

Form **990**

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2016
Open to Public Inspection

Department of the Treasury
Internal Revenue Service

▶ 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.

A For the 2016 calendar year, or tax year beginning and ending

B Check if applicable: <input type="checkbox"/> Address change <input type="checkbox"/> Name change <input type="checkbox"/> Initial return <input type="checkbox"/> Final return/terminated <input type="checkbox"/> Amended return <input type="checkbox"/> Application pending	C Name of organization JEWISH FEDERATION OF ST. LOUIS		D Employer identification number 43-0652643
	Doing business as		E Telephone number 314-442-0020
	Number and street (or P.O. box if mail is not delivered to street address)	Room/suite	
	12 MILLSTONE CAMPUS DRIVE		G Gross receipts \$ 15,837,753.
	City or town, state or province, country, and ZIP or foreign postal code ST. LOUIS, MO 63146-5776		H(a) Is this a group return for subordinates? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
F Name and address of principal officer: DR. ANDREW REHFELD SAME AS C ABOVE		H(b) Are all subordinates included? <input type="checkbox"/> Yes <input type="checkbox"/> No	
I Tax-exempt status: <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 501(c) () (insert no.) <input type="checkbox"/> 4947(a)(1) or <input type="checkbox"/> 527		If "No," attach a list. (see instructions)	
J Website: WWW.JEWISHINSTLOUIS.ORG; WWW.JFEDSTL.ORG		H(c) Group exemption number ▶	
K Form of organization: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Association <input type="checkbox"/> 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: PRESERVE AND ENHANCE JEWISH LIFE IN ST. LOUIS, ISRAEL, AND AROUND THE WORLD.		
	2 Check this box <input type="checkbox"/> 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 2016 (Part V, line 2a)	5	100
	6 Total number of volunteers (estimate if necessary)	6	520
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	-99,222.
b Net unrelated business taxable income from Form 990-T, line 34	7b	-101,272.	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	13,926,450.	13,500,643.
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	191,561.	95,904.
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	3,064,586.	-2,232,736.
	12 Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	824,647.	1,321,755.
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1-3)	18,007,244.	12,685,566.
	14 Benefits paid to or for members (Part IX, column (A), line 4)	8,839,590.	8,513,081.
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	0.	0.
	16a Professional fundraising fees (Part IX, column (A), line 11e)	4,913,796.	5,029,465.
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 1,858,002.	4,543.	0.
	17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	4,647,448.	5,227,045.
	18 Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	18,405,377.	18,769,591.
19 Revenue less expenses. Subtract line 18 from line 12	-398,133.	-6,084,025.	
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)	115,326,193.	116,963,720.
	22 Net assets or fund balances. Subtract line 21 from line 20	37,896,088.	34,891,543.
		77,430,105.	82,072,177.

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	Preparer's signature	Date
	JEFF PARKER		
	Firm's name ▶ CLIFTONLARSONALLEN LLP	Firm's EIN ▶ 41-0746749	Check if self-employed <input type="checkbox"/> PTIN P00970069
	Firm's address ▶ 600 WASHINGTON AVENUE, SUITE 1800 ST. LOUIS, MO 63101	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 Accomplishments

Check if Schedule O contains a response or note to any line in this Part III [X]

1 Briefly describe the organization's mission:
JEWISH FEDERATION OF ST. LOUIS MOBILIZES THE JEWISH COMMUNITY AND ITS HUMAN AND FINANCIAL RESOURCES TO PRESERVE AND ENHANCE JEWISH LIFE IN ST. LOUIS, IN ISRAEL AND AROUND THE WORLD.

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 [X] 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 [X] 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 \$ 10,842,106. including grants of \$ 8,513,081.) (Revenue \$)
PLANNING AND ALLOCATIONS:

THE JEWISH FEDERATION OF ST. LOUIS IS THE JEWISH COMMUNITY'S CENTRAL FUNDRAISING AND PLANNING ORGANIZATION. FOUNDED IN 1901, IT IS ONE OF THE REGION'S OLDEST AND LARGEST NONPROFIT ORGANIZATIONS. FUNDS ARE DISTRIBUTED TO DOZENS OF LOCAL, NATIONAL, AND INTERNATIONAL AGENCIES TO FEED THE HUNGRY, EDUCATE STUDENTS OF ALL AGES, CARE FOR THE YOUNG AND OLD, FIGHT ANTI-SEMITISM, PROMOTE JEWISH CULTURE AND SUPPORT THE JEWISH COMMUNITY 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

4b (Code:) (Expenses \$ 4,001,323. including grants of \$) (Revenue \$ 95,904.)
COMMUNITY DEVELOPMENT:

THE FEDERATION, THROUGH MULTIPLE CHANNELS, STRIVES TO MEET THE FUTURE FINANCIAL NEEDS OF THE COMMUNITY, PROVIDE COMMUNITY EDUCATION AND ENGAGEMENT, AND DEVELOP CURRENT AND FUTURE COMMUNITY PROFESSIONALS.

ENDOWMENTS AND PLANNED GIVING ARE HANDLED BY THE JEWISH COMMUNITY FOUNDATION (JCF) OF ST. LOUIS, LAUNCHED BY THE FEDERATION IN 2006. JCF SERVES AS THE JEWISH 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

4c (Code:) (Expenses \$ 694,616. including grants of \$) (Revenue \$)
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 \$ including grants of \$) (Revenue \$)

4e Total program service expenses 15,538,045.

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 <i>Schedule B, Schedule of Contributors</i> ?	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

Part IV Checklist of Required Schedules (continued)

	Yes	No
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?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	X	
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>		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? <i>If "Yes," complete Schedule J</i>	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? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
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?		
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?		
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part I</i>		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? <i>If "Yes," complete Schedule L, Part II</i>		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? <i>If "Yes," complete Schedule L, Part III</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
b A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>		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? <i>If "Yes," complete Schedule L, Part IV</i>		X
29 Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	X	
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>		X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>		X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>		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? <i>If "Yes," complete Schedule R, Part I</i>	X	
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1</i>	X	
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	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)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	X	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>		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? <i>If "Yes," complete Schedule R, Part VI</i>		X
38 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?	X	

Note. All Form 990 filers are required to complete Schedule O

Part V Statements Regarding Other IRS Filings and Tax Compliance

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

Input box for Schedule O

Table with columns for question number, description, and Yes/No checkboxes. Includes rows for backup withholding, employee reporting, foreign accounts, and charitable contributions.

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 [X]

Section A. Governing Body and Management

Table with 3 columns: Question, Yes, No. Rows include: 1a Enter the number of voting members of the governing body at the end of the tax year (31); 1b Enter the number of voting members included in line 1a, above, who are independent (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); 7b 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.)

Table with 3 columns: Question, Yes, No. Rows include: 10a Did the organization have local chapters, branches, or affiliates? (X); 10b 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); 11b 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); 12b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts? (X); 12c 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); 16b 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 NONE
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. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, address, and telephone number of the person who possesses the organization's books and records: DONALD HANNON, CHIEF OPERATING OFFICER - 314-442-3747 12 MILLSTONE CAMPUS DRIVE, ST. LOUIS, MO 63146-5776

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

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

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

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

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, 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) HARVEY N. WALLACE BOARD CHAIR	20.00	X		X				0.	0.	0.
(2) PATRICIA F. CROUGHAN IMMEDIATE PAST CHAIR	7.00	X		X				0.	0.	0.
(3) KEN KRANZBERG VICE CHAIR, AT LARGE/SECRETARY	10.00 1.00	X		X				0.	0.	0.
(4) GERALD P. GREIMAN VICE CHAIR, STRATEGIC PLANNING	10.00	X		X				0.	0.	0.
(5) MARK ZORENSKY VICE CHAIR, FINANCE/TREASURER	10.00	X		X				0.	0.	0.
(6) DAVID KASLOW VICE CHAIR, ENDOWMENTS AND PLANNED G	10.00	X		X				0.	0.	0.
(7) SUSAN SCHLICHTER VICE CHAIR, PLANNING & ALLOCATION	10.00	X		X				0.	0.	0.
(8) TIMOTHY STERN VICE CHAIR, CAMPAIGN	10.00	X		X				0.	0.	0.
(9) MICHAEL OBERLANDER VICE CHAIR 15-16	5.00	X		X				0.	0.	0.
(10) DOUGLAS BARON DIRECTOR 15-17	5.00	X		X				0.	0.	0.
(11) KATHERINE GREEN BRUCKEL DIRECTOR 16-17	2.50	X						0.	0.	0.
(12) BETSEY G. DENNIS DIRECTOR 16-17	5.00	X						0.	0.	0.
(13) J.J. FLOTKEN DIRECTOR 15-17	5.00	X						0.	0.	0.
(14) BURT GARLAND DIRECTOR 15-17	5.00	X						0.	0.	0.
(15) SUSAN K. GOLDBERG DIRECTOR 15-17	5.00	X						0.	0.	0.
(16) SHEILA GREENBAUM DIRECTOR 15-17	5.00	X						0.	0.	0.
(17) JOHN GREENBERG DIRECTOR 15-17	5.00	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) BRAD GROSS DIRECTOR 15-17	5.00	X						0.	0.	0.
(19) GIANNA JACOBSON DIRECTOR 15-17	5.00	X						0.	0.	0.
(20) SUSAN GODWIN KOFKOFF DIRECTOR 15-16	3.50	X						0.	0.	0.
(21) MICHAEL LEFTON DIRECTOR 15-17	5.00	X						0.	0.	0.
(22) MICHAEL LITWACK DIRECTOR 16-17	3.50	X						0.	0.	0.
(23) EMILY STEIN MACDONALD DIRECTOR 15-17	5.00	X						0.	0.	0.
(24) RUTH RASKAS DIRECTOR 15-17	5.00	X						0.	0.	0.
(25) MICHELLE RUBIN DIRECTOR 15-17	5.00	X						0.	0.	0.
(26) SHERRY SHUMAN DIRECTOR 15-17	5.00	X						0.	0.	0.
1b Sub-total								0.	0.	0.
c Total from continuation sheets to Part VII, Section A								916,119.	0.	78,175.
d Total (add lines 1b and 1c)								916,119.	0.	78,175.

