1,167.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	207,820.	85,759.	65,141.	56,920.
20 Interest	490,061.		490,061.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	293,313.	92,978.	165,035.	35,300.
23 Insurance	61,646.	7,255.	54,391.	
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 TRANSITION EXPENSES	775,617.	143,868.	496,917.	134,832.
b AWARDS AND GRANTS	125,819.	113,567.	10,257.	1,995.
c MISCELLANEOUS	61,608.	22,106.	24,991.	14,511.
d MISSIONS	51,993.	11,966.	18,175.	21,852.
e All other expenses				
25 Total functional expenses. Add lines 1 through 24e	18,153,400.	13,690,093.	2,947,972.	1,515,335.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

Check here ☐ if following SOP 98-2 (ASC 958-720)

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash - non-interest-bearing	1,965,282.	1	1,222,266.
	2 Savings and temporary cash investments	3,261,436.	2	5,318,070.
	3 Pledges and grants receivable, net	3,428,892.	3	3,351,700.
	4 Accounts receivable, net	514,837.	4	507,725.
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
	7 Notes and loans receivable, net	660,296.	7	22,381,467.
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	312,293.	9	98,807.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,043,600.		
	b Less: accumulated depreciation	10b 5,046,563.		
		3,149,760.	10c	2,997,037.
	11 Investments - publicly traded securities	61,589,989.	11	65,889,061.
	12 Investments - other securities. See Part IV, line 11	37,002,205.	12	34,568,843.
	13 Investments - program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
15 Other assets. See Part IV, line 11		15		
16 Total assets. Add lines 1 through 15 (must equal line 34)	111,884,990.	16	136,334,976.	
Liabilities	17 Accounts payable and accrued expenses	3,007,040.	17	3,477,997.
	18 Grants payable		18	
	19 Deferred revenue		19	
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	21,672,166.	21	17,588,776.
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties	1,193,402.	24	22,830,180.
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	5,600,528.	25	4,330,230.
	26 Total liabilities. Add lines 17 through 25	31,473,136.	26	48,227,183.
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here ☒ and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	40,902,028.	27	44,201,864.
	28 Temporarily restricted net assets	22,107,100.	28	24,915,002.
	29 Permanently restricted net assets	17,402,726.	29	18,990,927.
	Organizations that do not follow SFAS 117 (ASC 958), check here ☐ and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
	33 Total net assets or fund balances	80,411,854.	33	88,107,793.
	34 Total liabilities and net assets/fund balances	111,884,990.	34	136,334,976.

Form 990 (2013)

Part XI Reconciliation 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	19,432,386.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,153,400.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,278,986.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	80,411,854.
5	Net unrealized gains (losses) on investments	5	4,803,444.
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	1,613,509.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	88,107,793.

Part XII Financial Statements and Reporting

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

☐

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

Form 990 (2013)

Department of the Treasury
Internal Revenue Service

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.
 ▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

**Open to Public
Inspection**

Name of the organization

JEWSH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

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

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

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

2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E.)

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

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

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

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

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

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

9 ☐ An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)

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

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

a ☐ Type I b ☐ Type II c ☐ Type III - Functionally integrated d ☐ Type III - Non-functionally integrated

e ☐ By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).

f ☐ If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box _____

g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization? _____

(ii) A family member of a person described in (i) above? _____

(iii) A 35% controlled entity of a person described in (i) or (ii) above? _____

h Provide the following information about the supported organization(s).

[illegible]

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule A (Form 990 or 990-EZ) 2013

332021
09-25-13

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	12,188,066.	13,951,639.	12,215,962.	13,784,608.	13,631,279.	65,771,554.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3	12,188,066.	13,951,639.	12,215,962.	13,784,608.	13,631,279.	65,771,554.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						198,975.
6 Public support. Subtract line 5 from line 4.						65,572,579.

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
7 Amounts from line 4	12,188,066.	13,951,639.	12,215,962.	13,784,608.	13,631,279.	65,771,554.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	1,456,652.	1,236,010.	1,330,068.	1,374,492.	1,778,535.	7,175,757.
9 Net income from unrelated business activities, whether or not the business is regularly carried on				10,590.		10,590.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	467,652.	564,837.	634,036.	722,298.	580,956.	2,969,779.
11 Total support. Add lines 7 through 10						75,927,680.
12 Gross receipts from related activities, etc. (see instructions)					12	1,471,694.
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here ► ☐						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2013 (line 6, column (f) divided by line 11, column (f))	14	86.36 %
15 Public support percentage from 2012 Schedule A, Part II, line 14	15	85.29 %
16a 33 1/3% support test - 2013. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☒		
b 33 1/3% support test - 2012. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization ► ☐		
17a 10% -facts-and-circumstances test - 2013. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐		
b 10% -facts-and-circumstances test - 2012. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization ► ☐		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions ► ☐		

Schedule A (Form 990 or 990-EZ) 2013

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

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

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5 The value of services or facilities furnished by a governmental unit to the organization without charge						
6 Total. Add lines 1 through 5						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c Add lines 7a and 7b						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2009	(b) 2010	(c) 2011	(d) 2012	(e) 2013	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2013 (line 8, column (f) divided by line 13, column (f)) **15** %

16 Public support percentage from 2012 Schedule A, Part III, line 15 **16** %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2013 (line 10c, column (f) divided by line 13, column (f)) **17** %

18 Investment income percentage from 2012 Schedule A, Part III, line 17 **18** %

19a **33 1/3% support tests - 2013.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

b **33 1/3% support tests - 2012.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here.** The organization qualifies as a publicly supported organization ☐

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

Part IV **Supplemental Information.** Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; and Part III, line 12.

Also complete this part for any additional information. (See instructions).

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

MISCELLANEOUS

2010 AMOUNT: \$ 72,838.

2011 AMOUNT: \$ 176,378.

2012 AMOUNT: \$ 238,672.

2013 AMOUNT: \$ 101,885.

INTERCOMPANY CHARGES

2009 AMOUNT: \$ 467,652.

2010 AMOUNT: \$ 491,999.

2011 AMOUNT: \$ 457,658.

2012 AMOUNT: \$ 483,626.

2013 AMOUNT: \$ 479,071.

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF.
▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and
its instructions is at www.irs.gov/form990.

OMB No. 1545-0047

2013

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

Organization type (check one):

Filers of:

Section:

Form 990 or 990-EZ

☒ 501(c)(3) (enter number) organization

☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation

☐ 527 political organization

Form 990-PF

☐ 501(c)(3) exempt private foundation

☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation

☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

☐ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II.

Special Rules

☒ For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.

☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions of \$5,000 or more during the year ▶ \$

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2013)

Name of organization	Employer identification number
JEWISH FEDERATION OF ST. LOUIS	43-0652643

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1		\$ 1,565,277.	Person ☒ Payroll ☐ Noncash ☒ (Complete Part II for noncash contributions.)
2		\$ 549,100.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
3		\$ 375,000.	Person ☒ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)
		\$	Person ☐ Payroll ☐ Noncash ☐ (Complete Part II for noncash contributions.)

Name of organization

Employer identification number

JEWISH FEDERATION OF ST. LOUIS

43-0652643

Part II **Noncash Property** (see instructions). Use duplicate copies of Part II if additional space is needed.

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	COMMON STOCK: 675 SH. ESGR; 2,204 SH. AEE; 2,300 SH. PFE; 1,300 SH. SMLP; 500 SH. BPL; 500 SH. EQM	\$ 348,436.	12/26/13
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	
		\$	

Name of organization	Employer identification number
JEWISH FEDERATION OF ST. LOUIS	43-0652643

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

Use duplicate copies of Part III if additional space is needed.

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

SCHEDULE C
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527
▶ **Complete if the organization is described below.** ▶ **Attach to Form 990 or Form 990-EZ.**
▶ **See separate instructions.** ▶ **Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.**

OMB No. 1545-0047

2013

**Open to Public
Inspection**

If the organization answered "Yes," to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

- Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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Part I-A Complete if the organization is exempt under section 501(c) or is a section 527 organization.

1 Provide a description of the organization's direct and indirect political campaign activities in Part IV.

2 Political expenditures	▶ \$	0.
3 Volunteer hours	▶	0.

Part I-B Complete if the organization is exempt under section 501(c)(3).

1 Enter the amount of any excise tax incurred by the organization under section 4955	▶ \$	0.
2 Enter the amount of any excise tax incurred by organization managers under section 4955	▶ \$	0.
3 If the organization incurred a section 4955 tax, did it file Form 4720 for this year?	☐ Yes ☐ No	
4a Was a correction made?	☐ Yes ☐ No	
b If "Yes," describe in Part IV.		

