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Form **990**

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

OMB No. 1545-0047

2012

Open to Public Inspection

Dep	artment of	the Treasury ue Service	► The organization may	have to use a copy of this	return to satisfy	state repo	orting require	ments.	Inspect	ion
			ndar year, or tax year begin		, 2012, aı	nd ending	Decem	ber 31	, 20 12	
B Check if applicable:			C Name of organization Missio	n: St. Louis				D Employer	r identification nu	ımber
.	Check if applicable: C Name of organization Mission: St. Louis Address change Doing Business As Mission: St. Louis								20-8983607	
片		Number and street (or B.O. box if mail is not delivered to street address) Room/suite							e number	
믐	Name ch		4366 Manchester Ave.						314- <u>534-1188</u>	
H	Initial ret		City, town or post office, state	, and ZIP code						
님	Terminat Amende		St. Louis, MO 63110					G Gross rec		812,600
님		ion pending		l officer: Josh Wilson, Ex	ecutive Directo	or	H(a) Is this a	group return fo	or affiliates? 🔲 Yes	☑ No
ப	Applicat	ion bending	4366 Manchester Ave St. L				H(b) Are all	affiliates inc	cluded? Yes	₩ No
_	Toy over	mpt status:		01(c)() ◀ (insert no.)	4947(a)(1) or	527	if "No	," attach a	list. (see instruction	ins)
<u>'</u>	Website		w.missionstl.org				H(c) Group			
K				ssociation ☐ Other ►	L Yea	r of formatio	n: 2008	M State	of legal domicile:	MO
	art I	Sumn	nan/							
_	1	Driefly d	cooribo the organization's	mission or most signific	ant activities:	Mission:	St. Louis is	committ	ed to restoring	hope in
		under-re	sourced neighborhoods by	supporting opportunity, f	ostering dignil	ty and pro	noting sust	ainability.	. Our mission i	s to
ဥ		empowe	r people to transform their r	neighborhoods.						
Activities & Governance								050/ -6		
Ş	2	Check th	nis box ▶☐ if the organiza	ation discontinued its op	erations or di	sposed of	more than	25% of I	its net assets.	
ğ	3	Number	of voting members of the	governing body (Part VI	, line 1a) . .			3		0
95	4	Number	of independent voting me	embers of the governing	body (Part VI,	, line 1b)		4		6
/itie	5	Total nu	mber of individuals emplo	yed in calendar year 201	12 (Part V, line	2a) .		5		1,760
Ę.	6	Total nu	mber of volunteers (estima	ate if necessary)				6		1,700
⋖	7a	Total un	related business revenue	from Part VIII, column (C), line 12 .			7a		
	b	Net unre	elated business taxable inc	come from Form 990-T,	line 34		Prior Ye	7b	Current Y	ear
						- Currona i	\$710,760			
ď	, 8	Contribu	utions and grants (Part VIII	I, line 1h)		· ·		501,377	"	\$ 44,680
Revenue	9	Program	n service revenue (Part VIII					8 17,371 8 570		\$ 455
Š	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)								\$ 14,796
α	11	Other re	evenue (Part VIII, column (A	A), lines 5, 6d, 8c, 9c, 10	c, and 11e) .	10\		8 2,472		\$ 770,691
	12	Total rev	venue-add lines 8 through	11 (must equal Part VIII,	column (A), III	ne 12)		521,790	<u> </u>	\$ 0
	13	Grants	and similar amounts paid (\$0 80			80			
	14	Benefits paid to or for members (Part IX, column (A), line 4)								\$ 402,016
ď	≀ 15	Salaries	, other compensation, empl	loyee benefits (Part IX, col	iumn (A), iines	⁵⁻¹⁰⁾ -		\$ 299,515 \$ 0		U-102,010
Ž	16a	Profess	ional fundraising fees (Par	t IX, column (A), line 116	∍)					
Evnencec	နို b	Total fu	ndraising expenses (Part I	X, column (D), line 25)	8	79,071		§ 162,635		8 350,595
Щ	1 17	Other e	xpenses (Part IX, column ((A), lines 11a-11d, 111-2	4e)	™ ⊢		8 462,150		\$752,612
	18	Total ex	penses. Add lines 13-17 ((must equal Part IX, colu	mn (A), line 2	" · Ի		\$ 59,640		8 18,079
_	19	Revenu	e less expenses. Subtract	eginning of Cu		End of Y				
ŏ	200		1 /D - 1 V 1 - 40			F		\$ 248,889		\$ 251,9 5 4
sset	[20		ssets (Part X, line 16)			· ·		\$ 11,759		88,154
etA	20 21 22	Total lia	abilities (Part X, line 26) . sets or fund balances. Sub	+root line 21 from line 20		: : :		8 237,129		\$ 243,800
				tract line 21 Hom line 20	· · · · · · · · · · · ·					
_	Part II		ature Block rjury, I declare that I have examin	ad this return, including accom	nanving schedule	es and stater	nents, and to	he best of	my knowledge ar	nd belief, it is
1	Jnaer per rue, corre	naities of per ect, and com	rjury, i declare that i have examin oplete. Declaration of preparer (oth	her than officer) is based on all	information of wh	ich preparer	has any know	ledge.		
_			1/2 CAN F	ansen				111	13/13	<u> </u>
9	ign	Sig	gnature of officer	Λ:			D:	ate		
	lere			USEN Dir	ector o	+ 01	peratio	15		
•	1616	TV	pe or print name and title	<u> </u>						
_		, , , , , , , , , , , , , , , , , , ,	Type preparer's name	Preparer's signature		Da	te	Check	☐ if PTIN	
	Paid		•• • •						ployed	
	repar		s name 🕨				Fir	m's EIN ▶		
Ĺ	Jse Oı	עווו עווו	s address >				Ph	one no.		
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14,680)

