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Form 990

Return of Organization Exempt From Income Tax

OMB No 1545-0047

2018

Open to Public Inspection

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

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

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

A For the 2019 calendar year, or tax year beginning 01-01-2018 , and ending 12-31-2018

B Check if applicable

☒ Address change

☐ Name change

☐ Initial return

☐ Final return/terminated

☐ Amended return

☐ Application pending

C Name of organization

The Missouri Foundation for Health

% JILL NOWAK

Doing business as

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

Room/suite

4254 Vista Avenue

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

St Louis, MO 63110

D Employer identification number

43-1880952

E Telephone number

(314) 345-5500

G Gross receipts \$

401,381,385

F Name and address of principal officer

ROBERT HUGHES

4254 VISTA AVENUE

ST LOUIS, MO 63110

H(a) Is this a group return for subordinates?

☐ Yes ☒ No

H(b) Are all subordinates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☐ 501(c)(3) ☒ 501(c) (4) ◀ (insert no) ☐ 4947(a)(1) or ☐ 527

J Website: ▶

WWW MFFH ORG

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other ▶

L Year of formation

2000

M State of legal domicile

MO

Part I

Summary

Activities & Governance

1 Briefly describe the organization's mission or most significant activities

TO IMPROVE THE HEALTH AND WELL BEING OF INDIVIDUALS AND COMMUNITIES IN NEED

2 Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets

3 Number of voting members of the governing body (Part VI, line 1a)

15

4 Number of independent voting members of the governing body (Part VI, line 1b)

15

5 Total number of individuals employed in calendar year 2018 (Part V, line 2a)

56

6 Total number of volunteers (estimate if necessary)

30

7a Total unrelated business revenue from Part VIII, column (C), line 12

-2,320,962

7b Net unrelated business taxable income from Form 990-T, line 34

-2,271,851

Revenue

8 Contributions and grants (Part VIII, line 1h)

9 Program service revenue (Part VIII, line 2g)

10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)

11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)

12 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)

Prior Year

0

0

126,135,887

1,062

126,136,949

Current Year

0

0

62,157,337

1,024

62,158,361

Expenses

13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)

14 Benefits paid to or for members (Part IX, column (A), line 4)

15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)

16a Professional fundraising fees (Part IX, column (A), line 11e)

b Total fundraising expenses (Part IX, column (D), line 25) ▶0

17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)

18 Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)

19 Revenue less expenses Subtract line 18 from line 12

47,533,133

0

5,923,978

0

17,030,360

70,487,471

55,649,478

50,333,879

0

6,385,847

0

19,689,891

76,409,617

-14,251,256

Net Assets or Fund Balances

20 Total assets (Part X, line 16)

21 Total liabilities (Part X, line 26)

22 Net assets or fund balances Subtract line 21 from line 20

Beginning of Current Year

1,200,991,252

74,777,161

1,126,214,091

End of Year

1,118,235,896

87,118,235

1,031,117,661

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

2019-11-15

Date

JILL NOWAK CFO

Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name

Preparer's signature

Date 2019-11-14

Check ☐ if self-employed

PTIN P01041237

Firm's name ▶ BKD LLP

Firm's EIN ▶

Firm's address ▶ 211 N BROADWAY SUITE 600

Phone no (314) 231-5544

ST LOUIS, MO 631022733

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2018)

Part III Statement of Program Service Accomplishments

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

1 Briefly describe the organization's mission

TO IMPROVE THE HEALTH AND WELL BEING OF INDIVIDUALS AND COMMUNITIES IN NEED

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

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

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

If "Yes," describe these changes on Schedule O

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

4a (Code) (Expenses \$ 46,946,979 including grants of \$ 46,946,979) (Revenue \$)
See Additional Data



















4b (Code) (Expenses \$ 7,066,790 including grants of \$ 3,386,900) (Revenue \$)
See Additional Data

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services (Describe in Schedule O)
(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 54,013,769

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1	No
2 Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2	No
3 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	No
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? 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	No
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6	No
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II 	7	No
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	No
9 Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9	No
10 Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	No
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI 	11a	Yes
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? If "Yes," complete Schedule D, Part VII 	11b	Yes
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? If "Yes," complete Schedule D, Part VIII 	11c	No
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? If "Yes," complete Schedule D, Part IX 	11d	No
e Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X 	11e	No
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)? If "Yes," complete Schedule D, Part X 	11f	No
12a Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII 	12a	No
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	Yes
13 Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	No
14a Did the organization maintain an office, employees, or agents outside of the United States?	14a	No
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV 	14b	Yes
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV 	15	No
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV 	16	No
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	No
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	No
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	No
20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a	No
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b	
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? If "Yes," complete Schedule I, Parts I and II 	21	Yes
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III 	22	No

Part IV Checklist of Required Schedules (continued)

		Yes	No
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23 Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a</i>		No
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a	Section 501(c)(3), 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>	25a	No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b	No
26	Did the organization report any amount on Part X, line 5, 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>	26	No
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>	27 Yes	
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>	28a	No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b	No
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>	28c	No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	No
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30	No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31	No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32	No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33 Yes	
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>	34 Yes	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a Yes	
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>	35b Yes	
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>	36	
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>	37	No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	38 Yes	

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

		Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable	1a 37	
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b 0	
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c Yes	

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	56			
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)				2b	Yes	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?				3a	Yes	
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O				3b	Yes	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?				4a		No
b If "Yes," enter the name of the foreign country ▶ _____ See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?				5a		No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?				5b		No
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?				5c		
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?				6a		No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?				6b		
7 Organizations that may receive deductible contributions under section 170(c).						
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?				7a		
b If "Yes," did the organization notify the donor of the value of the goods or services provided?				7b		
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?				7c		
d If "Yes," indicate the number of Forms 8282 filed during the year				7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?				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		
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?				7h		
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?				8		
9a Did the sponsoring organization make any taxable distributions under section 4966?				9a		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?				9b		
10 Section 501(c)(7) organizations. Enter						
a Initiation fees and capital contributions included on Part VIII, line 12				10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities				10b		
11 Section 501(c)(12) organizations. Enter						
a Gross income from members or shareholders				11a		
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)				11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?				12a		
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year				12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.						
a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O				13a		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans				13b		
c Enter the amount of reserves on hand				13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?				14a		No
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O				14b		
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? If "Yes," see instructions and file Form 4720, Schedule N				15		No
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income? If "Yes," complete Form 4720, Schedule O				16		No

Part VI

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

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

Section A. Governing Body and Management

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year	1a 15		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O			
b Enter the number of voting members included in line 1a, above, who are independent	1b 15		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3 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?	3		No
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		No
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		No
6 Did the organization have members or stockholders?	6		No
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		No
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		No
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	Yes	
b Each committee with authority to act on behalf of the governing body?	8b	Yes	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O.	9		No

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

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

Section C. Disclosure

17 List the States with which a copy of this Form 990 is required to be filed: _____

18 Section 6104 requires an organization to make its Form 1023 (or 1024-A if applicable), 990, and 990-T (501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain in Schedule O)

19 Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.