Part I-C Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities	▶ \$	
2 Enter the amount of the filing organization's funds contributed to other organizations for section 527 exempt function activities	▶ \$	
3 Total exempt function expenditures. Add lines 1 and 2. Enter here and on Form 1120-POL, line 17b	▶ \$	
4 Did the filing organization file Form 1120-POL for this year?	☐ Yes ☐ No	
5 Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC). If additional space is needed, provide information in Part IV.		

(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization. If none, enter -0-

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2013

LHA

332041
11-08-13

Part II-A Complete if the organization is exempt under section 501(c)(3) and filed Form 5768 (election under section 501(h)).

A Check ☐ if the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures).

B Check ☐ if the filing organization checked box A and "limited control" provisions apply.

Limits on Lobbying Expenditures (The term "expenditures" means amounts paid or incurred.)		(a) Filing organization's totals	(b) Affiliated group totals												
1a	Total lobbying expenditures to influence public opinion (grass roots lobbying)	0.													
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	105,834.													
c	Total lobbying expenditures (add lines 1a and 1b)	105,834.													
d	Other exempt purpose expenditures	16,532,231.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	16,638,065.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	981,903.													
<table border="1"> <thead> <tr> <th>If the amount on line 1e, column (a) or (b) is:</th> <th>The lobbying nontaxable amount is:</th> </tr> </thead> <tbody> <tr> <td>Not over \$500,000</td> <td>20% of the amount on line 1e.</td> </tr> <tr> <td>Over \$500,000 but not over \$1,000,000</td> <td>\$100,000 plus 15% of the excess over \$500,000.</td> </tr> <tr> <td>Over \$1,000,000 but not over \$1,500,000</td> <td>\$175,000 plus 10% of the excess over \$1,000,000.</td> </tr> <tr> <td>Over \$1,500,000 but not over \$17,000,000</td> <td>\$225,000 plus 5% of the excess over \$1,500,000.</td> </tr> <tr> <td>Over \$17,000,000</td> <td>\$1,000,000.</td> </tr> </tbody> </table>		If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:	Not over \$500,000	20% of the amount on line 1e.	Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.	Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.	Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.	Over \$17,000,000	\$1,000,000.		
If the amount on line 1e, column (a) or (b) is:	The lobbying nontaxable amount is:														
Not over \$500,000	20% of the amount on line 1e.														
Over \$500,000 but not over \$1,000,000	\$100,000 plus 15% of the excess over \$500,000.														
Over \$1,000,000 but not over \$1,500,000	\$175,000 plus 10% of the excess over \$1,000,000.														
Over \$1,500,000 but not over \$17,000,000	\$225,000 plus 5% of the excess over \$1,500,000.														
Over \$17,000,000	\$1,000,000.														
g	Grassroots nontaxable amount (enter 25% of line 1f)	245,476.													
h	Subtract line 1g from line 1a. If zero or less, enter -0-	0.													
i	Subtract line 1f from line 1c. If zero or less, enter -0-	0.													
j	If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720 reporting section 4911 tax for this year?		☐ Yes ☐ No												

4-Year Averaging Period Under Section 501(h)

(Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the instructions for lines 2a through 2f on page 4.)

Lobbying Expenditures During 4-Year Averaging Period

Calendar year (or fiscal year beginning in)	(a) 2010	(b) 2011	(c) 2012	(d) 2013	(e) Total
2a Lobbying nontaxable amount	935,310.	962,053.	914,139.	981,903.	3,793,405.
b Lobbying ceiling amount (150% of line 2a, column(e))					5,690,108.
c Total lobbying expenditures	96,117.	101,618.	100,349.	105,834.	403,918.
d Grassroots nontaxable amount	233,828.	240,513.	228,535.	245,476.	948,352.
e Grassroots ceiling amount (150% of line 2d, column (e))					1,422,528.
f Grassroots lobbying expenditures					

Schedule C (Form 990 or 990-EZ) 2013

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

OMB No. 1545-0047

2013**Open to Public Inspection**

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

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

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	91	
2 Aggregate contributions to (during year)	1,790,923.	
3 Aggregate grants from (during year)	2,072,126.	
4 Aggregate value at end of year	6,949,712.	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

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

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

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

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

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

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

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

a ☐ Public exhibitiond ☐ Loan or exchange programsb ☐ Scholarly researche ☐ Otherc ☐ Preservation for future generations

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

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets

to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☒ No

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

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

b If "Yes," explain the arrangement in Part XIII and complete the following table:

c Beginning balance

d Additions during the year

e Distributions during the year

f Ending balance

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21? ☒ Yes ☐ No

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

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

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance	84,267,931.	73,467,620.	78,156,133.	71,652,632.	60,220,468.
b Contributions	4,018,183.	8,700,274.	2,433,713.	3,067,896.	2,151,377.
c Net investment earnings, gains, and losses	9,284,594.	8,083,144.	-1,142,787.	8,414,561.	15,085,489.
d Grants or scholarships	8,698,506.	5,983,107.	5,979,439.	4,978,956.	5,804,702.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	88,872,202.	84,267,931.	73,467,620.	78,156,133.	71,652,632.

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

a Board designated or quasi-endowment 50.93 %

b Permanent endowment 24.29 %

c Temporarily restricted endowment 24.78 %

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

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

(i) unrelated organizations

(ii) related organizations

	Yes	No
3a(i)		☒
3a(ii)		☒
3b		

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

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

Part VI Land, Buildings, and Equipment.

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

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings		3,626,956.	2,583,232.	1,043,724.
c Leasehold improvements				
d Equipment		4,416,644.	2,463,331.	1,953,313.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).)				2,997,037.

Schedule D (Form 990) 2013

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CSV OF LIFE INSURANCE	1,255,367.	END-OF-YEAR MARKET VALUE
(B) OTHER	34,007.	END-OF-YEAR MARKET VALUE
(C) PRIVATE EQUITY	9,691,627.	END-OF-YEAR MARKET VALUE
(D) ABSOLUTE RETURN		
(E) STRATEGIES	13,120,460.	END-OF-YEAR MARKET VALUE
(F) REAL ESTATE	10,467,382.	END-OF-YEAR MARKET VALUE
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	34,568,843.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(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" to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) SPLIT INTEREST OBLIGATIONS	2,593,889.
(3) ACCRUED PENSION LIABILITY	1,736,341.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	4,330,230.

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

Schedule D (Form 990) 2013

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		5

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

Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5

Part XIII Supplemental Information.

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

PART IV, LINE 2B:

FUNDS HELD IN CUSTODY FOR OTHERS INCLUDE INVESTMENTS OF VARIOUS BENEFICIARY AGENCIES AND OTHER ORGANIZATIONS WHICH PARTICIPATE IN THE POOLED INVESTMENT PROGRAM OF THE FEDERATION, WHICH ARE RELATED PARTIES. THESE AGENCIES AND ORGANIZATIONS RETAIN THE AUTHORITY TO WITHDRAW THESE FUNDS AT ANY TIME WITH CERTAIN ADVANCE NOTICE. FUNDS HELD IN CUSTODY FOR OTHERS ALSO INCLUDE THE ESTIMATED AMOUNT TO BE DISTRIBUTED TO OTHER ORGANIZATIONS UPON THE DEATH OF A DONOR ANNUITY BENEFICIARY AND AMOUNTS TO BE DISTRIBUTED IN ACCORDANCE WITH THE PASSPORT TO ISRAEL PROGRAM.

PART V, LINE 4:

THE FEDERATION'S ENDOWMENT FUNDS SUPPORT THE FEDERATION'S

Part XIII Supplemental Information (continued)

CHARITABLE PURPOSE, BY MAKING FUNDS AVAILABLE TO BE USED IN THE
FEDERATION'S ANNUAL SUPPORT OF BENEFICIARY AGENCIES, TO SUPPORT SPECIFIC
PROGRAMS OF THE FEDERATION OR TO SUPPORT OTHER DESIGNATED PROGRAMS OUTSIDE
OF THE ORGANIZATION.

PART X, LINE 2:

THE FEDERATION HAS BEEN RECOGNIZED BY THE INTERNAL REVENUE
SERVICE AS EXEMPT FROM INCOME TAXES UNDER SECTION 501(C)(3) OF THE
INTERNAL REVENUE CODE AND, ACCORDINGLY, IS GENERALLY NOT SUBJECT TO INCOME
TAXES. THE FEDERATION HAS ADOPTED GUIDANCE REGARDING THE RECOGNITION OF
UNCERTAIN INCOME TAX POSITIONS. THE FEDERATION'S POLICY PRESCRIBES A
RECOGNITION THRESHOLD AND MEASUREMENT PRINCIPLES FOR THE FINANCIAL
STATEMENT RECOGNITION AND MEASUREMENT OF TAX POSITIONS TAKEN OR EXPECTED
TO BE TAKEN ON A TAX RETURN THAT ARE NOT CERTAIN TO BE REALIZED.