Part	Statement of Program Service Accomplishments Check if Schedule O contains a response to any question in this Part III
	Check it Schedule of contains a responde to any question in the fact in
1	Briefly describe the organization's mission:
	Mission: St. Louis is committed to restoring hope in under-resourced neighborhoods by supporting opportunity, fostering dignity and promoting sustainability. Our mission is to transform empower people to transform their neighborhoods.
	and promoting sustainability. Our imission is to transform empower people to transform their notification notification
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O. Describe the organization's program service accomplishments for each of its three largest program services, as measured by
4	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 \$196,109 including grants of \$0) (Revenue \$)
	Job and Leadership Training: The Mission: St. Louis Job & Leadership Training (JLT) program equips men with the skills necessary
	to not only secure and sustain long-term employment, but to become leaders in their families and communities. Many men entering
	our program are in need of basic skill development, hands-on work experience, mentoring relationships, and personal development.
	With that in mind, JLT was offered as an 8-week training that included financial and computer literacy classes, job skill development,
	character development, small group discussions, and personal mentorship. Unique from other job training programs, students had
	the opportunity to have a paid internship that allowed them to get workplace experience and apply the skills they learned through
	classes. Even more unique is our focus on building a support system for students. To build this supportive environment, each evening class started with a shared meal, allowing the men to develop a community within the session. In 2012, 100% of graduates,
	or 37 men, completed a paid internship, 60 individual hours of literacy skill development, 8 hours personal mentoring, and 48 hours
	of small group teaching—leading to 100% of graduates obtaining employment or enrolling in school.
	of strain group teaching—reading to 100% of graduates obtaining employment of children straining—reading to 100% of graduates obtaining employment of children straining—reading to 100% of graduates obtaining employment of children straining employment employment of children straining employment e
4b	(Code:) (Expenses \$ 182,887 including grants of \$ 0) (Revenue \$)
	Home Repair: The Mission: St. Louis Home Repair program provides free home repair services to low-income residents in the
	neighborhoods we serve, with special emphasis on senior citizens. We seek to create safe and healthy home environments, allowing
	residents to stay in their homes as long as possible and preserving the social fabric of the area. While St. Louis City homes are valued
	for their historic features, style and materials, the aging housing stock (majority built between 1890-1920) requires costly maintenance
	and repairs. According to a study conducted by the American Housing Survey in 2005, 18% of homes surveyed in the St. Louis metro
	area were found to have unsafe/unsatisfactory living conditions. 10% of homes were found to have holes in the floors while 61% of
	homes had open cracks, holes, broken plaster or peeling paint in their interiors. Throughout 2012, our Home Repair program
	completed 550 repairs, helping over 270 residents to avoid costly citations or eviction. To complete these repairs, 1,013 volunteers
	served on multiple workdays over the course of the year—going out into the community to not only complete repairs, but also build
	relationships within the neighborhood.
4c	(Code:) (Expenses \$ 131,444 including grants of \$) (Revenue \$ \$44,680)
	Youth Development: Mission: St. Louis Youth Development activities set and reinforce the expectation that students will transition
	into and graduate from high school successfully. Research shows that dropout is a process, with indicators present as early as
	elementary school, Mission: St. Louis addressed this by mobilizing volunteers to read with 3rd-4th graders and assist in classrooms
	through our Morning Reading and Adopt-A-Classroom programs. In 2012, volunteers spent over 1,260 hours reading with 206
	students in the schools we serve. For students in 4th-8th grades, we offered Summer Camp and After School Program to provide
	more intensive services. Through these programs, we combat Summer Learning Loss and address Early Warning Indicators:
	academic achievement, behavior, and attendance. To increase academic achievement, we targeted literacy, as 78% of students
	served were reading 2+ years below grade level. Behavior was addressed through character skill-building. Attendance was addressed
	by increasing students' engagement in learning and knowledge of future opportunities. Through local partnerships, students
	participated in over 15 unique enrichment activities in 2012. In the 2012 Summer Camp, the average reading comprehension for
	students improved at least one full grade level. For all Youth Development activities, we mobilized nearly 1,010 volunteers to serve for
A -1	over 3,080 hours. Other program services (Describe in Schedule O.)
4d	(Expenses \$ 93,589 including grants of \$) (Revenue \$)
4e	Total program service expenses ► \$604,030
70	Total program service expenses 7 1004,000