20 State the name, address, and telephone number of the person who possesses the organization's books and records.
 JILL NOWAK 4254 VISTA AVENUE ST LOUIS, MO 63110 (314) 345-5500

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, or 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 dotted 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) ANDWELE JOLLY DIRECTOR	1 0 0 0	X						0	0	0
(2) BETHANY JOHNSON-JAVOIS DIRECTOR	1 0 0 0	X						0	0	0
(3) CONNIE CUNNINGHAM DIRECTOR	1 0 0 0	X						0	0	0
(4) JANET GOOCH SECRETARY	1 0 0 0	X		X				0	0	0
(5) JOAN BRAY DIRECTOR	1 0 0 0	X						0	0	0
(6) JEANNE JARRETT DIRECTOR	1 0 0 0	X						0	0	0
(7) KENNETH HALLER DIRECTOR	1 0 0 0	X						0	0	0
(8) JUDITH BAKER DIRECTOR	1 0 0 0	X						0	0	0
(9) PAMELA CAMPBELL DIRECTOR	1 0 0 0	X						0	0	0
(10) THERESA MAYBERRY DIRECTOR	1 0 0 0	X						0	0	0
(11) BROOKS MILLER DIRECTOR	1 0 0 0	X						0	0	0
(12) SERENA MUHAMMAD CHAIRPERSON	1 5 0 0	X		X				0	0	0
(13) STEVE RENNE VICE CHAIRPERSON	1 0 0 0	X		X				0	0	0
(14) RYAN RIPPEL DIRECTOR	1 0 0 0	X						0	0	0
(15) TIM SHRYACK DIRECTOR	1 0 0 0	X						0	0	0
(16) ROBERT HUGHES PRESIDENT AND CEO	40 0 0 0			X				462,132	0	25,538
(17) JILL NOWAK CHIEF FINANCIAL OFFICER	40 0 0 0			X				266,204	0	54,576

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 dotted 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) MATTHEW R BARKER	40 0				X			168,611	0	38,430
VP HEALTH POLICY	0 0									
(19) STACEY EASTERLING	40 0				X			223,873	0	46,556
VP PROGRAM	0 0									
(20) COURTNEY STEWART	40 0				X			170,031	0	57,179
VP STRATEGIC COMMUNICATIONS	0 0									
(21) KATHLEEN HOLMES	40 0					X		120,633	0	25,045
PROGRAM DIRECTOR	0 0									
(22) MATTHEW KUHLENBECK	40 0					X		129,967	0	33,587
PROGRAM DIRECTOR	0 0									
(23) THOMAS MCAULIFFE	40 0					X		111,797	0	49,203
PROGRAM DIRECTOR	0 0									
(24) FRANCIS RYBAK	40 0					X		117,075	0	58,603
GRANTS / INVESTMENT MANAGER	0 0									
(25) MARK SEEBECK	40 0					X		156,035	0	31,810
SENIOR DIRECTOR, FINANCE & ADM	0 0									
1b Sub-Total										
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								1,926,358	0	420,527

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 **▶ 16**

	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>		No
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>	Yes	
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>		No

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
CORNERSTONE PARTNERS LLC, 675 PETER JEFFERSON PKWY STE 160 CHARLOTTESVILLE, VA 22911	INVESTMENT MANAGER	2,255,750
GARDNER RUSSO GARDNER, 223 E CHESTNUT ST LANCASTER, PA 17602	INVESTMENT MANAGER	405,298
BARES CAPITAL MANAGEMENT, 12600 HILL COUNTRY BLVD BEE CAVE, TX 78738	INVESTMENT MANAGER	328,792
SHAPIRO CAPITAL MANAGEMENT, 3060 PEACHTREE ST NW ATLANTA, GA 30305	INVESTMENT MANAGER	271,591
WELLINGTON MANAGEMENT, 280 CONGRESS ST BOSTON, MA 02210	INVESTMENT MANAGER	324,696
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 ▶ 7		

Part VIII Statement of Revenue

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

Contributions, Gifts, Grants
and Other Similar Amounts

	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
1a Federated campaigns	1a			
b Membership dues	1b			
c Fundraising events	1c			
d Related organizations	1d			
e Government grants (contributions)	1e			
f All other contributions, gifts, grants, and similar amounts not included above	1f			
g Noncash contributions included in lines 1a - 1f \$				
h Total. Add lines 1a-1f	0			

Program Service Revenue

	Business Code				
2a					
b					
c					
d					
e					
f All other program service revenue					
g Total. Add lines 2a-2f	0				

Other Revenue

3 Investment income (including dividends, interest, and other similar amounts)		11,638,324		-2,320,962	13,959,286
4 Income from investment of tax-exempt bond proceeds		0			
5 Royalties		0			
6a Gross rents	(i) Real	(ii) Personal			
b Less rental expenses					
c Rental income or (loss)	0	0			
d Net rental income or (loss)		0			
7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other			
b Less cost or other basis and sales expenses	389,742,037				
c Gain or (loss)	339,223,024				
d Net gain or (loss)	50,519,013		50,519,013		50,519,013
8a Gross income from fundraising events (not including \$ of contributions reported on line 1c) See Part IV, line 18	a	0			
b Less direct expenses	b	0			
c Net income or (loss) from fundraising events		0			
9a Gross income from gaming activities See Part IV, line 19	a	0			
b Less direct expenses	b	0			
c Net income or (loss) from gaming activities		0			
10a Gross sales of inventory, less returns and allowances	a	0			
b Less cost of goods sold	b	0			
c Net income or (loss) from sales of inventory		0			
Miscellaneous Revenue	Business Code				
11a MISCELLANEOUS REVENUE	900099	1,024			1,024
b					
c					
d All other revenue					
e Total. Add lines 11a-11d		1,024			
12 Total revenue. See Instructions		62,158,361		-2,320,962	64,479,323