THE FEDERATION AND ITS CONSOLIDATED ENTITIES FILE AS TAX EXEMPT
ORGANIZATIONS. THE FEDERATION'S 2010, 2011, 2012 AND 2013 (WHEN FILED) TAX
YEARS ARE OPEN FOR EXAMINATION BY THE IRS.

SCHEDULE F
(Form 990)

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

Employer identification number

JEWISH FEDERATION OF ST. LOUIS

43-0652643

Part I **General Information on Activities Outside the United States.** Complete if the organization answered "Yes" on Form 990, Part IV, line 14b.

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

2 For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States.

3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.)

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
RUSSIA & THE NEWLY INDEPENDENT STATES -	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION		0.
MIDDLE EAST AND NORTH AFRICA -	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION		0.
SOUTH AMERICA - ARGENTINA, BOLIVIA,	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION		0.
3 a Sub-total	0	0			0.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			0.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

43-0652643

JEWISH FEDERATION OF ST. LOUIS

Schedule F (Form 990) 2013

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			RUSSIA & THE NEWLY INDEPENDENT STATES -	DISTRIBUTION TO ORGANIZATIONS IN RUSSIA & THE NEWLY INDEPENDENT STATES	0.	WIRE/CHECK	0.	N/A	N/A
			MIDDLE EAST AND NORTH AFRICA -	DISTRIBUTION TO ORGANIZATIONS IN THE MIDDLE EASTERN AND NORTH AFRICAN REGION	0.	WIRE/CHECK	0.	N/A	N/A
			SOUTH AMERICA - ARGENTINA, BOLIVIA,	DISTRIBUTION TO ORGANIZATIONS IN SOUTH AMERICAN REGION	0.	WIRE/CHECK	0.	N/A	N/A
				SEE PART V FOR MORE INFORMATION ON GRANTS TO ORGANIZATIONS OUTSIDE THE UNITED	3,409,229.	WIRE/CHECK	0.	N/A	N/A

2 Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities

1
0

Schedule F (Form 990) 2013

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part IV Foreign Forms

- 1 Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926) ☐ Yes ☒ No
- 2 Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) ☐ Yes ☒ No
- 3 Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations. (see Instructions for Form 5471) ☐ Yes ☒ No
- 4 Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. (see Instructions for Form 8621) ☐ Yes ☒ No
- 5 Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865) ☐ Yes ☒ No
- 6 Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report. (see Instructions for Form 5713) ☐ Yes ☒ No

Schedule F (Form 990) 2013

Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.

PART I, LINE 2:

THE FEDERATION EXCLUSIVELY USES JEWISH FEDERATIONS OF NORTH AMERICA (JFNA) TO PERFORM GRANTMAKING TO ORGANIZATIONS OUTSIDE THE UNITED STATES. JFNA IS THE OVERSEAS GRANTMKING ORGANIZATION FOR 155 FEDERATIONS IN THE UNITED STATES. JFNA PERFORMS ALL DUE DILIGENCE WITH RESPECT TO EVALUATING THE RECIPIENT ORGANIZATIONS TO ENSURE THEY MEET THE ELIGIBILITY CRITERIA REQUIRED TO MEET THE EQUIVALENCY OF 501(C)(3) STATUS IN THE UNITED STATES. THE FEDERATION SPECIFIES CERTAIN PORTIONS FOR RECIPIENT ORGANIZATIONS IN ISRAEL, THE FORMER SOVIET UNION, AND SOUTH AMERICA; ALTHOUGH SPECIFIC DOLLAR AMOUNTS PER REGION CANNOT BE DETERMINED. THE GRANT AMOUNTS REPORTED IN THE FEDERATION'S FORM 990 WILL ALSO BE REPORTED ON JFNA'S FORM 990, SCHEDULE F.

PART I, LINE 3:

ACCRUAL

PART II, COLUMN (D):

REGION: RUSSIA & THE NEWLY INDEPENDENT STATES -

(D) PURPOSE OF GRANT: DISTRIBUTION TO ORGANIZATIONS IN RUSSIA & THE NEWLY INDEPENDENT STATES REGION

Department of the Treasury
Internal Revenue Service

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

▶ Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2013

Open To Public Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number
43-0652643

Part I

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

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

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

- 2 a** Did the organization have a written or oral agreement with any individual (including officers, directors, trustees or key employees listed in Form 990, Part VII) or entity in connection with professional fundraising services?

☒ Yes ☐ No

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

(i) Name and address of individual or entity (fundraiser)	(ii) Activity	(iii) Did fundraiser have custody or control of contributions?		(iv) Gross receipts from activity	(v) Amount paid to (or retained by) fundraiser listed in col. (i)	(vi) Amount paid to (or retained by) organization
		Yes	No			
SIEGEL MARKETING GROUP - PO BOX 686598, CHICAGO, IL	TELEMARKETING		X	73,369.	19,295.	54,074.
Total				73,369.	19,295.	54,074.

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

MO

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule G (Form 990 or 990-EZ) 2013

SEE PART IV FOR CONTINUATIONS

332081
09-12-13

35

15181107 131843 098-04268800 2013.04030 JEWISH FEDERATION OF ST. LO 098-0461

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

		(a) Event #1	(b) Event #2	(c) Other events	(d) Total events (add col. (a) through col. (c))
		(event type)	(event type)	(total number)	
Revenue	1 Gross receipts				
	2 Less: Contributions				
	3 Gross income (line 1 minus line 2)				
Direct Expenses	4 Cash prizes				
	5 Noncash prizes				
	6 Rent/facility costs				
	7 Food and beverages				
	8 Entertainment				
	9 Other direct expenses				
	10 Direct expense summary. Add lines 4 through 9 in column (d)				
	11 Net income summary. Subtract line 10 from line 3, column (d)				

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

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

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

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

b If "No," explain: _____

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

b If "Yes," explain: _____

- 11 Does the organization operate gaming activities with nonmembers? ☐ Yes ☐ No
- 12 Is the organization a grantor, beneficiary or trustee of a trust or a member of a partnership or other entity formed to administer charitable gaming? ☐ Yes ☐ No
- 13 Indicate the percentage of gaming activity operated in:
- | | | |
|-------------------------------|-----|---|
| a The organization's facility | 13a | % |
| b An outside facility | 13b | % |
- 14 Enter the name and address of the person who prepares the organization's gaming/special events books and records:

Name ► _____

Address ► _____

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

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

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

Name ► _____

Address ► _____

16 Gaming manager information:

Name ► _____

Gaming manager compensation ► \$ _____

Description of services provided ► _____

☐ Director/officer☐ Employee☐ Independent contractor

17 Mandatory distributions:

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

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

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

SCHEDULE G, PART I, LINE 2B, LIST OF TEN HIGHEST PAID FUNDRAISERS:

(I) NAME OF FUNDRAISER: SIEGEL MARKETING GROUP

(I) ADDRESS OF FUNDRAISER: PO BOX 686598, CHICAGO, IL 60695-6598

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

**Grants and Other Assistance to Organizations,
Governments, and Individuals in the United States**
Complete if the organization answered "Yes" to Form 990, Part IV, line 21 or 22.

▶ Attach to Form 990.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number
43-0652643

Part I General Information on Grants and Assistance

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

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

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21, for any

recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ACLU/EM FUND 454 WHITTIER ST ST. LOUIS, MO 63108	43-6070952	501(C)(3)	5,100.	0.	N/A	N/A	GENERAL SUPPORT
AISH HATORAH 457 N WOODSMILL RD CHESTERFIELD, MO 63017	43-1839464	501(C)(3)	9,771.	0.	N/A	N/A	GENERAL SUPPORT
ALZHEIMER'S ASSOCIATION 9370 OLIVE BLVD ST. LOUIS, MO 63132	43-1237069	501(C)(3)	21,252.	0.	N/A	N/A	GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE 7751 CARONDOLET AVE ST. LOUIS, MO 63105	13-5563393	501(C)(3)	14,860.	0.	N/A	N/A	GENERAL SUPPORT
ANTI DEFAMATION LEAGUE 15 E 84TH ST NEW YORK, NY 10028	13-1679610	501(C)(3)	9,840.	0.	N/A	N/A	GENERAL SUPPORT
ARTS & EDUCATION COUNCIL 10420 OLD OLIVE STREET RD ST. LOUIS, MO 63141	13-1818723	501(C)(3)	15,070.	0.	N/A	N/A	GENERAL SUPPORT