Part	V Checklist of Required Schedules		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	√ V	NO
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	✓	√
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		√
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		✓
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		✓
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		✓
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		✓
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability; serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		✓
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		✓
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	complete Schedule D, Part VI	11a	✓	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		1
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		✓
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		1
f	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X.	11e 11f		√
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		✓
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		√
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		√
14 a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		1
b	fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b		✓
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15		1
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		1
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		1
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18	1	_
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		1
20 a		20a		1
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	m 990	1/2012

art l	V Checklist of Required Schedules (continued)		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21	_	<u>✓</u>
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the oritical states.	22		✓
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 organization's current and former officers, directors, trustees, key employees, and highest compensated organization.	23		✓
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25	24a 24b		√
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c 24d		√
d 25 a	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year? Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disguidified person during the year? If "Yes," complete Schedule L, Part I	25a		√
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?	25b		1
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or diagnostified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II.	26		1
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 substantial contributor of any of these persons? If "Yes," complete Schedule L, Part III	27		1
28	Was the organization a party to a business transaction with one of the following parties (see Scriedule 2, Part IV instructions for applicable filing thresholds, conditions, and exceptions):	28a		1
a b	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete	28b		1
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof)	28c	_	1
29 30	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule IVI Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified	30	_	1
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete scriedule N,	31		✓
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32	_	1
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations	33	_	1
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Fart II, III,	34		1
35a	the standard controlled entity within the meaning of section 512(b)(13)?	35a	4-	1
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a sentralled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	001		1
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt horizontalities and exempt horizontalities.	_00	_	✓
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R,	37		1
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	00		90 (2012
		FC	AIII 🥸	(ZU12