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.	50,333,879	50,333,879		
2 Grants and other assistance to domestic individuals. See Part IV, line 22.	0			
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, line 15 and 16.	0			
4 Benefits paid to or for members.	0			
5 Compensation of current officers, directors, trustees, and key employees.	1,513,131	458,043	1,055,088	
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0			
7 Other salaries and wages.	3,610,230	1,650,868	1,959,362	
8 Pension plan accruals and contributions (include section 401 (k) and 403(b) employer contributions).	276,024	126,219	149,805	
9 Other employee benefits.	655,237	301,612	353,625	
10 Payroll taxes.	331,225	151,461	179,764	
11 Fees for services (non-employees):				
a Management.	0			
b Legal.	267,094	14,341	252,753	
c Accounting.	111,721		111,721	
d Lobbying.	0			
e Professional fundraising services. See Part IV, line 17.	0			
f Investment management fees.	17,440,930		17,440,930	
g Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O).	177,660	86,742	90,918	
12 Advertising and promotion.	37,421	18,004	19,417	
13 Office expenses.	87,580	40,048	47,532	
14 Information technology.	292,499	126,407	166,092	
15 Royalties.	0			
16 Occupancy.	522,688	239,012	283,676	
17 Travel.	267,752	201,110	66,642	
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.	0			
19 Conferences, conventions, and meetings.	207,044	80,942	126,102	
20 Interest.	2,597		2,597	
21 Payments to affiliates.	0			
22 Depreciation, depletion, and amortization.	61,965	28,335	33,630	
23 Insurance.	24,374	7,883	16,491	
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 DUES & MEMBERSHIPS	76,418	38,875	37,543	
b COMMUNITY ACTIVITIES	45,409	45,409		
c PUBLICATIONS & COMM EDUCATION	13,127	13,127		
d COVENINGS, TRAININGS & COMM EV	49,183	49,183		
e All other expenses	4,429	2,269	2,160	
25 Total functional expenses. Add lines 1 through 24e.	76,409,617	54,013,769	22,395,848	0
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here <input type="checkbox"/> if following SOP 98-2 (ASC 958-720).				

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

				(A) Beginning of year		(B) End of year	
Assets	1	Cash—non-interest-bearing		266	1	0	
	2	Savings and temporary cash investments		46,184,955	2	50,776,633	
	3	Pledges and grants receivable, net		6,194	3	4,130	
	4	Accounts receivable, net		129	4	0	
	5	Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		0	5	0	
	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 instructions). Complete Part II of Schedule L		0	6	0	
	7	Notes and loans receivable, net		0	7	0	
	8	Inventories for sale or use		0	8	0	
	9	Prepaid expenses and deferred charges		102,628	9	352,424	
	10a	Land, buildings, and equipment—cost or other basis. Complete Part VI of Schedule D	10a	12,241,771			
	b	Less: accumulated depreciation	10b	242,329	3,183,963	10c	11,999,442
	11	Investments—publicly traded securities		418,948,384	11	246,811,942	
	12	Investments—other securities. See Part IV, line 11		731,264,849	12	805,436,643	
	13	Investments—program-related. See Part IV, line 11		1,299,884	13	2,854,682	
	14	Intangible assets		0	14	0	
	15	Other assets. See Part IV, line 11		0	15	0	
16	Total assets. Add lines 1 through 15 (must equal line 34)		1,200,991,252	16	1,118,235,896		
Liabilities	17	Accounts payable and accrued expenses		4,198,550	17	6,702,973	
	18	Grants payable		59,578,561	18	66,186,562	
	19	Deferred revenue		0	19	0	
	20	Tax-exempt bond liabilities		0	20	0	
	21	Escrow or custodial account liability. Complete Part IV of Schedule D		0	21	0	
	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		0	22	0	
	23	Secured mortgages and notes payable to unrelated third parties		11,000,050	23	14,228,700	
	24	Unsecured notes and loans payable to unrelated third parties		0	24	0	
	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		0	25	0	
	26	Total liabilities. Add lines 17 through 25		74,777,161	26	87,118,235	
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		1,126,214,091	27	1,031,117,661	
	28	Temporarily restricted net assets		0	28	0	
	29	Permanently restricted net assets		0	29	0	
	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		1,126,214,091	33	1,031,117,661		
34	Total liabilities and net assets/fund balances		1,200,991,252	34	1,118,235,896		

Part XI Reconciliation of Net AssetsCheck 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	62,158,361
2	Total expenses (must equal Part IX, column (A), line 25)	2	76,409,617
3	Revenue less expenses Subtract line 2 from line 1	3	-14,251,256
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,126,214,091
5	Net unrealized gains (losses) on investments	5	-82,322,240
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	1,477,066
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	1,031,117,661

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII ☐

- 1** Accounting method used to prepare the Form 990 ☐ Cash ☒ Accrual ☐ Other _____
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O
- 2a** Were the organization's financial statements compiled or reviewed by an independent accountant?
If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis
- 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
☐ Separate basis ☒ Consolidated basis ☐ Both consolidated and separate basis
- c** If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O
- 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?
- 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

	Yes	No
2a		No
2b	Yes	
2c	Yes	
3a		No
3b		

Additional Data

Software ID:

Software Version:

EIN: 43-1880952

Name: The Missouri Foundation for Health

Form 990 (2018)

Form 990, Part III, Line 4a:

MFH AWARDED 387 GRANTS/CONTRACTS IN 2018 TO ORGANIZATIONS TO IMPROVE THE HEALTH OF MISSOURIANS IN OUR SERVICE AREA A COMPLETE LISTING OF AWARDS BY FUNDING PROGRAM IS ATTACHED IN SCHEDULE I

Form 990, Part III, Line 4b:

OTHER PROGRAM SERVICES INCLUDES EXPENSES TO DEVELOP FUNDING PROGRAMS, PROCESS GRANT APPLICATIONS AND MANAGE GRANT AWARDS APPROVED BY THE BOARD OF DIRECTORS

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
The Missouri Foundation for Health

Employer identification number
43-1880952

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		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control?

☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit?