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table **64.**

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

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) (2013)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
BASIS ABRAHAM CONGREGATION 3547 OLIVE ST ST. LOUIS, MO 63103	43-0790672	501(C)(3)	12,105.	0.	N/A	N/A	GENERAL SUPPORT
BARNES JEWISH HOSPITAL 600 S TAYLOR AVE ST. LOUIS, MO 63110	43-1648435	501(C)(3)	41,528.	0.	N/A	N/A	GENERAL SUPPORT
BIRTHRIGHT ISRAEL FOUNDATION PO BOX 1784 NEW YORK, NY 10156	13-4092050	501(C)(3)	130,354.	0.	N/A	N/A	GENERAL SUPPORT
B'NAI B'RITH HILLEL FOUNDATION 6300 FORSYTH ST. LOUIS, MO 63105	43-6065763	501(C)(3)	208,872.	0.	N/A	N/A	GENERAL SUPPORT
CANCER SUPPORT COMMUNITY 1058 OLD DES PERE RD ST. LOUIS, MO 63131	43-1587517	501(C)(3)	6,325.	0.	N/A	N/A	GENERAL SUPPORT
CENTRAL AGENCY FOR JEWISH EDUCATION - 12 MILLSTONE CAMPUS DR - ST. LOUIS, MO 63146	23-7123583	501(C)(3)	1,268,304.	0.	N/A	N/A	GENERAL SUPPORT
CENTRAL REFORM CONGREGATION 5020 WATERMAN ST. LOUIS, MO 63108	43-1336060	501(C)(3)	34,300.	0.	N/A	N/A	GENERAL SUPPORT
CHABAD OF GREATER ST. LOUIS 8124 DELMAR ST. LOUIS, MO 63130	43-1287764	501(C)(3)	37,050.	0.	N/A	N/A	GENERAL SUPPORT
COMMUNITY AGING CORPORATION 8 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	43-1365901	501(C)(3)	85,263.	0.	N/A	N/A	GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
CONGREGATION B' NAI AMOONA 324 S MASON RD ST. LOUIS, MO 63141	43-0706846	501(C)(3)	41,772.	0. N/A		N/A	GENERAL SUPPORT
CONGREGATION TEMPLE ISRAEL #1 RABBI ALVIAN D. RUBIN DR ST. LOUIS, MO 63141	43-0653290	501(C)(3)	49,544.	0. N/A		N/A	GENERAL SUPPORT
CONTEMPORARY ART MUSEUM 3750 WASHINGTON BLVD ST. LOUIS, MO 63108	43-1202816	501(C)(3)	16,000.	0. N/A		N/A	GENERAL SUPPORT
CRAFT ALLIANCE EDUCATION FOUNDATION - 6440 DELMA BLVD - ST. LOUIS, MO 63130	43-1022226	501(C)(3)	6,500.	0. N/A		N/A	GENERAL SUPPORT
DONALD DANFORTH PLANT SCIENCE CENTER - 975 N WARSON RD - ST. LOUIS, MO 63132	31-1584621	501(C)(3)	62,000.	0. N/A		N/A	GENERAL SUPPORT
GATEWAY TO HOPE 845 N NEW BALLAS CRT, STE 380 ST. LOUIS, MO 63141	20-2737792	501(C)(3)	5,500.	0. N/A		N/A	GENERAL SUPPORT
GLADYS & HENRY CROWN CENTER 8350 DELCREST DR ST. LOUIS, MO 63124	43-1695861	501(C)(3)	102,972.	0. N/A		N/A	GENERAL SUPPORT
H.F. EPSTEIN HEBREW ACADEMY 1138 WARSON RD ST. LOUIS, MO 63132	43-6001158	501(C)(3)	176,579.	0. N/A		N/A	GENERAL SUPPORT
HOLOCAUST MUSEUM & LEARNING CENTER 12 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	43-0652643	501(C)(3)	13,821.	0. N/A		N/A	GENERAL SUPPORT

Schedule I (Form 990)

Part I Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part I.)

(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
JEWISH COMMUNITY CENTER 2 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	43-0681477	501(C)(3)	1,365,743.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH COMMUNITY RELATIONS COUNCIL 12 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	20-5631988	501(C)(3)	338,904.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E 27TH ST NEW YORK, NY 10016	13-1624104	501(C)(3)	8,000.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH FAMILY & CHILDREN'S SERVICE 10950 SCHUETZ RD ST. LOUIS, MO 63146	43-0790330	501(C)(3)	807,641.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH FEDERATION OF SOUTHERN ILLINOIS - 3419 W MAIN ST - BELLEVILLE, IL 62226	37-0661214	501(C)(3)	7,900.	0.	N/A	N/A	GENERAL SUPPORT
KOL RINAH RELIGIOUS SCHOOL 829 N HANLEY RD ST LOUIS, MO 63130	90-1003729	501(C)(3)	7,207.	0.	N/A	N/A	GENERAL SUPPORT
MERS GOODWILL 1727 LOCUST ST ST. LOUIS, MO 63103	43-0652657	501(C)(3)	41,986.	0.	N/A	N/A	GENERAL SUPPORT
MIRIAM FOUNDATION 501 BACON AVE ST. LOUIS, MO 63119	43-0667478	501(C)(3)	26,600.	0.	N/A	N/A	GENERAL SUPPORT
MISSOURI BOTANICAL GARDEN PO BOX 299 ST. LOUIS, MO 63166	43-0666759	501(C)(3)	26,130.	0.	N/A	N/A	GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
NATIONAL COUNCIL OF JEWISH WOMEN 8350 DELCREST DR ST. LOUIS, MO 63124	43-0722936	501(C)(3)	11,230.	0.	N/A	N/A	GENERAL SUPPORT
NEXT DOR 5062 WATERMAN ST. LOUIS, MO 63108	80-0594269	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL SUPPORT
NETV IN ISRAEL 46 BOWAN RD WARWICK, NY 10990	13-1663143	501(C)(3)	27,629.	0.	N/A	N/A	GENERAL SUPPORT
NINE NETWORK OF PUBLICATIONS 3655 OLIVE ST RD ST. LOUIS, MO 63108	43-0685345	501(C)(3)	7,680.	0.	N/A	N/A	GENERAL SUPPORT
PLANNED PARENTHOOD OF ST. LOUIS 4251 FOREST PARK AVE ST. LOUIS, MO 63108	43-0652666	501(C)(3)	8,360.	0.	N/A	N/A	GENERAL SUPPORT
SAFE CONNECTIONS 2165 HAMPTON AVENUE ST. LOUIS, MO 63139	43-1077667	501(C)(3)	11,000.	0.	N/A	N/A	GENERAL SUPPORT
SAINT LOUIS PUBLIC LIBRARY 1301 OLIVE ST ST. LOUIS, MO 63103		CITY OF ST. LOUIS	53,478.	0.	N/A	N/A	GENERAL SUPPORT
SALVATION ARMY 1130 HAMPTON AVE ST. LOUIS, MO 63139	43-0653584	501(C)(3)	42,829.	0.	N/A	N/A	GENERAL SUPPORT
SAUL MIROWITZ JEWISH COMMUNITY SCHOOL - 348 S MASON RD - ST. LOUIS, MO 63141	43-1772004	501(C)(3)	147,906.	0.	N/A	N/A	GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
SHAARE EMETH CONGREGATION 11645 LADUE RD ST. LOUIS, MO 63141	43-0662466	501(C)(3)	25,756.	0.N/A		N/A	GENERAL SUPPORT
SHAARE ZEDEK SYNAGOGUE 829 N HANLEY RD ST. LOUIS, MO 63130	43-0827996	501(C)(3)	12,311.	0.N/A		N/A	GENERAL SUPPORT
SHRINER'S HOSPITAL FOUNDATION 2001 S LINDBERGH BLVD ST. LOUIS, MO 63131	32-2193608	501(C)(3)	30,078.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS ART MUSEUM 1 FINE ARTS DR ST. LOUIS, MO 63110	43-1056957	501(C)(3)	11,280.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS CHILDREN'S HOSPITAL PO BOX 500522 ST. LOUIS, MO 63150	43-1626863	501(C)(3)	26,000.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS JEWISH LIGHT PO BOX 955519 ST. LOUIS, MO 63195	43-0965860	501(C)(3)	101,370.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS JEWISH STUDENT UNION 8251 MARYLAND AVE, STE 15 ST. LOUIS, MO 63105	13-5623717	501(C)(3)	29,685.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS KOLLEL 8200 DELMAR BLVD ST. LOUIS, MO 63124	43-1594954	501(C)(3)	30,193.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS SOCIETY FOR THE BLIND 8770 MANCHESTER RD ST. LOUIS, MO 63144	43-0666768	501(C)(3)	40,104.	0.N/A		N/A	GENERAL SUPPORT

Schedule I (Form 990)