Part \	Statements Regarding Other IRS Filings and Tax Compliance		
	Check if Schedule O contains a response to any question in this Part V	Yes	No
	5 Latter completed in Box 3 of Form 1096 Enter -0- if not applicable	100	1
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable		
b	Did the organization comply with backup withholding rules for reportable payments to vendors and		
С	reportable gaming (gambling) winnings to prize winners?	1c √	
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax		
	Statements, filed for the calendar year ending with or within the year covered by this return 2a 2b		
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b ✓	<u> </u>
-	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)		-
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	-
b	If "Voe" has it filed a Form 990-T for this year? If "No." provide an explanation in Schedule U	3b	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority		
	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	1
	account)?	10	
b	If "Yes," enter the name of the foreign country: See instructions for filling requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.		
_	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	1
5a	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	✓
b	15 "Vee" to line 5e or 5h, did the organization file Form 8886-T?	5c	
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the		
-	organization solicit any contributions that were not tax deductible as charitable contributions?	6a	
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or	C.	
	gifts were not tax deductible?	6b	
7	Organizations that may receive deductible contributions under section 170(c).		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods	7a ✓	
	and services provided to the payor?	7b ✓	
b	If "Yes," did the organization notify the donor of the value of the goods of services provided. It is both the organization sell, exchange, or otherwise dispose of tangible personal property for which it was		
С	required to file Form 8282?	7c	✓_
d	If "Ves " indicate the number of Forms 8282 filed during the year		
e	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	√
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?.	7f	✓
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g 7h	-
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	711	
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting		
	organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring	8	
_	organization, have excess business holdings at any time during the year?		
9	Did the organization make any taxable distributions under section 4966?	9a	
a b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b	
10	Section 501(c)(7) organizations. Enter:		
а	Initiation fees and capital contributions included on Part VIII, line 12 10a	4 1	
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . [10b]	- 1	
11	Section 501(c)(12) organizations. Enter:		
а	Gross income from members or shareholders	-	
b	Gross income from other sources (Do not net amounts due or paid to other sources		
	against amounts due or received from them.)	12a	
12a	If "Yes," enter the amount of tax-exempt interest received or accrued during the year		
12	Section 501(c)(29) qualified nonprofit health insurance issuers.		
13 a	Is the organization licensed to issue qualified health plans in more than one state?	13a	
a	Note: See the instructions for additional information the organization must report on Schedule O.		
b	Enter the amount of reserves the organization is required to maintain by the states in which	2	
	the organization is licensed to issue qualified health plans	- 1	
С	Enter the amount of reserves on hand	14a	1
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14b	-
b			90 (2012)

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

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.

Check this box it neither the organization nor	arry related	a orga	111120	(C		,,,po,	1			•
	· (D)			Posi	tion			(D)	(E)	(F)
(A)	(B) Average	(do not check more than one box, unless person is both an					ne an	Reportable	Reportable	Estimated
Name and Title	hours per	office	r and	a di	recto	or/truste	ee)	compensation	compensation from related	amount of other
	week (list any hours for	오코	Ę	오	\$	en II	Fo	from the	organizations	compensation
	related	dire	랿	Officer	y en	hes	Former	organization (W-2/1099-MISC)	(W-2/1099-MISC)	from the organization
	organizations below dotted		Institutional trustee		Key employee	ee cor	Ì	(W-2/1099-MISC)		and related
	line)	rust	큠		è	nper				organizations
		8	stee			Highest compensated employee		İ		
						ä				
an a								Į.		
(1) Shane Johnston - Co-President of the Board	11	1		1						
(2) Carol Williams - Co-President of the Board	1									
(2) Value Williams 30 Troolson		1		✓	<u> </u>					
(3) Lynn Beckemeier - Vice President of the Board	11									
		1		✓	<u> </u>	<u> </u>	<u> </u>		-	
(4) Erin Karandish - Secretary of the Board	1			1						
		✓		 *	-			-		
(5) Stephen Rhodes - Member	<u> </u>	1								
(6) Josh Wilson - Executive Director	40	† ' –	1	\vdash		_				
(O) Josh Wilson - Executive Director	<u></u>	1		1				8 68,670		\$7,303
(7) Andy Hansen - Director of Operations	40								1	
			<u> </u>	✓	_			\$ 56,900	<u> </u>	§ 12,234
(8)		_								
		┼	-	<u> </u>	┝		┢			
(9)	 	-		1	1					_
(40)		\dagger		 	-		T			
(10)	 									
(11)										
			_		╄-	<u> </u>	L			
(12)		_							1	
		+	+	├-	+	╂	+	-	+	
(13)		-								
770	-	+-	+	十	╁	+	+		-	
(14)						1		Ì		
	1	1								Form 990 (2012)