☐ Yes ☐ No

Part II Conservation Easements. Complete if the organization answered "Yes" 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 an historically important land area

☐ Protection of natural habitat

☐ Preservation of a certified historic structure

☐ Preservation of open space

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

	Held at the End of the 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 7/25/06, and not on a historic structure listed in the National Register	2d

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

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

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds?

☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, 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)?

☐ Yes ☐ No

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

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets.
Complete if the organization answered "Yes" 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

► \$

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

c

Beginning balance

d

Additions during the year

e

Distributions during the year

f

Ending balance

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21, 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 in 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				
b	Contributions				
c	Net investment earnings, gains, and losses				
d	Grants or scholarships				
e	Other expenditures for facilities and programs				
f	Administrative expenses				
g	End of year balance				

2

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

a

Board designated or quasi-endowment

b

Permanent endowment

c

Temporarily restricted endowment

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

(i)

unrelated organizations

(ii)

related organizations

b

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

	Yes	No
3a(i)		
3a(ii)		
3b		

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			
c	Leasehold improvements			
d	Equipment	309,894	242,329	67,565
e	Other	11,931,877		11,931,877
Total.	Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))			11,999,442

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) HEDGE FUNDS	498,704,364	F
(B) PRIVATE EQUITY	279,658,492	F
(C) REAL ESTATE	27,073,787	F
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 12) ▶	805,436,643	

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. (Column (b) must equal Form 990, Part X, col (B) line 13) ▶		

Part IX

Other Assets. Complete if the organization answered 'Yes' on Form 990, 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)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, col (B) line 25) ▶		

2. Liability for uncertain tax positions In Part XIII, provide the text of the footnote 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	-37,604,809
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains (losses) on investments	2a	-82,322,240
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	-82,322,240
3	Subtract line 2e from line 1	3	44,717,431
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	17,440,930
b	Other (Describe in Part XIII)	4b	
c	Add lines 4a and 4b	4c	17,440,930
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12)	5	62,158,361

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	57,491,621
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	57,491,621
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	17,440,930
b	Other (Describe in Part XIII)	4b	1,477,066
c	Add lines 4a and 4b	4c	18,917,996
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18)	5	76,409,617

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.

Return Reference	Explanation
See Additional Data Table	

Part XIII Supplemental Information *(continued)*

Return Reference	Explanation

Additional Data

Software ID:
Software Version:
EIN: 43-1880952
Name: The Missouri Foundation for Health

Supplemental Information

Return Reference	Explanation
SCHEDULE D, PART X, LINE 2	UNCERTAIN TAX POSITIONS MANAGEMENT HAS EVALUATED THEIR INCOME TAX POSITIONS UNDER THE GUIDANCE INCLUDED IN ASC 740 BASED ON THEIR REVIEW, MANAGEMENT HAS NOT IDENTIFIED ANY MATERIAL UNCERTAIN TAX POSITIONS TO BE RECORDED OR DISCLOSED IN THE FINANCIAL STATEMENTS

Supplemental Information	
Return Reference	Explanation
SCHEDULE D, PART XII, LINE 4B	AMOUNTS INCLUDED ON FORM 990 NOT INLCUDED ON FINANCIAL STATEMENTS PRESENT VALUE ADJUSTMENT TO FUTURE GRANT COMMITMENTS \$1,477,066

**SCHEDULE F
(Form 990)**

Department of the Treasury
Internal Revenue Service

Statement of Activities Outside the United States

- Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.
► Attach to Form 990.
► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047

2018

**Open to Public
Inspection**

Name of the organization
The Missouri Foundation for Health

Employer identification number
43-1880952

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

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

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

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

(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e g , fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for and investments in region
(1) Central America and the Caribbean			PASSIVE INVESTMENTS		660,134,100
(2)					
(3)					
(4)					
(5)					
3a Sub-total					660,134,100
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)					660,134,100

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

1	(a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)									
(2)									
(3)									
(4)									

- 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 ► _____

Part III **Grants and Other Assistance to Individuals Outside the United States.** Complete if the organization answered "Yes" to 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 non-cash assistance	(g) Description of non-cash assistance	(h) Method of valuation (book, FMV, appraisal, other)
(1)							
(2)							
(3)							
(4)							
(5)							
(6)							
(7)							
(8)							
(9)							
(10)							
(11)							
(12)							
(13)							
(14)							
(15)							
(16)							
(17)							
(18)							

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, don't 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, don't file with Form 990)* ☐ Yes ☒ No

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).

990 Schedule F, Supplemental Information

Return Reference	Explanation
SCHEDULE F, PART I, LINE 2	PROCEDURES FOR MONITORING FOREIGN GRANT FUNDS THE ORGANIZATION DID NOT MAKE ANY GRANTS OUTSIDE OF THE US

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

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
The Missouri Foundation for Health

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

Complete if the organization answered "Yes," on Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Employer identification number
43-1880952

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.

(a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
(1) SEE ATTACHED DETAIL			46,946,979				SEE ATTACHED DETAIL
(2) BUILD MISSOURI HEALTH 4254 VISTA AVE ST LOUIS, MO 63110	83-2641644	501(C)(3)	3,386,900				

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table 221

3 Enter total number of other organizations listed in the line 1 table 115

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 noncash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					
(7)					

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

Return Reference	Explanation
SCHEDULE I, PART I, LINE 2	PROCEDURES FOR MONITORING GRANT FUNDS MISSOURI FOUNDATION FOR HEALTH (MFH) MAINTAINS DETAILED RECORDS OF ALL GRANTS AND CONTRACTS TO GOVERNMENT AGENCIES AND ORGANIZATIONS FUNDING PROGRAMS ARE APPROVED BY THE MFH BOARD OF DIRECTORS AN APPLICANT ORGANIZATION'S ELIGIBILITY IS VERIFIED BY STAFF, AND THE APPLICANT'S RESPONSE IS EVALUATED RECOMMENDATIONS ARE MADE BY STAFF TO THE BOARD, WHO MAKES FUNDING DECISIONS ON AWARDS \$300,000 AND OVER THE CEO CAN APPROVE AWARDS UP TO \$300 000 ON AWARD OF A GRANT, A CONTRACTUAL AGREEMENT IS ENTERED INTO BETWEEN MFH AND THE APPLICANT, NOW TERMED GRANTEE THE USE OF GRANT FUNDS IS MONITORED BY STAFF THROUGH INTERIM REPORTS THAT MUST BE SUBMITTED BY THE GRANTEE TO CONTINUE TO RECEIVE SCHEDULED DISBURSEMENTS MONITORING IS PERFORMED FROM BOTH A PROGRAMMATIC AND FINANCIAL VIEWPOINT TO ENSURE THAT OBJECTIVES ARE BEING MET AND THAT FUNDS ARE BEING SPENT ACCORDING TO THE PROJECT PLAN AND GRANT AWARD AGREEMENT AT THE CONCLUSION OF THE GRANT, A FINAL REPORT IS REQUIRED FROM THE GRANTEE THE FINAL REPORT PROVIDES PROGRAMMATIC OUTCOMES AS WELL AS A FINAL FINANCIAL REPORT THAT MUST BE SUPPORTED BY APPROPRIATE RECEIPTS/DOCUMENTATION