Part II Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.)							
(a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
ST. LOUIS SYMPHONY ORCHESTRA 718 N GRAND BLVD ST. LOUIS, MO 63103	43-0666769	501(C)(3)	12,800.	0.N/A		N/A	GENERAL SUPPORT
ST. LOUIS ZOO ONE GOVERNMENT DR ST. LOUIS, MO 63110	43-1027365	501(C)(3)	61,850.	0.N/A		N/A	GENERAL SUPPORT
STAGES OF ST. LOUIS 444 CHESTERFIELD CTR ST. LOUIS, MO 63017	43-1434156	501(C)(3)	10,575.	0.N/A		N/A	GENERAL SUPPORT
TEMPLE EMANUEL 12166 CONWAY RD ST. LOUIS, MO 63141	43-6015404	501(C)(3)	5,075.	0.N/A		N/A	GENERAL SUPPORT
THREADS OF HOPE 7400 GURNEY DR PLANO, TX 75024	26-4580974	501(C)(3)	20,052.	0.N/A		N/A	GENERAL SUPPORT
TORAH MITZION KOLLEL 7741 GANNON AVE ST. LOUIS, MO 63130	56-2318455	501(C)(3)	27,780.	0.N/A		N/A	GENERAL SUPPORT
TORAH PREPARATORY SCHOOL 8000 STANFORD ST. LOUIS, MO 63130	56-2318455	501(C)(3)	227,031.	0.N/A		N/A	GENERAL SUPPORT
UNITED HEBREW CONGREGATION 13788 CONWAY RD ST. LOUIS, MO 63141	43-0743415	501(C)(3)	13,437.	0.N/A		N/A	GENERAL SUPPORT
UNITED WAY OF GREATER ST. LOUIS PO BOX 14507 ST. LOUIS, MO 63178	43-0714167	501(C)(3)	24,340.	0.N/A		N/A	GENERAL SUPPORT

Schedule I (Form 990)

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

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non-cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of non-cash assistance

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

PART I, LINE 2:

ALL BENEFICIARY ORGANIZATIONS WHICH RECEIVE GRANTS MADE

THROUGH THE FEDERATION'S ALLOCATION PROGRAM HAVE A TRI-ANNUAL ORGANIZATION

REVIEW. THIS INCLUDES A FINANCIAL AND ADMINISTRATIVE REVIEW OF THE

ORGANIZATION AND, IF APPLICABLE, A PROGRAMMATIC REVIEW AS WELL. FOR GRANTS

MADE THROUGH THE FEDERATION'S DONOR ADVISED FUNDS, ALL GRANTEEES' 501(C)(3)

STATUS IN GOOD STANDING IS CONFIRMED.

SCHEDULE I, PART II: * THE LARGE VARIETY IN ORGANIZATIONS RECEIVING GRANTS

Part IV Supplemental Information

FROM THE FEDERATION IS DUE TO THE INCLUSION OF GRANTS MADE THROUGH DONOR
ADVISED FUNDS.

**SCHEDULE J
(Form 990)**

Department of the Treasury
Internal Revenue Service

Compensation Information

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

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

▶ Attach to Form 990. ▶ See separate instructions.

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☒ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (e.g., maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked in line 1a?

3 Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| ☒ Compensation committee | ☒ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

a Receive a severance payment or change-of-control payment?

b Participate in, or receive payment from, a supplemental nonqualified retirement plan?

c Participate in, or receive payment from, an equity-based compensation arrangement?

If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.

5 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

a The organization?

b Any related organization?

If "Yes" to line 5a or 5b, describe in Part III.

6 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

a The organization?

b Any related organization?

If "Yes" to line 6a or 6b, describe in Part III.

7 For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III

9 If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

	Yes	No
1b	X	
2	X	
4a	X	
4b	X	
4c		X
5a		X
5b		X
6a		X
6b		X
7		X
8		X
9		

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Part III Supplemental Information

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

PART I, LINE 1A:

DR. ANDREW REHFELD: HEALTH OR SOCIAL CLUB DUES OR INITIATION

FEES - NOT INCLUDED IN TAXABLE INCOME.

PART I, LINES 4A-B:

409(A) NON-QUALIFIED SUPPLEMENTAL RETIREMENT PLAN

DISTRIBUTION - BARRY ROSENBERG \$100,000.

SEVERANCE PAYMENTS - RUTH L. LEDERMAN \$47,089.

SCHEDULE M
(Form 990)

Department of the Treasury
Internal Revenue Service

Noncash Contributions

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

Part I Types of Property

	(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	(d) Method of determining noncash contribution amounts
1 Art - Works of art				
2 Art - Historical treasures				
3 Art - Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities - Publicly traded	X	192	2,682,199.	STOCK MARKET QUOTES
10 Securities - Closely held stock				
11 Securities - Partnership, LLC, or trust interests				
12 Securities - Miscellaneous				
13 Qualified conservation contribution - Historic structures				
14 Qualified conservation contribution - Other				
15 Real estate - Residential				
16 Real estate - Commercial				
17 Real estate - Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ▶ ()				
26 Other ▶ ()				
27 Other ▶ ()				
28 Other ▶ ()				

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

29

0

30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 - 28, that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?

	Yes	No
30a		X
31	X	
32a		X
33		

b If "Yes," describe the arrangement in Part II.

31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?

32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?

b If "Yes," describe in Part II.

33 If the organization did not report an amount in column (c) for a type of property for which column (a) is checked, describe in Part II.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) (2013)

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

SCHEDULE M, PART I, COLUMN (B):

THE FEDERATION REPORTS THE NUMBER OF CONTRIBUTORS ON

SCHEDULE M, PART I, COLUMN (B).

Blank lines for supplemental information.

SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

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

OMB No. 1545-0047

2013

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

EDUCATIONAL, AND PHILANTHROPIC ORGANIZATIONS AND FOR PROVIDING CERTAIN
ASSET MANAGEMENT AND GENERAL SERVICES TO AFFILIATED AGENCIES.

FORM 990, PART III, LINE 4A, PROGRAM SERVICE ACCOMPLISHMENTS:

RAISE FUNDS, MANAGE ENDOWMENTS, RESPOND TO EMERGENCIES, EVALUATE NEEDS
AND DISTRIBUTE CHARITABLE DOLLARS TO THE FEDERATION'S FAMILY OF
AGENCIES, PROGRAMS AND SERVICES.

LOCAL AGENCIES ARE REVIEWED AND FUNDS ALLOCATED IN THREE-YEAR CYCLES.

NATIONAL AND INTERNATIONAL AGENCIES ARE REVIEWED ANNUALLY. THE

FEDERATION'S PLANNING AND ALLOCATIONS PROCESS IS BUILT AROUND A VISION

OF AN INSPIRING, CARING AND UNITED JEWISH COMMUNITY AND IS GUIDED BY

THE FEDERATION'S SIX STRATEGIC PRIORITIES; ENSURING THE JEWISH IDENTITY

AND ENGAGEMENT OF FUTURE GENERATIONS; CREATE A VIBRANT, EMBRACING,

LOCAL JEWISH COMMUNITY THAT WILL HELP RETAIN AND BE ATTRACTIVE TO YOUNG

ADULTS AND FAMILIES WITH CHILDREN; EDUCATE AND ADVOCATE FOR A STRONG

ISRAEL AND SAFE JEWISH WORLD; BUILD A HUMAN SERVICES SAFETY NET TO

IDENTIFY, MONITOR AND CARE FOR THE MOST VULNERABLE AND ISOLATED JEWS;

RECRUIT, TRAIN AND DEVELOP EXCEPTIONAL HUMAN RESOURCES; AND STRENGTHEN

AND OPTIMIZE THE COMMUNITY'S INFRASTRUCTURE TO MEET PRESENT AND FUTURE

REALITIES AND CHALLENGES. PLANNING AND ALLOCATIONS IS GUIDED BY

COMMUNITY INPUT FROM SOME 60 LOCAL LAY LEADERS PLUS STAFF REPRESENTING

A WIDE VARIETY OF AGES, INTEREST AND VIEWPOINTS WORKING WITH AGENCIES

TO EXAMINE GEOGRAPHIC AND DEMOGRAPHIC SHIFTS, IDENTIFY WHERE NEEDS ARE

GREATEST AND MAKE PLANS TO ADDRESS THEM EFFICIENTLY AND WITH LITTLE

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule O (Form 990 or 990-EZ) (2013)

332211
09-04-13

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

DUPLICATION OF SERVICES. ADDITIONALLY, EFFORTS ARE DIRECTED AT STRENGTHENING THE GOVERNANCE, MANAGEMENT AND ADMINISTRATIVE STRENGTH OF OUR AGENCIES.

ALTHOUGH THE GREAT MAJORITY OF SERVICES ARE OPERATED BY INDEPENDENT BENEFICIARY AGENCIES, SEVERAL MAJOR PROGRAMS ARE UNDER THE AEGIS OF PLANNING AND ALLOCATIONS:

THE ST. LOUIS NATURALLY OCCURRING RETIREMENT COMMUNITY (NORC) SENIOR PROGRAM: ST. LOUIS NORC IS DESIGNED TO HELP SENIORS REMAIN INDEPENDENT IN THEIR HOMES TO AGE IN PLACE WITH SUPPORT SERVICES AND PROGRAMS/ACTIVITIES TO KEEP THEM ACTIVE AND MENTALLY ENGAGED. NORC ENCOMPASSES A THREE-MILE AREA IN WEST ST. LOUIS COUNTY AND HAS A CURRENT MEMBERSHIP OF 642 PEOPLE AGED 65+. THE ST. LOUIS NORC OFFERS A LOW-COST ALTERNATIVE TO INSTITUTIONALIZATION. FEWER THAN 1% OF THE NORC'S RESIDENTS REPORT HAVING MOVED FROM THE NORC INTO NURSING HOMES. AT AN AVERAGE ANNUAL COST OF \$48,000 PER PERSON FOR A SEMI-PRIVATE NURSING HOME BED IN ST. LOUIS (ACCORDING TO GENWORTH FINANCIAL), THE NORC PROVIDES A COST-EFFECTIVE AND DIGNIFIED OPTION WHILE MEETING THE LIFESTYLE CHOICE OF MATURE ADULTS.