Part \	The page to line to the or 10h helow describe the circumstances, processes, or changes	ili ochedule O. Se	C II ISU	actic	<i>n</i> 10.			
	Check if Schedule O contains a response to any question in this Part VI	<u> </u>	<u>· · · </u>	· ·	<u>V</u>			
Section	on A. Governing Body and Management			Yes	No			
	Enter the number of voting members of the governing body at the end of the tax year If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.	<u>1a 6</u>						
b 2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with							
3	supervision of officers, directors, or trustees, or key employees to a management company or other person?							
4 5 6 7a	Did the organization make any significant changes to its governing documents since the prior Form 9 Did the organization become aware during the year of a significant diversion of the organization Did the organization have members or stockholders? Did the organization have members, stockholders, or other persons who had the power to the governing body?	on's assets? elect or appoint	4 5 6 7a		∀ ∀ ∀			
b	Are any governance decisions of the organization reserved to (or subject to approve stockholders, or persons other than the governing body?		7b		✓			
8	Did the organization contemporaneously document the meetings held or written actions ur the year by the following:	identaken during	8a					
a b 9	The governing body?	O	8b 9	√	√			
Secti	on B. Policies (This Section B requests information about policies not required by the	ne Internal Reven	ue Co	ode.)			
3601	ON D. I GIROLO (MINO COLLAR)			Yes				
10a b	Did the organization have local chapters, branches, or affiliates?	tipi purposes:	10a 10b		1			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body berg	ore thing the form?	11a	✓				
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990).	12a	√				
12a b	Did the organization have a written conflict of interest policy? If "No," go to line 13 Were officers, directors, or trustees, and key employees required to disclose annually interests that could g	ive rise to conflicts?	12b	√				
С	Did the organization regularly and consistently monitor and enforce compliance with the describe in Schedule O how this was done	policy? If Yes,	12c	1				
13 14 15	Did the organization have a written whistleblower policy?	m and decision:	14 15a	1				
a b 16a	The organization's CEO, Executive Director, or top management official							
b	with a taxable entity during the year?	on to evaluate its to safeguard the	16a 16b		V			
Sec	tion C. Disclosure							
17 18	List the states with which a copy of this Form 990 is required to be filed Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, available for public inspection. Indicate how you made these available. Check all that apply.		n 501	(c)(3)	s only)			
19	☐ Own website ☐ Another's website ☑ Upon request ☐ Other (explain in S Describe in Schedule O whether (and if so, how), the organization made its governing do and financial statements available to the public during the tax year.	cuments, conflict			policy,			
20	State the name, physical address, and telephone number of the person who possesses the	books and records	of th	е				
	organization: ► Andy Hansen, 4366 Manchester Ave., St. Louis, MO 63110				(2012)			