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? <i>If "Yes," complete Schedule J for such individual</i>		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? <i>If "Yes," complete Schedule J for such individual</i>	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? <i>If "Yes," complete Schedule J for such person</i>		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

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 (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) IAN SILBERMAN DIRECTOR 15-16	5.00	X						0.	0.	0.
(28) MICHAEL STAENBERG DIRECTOR 15-17	5.00 1.00	X						0.	0.	0.
(29) LESLIE STERMAN DIRECTOR 15-17	5.00	X						0.	0.	0.
(30) RABBI SUSAN TALVE DIRECTOR 15-17	5.00	X						0.	0.	0.
(31) TOBY WARTICOVSCHI DIRECTOR 15-17	5.00	X						0.	0.	0.
(32) HANK WEBBER DIRECTOR 15-17	5.00	X						0.	0.	0.
(33) SHERRI FRANK WEINTROP DIRECTOR 15-17	2.50	X						0.	0.	0.
(34) DR. ANDREW REHFELD PRESIDENT & CEO	40.00 3.00			X				305,280.	0.	4,964.
(35) DONALD HANNON CHIEF OPERATING OFFICER	40.00			X				168,401.	0.	16,255.
(36) STEPHEN G. COHEN VICE PRESIDENT, PLANNING & ALLOCATIO	40.00					X		189,361.	0.	19,151.
(37) SANDRA JANITCH-SCHWARZEN DIRECTOR OF FISCAL SERVICES	40.00					X		126,810.	0.	19,853.
(38) SONIA DOBINSKY VICE PRESIDENT, COMMUNITY DEVELOPMEN	40.00					X		126,267.	0.	17,952.
Total to Part VII, Section A, line 1c								916,119.		78,175.

Part VIII Statement of Revenue

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

		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514	
Contributions, Gifts, Grants and Other Similar Amounts	1 a Federated campaigns	1a 162,878.				
	b Membership dues	1b				
	c Fundraising events	1c				
	d Related organizations	1d 946,294.				
	e Government grants (contributions)	1e 195,852.				
	f All other contributions, gifts, grants, and similar amounts not included above	1f 12,195,619.				
	g Noncash contributions included in lines 1a-1f: \$	2,435,660.				
	h Total. Add lines 1a-1f	▶ 13,500,643.				
	Program Service Revenue	2 a COMMUNITY DEVELOPMENT	Business Code 900099	73,551.	73,551.	
b PLANNING & ALLOCATIONS		900099	22,353.	22,353.		
c						
d						
e						
f All other program service revenue						
g Total. Add lines 2a-2f		▶ 95,904.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)	▶ 919,451.		-99,222.	1,018,673.	
	4 Income from investment of tax-exempt bond proceeds	▶				
	5 Royalties	▶				
	6 a Gross rents	(i) Real	69,909.			
		(ii) Personal				
		b Less: rental expenses	0.			
	c Rental income or (loss)	69,909.				
	d Net rental income or (loss)	▶ 69,909.			69,909.	
	7 a Gross amount from sales of assets other than inventory	(i) Securities				
		(ii) Other				
		b Less: cost or other basis and sales expenses	3,152,187.			
		c Gain or (loss)	-3,152,187.			
	d Net gain or (loss)	▶ -3,152,187.			-3,152,187.	
	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 ALLOCATIONS	900099	993,824.			993,824.	
	b OTHER INCOME	900099	258,022.		258,022.	
	c					
	d All other revenue					
	e Total. Add lines 11a-11d	▶ 1,251,846.				
12 Total revenue. See instructions.	▶ 12,685,566.	95,904.	-99,222.	-811,759.		

Part IX Statement of Functional Expenses

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

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

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21	5,727,746.	5,727,746.		
2 Grants and other assistance to domestic individuals. See Part IV, line 22				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16	2,785,335.	2,785,335.		
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees	509,570.	343,833.	51,539.	114,198.
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	3,360,702.	1,770,066.	657,886.	932,750.
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)	486,817.	281,680.	91,521.	113,616.
9 Other employee benefits	401,470.	232,630.	64,899.	103,941.
10 Payroll taxes	270,906.	147,589.	49,174.	74,143.
11 Fees for services (non-employees):				
a Management				
b Legal	61,661.	1,571.	53,196.	6,894.
c Accounting	63,312.		63,312.	
d Lobbying	63,000.		63,000.	
e Professional fundraising services. See Part IV, line 17				
f Investment management fees	3,982.			3,982.
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Sch O.)	785,617.	625,609.	93,787.	66,221.
12 Advertising and promotion	1,347,255.	899,173.	20,330.	427,752.
13 Office expenses	291,972.	133,376.	125,382.	33,214.
14 Information technology	209,863.	125,330.	41,721.	42,812.
15 Royalties				
16 Occupancy	796,737.	502,810.	125,563.	168,364.
17 Travel	26,682.	18,267.	6,498.	1,917.
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	462,711.	359,489.	69,608.	33,614.
20 Interest	292,499.	251,805.	40,694.	
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	151,763.	111,335.	15,549.	24,879.
23 Insurance	62,658.	19,127.	37,803.	5,728.
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 AWARDS AND GRANTS	273,548.	258,553.	15,200.	-205.
b MISSIONS	196,225.	166,871.	15,576.	13,778.
c MISCELLANEOUS	83,085.	5,468.	75,548.	2,069.
d UNCOLLECTIBLE PLEDGE PR	54,475.			54,475.
e All other expenses		770,382.	-404,242.	-366,140.
25 Total functional expenses. Add lines 1 through 24e	18,769,591.	15,538,045.	1,373,544.	1,858,002.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.				

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

Part X Balance Sheet

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

		(A) Beginning of year		(B) End of year	
Assets	1 Cash - non-interest-bearing	1,358,272.	1	700,175.	
	2 Savings and temporary cash investments	6,862,531.	2	5,081,890.	
	3 Pledges and grants receivable, net	2,792,477.	3	2,665,346.	
	4 Accounts receivable, net	771,591.	4	396,936.	
	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	10,828,596.	7	7,673,437.	
	8 Inventories for sale or use		8		
	9 Prepaid expenses and deferred charges	351,927.	9	1,670,115.	
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 8,806,924.			
	b Less: accumulated depreciation	10b 5,962,358.	2,862,163.	10c	2,844,566.
	11 Investments - publicly traded securities	62,813,396.	11	65,553,722.	
	12 Investments - other securities. See Part IV, line 11	26,685,240.	12	30,377,533.	
	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)	115,326,193.	16	116,963,720.		
Liabilities	17 Accounts payable and accrued expenses	1,031,548.	17	789,058.	
	18 Grants payable	3,088,404.	18	2,606,016.	
	19 Deferred revenue		19		
	20 Tax-exempt bond liabilities		20		
	21 Escrow or custodial account liability. Complete Part IV of Schedule D	16,523,849.	21	18,689,858.	
	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	10,747,693.	23	7,613,437.	
	24 Unsecured notes and loans payable to unrelated third parties	1,617,219.	24	617,871.	
	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	4,887,375.	25	4,575,303.	
	26 Total liabilities. Add lines 17 through 25	37,896,088.	26	34,891,543.	
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.				
	27 Unrestricted net assets	38,009,685.	27	41,009,955.	
	28 Temporarily restricted net assets	19,506,036.	28	21,083,535.	
	29 Permanently restricted net assets	19,914,384.	29	19,978,687.	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> 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	77,430,105.	33	82,072,177.		
34 Total liabilities and net assets/fund balances	115,326,193.	34	116,963,720.		