ELDERLINK ST. LOUIS: IS A COORDINATED REFERRAL SERVICE FOR JEWISH OLDER ADULTS, THEIR CHILDREN AND CAREGIVERS, WHICH IS A PROJECT OF THE SENIOR SERVICE INTEGRATION COMMISSION, ADMINISTERED BY A BENEFICIARY AGENCY. STAFF MEMBERS, WHO HOLD MASTERS OF SOCIAL WORK DEGREES AND ARE EXPERIENCED IN GERONTOLOGY, CONNECT USERS WITH ADVICE AND INFORMATION ON EVERYTHING FROM AGING IN PLACE AND CAREGIVER RESOURCES, TO EMPLOYMENT, END-OF-LIFE SERVICES, FINANCIAL RESOURCES, HOUSING,

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

LEARNING AND RECREATION, PHYSICAL AND MENTAL HEALTH, SAFETY AND LEGAL ISSUES AND MUCH MORE WITH EITHER A SIMPLE, CONFIDENTIAL PHONE CALL OR EMAIL. IN 2013, A TOTAL OF 1,648 PHONE CALLS WERE RECEIVED WITH INDIVIDUALS SEEKING REFERRAL SERVICES. FIFTY PERCENT WERE FROM CAREGIVERS; 35% OLDER ADULTS; 15% PROFESSIONALS AND OTHERS. IN ADDITION, ANOTHER 613 INDIVIDUALS ATTENDED 14 COMMUNITY PRESENTATIONS PROVIDED BY ELDERLINK STAFF AND 1,677 INDIVIDUALS VISITED THE ELDERLINK WEBSITE.

PJ LIBRARY PROGRAM: ST. LOUIS IS ONE OF MANY JEWISH COMMUNITIES THROUGHOUT THE COUNTRY WHICH OFFERS THE NATIONAL PJ LIBRARY PROGRAM TO ANY LOCAL FAMILY WITH CHILDREN AGED 6 MONTHS THROUGH 7 YEARS OF AGE. MORE THAN 800 LOCAL FAMILIES HAVE SIGNED UP (OR SOME 1,300 CHILDREN) TO RECEIVE A FREE (A \$40 VALUE) JEWISH CHILDREN'S BOOK OR CD EACH MONTH FOR A YEAR IN ORDER TO BUILD A JEWISH IDENTITY.

FORM 990, PART III, LINE 4B, PROGRAM SERVICE ACCOMPLISHMENTS: ENDOWMENTS AND PLANNED GIVING ARE HANDLED BY THE JEWISH COMMUNITY FOUNDATION (JCF) OF ST. LOUIS, LAUNCHED BY THE JEWISH FEDERATION IN 2006. JCF SERVES AS OUR COMMUNITY'S CENTRAL PLACE TO ACCEPT AND MANAGE ENDOWMENTS AND PLANNED GIFTS: BEQUESTS, CHARITABLE TRUSTS, ANNUITIES AND DONOR-ADVISED FUNDS. JCF ALSO PROVIDES A PLACE FOR DONORS AND LOCAL AGENCIES TO BENEFIT FROM THE COORDINATED MANAGEMENT OF COMMUNITY ASSETS. IT IS BACKED BY 100-PLUS YEARS OF THE FEDERATION'S SERVICE AS TRUSTEE OF THE ST. LOUIS' JEWISH COMMUNITY FUNDS. WEBSITE: WWW.JCF.ORG.

IN ADDITION, THE FEDERATION HOUSES THE MILLSTONE INSTITUTE FOR JEWISH LEADERSHIP WHICH IS A COMMUNITY-WIDE EFFORT THROUGHOUT THE NONPROFIT

Name of the organization

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43-0652643

JEWISH COMMUNITY TO DEVELOP LEADERS, STRENGTHEN ORGANIZATIONS AND
CREATE AN ENVIRONMENT FOR COLLABORATIONS THAT WAS ESTABLISHED IN
JANUARY, 2011. THE INSTITUTE PROMOTES A STRONG EMPHASIS ON VOLUNTEER
LEADERSHIP DEVELOPMENT. PROGRAMS INCLUDED THE MILLSTONE FELLOWS FOR
EMERGING AND ESTABLISHED LEADERS (PRIMARYLY IN THEIR 30'S AND 40'S),
THE LENS FOR YOUNG ADULTS IN THEIR 20'S, THE WOMEN'S INSTITUTE
(PRIMARYLY IN THEIR 50'S AND 60'S), INSPIRING YOUNG ADULT SPEAKERS
SERIES, THE IMPACT SERIES FOR EFFECTIVE BOARD AND WORK CULTURES AND THE
BOARD PRESIDENTS' CIRCLE. JPROSTL, THE PROFESSIONAL ASSOCIATION,
INVOLVES STAFF MEMBERS FROM 50 ORGANIZATIONS IN TRAINING, NETWORKING
AND THE SHARING OF RESOURCES. PARTICIPANTS INCLUDE ALL LEVELS OF
EMPLOYEES FROM FRONT-LINE STAFF TO SENIOR MANAGERS.

FORM 990, PART VI, SECTION A, LINE 6:

ANY JEWISH ADULT INDIVIDUAL (AGE EIGHTEEN OR OLDER) WHO MAKES
PAYMENT OR A CONTRIBUTION OF NOT LESS THAN THIRTY DOLLARS (\$30.00) TO THE
FEDERATION'S ANNUAL CAMPAIGN, OR TO ANY CAMPAIGN CONDUCTED IN LIEU OF THE
ANNUAL CAMPAIGN, SHALL BE A VOTING MEMBER FOR THE FISCAL YEAR IN RESPECT TO
WHICH SUCH PAYMENT IS MADE AND UNTIL ADJOURNMENT OF THE ANNUAL MEETING OF
THE ORGANIZATION HELD THE FOLLOWING YEAR. AS A CONDITION PRECEDENT TO
MEMBERSHIP, AN INDIVIDUAL SHALL AGREE (AND CONTINUE TO ABIDE BY SUCH
AGREEMENT) TO RESPECT THE FEDERATION'S MISSION STATEMENT AS SET FORTH IN
ARTICLE TWO OF THE FEDERATION'S BY-LAWS.

FORM 990, PART VI, SECTION A, LINE 7A:

AT EACH ANNUAL MEETING OF THE MEMBERS, THE MEMBERS SHALL ELECT
TO FILL THE POSITIONS OF THOSE AT-LARGE TRUSTEES WHOSE TERMS ARE EXPIRING
FROM A SLATE OF NOMINEES PREPARED AND PROPOSED BY THE BOARD DEVELOPMENT AND

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NOMINATING COMMITTEE OR FROM THOSE NOMINEE(S) PROPOSED BY TWO HUNDRED FIFTY MEMBERS OF THE FEDERATION AS DESCRIBED IN ARTICLE 7.02 OF THE BY-LAWS. EACH MEMBER SHALL HAVE ONE VOTE FOR AS MANY TRUSTEES AS THERE ARE TO BE ELECTED. THERE SHALL BE NO CUMULATIVE VOTING IN THE ELECTION OF TRUSTEES.

THE BOARD OF TRUSTEES ARE RESPONSIBLE FOR THE ELECTION OF THE AT-LARGE DIRECTORS; CONSIDER AND VOTE ON CHANGES TO THE BY-LAWS EITHER DRAFTED AND APPROVED BY THE BOARD OF DIRECTORS OR THE MEMBERS OF THE FEDERATION; APPROVE THE APPOINTMENT, BY THE PRESIDENT, OF SIX AT-LARGE TRUSTEES WHO WILL EACH SERVE ON THE BOARD DEVELOPMENT AND NOMINATING COMMITTEE; AND PARTICIPATE IN DISCUSSIONS OF COMMUNITY PRIORITIES.