Part V		ees, Key Eı	mploy	ees	, an	id H	ighes	t Co	ompensated E	mployees (conti	nued)
	400	(B)			Posi	tion			(D)	(E)	(F)
(A) Name and title		Average	box, t	ınles	s pe	rson	than o	an	Reportable	Reportable compensation from	Estimated amount of
		hours per week (list any hours for related organizations below dotted line)	Individua or directo	lnstitutional trustee	a Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	other compensation from the organization and related organizations
			l ee	ıstee			nsated				
(15)								j			
(16)											
(17)											
(18)			-								
(19)											
(20)											
(21)								L			
(22)			-								
(23)			-								
(24)											
(25)											
1b c	Sub-total	t VII, Secti	on A		•	•		* * *	\$ 125,57 \$ 125,57		\$ 19,53 \$ 19,53
d 2	Total (add lines 1b and 1c) Total number of individuals (including b reportable compensation from the orga	ut not limite	ed to	thos	se li	stec	abov	/e) \	who received r	more than \$100	
3	Did the organization list any former of	officer, dire	J for	suci	חו ח	aivi	auai	•			- 0 1
4	For any individual listed on line 1a, is the organization and related organizations	ne sum of i	eport than	able \$15	0,00	mp 00?	ensat <i>If "Y</i> 	ion 'es, '	and other con " complete So		. 4
5	Did any person listed on line 1a receive for services rendered to the organization	or accrue n? If "Yes,"	comp " com	ens plet	atic e S	on fr che	om ar dule	ny L I foi	inrelated orgai r such person	nization or indiv	. 5 V
Secti	The state of the s										
1	Complete this table for your five highes compensation from the organization. Ryear.	eport compens	ated i pensa	tion	for	the	caler	nda			
	(A) Name and business a	ddress							Description o	of services	(C) Compensation
								+			
								\downarrow			
2	Total number of independent contra-	ctors (inclu	ding	but	no	t lir	nited	to	those listed	above) who	
	received more than \$100,000 of comp	ensation fro	m the	e org	gani	zati	UII				Form 990 (20

Part	VIII	Statement of Rever	nue	to any guard	ion in this Part \	711		🗆
		Check if Schedule O co	ontains a re	sponse to any quest	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
<u> </u>	1a	Federated campaigns	 . ⊺ ·	1a				
ant ant	b	Membership dues .		1b				
اع ق	C	Fundraising events .		1c \$58,615				
r B	d	Related organizations	· · · ·	1d				
ਕੂ ਜ਼ੂ	e	Government grants (cont	· —	1e				
Sin	f	All other contributions, gif	· · · / /-					
iğ je	•	and similar amounts not incl	luded above	1f \$642,124				
윤종	_	Noncash contributions include						T.
Contributions, Gifts, Grants and Other Similar Amounts	g	Total. Add lines 1a-1f			\$ 700,740			
	- ''	Total. Add lifes to 11		Business Code				
ž	_	Empowerment Programs 900,09			\$ 44,680	\$ 44,680	2400,000 00000 000000 00000	
Program Service Revenue	2a			300,033	0 1 1,000	· · · · · · · · · · · · · · · · · · ·		
e R	b							
٤	C							
S	d							
ä	е							
Б,	f	All other program serv			\$ 44,680			
<u>~</u>	g	Total. Add lines 2a-21 Investment income	f	lividanda interest	3 44,000			
	3	and other similar amo	unts) t of tax-exem	pt bond proceeds ▶	§ 455			\$ 455
	5	Royalties	· · · · ·	(ii) Personal				
			(i) Real	(II) Felsoliai				
	6a	Gross rents			-			
	b	Less: rental expenses						
	C	Rental income or (loss)						
	d	Net rental income or (s (ii) Other				
	7a		(i) Securitie	es (II) Other	4	10.00		1.5
		assets other than inventory			4			
	b	Less: cost or other basis						
		and sales expenses .						
	С	Gain or (loss)						
	d	Net gain or (loss)	·	. <u> ▶</u>				
evenue	8a	Gross income from fu	undraising					
ē		events (not including \$	\$ 58,61	5				
		of contributions report	ed on line 1c	<u>)</u> .				
<u>γ</u>		See Part IV, line 18 .			5	99		
Other	Ь	Less: direct expenses	s	b \$41,909)			
0	C	N. 1.2			\$ 24,816	6		8 24,81
		Gross income from ga	aming activit	ies.				
	54	See Part IV, line 19 .		a				
	.				1			
	b	11-1 on /loop) +	from gamino	activities .		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
	102							
	10a	returns and allowanc	es	. a				
					1			
	b		from sales o	of inventory		MATERIAL AND STRANGE S		
	<u> </u>	Miscellaneous I		Business Code				
	44							
	11a				 			
	10					<u> </u>	1	
	C				 -		1	
	0			·	+			
	1		-110		9 770 00	1 \$44,68	n l	\$ 25,2
	12	Total revenue. See	instructions	<u> </u>	\$ 770,69	0 44,00	Y1	Form 990 (201