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	12,685,566.
2	Total expenses (must equal Part IX, column (A), line 25)	2	18,769,591.
3	Revenue less expenses. Subtract line 2 from line 1	3	-6,084,025.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	77,430,105.
5	Net unrealized gains (losses) on investments	5	8,313,874.
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	2,199,722.
9	Other changes in net assets or fund balances (explain in Schedule O)	9	212,501.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	82,072,177.

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: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> 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: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
b	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: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? _____ 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
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits _____		

Form 990 (2016)

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization **JEWISH 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 12, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E (Form 990 or 990-EZ).)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state: _____
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 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.)
- 11 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 12 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2)**. See **section 509(a)(3)**. Check the box in lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
 - a **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
 - b **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
 - c **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
 - d **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
 - e Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
 - f Enter the number of supported organizations
 - g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
Total						

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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	13,784,608.	13,631,279.	13,113,718.	13,926,450.	13,500,643.	67,956,698.
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	13,784,608.	13,631,279.	13,113,718.	13,926,450.	13,500,643.	67,956,698.
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)						1,518,618.
6 Public support. Subtract line 5 from line 4.						66,438,080.

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
7 Amounts from line 4	13,784,608.	13,631,279.	13,113,718.	13,926,450.	13,500,643.	67,956,698.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources ...	1,374,492.	1,778,535.	2,197,908.	1,655,840.	989,360.	7,996,135.
9 Net income from unrelated business activities, whether or not the business is regularly carried on ...	10,590.		73,673.			84,263.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)	722,298.	580,956.	667,804.	758,016.	1,251,846.	3,980,920.
11 Total support. Add lines 7 through 10						80,018,016.
12 Gross receipts from related activities, etc. (see instructions)					12	3,304,470.
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						<input type="checkbox"/>

Section C. Computation of Public Support Percentage

14 Public support percentage for 2016 (line 6, column (f) divided by line 11, column (f))	14	83.03 %
15 Public support percentage from 2015 Schedule A, Part II, line 14	15	84.98 %
16a 33 1/3% support test - 2016. 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		<input checked="" type="checkbox"/>
b 33 1/3% support test - 2015. 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		<input type="checkbox"/>
17a 10% -facts-and-circumstances test - 2016. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
b 10% -facts-and-circumstances test - 2015. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part VI how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization		<input type="checkbox"/>
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		<input type="checkbox"/>

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

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ►	(a) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(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) 2012	(b) 2013	(c) 2014	(d) 2015	(e) 2016	(f) Total
9 Amounts from line 6						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b						
11 Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

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

Section C. Computation of Public Support Percentage

15 Public support percentage for 2016 (line 8, column (f) divided by line 13, column (f))	15	%
16 Public support percentage from 2015 Schedule A, Part III, line 15	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2016 (line 10c, column (f) divided by line 13, column (f))	17	%
18 Investment income percentage from 2015 Schedule A, Part III, line 17	18	%

19a 33 1/3% support tests - 2016. 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 - 2015. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization

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

Part IV Supporting Organizations

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

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? <i>If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.</i>		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? <i>If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).</i>		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? <i>If "Yes," answer (b) and (c) below.</i>		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? <i>If "Yes," describe in Part VI when and how the organization made the determination.</i>		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? <i>If "Yes," explain in Part VI what controls the organization put in place to ensure such use.</i>		
4a Was any supported organization not organized in the United States ("foreign supported organization")? <i>If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below.</i>		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? <i>If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.</i>		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? <i>If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.</i>		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? <i>If "Yes," answer (b) and (c) below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).</i>		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? <i>If "Yes," provide detail in Part VI.</i>		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? <i>If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ).</i>		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? <i>If "Yes," provide detail in Part VI.</i>		
b Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? <i>If "Yes," provide detail in Part VI.</i>		
c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? <i>If "Yes," provide detail in Part VI.</i>		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? <i>If "Yes," answer 10b below.</i>		
b Did the organization have any excess business holdings in the tax year? <i>(Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)</i>		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described in (b) and (c) below, the governing body of a supported organization?		
b A family member of a person described in (a) above?		
c A 35% controlled entity of a person described in (a) or (b) above? If "Yes" to a, b, or c, provide detail in Part VI.		
11a		
11b		
11c		

Section B. Type I Supporting Organizations

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

Section C. Type II Supporting Organizations

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

Section D. All Type III Supporting Organizations

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

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a <input type="checkbox"/> The organization satisfied the Activities Test. Complete line 2 below.		
b <input type="checkbox"/> The organization is the parent of each of its supported organizations. Complete line 3 below.		
c <input type="checkbox"/> The organization supported a governmental entity. Describe in Part VI how you supported a government entity (see instructions).		
2 Activities Test. Answer (a) and (b) below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.	Yes	No
b Did the activities described in (a) constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer (a) and (b) below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? Provide details in Part VI.		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		
2a		
2b		
3a		
3b		

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

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

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

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

Section C - Distributable Amount		(A) Prior Year	Current Year
1	Adjusted net income for prior year (from Section A, line 8, Column A)	1	
2	Enter 85% of line 1	2	
3	Minimum asset amount for prior year (from Section B, line 8, Column A)	3	
4	Enter greater of line 2 or line 3	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions)	6	
7	<input type="checkbox"/> Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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

Section D - Distributions	Current Year
1 Amounts paid to supported organizations to accomplish exempt purposes	
2 Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	
3 Administrative expenses paid to accomplish exempt purposes of supported organizations	
4 Amounts paid to acquire exempt-use assets	
5 Qualified set-aside amounts (prior IRS approval required)	
6 Other distributions (describe in Part VI). See instructions	
7 Total annual distributions. Add lines 1 through 6	
8 Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions	
9 Distributable amount for 2016 from Section C, line 6	
10 Line 8 amount divided by Line 9 amount	

Section E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributions Pre-2016	(iii) Distributable Amount for 2016
1 Distributable amount for 2016 from Section C, line 6			
2 Underdistributions, if any, for years prior to 2016 (reasonable cause required- explain in Part VI). See instructions			
3 Excess distributions carryover, if any, to 2016:			
a			
b			
c From 2013			
d From 2014			
e From 2015			
f Total of lines 3a through e			
g Applied to underdistributions of prior years			
h Applied to 2016 distributable amount			
i Carryover from 2011 not applied (see instructions)			
j Remainder. Subtract lines 3g, 3h, and 3i from 3f.			
4 Distributions for 2016 from Section D, line 7: \$			
a Applied to underdistributions of prior years			
b Applied to 2016 distributable amount			
c Remainder. Subtract lines 4a and 4b from 4			
5 Remaining underdistributions for years prior to 2016, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, explain in Part VI. See instructions			
6 Remaining underdistributions for 2016. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in Part VI. See instructions			
7 Excess distributions carryover to 2017. Add lines 3j and 4c			
8 Breakdown of line 7:			
a			
b Excess from 2013			
c Excess from 2014			
d Excess from 2015			
e Excess from 2016			

Schedule A (Form 990 or 990-EZ) 2016

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

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

MISCELLANEOUS

2012 AMOUNT: \$ 238,672.

2013 AMOUNT: \$ 101,885.

2014 AMOUNT: \$ 166,002.

2015 AMOUNT: \$ 170,002.

2016 AMOUNT: \$ 258,022.

INTERCOMPANY CHARGES

2012 AMOUNT: \$ 483,626.

2013 AMOUNT: \$ 479,071.

2014 AMOUNT: \$ 501,802.

2015 AMOUNT: \$ 588,014.

2016 AMOUNT: \$ 993,824.

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

2016

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, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions 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 an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled 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. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year ▶ \$ _____

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't 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 doesn't 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) (2016)

Name of organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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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	 <hr/> <hr/> <hr/>	\$ <u>656,379.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
2	 <hr/> <hr/> <hr/>	\$ <u>375,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
3	 <hr/> <hr/> <hr/>	\$ <u>422,500.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
4	 <hr/> <hr/> <hr/>	\$ <u>1,436,475.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
5	 <hr/> <hr/> <hr/>	\$ <u>450,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
6	 <hr/> <hr/> <hr/>	\$ <u>345,000.</u>	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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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
7	<hr/> <hr/> <hr/>	\$ 340,000.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
8	<hr/> <hr/> <hr/>	\$ 302,404.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
9	<hr/> <hr/> <hr/>	\$ 335,780.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
10	<hr/> <hr/> <hr/>	\$ 374,115.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions.)
11	<hr/> <hr/> <hr/>	\$ 363,024.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)
12	<hr/> <hr/> <hr/>	\$ 338,407.	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II for noncash contributions.)