FORM 990, PART VI, SECTION A, LINE 7B:

THE MEMBERS OF THE FEDERATION MAY ACT TO ADD TO, ALTER, AMEND, OR REPEAL THE BY-LAWS, SUBJECT TO THE FOLLOWING TWO CONDITIONS: (I) THE AFFIRMATIVE VOTE OF AT LEAST THREE-FOURTHS (3/4) OF THE MEMBERS OF THE FEDERATION PRESENT AT ANY MEETING OF THE MEMBERS AS TO WHICH NOTICE OF THE CONTEMPLATED ACTION WAS GIVEN; AND (II) THE AFFIRMATIVE VOTE OF AT LEAST TWO-THIRDS (2/3) OF THE TRUSTEES PRESENT AT ANY MEETING OF THE BOARD OF TRUSTEES AS TO WHICH NOTICE OF THE CONTEMPLATED ACTION WAS GIVEN.

FORM 990, PART VI, SECTION B, LINE 11:

PRIOR TO THE FILING OF FORM 990, THE FEDERATION BUDGET FINANCE AND ADMINISTRATION (BF&A) COMMITTEE WILL CARRY OUT A DETAILED REVIEW OF THE FORM 990. THE BF&A COMMITTEE CHAIR, SUBSEQUENT TO THIS REVIEW, WILL PRESENT THE FORM 990 TO THE FULL BOARD FOR APPROVAL TO FILE. EACH BOARD MEMBER WILL RECEIVE A FULL COPY OF THE FORM 990 PRIOR TO THIS PRESENTATION. UPON APPROVAL OF THE BOARD MANAGEMENT WILL FILE THE FORM 990.

Name of the organization

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

ON AN ANNUAL BASIS, EACH DIRECTOR, TRUSTEE, OFFICER, COMMITTEE MEMBER AND EMPLOYEE WILL SIGN/UPDATE A CONFLICT OF INTEREST DISCLOSURE STATEMENT. THIS STATEMENT WILL LIST ANY POTENTIAL CONFLICTS AND AFFIRM THE PERSON'S RESPONSIBILITY ON DISCLOSURE OF A POTENTIAL CONFLICT. EACH OF THE ABOVE NAMED PERSON'S (OTHER THAN EMPLOYEES) MUST DISCLOSE POTENTIAL CONFLICTS TO THE FEDERATION'S BOARD CHAIR AND THE CHAIRMAN OF THE AUDIT COMMITTEE. AN EMPLOYEE MUST ALSO DISCLOSE POTENTIAL CONFLICTS TO THE EXECUTIVE VICE PRESIDENT & CEO. THE POTENTIAL CONFLICT/TRANSACTION WILL BE DETERMINED TO EITHER BE OR NOT BE A CONFLICT BY A MAJORITY OF THE FEDERATION BOARD MEMBERS OR COMMITTEE MEMBERS. INDIVIDUALS WITH A CONFLICT WILL NOT BE ALLOWED TO PARTICIPATE IN THE DISCUSSION NOR THE VOTE. ALL PROCEEDINGS RELATED TO CONFLICTS OF INTEREST ARE DOCUMENTED IN THE MEETING MINUTES.

FORM 990, PART VI, SECTION B, LINE 15A:

THE PROCESS FOR DETERMINING COMPENSATION FOR THE PRESIDENT AND CEO INCLUDED A REVIEW AND APPROVAL BY INDEPENDENT PERSONS, COMPARABILITY DATA AND SUBSTANTIATION OF THE DELIBERATION AND DECISION. THE PROCESS IS COMPLETED ON AN ANNUAL BASIS. THIS PROCESS WAS LAST UNDERTAKEN IN 2013.

KEY EMPLOYEES AND OTHER OFFICERS OF THE FEDERATION EACH HAVE AN ANNUAL REVIEW SIGNED OFF BY THEIR SUPERVISOR. COMPENSATION IS BASED ON COMPARABILITY DATA AND MEETING INTERNALLY ESTABLISHED GOALS. THIS PROCESS WAS LAST UNDERTAKEN IN 2013.

FORM 990, PART VI, SECTION C, LINE 19:

332212
09-04-13

Schedule O (Form 990 or 990-EZ) (2013)

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

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43-0652643

THE FEDERATION MAKES ITS GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND THE FORM 990 AVAILABLE TO THE PUBLIC UPON REQUEST. THE FEDERATION'S FINANCIAL STATEMENTS ARE AVAILABLE ON THE WEBSITE.

FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	102,337.
PENSION RELATED CHANGES OTHER THAN NET PERIODIC COST	1,511,172.
TOTAL TO FORM 990, PART XI, LINE 9	1,613,509.

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

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

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

	Yes	No
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity		X
b Gift, grant, or capital contribution to related organization(s)		X
c Gift, grant, or capital contribution from related organization(s)		X
d Loans or loan guarantees to or for related organization(s)		X
e Loans or loan guarantees by related organization(s)		X
f Dividends from related organization(s)		X
g Sale of assets to related organization(s)		X
h Purchase of assets from related organization(s)		X
i Exchange of assets with related organization(s)		X
j Lease of facilities, equipment, or other assets to related organization(s)		X
k Lease of facilities, equipment, or other assets from related organization(s)		X
l Performance of services or membership or fundraising solicitations for related organization(s)		X
m Performance of services or membership or fundraising solicitations by related organization(s)		X
n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)		X
o Sharing of paid employees with related organization(s)		X
p Reimbursement paid to related organization(s) for expenses		X
q Reimbursement paid by related organization(s) for expenses		X
r Other transfer of cash or property to related organization(s)		X
s Other transfer of cash or property from related organization(s)		X

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

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) LUBIN-GREEN FOUNDATION	C	549,100.CASH	TRANSFER
(2) STAENBERG FAMILY FOUNDATION	C	207,500.CASH	TRANSFER
(3)			
(4)			
(5)			
(6)	62		

Part VII	Supplemental Information
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Provide additional information for responses to questions on Schedule R (see instructions).

TAX RETURN FILING INSTRUCTIONS

FORM 990-T

FOR THE YEAR ENDING
DECEMBER 31, 2013

Prepared for	MS. SANDRA A. JANITCH-SCHWARZEN JEWISH FEDERATION OF ST. LOUIS 12 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146-5776
Prepared by	CLIFTONLARSONALLEN LLP 600 WASHINGTON AVENUE, SUITE 1800 ST. LOUIS, MO 63101 314-925-4300
Amount due or refund	OVERPAYMENT OF \$1,600. THE ENTIRE OVERPAYMENT HAS BEEN APPLIED TO THE ESTIMATED TAX PAYMENTS.
Make check payable to	NO AMOUNT IS DUE.
Mail tax return and check (if applicable) to	DEPARTMENT OF THE TREASURY INTERNAL REVENUE SERVICE CENTER OGDEN, UT 84201-0027
Return must be mailed on or before	NOVEMBER 17, 2014
Special Instructions	THE RETURN SHOULD BE SIGNED AND DATED.

Exempt Organization Business Income Tax Return

(and proxy tax under section 6033(e))

OMB No. 1545-0687

2013

Open to Public Inspection for 501(c)(3) Organizations Only

Department of the Treasury
Internal Revenue Service

For calendar year 2013 or other tax year beginning _____, and ending _____

▶ Information about Form 990-T and its instructions is available at www.irs.gov/form990t.

▶ Do not enter SSN numbers on this form as it may be made public if your organization is a 501(c)(3).

A ☐ Check box if address changed		Print or Type	Name of organization (☐ Check box if name changed and see instructions.) JEWISH FEDERATION OF ST. LOUIS		D Employer identification number (Employees' trust, see instructions.) 43-0652643
B Exempt under section ☒ 501(c)(3) ☐ 408(e) ☐ 220(e) ☐ 408A ☐ 530(a) ☐ 529(a)			Number, street, and room or suite no. If a P.O. box, see instructions. 12 MILLSTONE CAMPUS DRIVE		E Unrelated business activity codes (See instructions.) 523000
C Book value of all assets at end of year 136,334,976.			City or town, state or province, country, and ZIP or foreign postal code ST. LOUIS, MO 63146-5776		
F Group exemption number (See instructions.)			G Check organization type ☒ 501(c) corporation ☐ 501(c) trust ☐ 401(a) trust ☐ Other trust		

H Describe the organization's primary unrelated business activity. ▶ **PASSIVE INCOME FROM PARTNERSHIP INVESTMENTS**
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? ☐ Yes ☒ No

If "Yes," enter the name and identifying number of the parent corporation. ▶

J The books are in care of ▶ **SANDRA A. JANITCH-SCHWARZEN** Telephone number ▶ **314-442-3857**

Part I Unrelated Trade or Business Income		(A) Income	(B) Expenses	(C) Net
1 a	Gross receipts or sales			
b	Less returns and allowances			
c	Balance			
2	Cost of goods sold (Schedule A, line 7)			
3	Gross profit. Subtract line 2 from line 1c			
4 a	Capital gain net income (attach Form 8949 and Schedule D)			
b	Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)			
c	Capital loss deduction for trusts			
5	Income (loss) from partnerships and S corporations (attach statement)	-14,236.	STMT 1	-14,236.
6	Rent income (Schedule C)			
7	Unrelated debt-financed income (Schedule E)			
8	Interest, annuities, royalties, and rents from controlled organizations (Sch. F)			
9	Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)			
10	Exploited exempt activity income (Schedule I)			
11	Advertising income (Schedule J)			
12	Other income (See instructions; attach schedule.)			
13	Total. Combine lines 3 through 12	-14,236.		-14,236.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions.)