Part IX Statement of Functional Expenses

Section	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. Al	i otner organization	s must complete con	<u>unin (/-y.</u>
	Check if Schedule O contains a respons	e to any question in	n this Part IX	(0)	<u> </u>
Do not 8b, 9b,	include amounts reported on lines 6b, 7b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the United States. See Part IV, line 21				7-1
2	Grants and other assistance to individuals in the United States. See Part IV, line 22				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
3	Grants and other assistance to governments, organizations, and individuals outside the United States. See Part IV, lines 15 and 16				
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	\$ 125,570	§ 99,47 5	\$ 18,77 7	87,318
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 8	Other salaries and wages	\$ 221,033	\$ 169,148	§ 17,812	§ 34,073
9 10	Other employee benefits	\$ 28,902 \$ 26,511	\$ 21,516 \$ 20,547		\$ 2,241 \$ 3,166
11 a	Fees for services (non-employees): Management	\$ 148		\$ 148	
b c d	Legal	81,557		8 1,557	
e f	Professional fundraising services. See Part IV, line 17 Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column		Spilare State		
g 12	(A) amount, list line 11g expenses on Schedule O.)	\$ 23,367 \$ 9,737	\$ 23,367 \$ 7,660		§ 1,207
13 14	Office expenses	\$ 156,354 \$ 3,667	\$ 136,892 \$ 2,885		
15 16	Royalties	\$ 54,312 \$ 5,461			
17 18	Travel	33,401	77,230		
19 20	Conferences, conventions, and meetings Interest	\$ 2,385			
21 22	Payments to affiliates	\$ 5,973 \$ 5,021 \$ 15,138	8 3,950	\$ 449	\$ 622
23 24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column	8 13,100			
a		\$ 27,649 \$ 9,759			
b c d	Auto Expenses	\$ 1,913 \$ 1,213	\$ 1,50 \$ \$95	5 \$ 171 4 \$ 108	\$ 150
e 25	All other expenses Total functional expenses. Add lines 1 through 24e	\$ 26,941 \$ 752,612			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720)				Form 990 (2012