Name of organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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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
9	1000 SHARES CAH _____ _____ _____	\$ 85,680.	05/02/16
11	6562 SHARES VTSAX _____ _____ _____	\$ 360,224.	12/02/16
12	588 SHARES PEP, 588 SHARES WBA _____ _____ _____	\$ 99,591.	05/31/16
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____
	_____ _____ _____	\$ _____	_____

Name of organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. 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 info. 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

(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

(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

(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

SCHEDULE C
(Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

OMB No. 1545-0047

2016

Open to Public Inspection

Department of the Treasury
Internal Revenue Service

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

If the organization answered "Yes," on 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," on 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," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), 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 campaign activity expenditures ▶ \$ _____
- 3 Volunteer hours for political campaign activities _____

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 ▶ \$ _____
- 2 Enter the amount of any excise tax incurred by organization managers under section 4955 ▶ \$ _____
- 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) 2016

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)														
b	Total lobbying expenditures to influence a legislative body (direct lobbying)	94,416.													
c	Total lobbying expenditures (add lines 1a and 1b)	94,416.													
d	Other exempt purpose expenditures	15,443,629.													
e	Total exempt purpose expenditures (add lines 1c and 1d)	15,538,045.													
f	Lobbying nontaxable amount. Enter the amount from the following table in both columns.	926,902.													
<table border="1" style="width: 100%;"> <thead> <tr> <th style="width: 50%;">If the amount on line 1e, column (a) or (b) is:</th> <th style="width: 50%;">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)	231,726.													
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?		<input type="checkbox"/> Yes <input type="checkbox"/> 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 separate instructions for lines 2a through 2f.)

Lobbying Expenditures During 4-Year Averaging Period						
Calendar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) Total	
2a	Lobbying nontaxable amount	981,903.	1,000,000.	964,786.	926,902.	3,873,591.
b	Lobbying ceiling amount (150% of line 2a, column(e))					5,810,387.
c	Total lobbying expenditures	105,834.	102,420.	104,636.	94,416.	407,306.
d	Grassroots nontaxable amount	245,476.	250,000.	241,197.	231,726.	968,399.
e	Grassroots ceiling amount (150% of line 2d, column (e))					1,452,599.
f	Grassroots lobbying expenditures					

Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying activity.	(a)		(b)
	Yes	No	Amount
1 During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:			
a Volunteers?			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)? ..			
c Media advertisements?			
d Mailings to members, legislators, or the public?			
e Publications, or published or broadcast statements?			
f Grants to other organizations for lobbying purposes?			
g Direct contact with legislators, their staffs, government officials, or a legislative body?			
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			
i Other activities?			
j Total. Add lines 1c through 1i			
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?			
b If "Yes," enter the amount of any tax incurred under section 4912			
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912			
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?			

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

	Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?	1	
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?	2	
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from the prior year?	3	

Part III-B Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," OR (b) Part III-A, line 3, is answered "Yes."

1 Dues, assessments and similar amounts from members	1	
2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).		
a Current year	2a	
b Carryover from last year	2b	
c Total	2c	
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues	3	
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?	4	
5 Taxable amount of lobbying and political expenditures (see instructions)	5	

Part IV Supplemental Information

Provide the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group list); Part II-A, lines 1 and 2 (see instructions); and Part II-B, line 1. Also, complete this part for any additional information.

SCHEDULE D
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Financial Statements

▶ **Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990.**

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

OMB No. 1545-0047

2016

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" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year	117	
2 Aggregate value of contributions to (during year)	2,951,624.	
3 Aggregate value of grants from (during year)	2,168,243.	
4 Aggregate value at end of year	8,409,490.	
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?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

1 Purpose(s) of conservation easements held by the organization (check all that apply).
 Preservation of land for public use (e.g., recreation or education) Preservation of a 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?

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

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

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)?

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

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

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

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

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

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

(ii) Assets included in Form 990, Part X

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

a Revenue included on Form 990, Part VIII, line 1

b Assets included in Form 990, Part X

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

Schedule D (Form 990) 2016

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

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

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

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

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

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

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

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

	Amount
c Beginning balance	1c
d Additions during the year	1d
e Distributions during the year	1e
f Ending balance	1f

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

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

Part V Endowment Funds. Complete if the organization answered "Yes" on 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	82,294,508.	87,055,999.	88,872,202.	84,267,931.	73,467,620.
b Contributions	9,496,159.	4,350,456.	3,315,229.	4,018,183.	8,700,274.
c Net investment earnings, gains, and losses	6,254,885.	-2,714,201.	1,678,103.	9,284,594.	8,083,144.
d Grants or scholarships	6,148,476.	6,397,746.	6,809,535.	8,698,506.	5,983,107.
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance	91,897,076.	82,294,508.	87,055,999.	88,872,202.	84,267,931.

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

- a Board designated or quasi-endowment 51.00 %
- b Permanent endowment 21.00 %
- c Temporarily restricted endowment 28.00 %

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

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

	Yes	No
(i) unrelated organizations		<input checked="" type="checkbox"/>
(ii) related organizations		<input checked="" type="checkbox"/>

b If "Yes" on line 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" on 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		3,765,767.	2,477,814.	1,287,953.
c Leasehold improvements				
d Equipment		5,041,157.	3,484,544.	1,556,613.
e Other				
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)				2,844,566.

Part VII Investments - Other Securities.

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

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A) CSV OF LIFE INSURANCE	1,331,996.	END-OF-YEAR MARKET VALUE
(B) OTHER	39,125.	END-OF-YEAR MARKET VALUE
(C) PRIVATE EQUITY	3,915,120.	END-OF-YEAR MARKET VALUE
(D) PRIVATE DEBT	5,909,459.	END-OF-YEAR MARKET VALUE
(E) ABSOLUTE RETURN		
(F) STRATEGIES	10,597,545.	END-OF-YEAR MARKET VALUE
(G) REAL ESTATE	8,584,288.	END-OF-YEAR MARKET VALUE
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.) ▶	30,377,533.	

Part VIII Investments - Program Related.

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

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(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" on 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" on 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	1,764,803.
(3) ACCRUED PENSION LIABILITY	2,810,500.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	4,575,303.

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

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

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

1	Total revenue, gains, and other support per audited financial statements	1	20,168,440.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	8,313,874.
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	212,501.
e	Add lines 2a through 2d	2e	8,526,375.
3	Subtract line 2e from line 1	3	11,642,065.
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	1,043,501.
c	Add lines 4a and 4b	4c	1,043,501.
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	12,685,566.

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

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

1	Total expenses and losses per audited financial statements	1	17,715,767.
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	0.
3	Subtract line 2e from line 1	3	17,715,767.
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	1,053,824.
c	Add lines 4a and 4b	4c	1,053,824.
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	18,769,591.

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 CHARITABLE

Part XIII Supplemental Information (continued)

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.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

CHANGE IN VALUE OF SPLIT-INTEREST AGREEMENTS	59,572.
PENSION-RELATED CHANGES OTHER THAN NET PERIODIC COST	152,929.
TOTAL TO SCHEDULE D, PART XI, LINE 2D	212,501.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

INTERCOMPANY ALLOCATIONS	993,824.
WOMEN'S AUXILIARY SINGLE MEMBER LLC ACTIVITY	49,677.
TOTAL TO SCHEDULE D, PART XI, LINE 4B	1,043,501.

PART XII, LINE 4B - OTHER ADJUSTMENTS:

INTERCOMPANY ALLOCATIONS	993,824.
WOMEN'S AUXILIARY SINGLE MEMBER LLC ACTIVITY	60,000.

Part XIII Supplemental Information *(continued)*

TOTAL TO SCHEDULE D, PART XII, LINE 4B 1,053,824.

Multiple horizontal lines for supplemental information.

**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.

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

OMB No. 1545-0047

2016

Open to Public Inspection

Name of the organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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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 the region	(d) Activities conducted in the region (by type) (such as, 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 the region	(f) Total expenditures for and investments in the region
MIDDLE EAST & NORTH AFRICA	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	0.
RUSSIA AND NEIGHBORING STATES	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	0.
SOUTH AMERICA	0	0	PASS THROUGH GRANTS TO RECIPIENTS LOCATED IN REGION	N/A	0.
CENTRAL AMERICA AND THE CARIBBEAN	0	0	INVESTMENTS	N/A	16,213,448.
3 a Sub-total	0	0			16,213,448.
b Total from continuation sheets to Part I	0	0			0.
c Totals (add lines 3a and 3b)	0	0			16,213,448.