(Except for contributions, deductions must be directly connected with the unrelated business income.)

14	Compensation of officers, directors, and trustees (Schedule K)	14	
15	Salaries and wages	15	
16	Repairs and maintenance	16	
17	Bad debts	17	
18	Interest (attach schedule)	18	
19	Taxes and licenses	19	1,843.
20	Charitable contributions (See instructions for limitation rules.)	20	
21	Depreciation (attach Form 4562)	21	
22	Less depreciation claimed on Schedule A and elsewhere on return	22a	
23	Depletion	23	
24	Contributions to deferred compensation plans	24	
25	Employee benefit programs	25	
26	Excess exempt expenses (Schedule I)	26	
27	Excess readership costs (Schedule J)	27	
28	Other deductions (attach schedule)	28	SEE STATEMENT 2 500.
29	Total deductions. Add lines 14 through 28	29	2,343.
30	Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-16,579.
31	Net operating loss deduction (limited to the amount on line 30)	31	
32	Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-16,579.
33	Specific deduction (Generally \$1,000, but see instructions for exceptions.)	33	1,000.
34	Unrelated business taxable income. Subtract line 33 from line 32. If line 33 is greater than line 32, enter the smaller of zero or line 32	34	-16,579.

Part III Tax Computation**35 Organizations Taxable as Corporations.** See instructions for tax computation.Controlled group members (sections 1561 and 1563) check here ☐ See instructions and:**a** Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):

(1) \$ (2) \$ (3) \$

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$

(2) Additional 3% tax (not more than \$100,000) \$

c Income tax on the amount on line 34 35c 0.**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:☐ Tax rate schedule or ☐ Schedule D (Form 1041) 36**37 Proxy tax.** See instructions 37**38 Alternative minimum tax** 38**39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies 39 0.**Part IV Tax and Payments****40a Foreign tax credit** (corporations attach Form 1118; trusts attach Form 1116) 40a**b Other credits** (see instructions) 40b**c General business credit.** Attach Form 3800 40c**d Credit for prior year minimum tax** (attach Form 8801 or 8827) 40d**e Total credits.** Add lines 40a through 40d 40e**41 Subtract line 40e from line 39** 41 0.**42 Other taxes.** Check if from: ☐ Form 4255 ☐ Form 8611 ☐ Form 8697 ☐ Form 8866 ☐ Other (attach schedule) 42**43 Total tax.** Add lines 41 and 42 43 0.**44a Payments:** A 2012 overpayment credited to 2013 44a**b 2013 estimated tax payments** 44b**c Tax deposited with Form 8868** 44c 1,600.**d Foreign organizations:** Tax paid or withheld at source (see instructions) 44d**e Backup withholding** (see instructions) 44e**f Credit for small employer health insurance premiums** (Attach Form 8941) 44f**g Other credits and payments:** ☐ Form 2439 ☐ Form 4136 ☐ Other Total 44g**45 Total payments.** Add lines 44a through 44g 45 1,600.**46 Estimated tax penalty** (see instructions). Check if Form 2220 is attached ☐ 46**47 Tax due.** If line 45 is less than the total of lines 43 and 46, enter amount owed 47**48 Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid 48 1,600.**49 Enter the amount of line 48 you want:** Credited to 2014 estimated tax 1,600. Refunded 49 0.**Part V Statements Regarding Certain Activities and Other Information** (see instructions)

	Yes	No
1 At any time during the 2013 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here		X
2 During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file.		X
3 Enter the amount of tax-exempt interest received or accrued during the tax year \$		

Schedule A - Cost of Goods Sold. Enter method of inventory valuation N/A

1 Inventory at beginning of year	1		6 Inventory at end of year	6	
2 Purchases	2		7 Cost of goods sold. Subtract line 6 from line 5. Enter here and in Part I, line 2	7	
3 Cost of labor	3		8 Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?		Yes No
4a Additional section 263A costs (att. schedule)	4a				
b Other costs (attach schedule)	4b				
5 Total. Add lines 1 through 4b	5				

Sign Here	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.			
	Signature of officer		Date	
Paid Preparer Use Only	Print/Type preparer's name		Preparer's signature	
	AMY HENDLEY		Amy J. Hendley	
	Firm's name		Firm's EIN	
	CLIFTONLARSONALLEN LLP		41-0746749	
Firm's address		Phone no.		
600 WASHINGTON AVENUE, SUITE 1800		314-925-4300		
ST. LOUIS, MO 63101				

Schedule C - Rent Income (From Real Property and Personal Property Leased With Real Property) (see instructions)

1. Description of property

(1)
(2)
(3)
(4)

2. Rent received or accrued

(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)
(1)		
(2)		
(3)		
(4)		
Total 0.	Total 0.	

(c) Total income. Add totals of columns 2(a) and 2(b). Enter here and on page 1, Part I, line 6, column (A) 0.

(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B) 0.

Schedule E - Unrelated Debt-Financed Income (see instructions)

1. Description of debt-financed property	2. Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
		(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)			
(2)			
(3)			
(4)			

4. Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5. Average adjusted basis of or allocable to debt-financed property (attach schedule)	6. Column 4 divided by column 5	7. Gross income reportable (column 2 x column 6)	8. Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			0.	0.
Total dividends-received deductions included in column 8			0.	0.

Schedule F - Interest, Annuities, Royalties, and Rents From Controlled Organizations (see instructions)

1. Name of controlled organization	2. Employer identification number	Exempt Controlled Organizations			
		3. Net unrelated income (loss) (see instructions)	4. Total of specified payments made	5. Part of column 4 that is included in the controlling organization's gross income	6. Deductions directly connected with income in column 5
(1)					
(2)					
(3)					
(4)					

Nonexempt Controlled Organizations

7. Taxable income	8. Net unrelated income (loss) (see instructions)	9. Total of specified payments made	10. Part of column 9 that is included in the controlling organization's gross income	11. Deductions directly connected with income in column 10
(1)				
(2)				
(3)				
(4)				

Totals			0.	0.
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Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization

(see instructions)

1. Description of income	2. Amount of income	3. Deductions directly connected (attach schedule)	4. Set-asides (attach schedule)	5. Total deductions and set-asides (col. 3 plus col. 4)
(1)				
(2)				
(3)				
(4)				
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income

(see instructions)

1. Description of exploited activity	2. Gross unrelated business income from trade or business	3. Expenses directly connected with production of unrelated business income	4. Net income (loss) from unrelated trade or business (column 2 minus column 3). If a gain, compute cols. 5 through 7.	5. Gross income from activity that is not unrelated business income	6. Expenses attributable to column 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals		0.	0.			0.

Schedule J - Advertising Income (see instructions)**Part I Income From Periodicals Reported on a Consolidated Basis**

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals (carry to Part II, line (5))		0.	0.			0.

Part II Income From Periodicals Reported on a Separate Basis (For each periodical listed in Part II, fill in columns 2 through 7 on a line-by-line basis.)

1. Name of periodical	2. Gross advertising income	3. Direct advertising costs	4. Advertising gain or (loss) (col. 2 minus col. 3). If a gain, compute cols. 5 through 7.	5. Circulation income	6. Readership costs	7. Excess readership costs (column 6 minus column 5, but not more than column 4).
(1)						
(2)						
(3)						
(4)						
Totals from Part I		0.	0.			0.
Totals, Part II (lines 1-5)		0.	0.			0.

Schedule K - Compensation of Officers, Directors, and Trustees (see instructions)

1. Name	2. Title	3. Percent of time devoted to business	4. Compensation attributable to unrelated business
(1)		%	
(2)		%	
(3)		%	
(4)		%	
Total. Enter here and on page 1, Part II, line 14			0.

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS AND S CORPORATIONS	STATEMENT	1
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DESCRIPTION	AMOUNT
AMBERBROOK V, LLC	-8,062.
SIGULAR GUFF DISTRESSED OPPORTUNITIES FUND III, LP	1,044.
NORTHGATE PRIVATE EQUITY PARTNERS II (Q), LP	-2,027.
AMBERBROOK IV, LLC	-1,620.
Q-BLK REAL ASSETS II (PARALLEL), LP NATURAL RESOURCES	-24,747.
VENTURE INVESTMENT ASSOCIATES VI, L.P.	1,333.
WCP REAL ESTATE FUND III, LP	19,843.
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-14,236.

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	2
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DESCRIPTION	AMOUNT
ACCOUNTING FEES	500.
TOTAL TO FORM 990-T, PAGE 1, LINE 28	500.