Schedule J (Form 990)	<div>Compensation Information</div> <div>For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees</div> <div>▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ▶ Attach to Form 990.</div> <div>▶ Go to www.irs.gov/Form990 for instructions and the latest information.</div>	OMB No 1545-0047
		2018
		Open to Public Inspection

Department of the Treasury Internal Revenue Service	Name of the organization The Missouri Foundation for Health	Employer identification number 43-1880952
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Part I Questions Regarding Compensation		Yes	No
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 type="checkbox"/> Health or social club dues or initiation fees		
<input type="checkbox"/> Discretionary spending account	<input type="checkbox"/> Personal services (e.g., maid, chauffeur, chef)		
b If any of the boxes in 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.		1b	
2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a?		2	
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 type="checkbox"/> Compensation committee	<input checked="" type="checkbox"/> Written employment contract		
<input checked="" type="checkbox"/> Independent compensation consultant	<input checked="" type="checkbox"/> Compensation survey or study		
<input checked="" 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?		4a	No
b Participate in, or receive payment from, a supplemental nonqualified retirement plan?		4b	No
c Participate in, or receive payment from, an equity-based compensation arrangement?		4c	No
If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5 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?		5a	No
b Any related organization?		5b	No
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?		6a	No
b Any related organization?		6b	No
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 in lines 5 and 6? If "Yes," describe in Part III.		7	No
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.		8	No
9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?		9	

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

[illegible]

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.

Additional Data

Software ID:
Software Version:
EIN: 43-1880952
Name: The Missouri Foundation for Health

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(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				
ROBERT HUGHES PRESIDENT AND CEO	(i)	457,188	0	4,944	24,000	1,538	487,670	0
	(ii)	0	0	0	0	0	0	0
JILL NOWAK CHIEF FINANCIAL OFFICER	(i)	265,172	0	1,032	21,519	33,057	320,780	0
	(ii)	0	0	0	0	0	0	0
MATTHEW KUHLENBECK PROGRAM DIRECTOR	(i)	120,000	9,883	84	7,773	25,814	163,554	0
	(ii)	0	0	0	0	0	0	0
THOMAS MCAULIFFE PROGRAM DIRECTOR	(i)	111,626	0	171	21,703	27,500	161,000	0
	(ii)	0	0	0	0	0	0	0
FRANCIS RYBAK GRANTS / INVESTMENT MANAGER	(i)	116,054	0	1,021	24,500	34,103	175,678	0
	(ii)	0	0	0	0	0	0	0
MARK SEEBECK SENIOR DIRECTOR, FINANCE & ADM	(i)	155,742	0	293	8,566	23,244	187,845	0
	(ii)	0	0	0	0	0	0	0
MATTHEW R BARKER VP HEALTH POLICY	(i)	168,468	0	143	14,320	24,110	207,041	0
	(ii)	0	0	0	0	0	0	0
STACEY EASTERLING VP PROGRAM	(i)	223,401	0	472	17,608	28,948	270,429	0
	(ii)	0	0	0	0	0	0	0
COURTNEY STEWART VP STRATEGIC COMMUNICATIONS	(i)	169,887	0	144	14,440	42,739	227,210	0
	(ii)	0	0	0	0	0	0	0

Schedule L
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Transactions with Interested Persons

▶ Complete if the organization answered "Yes" on Form 990, Part IV, lines 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.
▶ Attach to Form 990 or Form 990-EZ.
▶ Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
The Missouri Foundation for Health

Employer identification number
43-1880952

Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and 501(c)(29) organizations only)
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b

1	(a) Name of disqualified person	(b) Relationship between disqualified person and organization	(c) Description of transaction	(d) Corrected?	
				Yes	No

2 Enter the amount of tax incurred by organization managers or disqualified persons during the year under section 4958 ▶ \$

3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization ▶ \$

Part II Loans to and/or From Interested Persons.
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a, or Form 990, Part IV, line 26, or if the organization reported an amount on Form 990, Part X, line 5, 6, or 22

(a) Name of interested person	(b) Relationship with organization	(c) Purpose of loan	(d) Loan to or from the organization?		(e) Original principal amount	(f) Balance due	(g) In default?		(h) Approved by board or committee?		(i) Written agreement?	
			To	From			Yes	No	Yes	No	Yes	No
Total						▶ \$						

Part III Grants or Assistance Benefiting Interested Persons.
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance
(1) ST LOUIS INTEGRATED	BETHANY JOHNSON-JAVOIS, A	957,292	CASH GRANT	GRANT TO IMPROVE ACCESS
(2) HEALTH NETWORK	DIRECTOR, IS THE CEO	0		TO HEALTH CARE

Part IV Business Transactions Involving Interested Persons.

Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c.

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing of organization's revenues?	
				Yes	No

Part V Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Return Reference	Explanation
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SCHEDULE O
(Form 990 or 990-EZ)

Department of the Treasury

Name of the organization

The Missouri Foundation for Health

Supplemental Information to Form 990 or 990-EZ

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

▶ Attach to Form 990 or 990-EZ.