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

Schedule F (Form 990) 2016

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 noncash assistance	(h) Description of noncash 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	2,785,335.	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 ▶ _____

SEE PART V FOR COLUMN (D) DESCRIPTIONS

Part III Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 16.

Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)

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 separately 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; do not file with Form 990)* 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 separately file Form 5713, International Boycott Report (see Instructions for Form 5713; do not file with Form 990)* Yes No

Schedule F (Form 990) 2016

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. See instructions.

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 GRANTMCKING 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:

THE FEDERATION USES ACCRUAL METHOD TO ACCOUNT FOR INVESTMENTS AND EXPENDITURES OUTSIDE OF THE UNITED STATES.

PART II, COLUMN (D):

REGION: RUSSIA & THE NEWLY INDEPENDENT STATES -

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

SCHEDULE F, PART I, COLUMN (F)

THE AMOUNT REPORTED FOR INVESTMENTS HELD OUTSIDE OF THE UNITED STATES OF \$16,213,448 REPRESENTS THE YEAR ENDED FAIR MARKET VALUE OF INVESTED ASSETS HELD IN MANAGERS DOMICILED IN THIS REGION.

**SCHEDULE I
(Form 990)**

Department of the Treasury
Internal Revenue Service

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

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

▶ Attach to Form 990.

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

OMB No. 1545-0047

2016

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

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 noncash assistance	(h) Purpose of grant or assistance
AISH HATORAH 457 N. WOODSMILL RD. CHESTERFIELD, MO 63017	43-1839464	501(C)(3)	11,986.	0.	N/A	N/A	GENERAL SUPPORT
AMERICAN JEWISH COMMITTEE 7751 CARONDOLET AVE. ST. LOUIS, MO 63105	13-5563393	501(C)(3)	19,000.	0.	N/A	N/A	GENERAL SUPPORT
AMIR 9792 EDMONDS WAY #229 EDMONDS, WA 98020	27-3114329	501(C)(3)	20,065.	0.	N/A	N/A	GENERAL SUPPORT
ANTI DEFAMATION LEAGUE 34 N BRENTWOOD BLVD. STE 2 ST. LOUIS, MO 63105	13-1818723	501(C)(3)	25,324.	0.	N/A	N/A	GENERAL SUPPORT
ARTS & EDUCATION COUNCIL 3547 OLIVE ST. ST LOUIS, MO 63103	43-0790672	501(C)(3)	6,150.	0.	N/A	N/A	GENERAL SUPPORT
BAIS ABRAHAM CONGREGATION 6910 DELMAR ST LOUIS, MO 63130	43-0782212	501(C)(3)	10,207.	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 **71.**
- 3 Enter total number of other organizations listed in the line 1 table

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

Schedule I (Form 990) (2016)

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
BAIS YAKOV 70 NORTH & SOUTH ST. LOUIS, MO 63130	43-1819166	501(C)(3)	18,750.	0.	N/A	N/A	GENERAL SUPPORT
BARNES JEWISH HOSPITAL FOUNDATION 10420 OLD OLIVE STREET ROAD ST. LOUIS, MO 63141	13-1818723	501(C)(3)	113,200.	0.	N/A	N/A	GENERAL SUPPORT
B'NAI AMOONA CONGREGATION 324 S MASON RD. ST. LOUIS, MO 63141	43-0706846	501(C)(3)	37,923.	0.	N/A	N/A	GENERAL SUPPORT
BUREAU OF JEWISH EDUCATION OF GREATER PHOENIX - 12701 N SCOTTSDALE RD STE 206 - SCOTTSDALE, AZ 85254	86-0560654	501(C)(3)	10,610.	0.	N/A	N/A	GENERAL SUPPORT
CHABAD OF GREATER ST LOUIS 8124 DELMAR ST. LOUIS, MO 63130	43-1287764	501(C)(3)	36,992.	0.	N/A	N/A	GENERAL SUPPORT
CHILDREN'S HOME SOCIETY 9445 LITZSINGER RD. ST. LOUIS, MO 63144	43-0652622	501(C)(3)	5,000.	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)	30,361.	0.	N/A	N/A	GENERAL SUPPORT
COVENANT PLACE FOUND 8 MILLSTONE CAMPUS DR. ST. LOUIS, MO 63146	43-1365901	501(C)(3)	163,893.	0.	N/A	N/A	GENERAL SUPPORT
CRAFT ALLIANCE EDUCATION CENTER 6640 DELMAR BLVD. ST. LOUIS, MO 63130	43-1022226	501(C)(3)	8,000.	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
DONALD DANFORTH PLANT SCIENCE CENTER - 975 NORTH WARSON ROAD - ST. LOUIS, MO 63132	31-1584621	501(C)(3)	102,100.	0.	N/A	N/A	GENERAL SUPPORT
H.F. EPSTEIN HEBREW ACADEMY 1138 WARSON ROAD ST. LOUIS, MO 63132	43-6001158	501(C)(3)	155,995.	0.	N/A	N/A	GENERAL SUPPORT
B'NAI B'RITH HILLEL FOUNDATION 6300 FORSYTH ST. LOUIS, MO 63105	43-6065763	501(C)(3)	298,398.	0.	N/A	N/A	GENERAL SUPPORT
HOLOCAUST MUSEUM & LEARNING CENTER 12 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	43-0652643	501(C)(3)	10,150.	0.	N/A	N/A	GENERAL SUPPORT
HORACE MANN SCHOOL 231 W 246TH STREET BRONX, NY 10471	13-1740455	501(C)(3)	15,000.	0.	N/A	N/A	GENERAL SUPPORT
ISRAEL ENDOWMENT FUND 630 THIRD AVE NEW YORK, NY 10017	13-6104086	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL SUPPORT
JAZZ ST. LOUIS 3536 WASHINGTON AVE ST. LOUIS, MO 63103	43-1761629	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH COMMUNITY CENTER 2 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	43-0681477	501(C)(3)	1,499,723.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH COMMUNITY RELATIONS COUNCIL 12 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	20-5631988	501(C)(3)	314,634.	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
JEWISH COUNCIL FOR PUBLIC AFFAIRS 116 E. 27TH STREET NEW YORK, NY 10016	13-1624104	501(C)(3)	9,500.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH FAMIY & CHILDREN'S SERVICE 10950 SCHUETZ ROAD ST. LOUIS, MO 63146	43-0790330	501(C)(3)	808,320.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH ROCK RADIO 14560 WHITE BIRCH LANE ST. LOUIS, MO 63017	26-3766713	501(C)(3)	9,500.	0.	N/A	N/A	GENERAL SUPPORT
JEWISH TELGRAPHIC AGENCY 24 W 30TH STREET, 4TH FLOOR NEW YORK, NY 10011	13-0887610	501(C)(3)	9,500.	0.	N/A	N/A	GENERAL SUPPORT
JOIN HANDS ESL 200 S BRENTWOOD #21A ST. LOUIS, MO 63105	43-1607996	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
KOL RINAH RELIGIOUS SCHOOL 829 N. HANLEY RD ST LOUIS, MO 63130	90-1003729	501(C)(3)	8,742.	0.	N/A	N/A	GENERAL SUPPORT
MARGOLIN HEBREW ACADEMY 390 S WHITE STATION ROAD MEMPHIS, TN 38117	62-6002000	501(C)(3)	7,000.	0.	N/A	N/A	GENERAL SUPPORT
MEMORY CARE HOME SOLUTIONS 4389 WEST PINE BLVD ST. LOUIS, MO 63108	02-0641248	501(C)(3)	10,300.	0.	N/A	N/A	GENERAL SUPPORT
MERS GOODWILL 1727 LOCUST STREET ST. LOUIS, MO 63103	43-0652657	501(C)(3)	79,383.	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
MIRIAM FOUNDATION 501 BACON AVE ST. LOUIS, MO 63119	43-0667478	501(C)(3)	26,750.	0.	N/A	N/A	GENERAL SUPPORT
MISSOURI BOTANICAL GARDENS PO BOX 299 ST. LOUIS, MO 63166	43-0666759	501(C)(3)	22,100.	0.	N/A	N/A	GENERAL SUPPORT
NATIONAL COUNCIL OF JEWISH WOMEN 8350 DELCREST DRIVE ST. LOUIS, MO 63124	43-0722936	501(C)(3)	74,600.	0.	N/A	N/A	GENERAL SUPPORT
NCH HEATHCARE 350 7TH STREET NORTH NAPLES, FL 34106	59-2314655	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL SUPPORT
NEVE SHALOM 6 MILLSTONE CAMPUS DR., STE 3050 ST LOUIS, MO 63146	43-1523412	501(C)(3)	12,000.	0.	N/A	N/A	GENERAL SUPPORT
NEXT DOR STL 5062 WATERMAN ST. LOUIS, MO 63108	80-0594269	501(C)(3)	32,500.	0.	N/A	N/A	GENERAL SUPPORT
NFTY IN ISRAEL 46 BOWAN RD. WARWICK, NY 10990	13-1663143	501(C)(3)	19,080.	0.	N/A	N/A	GENERAL SUPPORT
NINE NETWORK OF PUBLICATIONS 3655 OLIVE ST. RD ST. LOUIS, MO 63108	43-0685345	501(C)(3)	6,990.	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)	5,850.	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
REPERTORY THEATRE OF ST. LOUIS 130 EDGAR ROAD ST LOUIS, MO 63119	43-0970273	501(C)(3)	5,100.	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
SAUL MIROWITZ JEWISH COMMUNITY SCHOOL - 348 S MASON RD. - ST. LOUIS, MO 63141	43-1772004	501(C)(3)	194,292.	0.	N/A	N/A	GENERAL SUPPORT
SCHOLARSHIP FOUNDATION OF ST. LOUIS - 8215 CLAYTON ROAD - ST. LOUIS, MO 63117	43-6031234	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL SUPPORT
SHAARE EMETH CONGREGATION 11645 LADUE ROAD ST. LOUIS, MO 63141	43-0662466	501(C)(3)	54,730.	0.	N/A	N/A	GENERAL SUPPORT
SHIR HADASH RECONSTRUCTIONIST COMMUNITY - PO BOX 1671 - CLAYTON, MO 63105	20-3463256	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
SOUTHSIDE EARLY CHILDHOOD CENTER 2101 S JEFFERSON AVE ST. LOUIS, MO 63104	43-0685348	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS ART MUSEUM 1 FINE ARTS DR. ST. LOUIS, MO 63110	43-1056957	501(C)(3)	6,540.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS CHILDREN'S HOSPITAL PO BOX 500522 ST. LOUIS, MO 63150	43-1626863	501(C)(3)	25,250.	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 FASHION FUND PO BOX 16551 ST. LOUIS, MO 63105	37-1760557	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS JEWISH LIGHT PO BOX 955519 ST. LOUIS, MO 63195	43-0965860	501(C)(3)	77,170.	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)	33,000.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS KOLLEL 8200 DELMAR BLVD. ST. LOUIS, MO 63124	43-1594954	501(C)(3)	49,033.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS RABBINICAL 12 MILLSTONE CAMPUS DRIVE ST. LOUIS, MO 63146	43-6041235	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS SYMPHONY ORCHESTRA 718 N. GRAND BLVD. ST. LOUIS, MO 63103	43-0666769	501(C)(3)	11,100.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS TORAH MITZION KOLLEL 7741 GANNON AVE ST. LOUIS, MO 63101	56-2318455	501(C)(3)	30,000.	0.	N/A	N/A	GENERAL SUPPORT
ST. LOUIS ZOO FOUNDATION ONE GOVERNMENT DRIVE ST. LOUIS, MO 63110	43-1027365	501(C)(3)	44,100.	0.	N/A	N/A	GENERAL SUPPORT
STAGES OF ST. LOUIS 444 CHESTERFIELD CENTER ST. LOUIS, MO 63017	43-1434156	501(C)(3)	12,750.	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
TAHARATH ISRAEL OF ST. LOUIS 4 MILLSTONE CAMPUS ST. LOUIS, MO 63146	43-6052967	501(C)(3)	5,000.	0.	N/A	N/A	GENERAL SUPPORT
TEMPLE ADATH ISRAEL 124 N ASHLAND AVE LEXINGTON, KY 40502	61-0546638	501(C)(3)	10,000.	0.	N/A	N/A	GENERAL SUPPORT
TEMPLE EMANUEL 12166 CONWAY RD. ST. LOUIS, MO 63141	43-6015404	501(C)(3)	9,650.	0.	N/A	N/A	GENERAL SUPPORT
GLADYS & HENRY CROWN CENTER 8350 DELCREST DRIVE ST. LOUIS, MO 63124	43-1695861	501(C)(3)	71,029.	0.	N/A	N/A	GENERAL SUPPORT
TORAH PREPRATORY SCHOOL 8000 STANFORD ST. LOUIS, MO 63130	56-2318455	501(C)(3)	139,875.	0.	N/A	N/A	GENERAL SUPPORT
UNITED HEBREW CONGREGATION 13788 CONWAY ROAD ST. LOUIS, MO 63141	43-0743415	501(C)(3)	12,650.	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)	26,350.	0.	N/A	N/A	GENERAL SUPPORT
WASHINGTON UNIVERSITY 660 S. EUCLID AVE. ST. LOUIS, MO 63110	43-0653611	501(C)(3)	72,110.	0.	N/A	N/A	GENERAL SUPPORT
YESHIVAT KADIMAH HIGH SCHOOL 1142 N WARSON RD. ST. LOUIS, MO 63132	46-3021300	501(C)(3)	60,368.	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
YOUNG ISRAEL OF ST. LOUIS 8101 DELMAR BLVD. ST. LOUIS, MO 63130	43-0824829	501(C)(3)	24,473.	0.	N/A	N/A	GENERAL SUPPORT