P	art X						
		Check if Schedule O contains a response to	any questi	on in this Part	x		<u> </u>
					(A) Beginning of year		(B) End of year
	1	Cash-non-interest-bearing			\$ 186,278	1	§ 143,98 <u>6</u>
	2	Savings and temporary cash investments			\$ 58,651	3	<u>8 74,148</u>
	3	Pledges and grants receivable, net	ledges and grants receivable, net				
	4	Accounts receivable, net				4	
s	5	Loans and other receivables from current and trustees, key employees, and highest co- Complete Part II of Schedule L	A Company of the Comp	5			
	6	Loans and other receivables from other disqualified pers 4958(f)(1)), persons described in section 4958(c)(3)(B), ar sponsoring organizations of section 501(c)(9) volunorganizations (see instructions). Complete Part II of Sche	Support 1995	6	Annual Control of the		
Assets	7	Notes and loans receivable, net				7	
As	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges				9	
	10a	Land, buildings, and equipment: cost or			or and		
	_	other basis. Complete Part VI of Schedule D	10a	\$ 41,75 6		10c	400.000
	b	Less: accumulated depreciation	10b	-\$ 7,937	\$ 3,960	11	\$ 33,820
	11	, , , , , , , , , , , , , , , ,				12	
	12	Investments—other securities. See Part IV, line				13	
	13	Investments—program-related. See Part IV, line		14			
	14	Intangible assets		15			
	15	Other assets. See Part IV, line 11	\$ 248,88 9	16	8 251,954		
_	16 17	Total assets. Add lines 1 through 15 (must equal Accounts payable and accrued expenses	8 11.759	17	\$ 8,154		
					011,755	18	70,,03
	18 19	Grants payable		19			
	20	Tax-exempt bond liabilities			20	<u> </u>	
	21	Escrow or custodial account liability. Complete			21		
co.	22	Loans and other payables to current and for			10.7		
Liabilities	22	trustees, key employees, highest comper	sated emi	olovees, and			
Ħ		disqualified persons. Complete Part II of Schedu	ule L			22	200000000000000000000000000000000000000
Ë	23	Secured mortgages and notes payable to unrela				23	
	24	Unsecured notes and loans payable to unrelated		24			
	25	Other liabilities (including federal income tax, parties, and other liabilities not included on lines of Schedule D		25			
	26	Total liabilities. Add lines 17 through 25			\$ 11,7 5 9	26	88,154
	26	Organizations that follow SFAS 117 (ASC 958), check he	re ► 🗸 and			7-7:
Ses		complete lines 27 through 29, and lines 33 an					
lan	27	Unrestricted net assets			\$ 165,539		8 126,275
Ba	28	Temporarily restricted net assets			\$ 71,590		<u>\$ 99,187</u>
Net Assets or Fund Balances	29	Permanently restricted net assets Organizations that do not follow SFAS 117 (ASC 9			77440	29	
<u>.</u>		complete lines 30 through 34.	00), 01100K 11				
Õ	30	Capital stock or trust principal, or current funds			18000000000000000000000000000000000000	30	92 process
ěţ	31	Paid-in or capital surplus, or land, building, or e	nd .		31	1	
ASS	32	Retained earnings, endowment, accumulated in				32	
et	33	Total net assets or fund balances		\$ 237,129	33	\$ 243,800	
Z	34	Total liabilities and net assets/fund balances .		\$ 248,889		8 251,954	
						Form 990 (2012)	

_	-	1
Page	1	1

					3
Part	XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI		<u> </u>		✓
1	Total revenue (must equal Part VIII, column (A), line 12)	1		§ 77	0,691
2	Total expenses (must equal Part IX, column (A), line 25)	2		875	2,612
3	Revenue less expenses. Subtract line 2 from line 1	3		§ 1	8,079
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		\$ 23	7,129
5	Net unrealized gains (losses) on investments	5			
6	Donated services and use of facilities	6			
7	Investment expenses	7			
8	Prior period adjustments	8	3		
9	Other changes in net assets or fund balances (explain in Schedule O)	9		-8 1	1,409
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
	33, column (B))	10		\$ 24	3,800
Part	XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII		<u> </u>	<u></u>	
1	Accounting method used to prepare the Form 990: ☐ Cash ☑ Accrual ☐ Other			Yes	No
•	If the organization changed its method of accounting from a prior year or checked "Other," ex	plain in			
	Schedule O.				
2 a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were com	piled or			
	reviewed on a separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		13/06/38/30		
b	Were the organization's financial statements audited by an independent accountant?		2b		✓_
	If "Yes," check a box below to indicate whether the financial statements for the year were audite	₃d on a			
	separate basis, consolidated basis, or both:				
	☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis				53832122223
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for o				
	of the audit, review, or compilation of its financial statements and selection of an independent account		2c		
	If the organization changed either its oversight process or selection process during the tax year, ex	plain in			
	Schedule O.			laten.	
За	As a result of a federal award, was the organization required to undergo an audit or audits as set	forth in			
	the Single Audit Act and OMB Circular A-133?		3a		✓
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo				
	required audit or audits, explain why in Schedule O and describe any steps taken to undergo such a	udits	3b		
			Form	n 990	(2012)