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

OMB No 1545-0047

2018**Open to Public
Inspection****Employer identification number**

43-1880952

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 11B	FORM 990 REVIEW PROCESS THE CFO AND SENIOR DIRECTOR OF FINANCE REVIEW THE FORM 990 COMPLETELY AFTER SUPPLIED IN DRAFT FORM BY THE EXTERNAL TAX PREPARER THE CEO REVIEWS THE FORM AFTER THE CFO'S REVIEW IS COMPLETE AFTER MANAGEMENT'S REVIEW IS COMPLETE, THE FORM 990 IS PLACED IN A BOARD ACCESSIBLE PORTAL PRIOR TO FILING BOARD MEMBERS ARE NOTIFIED WHEN THIS OCCURS AND THAT THE RETURN IS AVAILABLE FOR REVIEW AND COMMENT

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 12C	CONFLICT OF INTEREST MONITORING ALL BOARD MEMBERS, COMMUNITY ADVISORY COUNCIL MEMBERS AND STAFF COMPLETE A CONFLICT OF INTEREST DISCLOSURE STATEMENT ANNUALLY, AND UPDATE AS REQUIRED THROUGHOUT THE YEAR ANY POTENTIAL CONFLICTS ARE REVIEWED BY STAFF AND THE FINANCE COMMITTEE A CURRENT SUMMARY OF POTENTIAL CONFLICTS IS MAINTAINED AND BROUGHT TO PROGRAM AND GRANTS COMMITTEE MEETINGS AND BOARD MEETINGS AT WHICH FUNDING DECISIONS ARE DISCUSSED AND/OR MADE

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15A	CEO COMPENSATION DETERMINATION PROCESS CEO COMPENSATION DECISION IS BASED ON COMPARABLE M ARKET DATA FROM SEVERAL RELIABLE SOURCES THE 2018 DECISION WAS MADE BY THE EXECUTIVE COMM ITTEE OF THE BOARD

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION B, LINE 15B	OTHER OFFICERS AND KEY EMPLOYEES COMPENSATION DETERMINATION PROCESS COMPENSATION DECISIONS FOR KEY EMPLOYEES ARE MADE BY THE PRESIDENT AND CEO AND ARE BASED ON MARKET DATA FROM SEVERAL RELIABLE SOURCES, AS WELL AS AN ANNUAL PERFORMANCE REVIEW PROCESS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART VI, SECTION C, LINE 19	OTHER DOCUMENTS AVAILABLE TO THE PUBLIC MISSOURI FOUNDATION FOR HEALTH OPERATES UNDER THE MISSOURI SUNSHINE LAW AND PROVIDES ACCESS TO REQUESTED DOCUMENTS (INCLUDING GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY, AND FINANCIAL STATEMENTS) TO THE PUBLIC UPON REQUEST DOCUMENTS ARE MADE AVAILABLE FOR REVIEW OR COPIES ARE PROVIDED TO THE REQUESTOR, WHICHEVER THE REQUESTOR PREFERS

990 Schedule O, Supplemental Information

Return Reference	Explanation
FORM 990, PART XI, LINE 9	OTHER CHANGES IN NET ASSETS OR FUND BALANCES PRESENT VALUE ADJUSTMENT TO FUTURE GRANT COMMITMENTS \$1,477,066

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

OMB No 1545-0047

2018

Open to Public Inspection

Name of the organization
The Missouri Foundation for Health

Employer identification number
43-1880952

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
(1) MFH HQ LLC 4254 VISTA AVE ST LOUIS, MO 63110 82-2641041	HQ CONSTR	MO	-220,160	12,110,979	MFH

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
(1)BUILD MISSOURI HEALTH 4254 VISTA AVE ST LOUIS, MO 63110 83-2641644	LEV LENDER	MO	501(C)(3)	7	MFH	Yes	

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

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

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

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

a Receipt of (i) interest, (ii)annuities, (iii) royalties, or(iv) rent from a controlled entity

1a

No

b Gift, grant, or capital contribution to related organization(s)

1b

Yes

c Gift, grant, or capital contribution from related organization(s)

1c

No

d Loans or loan guarantees to or for related organization(s)

1d

No

e Loans or loan guarantees by related organization(s)

1e

No

f Dividends from related organization(s)

1f

No

g Sale of assets to related organization(s)

1g

No

h Purchase of assets from related organization(s)

1h

No

i Exchange of assets with related organization(s)

1i

No

j Lease of facilities, equipment, or other assets to related organization(s)

1j

No

k Lease of facilities, equipment, or other assets from related organization(s)

1k

No

l Performance of services or membership or fundraising solicitations for related organization(s)

1l

No

m Performance of services or membership or fundraising solicitations by related organization(s)

1m

No

n Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)

1n

No

o Sharing of paid employees with related organization(s)

1o

No

p Reimbursement paid to related organization(s) for expenses

1p

No

q Reimbursement paid by related organization(s) for expenses

1q

No

r Other transfer of cash or property to related organization(s)

1r

No

s Other transfer of cash or property from related organization(s)

1s

No

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)BUILD MISSOURI HEALTH	B	3,386,900	CASH

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Part VII **Supplemental Information**

Provide additional information for responses to questions on Schedule R (see instructions)

Return Reference	Explanation

Missouri Foundation for Health					
43-1880952					
Schedule I					
Grant Awards to Governments and Organizations in the US, by Funding Program					
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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
2018 Count	Reference Number	Access to Care			Amount
1	17-0601-ATC-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$1,131,973
2	17-0612-ATC-18	Jefferson County Health Department 405 Main Street Hillsboro, MO 63050-4351	43-1390883	Government	\$409,543
3	17-0614-ATC-18	Jordan Valley Family Health Foundation 440 E Tampa St Springfield, MO 65806-1131	821901945	501(c)(3)	\$1,078,035
4	17-0621-ATC-18	Casa de Salud 3200 Chouteau Avenue St. Louis, MO 63103-2910	270732049	501(c)(3)	\$467,641
5	17-0624-ATC-18	Criminal Justice Ministry 941 Park Ave Saint Louis, MO 63104-3718	462647318	501(c)(3)	\$775,394
6	17-0629-ATC-18	St. Louis Integrated Health Network 1520 Market Street Suite 4034 St Louis, MO 63103-2632	203288245	501(c)(3)	\$957,292
7	18-0269-ATC-18	Betty&Smith 1875 K Street NW, Suite 400 Washington, DC 20006	82-2509357		\$116,760
8	18-0280-ATC-18	SoutheastHEALTH 1701 Lacey Street Cape Girardeau, MO 63701-5230	430654874	501(c)(3)	\$300,000
8		Total Access to Care			\$5,236,638
2018 Count	Reference Number	Advocacy			Amount
1	18-0176-HPA-18	Community Catalyst One Federal Street Boston, MA 02110-2012	43355127	501(c)(3)	\$7,250
2	18-0205-HPA-18	MWR Consulting LLC PO Box 410294 Saint Louis, MO 63141	47-5268115		\$22,500