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

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

THE FEDERATION MONITORS THE USE OF GRANT FUNDS AWARD TO INDIVIDUALS IN THE

Part IV Supplemental Information

UNITED STATES BY REQUIRING ALL GRANTEES TO SUBMIT ANNUAL PROGRESS REPORTS THAT INCLUDE INFORMATION ON NUMBER OF CLIENTS SERVED, DOLLARS SPENT, EVALUATION RESULTS, PLANS FOR THE COMING YEAR AND SUSTAINABILITY EFFORTS. IF THE PROGRESS REPORTS ARE NOT SATISFACTORY, FEDERATION STAFF MEET WITH THE GRANTEE STAFF AND/OR MAKE SITE VISITS TO SEE THE PROGRAM IN ACTION.

SCHEDULE I, PART II: * THE LARGE VARIETY IN ORGANIZATIONS RECEIVING GRANTS FROM THE FEDERATION IS DUE TO THE INCLUSION OF GRANTS MADE THROUGH DONOR ADVISED FUNDS.

**SCHEDULE J
(Form 990)**

Compensation Information

OMB No. 1545-0047

2016

Open to Public Inspection

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

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

▶ Attach to Form 990.

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

Department of the Treasury
Internal Revenue Service

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 on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|---|
| <input type="checkbox"/> First-class or charter travel | <input type="checkbox"/> Housing allowance or residence for personal use |
| <input type="checkbox"/> Travel for companions | <input type="checkbox"/> Payments for business use of personal residence |
| <input type="checkbox"/> Tax indemnification and gross-up payments | <input checked="" type="checkbox"/> Health or social club dues or initiation fees |
| <input type="checkbox"/> Discretionary spending account | <input type="checkbox"/> Personal services (such as, 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 on 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.

- | | |
|--|---|
| <input checked="" type="checkbox"/> Compensation committee | <input checked="" type="checkbox"/> Written employment contract |
| <input type="checkbox"/> Independent compensation consultant | <input checked="" type="checkbox"/> Compensation survey or study |
| <input type="checkbox"/> Form 990 of other organizations | <input checked="" type="checkbox"/> Approval by the board or compensation committee |

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

- a** Receive a severance payment or change-of-control payment?
- 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), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 5a or 5b, describe in Part III.

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

- a** The organization?
- b** Any related organization?
- If "Yes" on line 6a or 6b, describe in Part III.

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

8 Were any amounts reported on 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" on 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) 2016

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

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

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

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
(1) DR. ANDREW REHFELD PRESIDENT & CEO	(i)	260,280.	45,000.	0.	4,964.	0.	310,244.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) DONALD HANNON CHIEF OPERATING OFFICER	(i)	168,401.	0.	0.	2,692.	13,563.	184,656.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) STEPHEN G. COHEN VICE PRESIDENT, PLANNING & ALLOCATIO	(i)	189,361.	0.	0.	3,449.	15,702.	208,512.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

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, PRESIDENT & CEO: THE ORGANIZATION PAID FOR DUES
EXPENSES IN THE CURRENT TAX FILING YEAR. THE BENEFIT WAS NOT INCLUDED IN
TAXABLE COMPENSATION. THE MEMBERSHIP PROVIDES MARKETING BENEFITS AND DONOR
REFERRAL SOURCES TO THE ORGANIZATION TO HELP IT IN MEETING ITS MISSION AND
OBJECTIVES.

**SCHEDULE M
(Form 990)**

Noncash Contributions

OMB No. 1545-0047

2016

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Department of the Treasury
Internal Revenue Service

- ▶ 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.

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	228	2,435,660.	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**

	Yes	No
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1 through 28, that it must hold for at least three years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?		X
b If "Yes," describe the arrangement in Part II.		
31 Does the organization have a gift acceptance policy that requires the review of any nonstandard contributions?	X	
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash contributions?		X
b If "Yes," describe in Part II.		
33 If the organization didn't 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) (2016)

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).

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

2016

Open to Public
Inspection

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

FORM 990, PART III, LINE 4A, CONTINUED:

FROM ALL SECTORS OF THE COMMUNITY, WHO SERVE ON BOARDS AND COMMITTEES,
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
DUPLICATION OF SERVICES. ADDITIONALLY, EFFORTS ARE DIRECTED AT
STRENGTHENING THE GOVERNANCE, MANAGEMENT AND ADMINISTRATIVE STRENGTH OF
OUR AGENCIES.

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

Schedule O (Form 990 or 990-EZ) (2016)

632211 08-25-16

Name of the organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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FORM 990, PART III, LINE 4B, CONTINUED:

ASSETS. IT IS BACKED BY 110-PLUS YEARS OF THE FEDERATION'S SERVICE AS TRUSTEE OF THE ST. LOUIS JEWISH COMMUNITY FUNDS. WEBSITE: WWW.JCF.ORG

-COMMUNITY EDUCATION AND ENGAGEMENT

THE FEDERATION OFFERS AN ADULT AND TEEN EDUCATION PROGRAM WHICH THROUGH STIMULATING CLASS ENVIRONMENTS STRIVES TO STRENGTHEN THEIR JEWISH IDENTITY. IN ADDITION, THE FEDERATION PROVIDES TEACHER TRAINING OPPORTUNITIES FOR TEACHERS AT CONGREGATIONS.

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 (\$40 VALUE) JEWISH CHILDREN'S BOOK OR CD EACH MONTH FOR A YEAR IN ORDER TO BUILD A JEWISH IDENTITY.

THE NEXT GEN INITIATIVE IS DESIGNED TO CONNECT YOUNG ADULTS, AGES 22-40, WITH THE JEWISH FEDERATION OF ST. LOUIS, JEWISH RESOURCES, AND EACH OTHER THROUGH A SERIES OF SOCIAL PROGRAMS, EDUCATIONAL OPPORTUNITIES AND INDIVIDUAL CONNECTIONS. THE GOAL OF THESE IS TO CONTINUE TO BUILD A VIBRANT ST. LOUIS JEWISH COMMUNITY FOR GENERATIONS TO COME.

THE ST. LOUIS NATURALLY OCCURRING RETIREMENT COMMUNITY (NORC) SENIOR PROGRAM: ST. LOUIS NORC IS DESIGNED TO HELP SENIORS REMAIN INDEPENDENT

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

-DEVELOPMENT OF CURRENT AND FUTURE PROFESSIONALS

MANY COMMUNITY MEMBERS PARTICIPATE IN PEER GROUP ACTIVITIES SUCH AS THE YOUNG PROFESSIONALS DIVISION, AND THE MAIMONIDES, CARDOZO AND MONTEFIORE SOCIETIES WITH DEVELOP FUTURE COMMUNITY LEADERS

THE MILLSTONE INSTITUTE FOR JEWISH LEADERSHIP IS A COMMUNITY-WIDE EFFORT THROUGHOUT THE GREATER NON-PROFIT JEWISH COMMUNITY TO DEVELOP LEADERS, STRENGTHEN ORGANIZATIONS AND CREATE AN ENVIRONMENT FOR COLLABORATION. THE INSTITUTE PROMOTES A STRONG EMPHASIS ON VOLUNTEER LEADERSHIP DEVELOPMENT. PROGRAMS INCLUDE THE MILLSTONE FELLOWS FOR EMERGING AND ESTABLISHED LEADERS (PRIMARILY IN THEIR 30'S AND 40'S).

THE LENS FOR YOUNG ADULTS IN THEIR 20'S, THE WOMEN'S INSTITUTE (PRIMARILY IN THEIR 50'S AND 60'S), INSPIRING YOUNG ADULT SPEAKER SERIES, THE IMPACT SERIES FOR EFFECTIVE BOARD AND WORK CULTURES AND THE BOARD PRESIDENTS' CIRCLE. JPROSTL, THE PROFESSIONAL ASSOCIATION, INVOLVES STAFF MEMBERS FROM 50 JEWISH COMMUNITY ORGANIZATIONS IN

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

TRAINING, NETWORKING AND THE SHARING OF RESOURCES. PARTICIPANTS INCLUDE ALL LEVELS OF EMPLOYEES FROM FRONT-LINE 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 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

Name of the organization

JEWISH FEDERATION OF ST. LOUIS

Employer identification number

43-0652643

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 A, LINE 8B:

THE ORGANIZATION DOES NOT HAVE A EXECUTIVE COMMITTEE OR SIMILAR COMMITTEE WITH THE AUTHORITY TO ACT ON BEHALF OF THE BOARD.

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

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.

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 CONFLICTS AND AFFIRM THE PERSON'S RESPONSIBILITY ON DISCLOSURE OF A POTENTIAL CONFLICT. EACH OF THE ABOVE NAMED PERSONS (OTHER

Name of the organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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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 2015.

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 2015.

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

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	59,572.
PENSION RELATED CHANGES OTHER THAN NET PERIODIC COST	152,929.

Name of the organization JEWISH FEDERATION OF ST. LOUIS	Employer identification number 43-0652643
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TOTAL TO FORM 990, PART XI, LINE 9 212,501.

FORM 990, PAGE 12, PART XII, LINE 2C

THE PROCESS HAS NOT CHANGED FROM THE PRIOR YEAR.

FORM 990, PAGE 12, PART XI, LINE 8

THE FEDERATION DETERMINED THAT AN ADJUSTMENT WAS REQUIRED TO THE PRIOR PERIOD CONSOLIDATED FINANCIAL STATEMENTS AS A RESULT OF THE ALLOCATION PAYABLE AMOUNT RECORDED IN ERROR BEGINNING IN YEARS PRIOR TO 2015 AND FLOWING THROUGH 2015. THIS PRIOR PERIOD ADJUSTMENT RELATES TO THE NATIONAL AND INTERNATIONAL ALLOCATIONS FOR JEWISH FEDERATION OF NORTH AMERICA (JFNA) IN THAT THE AMOUNT RECORDED AS A PAYABLE TO JFNA EXCEEDED THE BALANCE THAT JFNA RECORDS AS OWED TO THEM. THIS DIFFERENCE WAS ADJUSTED TO RESTATE THE BEGINNING OF THE YEAR, JANUARY 1, 2015 BALANCES TO SHOW A NEW ASSET ACCOUNT FOR AN ALLOCATION PAID IN ADVANCE, A REDUCTION OF THE ALLOCATION PAYABLE ACCOUNT AND AN INCREASE IN NET ASSETS (UNRESTRICTED).

**SCHEDULE R
(Form 990)**

Department of the Treasury
Internal Revenue Service

Related Organizations and Unrelated Partnerships

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

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

OMB No. 1545-0047

2016

Open to Public Inspection

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

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

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WOMEN'S AUXILIARY FOUNDATION FOR THE JEWISH AGED, LLC, 12 MILLSTONE CAMPUS DR., ST. LOUIS, MO 63146	PROVIDE GRANTS TO ORGANIZATIONS THAT SUPPORT THE JEWISH AGED IN ST. LOUIS	MISSOURI	49,677.	264,515.	JEWISH FEDERATION OF ST. LOUIS

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity	(g) Section 512(b)(13) controlled entity?	
						Yes	No
LUBIN-GREEN FOUNDATION - 43-6049332 12 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	SUPPORTING FOUNDATION	MISSOURI	501(C)(3)	LINE 12A, I	JEWISH FEDERATION OF ST. LOUIS	X	
STAENBERG FAMILY FOUNDATION - 20-2055339 2127 INNERBELT BUSINESS CTR, STE 200 ST. LOUIS, MO 63114	SUPPORTING FOUNDATION	MISSOURI	501(C)(3)	LINE 12A, I	JEWISH FEDERATION OF ST. LOUIS	X	
THE KRANZBERG FOUNDATION - 20-4920260 12 MILLSTONE CAMPUS DR ST. LOUIS, MO 63146	SUPPORTING FOUNDATION	MISSOURI	501(C)(3)	LINE 12A, I	JEWISH FEDERATION OF ST. LOUIS	X	

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

Schedule R (Form 990) 2016

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

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

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

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	(i) Section 512(b)(13) controlled entity?	
								Yes	No
REMAINDER TRUSTS (20)	TRUST INVESTMENTS	MO		TRUST					X

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

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

	Yes	No
1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?		
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity		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	374,115.	CASH TRANSFER
(2) STAENBERG FAMILY FOUNDATION	C	656,379.	CASH TRANSFER
(3)			
(4)			
(5)			
(6)			

Part VII Supplemental Information.