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
3	18-0210-HPA-18	Social Policy Research Associates 1333 Broadway, Suite 310 Oakland, CA 94612	94-3143216		\$612,022
4	18-0221-HPA-18	Empower Missouri 308 East High Street, Suite 100 Jefferson City, MO 65101-3237	440547548	501(c)(3)	\$500,000
5	18-0226-HPA-18	Missouri Coalition for Community Behavioral Healthcare 221 Metro Drive Jefferson City, MO 65109-4412	431148537	501(c)(3)	\$500,000
6	18-0229-HPA-18	Forward through Ferguson 20 S Sarah St St. Louis, MO 63108-2819	811359671	501(c)(3)	\$500,000
7	18-0230-HPA-18	Operation Food Search, Inc. 1644 Lotsie Blvd. St. Louis, MO 63132-1444	431241854	501(c)(3)	\$500,000
8	18-0234-HPA-18	Missouri Primary Care Association 3325 Emerald Lane Jefferson City, MO 65109-6879	431419937	501(c)(3)	\$500,000
9	18-0237-HPA-18	Planned Parenthood of the St Louis Region and Southwest Missouri 4251 Forest Park Avenue St. Louis, MO 63108-2810	430652666	501(c)(3)	\$500,000
10	18-0242-HPA-18	Missouri Coalition Against Domestic and Sexual Violence (MCADSV) 217 Oscar Drive, Suite A Jefferson City, MO 65101-7801	431479799	501(c)(3)	\$500,000
11	18-0250-HPA-18	Missouri Rural Crisis Center 1108 Rangeline St. Columbia, MO 65201-4567	431432033	501(c)(3)	\$500,000
12	18-0262-HPA-18	Legal Services of Eastern Missouri, Inc. 4232 Forest Park Avenue St. Louis, MO 63108-2811	430816805	501(c)(3)	\$500,000
13	18-0264-HPA-18	Missouri KidsFirst 520 Dix Road, Suite C Jefferson City, MO 65109-1486	270124899	501(c)(3)	\$500,000

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
14	18-0266-HPA-18	PedNet Coalition PO Box 7124 Columbia, MO 65205	431901262	501(c)(3)	\$500,000
15	18-0268-HPA-18	Paraquad, Inc 5240 Oakland St. Louis, MO 63110-1436	237112449	501(c)(3)	\$500,000
16	18-0309-HPA-18	University of Missouri - St. Louis Office of Research Administration 341 Woods Hall One University Boulevard St. Louis, MO 63121-4400	436003859	501(c)(3)	\$129,516
17	18-0323-HPA-18	Innovation Network Inc 1625 K St Nw Ste 1050 Washington, DC 20006-1622	521807655	501(c)(3)	\$373,010
18	18-0357-HPA-18	The Improv Shop 3960 Chouteau Ave St. Louis, MO 63110	45-3593842		\$3,000
19	18-0358-HPA-18	Campfire 7346 Ethel Avenue Unit 2E Richmond Heights, MO 63117	82-0963190		\$44,097
19		Total Advocacy			\$7,191,395
2018 Count	Reference Number	Behavioral Health			Amount
na	16-0384-BH-16	Missouri Coalition For Community Behavioral Healthcare 221 Metro Drive Jefferson City, MO 65109-4412	431148537	501(c)(3)	(\$3,535)
na	16-0385-BH-16	Missouri Coalition For Community Behavioral Healthcare 221 Metro Drive Jefferson City, MO 65109-4412	431148537	501(c)(3)	(\$14,121)
1	18-0019-BH-18	St. Louis Regional Health Commission 1113 Mississippi Avenue, Suite 113 St. Louis, MO 63104-2468	431883638	501(c)(3)	\$234,163

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
2	18-0206-BH-18	City of St. Louis Mental Health Board of Trustees 333 S 18th St, Ste 200 The Annex (at Union Station) St. Louis, MO 63103-2256	43-1662402	Government	\$15,000
3	18-0308-BH-18	Gene Slay's Girls and Boys Club Of St Louis 2524 S. 11th St Saint Louis, MO 63104-4308	430653261	501(c)(3)	\$31,200
3		Total Behavioral Health			\$262,709
2018 Count	Reference Number	Childhood Obesity Prevention			Amount
na	15-0352-CHO-15	Dunklin County Caring Council 311 Kennett Street Kennett, MO 63857-3017	431690332	501(c)(3)	(\$15,796)
na	15-0354-CHO-15	Lester E Cox Medical Center 1423 North Jefferson Ave Springfield, MO 65802-1917	440577118	501(c)(3)	(\$18,645)
na	15-0369-CHO-15	Sullivan County Health Department 101 Hawthorne Drive PO Box 129 Milan, MO 635561017	43-1127797	Government	(\$8,098)
na	15-0355-CHO-15	Beyond Housing Inc 6506 Wright Way Pine Lawn, MO 63121-3209	510179471	501(c)(3)	(\$3,971)
na	15-0366-CHO-15	Gateway Region Young Mens Christian Association 326 South 21st Street, Suite 400 St. Louis, MO 63103-2267	430653616	501(c)(3)	(\$10,507)
na	15-0366-CHO-15	Gateway Region Young Mens Christian Association 326 South 21st Street, Suite 400 St. Louis, MO 63103-2267	430653616	501(c)(3)	(\$102,006)
na	15-0313-CHO-15	Council For A Healthy Dent County 1200 W. Rolla Road Salem, MO 65560-2705	272353430	501(c)(3)	(\$4,576)
na	15-0324-CHO-15	Bjc Health System 4444 Forest Park, Suite 500 St. Louis, MO 63108-2212	431617558	501(c)(3)	(\$37,182)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	15-0389-CHO-15	Texas County Health Department 950 North Highway 63, Suite 500 Houston, MO 65483-2619	43-1431118	Government	(\$10,331)
na	15-0324-CHO-15	Bjc Health System 4444 Forest Park, Suite 500 St. Louis, MO 63108-2212	431617558	501(c)(3)	(\$38,888)
na	15-0359-CHO-15	Randolph County Caring Community Inc 101 West Coates Street, Suite 201 Moberly, MO 65270-2222	522199775	501(c)(3)	(\$4,014)
na	17-0291-CHO-17	Beyond Housing Inc 6506 Wright Way Pine Lawn, MO 63121-3209	510179471	501(c)(3)	(\$4,819)
na	16-0441-CHO-16	Ozarks Regional YMCA 417 South Jefferson Springfield, MO 65806-2315	440545283	501(c)(3)	(\$16,533)
na	15-0124-CHO-15	Plainview R-8 School Route 3 Box 145 Ava, MO 65608-9803	12580775	Government	(\$9,913)
na	15-0124-CHO-15	Plainview R-8 School Route 3 Box 145 Ava, MO 65608-9803	12580775	Government	(\$82,562)
na	16-0129-CHO-16	Hayti Reorganized School District No. 2 500 North 4th Street Hayti, MO 63851-1116	436005620	Government	(\$1,854)
na	16-0129-CHO-16	Hayti Reorganized School District No. 2 500 North 4th Street Hayti, MO 63851-1116	436005620	Government	(\$6,212)
na	16-0128-CHO-16	Cooter R-4 School 1867 State Highway E Cooter, MO 63839-0218	43-6000885	Government	(\$2,711)
na	16-0114-CHO-16	Monett R-1 900 East Scott Street Monett, MO 65708-1782	44-6001429	Government	(\$3,443)
na	16-0124-CHO-16	Moberly District #81 926 Kwix Road Moberly, MO 65270-3813	43-6002349	Government	(\$37,778)