Provide additional information for responses to questions on Schedule R. See instructions.

Multiple horizontal lines for supplemental information.

Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2016

For calendar year 2016 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).**

Department of the Treasury
Internal Revenue Service

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

<p>A <input type="checkbox"/> Check box if address changed</p> <p>B Exempt under section <input checked="" type="checkbox"/> 501(c)(3) <input type="checkbox"/> 408(e) <input type="checkbox"/> 220(e) <input type="checkbox"/> 408A <input type="checkbox"/> 530(a) <input type="checkbox"/> 529(a)</p>	<p>Print or Type</p>	<p>Name of organization (<input type="checkbox"/> Check box if name changed and see instructions.) JEWISH FEDERATION OF ST. LOUIS</p> <p>Number, street, and room or suite no. If a P.O. box, see instructions. 12 MILLSTONE CAMPUS DRIVE</p> <p>City or town, state or province, country, and ZIP or foreign postal code ST. LOUIS, MO 63146-5776</p>	<p>D Employer identification number (Employees' trust, see instructions.) 43-0652643</p> <p>E Unrelated business activity codes (See instructions.) 523000</p>
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C Book value of all assets at end of year: **116,963,720.**

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 ▶ **DONALD HANNON, CHIEF OPERATING OFF** Telephone number ▶ **314-442-3747**

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	1c		
2 Cost of goods sold (Schedule A, line 7)	2		
3 Gross profit. Subtract line 2 from line 1c	3		
4 a Capital gain net income (attach Schedule D)	4a		
b Net gain (loss) (Form 4797, Part II, line 17) (attach Form 4797)	4b		
c Capital loss deduction for trusts	4c		
5 Income (loss) from partnerships and S corporations (attach statement)	5	-99,222.	-99,222.
6 Rent income (Schedule C)	6		
7 Unrelated debt-financed income (Schedule E)	7		
8 Interest, annuities, royalties, and rents from controlled organizations (Sch. F)	8		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)	9		
10 Exploited exempt activity income (Schedule I)	10		
11 Advertising income (Schedule J)	11		
12 Other income (See instructions; attach schedule)	12		
13 Total. Combine lines 3 through 12	13	-99,222.	-99,222.

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	1,200.
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 1 850.
29 Total deductions. Add lines 14 through 28	29	2,050.
30 Unrelated business taxable income before net operating loss deduction. Subtract line 29 from line 13	30	-101,272.
31 Net operating loss deduction (limited to the amount on line 30)	31	SEE STATEMENT 2
32 Unrelated business taxable income before specific deduction. Subtract line 31 from line 30	32	-101,272.
33 Specific deduction (Generally \$1,000, but see line 33 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	-101,272.

Part III Tax Computation

35 Organizations Taxable as Corporations. See instructions for tax computation. Controlled group members (sections 1561 and 1563) check here <input type="checkbox"/> 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: <input type="checkbox"/> Tax rate schedule or <input type="checkbox"/> Schedule D (Form 1041)	36	
37 Proxy tax. See instructions	37	
38 Alternative minimum tax	38	
39 Tax on Non-Compliant Facility Income. See instructions	39	
40 Total. Add lines 37, 38 and 39 to line 35c or 36, whichever applies	40	0.

Part IV Tax and Payments

41a Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	41a	
b Other credits (see instructions)	41b	
c General business credit. Attach Form 3800	41c	
d Credit for prior year minimum tax (attach Form 8801 or 8827)	41d	
e Total credits. Add lines 41a through 41d	41e	
42 Subtract line 41e from line 40	42	0.
43 Other taxes. Check if from: <input type="checkbox"/> Form 4255 <input type="checkbox"/> Form 8611 <input type="checkbox"/> Form 8697 <input type="checkbox"/> Form 8866 <input type="checkbox"/> Other (attach schedule)	43	
44 Total tax. Add lines 42 and 43	44	0.
45a Payments: A 2015 overpayment credited to 2016	45a	13,440.
b 2016 estimated tax payments	45b	
c Tax deposited with Form 8868	45c	
d Foreign organizations: Tax paid or withheld at source (see instructions)	45d	
e Backup withholding (see instructions)	45e	
f Credit for small employer health insurance premiums (Attach Form 8941)	45f	
g Other credits and payments: <input type="checkbox"/> Form 2439 <input type="checkbox"/> Form 4136 <input type="checkbox"/> Other _____ Total	45g	
46 Total payments. Add lines 45a through 45g	46	13,440.
47 Estimated tax penalty (see instructions). Check if Form 2220 is attached <input type="checkbox"/>	47	
48 Tax due. If line 46 is less than the total of lines 44 and 47, enter amount owed	48	
49 Overpayment. If line 46 is larger than the total of lines 44 and 47, enter amount overpaid	49	13,440.
50 Enter the amount of line 49 you want: Credited to 2017 estimated tax 13,440. Refunded	50	0.

Part V Statements Regarding Certain Activities and Other Information (see instructions)

51 At any time during the 2016 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 FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here	Yes	No
		X
52 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
53 Enter the amount of tax-exempt interest received or accrued during the tax year \$		

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.

Sign Here
 Signature of officer: _____ Date: _____
 Title: **PRESIDENT AND CEO**
 May the IRS discuss this return with the preparer shown below (see instructions)? Yes No

Paid Preparer Use Only
 Print/Type preparer's name: **JEFF PARKER**
 Preparer's signature: _____ Date: _____
 Check if self-employed PTIN: **P00970069**
 Firm's name: **CLIFTONLARSONALLEN LLP** Firm's EIN: **41-0746749**
 Firm's address: **600 WASHINGTON AVENUE, SUITE 1800 ST. LOUIS, MO 63101** Phone no. **314-925-4300**

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 (attach schedule)	4a							
b	Other costs (attach schedule)	4b							
5	Total. Add lines 1 through 4b	5							

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) ►

(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			Enter here and on page 1, Part I, line 7, column (A). 0.	Enter here and on page 1, Part I, line 7, column (B). 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			Add columns 5 and 10. Enter here and on page 1, Part I, line 8, column (A). 0.	Add columns 6 and 11. Enter here and on page 1, Part I, line 8, column (B). 0.

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		Enter here and on page 1, Part I, line 9, column (A). 0.		Enter here and on page 1, Part I, line 9, column (B). 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		Enter here and on page 1, Part I, line 10, col. (A). 0.	Enter here and on page 1, Part I, line 10, col. (B). 0.			Enter here and on page 1, Part II, line 26. 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	OTHER DEDUCTIONS	STATEMENT	1
DESCRIPTION		AMOUNT	
ACCOUNTING FEES		850.	
TOTAL TO FORM 990-T, PAGE 1, LINE 28		850.	

FORM 990-T	NET OPERATING LOSS DEDUCTION			STATEMENT	2
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	LOSS REMAINING	AVAILABLE THIS YEAR	
12/31/13	16,579.	16,579.	0.	0.	
12/31/15	79,034.	0.	79,034.	79,034.	
NOL CARRYOVER AVAILABLE THIS YEAR			79,034.	79,034.	

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS			STATEMENT	3
PARTNERSHIP NAME	GROSS INCOME	DEDUCTIONS	NET INCOME OR (LOSS)		
AMBERBROOK IV, LLC 33-1102798	-90.	4.	-94.		
AMBERBROOK V, LLC 80-0144875	307.	306.	1.		
FALCON STRATEGIC PARTNERS IV, LP 37-1700706	-44,267.	0.	-44,267.		
FALCON STRATEGIC PARTNERS V, LP 47-4102851	-16,870.	0.	-16,870.		
HARVEST MLP INCOME FUND II LLC 45-3134479	6.	0.	6.		
MARATHON-LONDON INTERNATIONAL INVESTMENT TRUST NORTHERN TRUST 04-3237387	5,571.	1,003.	4,568.		
Q-BLK REAL ASSETS II (PARALLEL), LP	45,241.	0.	45,241.		
NATURAL RESOURCES 20-4552399	45,241.	0.	45,241.		
VENTURE ENERGY III, L.P. 41-2282342	-50,773.	34,651.	-85,424.		
VENTURE INVESTMENT ASSOCIATES VI, L.P. 20-5196244	-2,183.	200.	-2,383.		
TOTAL TO FORM 990-T, PAGE 1, LINE 5	-63,058.	36,164.	-99,222.		