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na	16-0130-CHO-16	Salem R-80 School District 1409 W. Rolla Road Salem, MO 65560-2709	43-6003372	Government	(\$15,293)
na	16-0115-CHO-16	Hermitage R-IV School District 23824 Polk St. PO Box 327 Hermitage, MO 65668-0327	44-6002900	Government	(\$998)
na	16-0134-CHO-16	Milan C-2 School District 373 Market Street Milan, MO 63556-1182	446003466	Government	(\$33)
na	16-0134-CHO-16	Milan C-2 School District 373 Market Street Milan, MO 63556-1182	446003466	Government	(\$100)
na	16-0133-CHO-16	Skyline R-II School Rt 72 Box 486 Norwood, MO 65717	446006160	Government	(\$3,628)
na	17-0059-CHO-17	GMMB Inc. 3050 K Street NW Suite 100 Washington, DC 20007-5108	52-1305983		(\$2,201)
na	17-0548-CHO-17	Jsi Research & Training Institute Inc 44 Farnsworth Street Boston, MA 02210-1209	42679824	501(c)(3)	(\$50)
na	17-0081-CHO-17	University of Kansas Center for Research, Inc 2385 Irving Hill Road Lawrence, KS 66045-7568	48-0680117	Government	(\$42,338)
1	17-0578-CHO-18	ChildCare Aware of Missouri 1000 Executive Parkway Drive, Suite 103 St. Louis, MO 63141-6369	431821038	501(c)(3)	\$274,787
2	18-0025-CHO-18	Missouri Alliance of YMCAs Po Box 104176 Jefferson City, MO 65109-4781	462527769	501(c)(3)	\$203,975
3	18-0055-CHO-18	University of Kansas Center for Research, Inc 2385 Irving Hill Road Lawrence, KS 66045-7568	48-0680117	Government	\$858,874

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
4	18-0141-CHO-18	Salem R-80 School District 1409 W. Rolla Road Salem, MO 65560-2709	43-6003372	Government	\$98,860
5	18-0144-CHO-18	Hermitage R-IV School District 23824 Polk St. PO Box 327 Hermitage, MO 65668-0327	44-6002900	Government	\$96,753
6	18-0147-CHO-18	Ava R-I School District PO Box 338 Ava, MO 65608-0338	446001736	Government	\$100,000
7	18-0148-CHO-18	Moberly District #81 926 Kwix Road Moberly, MO 65270-3813	43-6002349	Government	\$97,414
8	18-0169-CHO-18	Eldon School District 112 S Pine St. Eldon, MO 65026	446002437	Government	\$8,800
9	18-0171-CHO-18	Hermitage R-IV School District 23824 Polk St. PO Box 327 Hermitage, MO 65668-0327	44-6002900	Government	\$4,900
10	18-0173-CHO-18	Kennett Public Schools 510 College Kennett, MO 63857-2062	43-6001887	Government	\$9,800
11	18-0182-CHO-18	Cooter R-4 School District 1867 State Highway E Cooter, MO 63839-0218	43-6000885	Government	\$5,900
12	18-0183-CHO-18	Skyline R-II School District Rt 72 Box 486 Norwood, MO 65717	446006160	Government	\$5,900
13	18-0184-CHO-18	Hayti R-2 School District 500 North 4th Street Hayti, MO 63851-1116	436005620	Government	\$5,900
14	18-0186-CHO-18	Monett R-1 School District 900 East Scott Street Monett, MO 65708-1782	44-6001429	Government	\$15,000

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
15	18-0188-CHO-18	Moberly District #81 926 Kwix Road Moberly, MO 65270-3813	43-6002349	Government	\$9,800
16	18-0189-CHO-18	Normandy Schools Collaborative 3855 Lucas and Hunt Road St. Louis, MO 63121-2919	43-6002548	Government	\$15,000
17	18-0190-CHO-18	Ava R-I School District PO Box 338 Ava, MO 65608-0338	446001736	Government	\$9,800
18	18-0194-CHO-18	Salem R-80 School District 1409 W. Rolla Road Salem, MO 65560-2709	43-6003372	Government	\$4,900
19	18-0195-CHO-18	Milan C-2 School District 373 Market Street Milan, MO 63556-1182	446003466	Government	\$5,900
20	18-0197-CHO-18	Alliance For A Healthier Generation Inc 2525 Sw 1st Ave Ste 120 Portland, OR 97201-9834	272028308	501(c)(3)	\$262,264
21	18-0217-CHO-18	Cabool R-IV School District 1025 Rogers Avenue Cabool, MO 65689-7359	44-6001372	Government	\$5,900
22	18-0306-CHO-18	PedNet Coalition PO Box 7124 Columbia, MO 65205	431901262	501(c)(3)	\$258,580
23	18-0310-CHO-18	Missouri Alliance of YMCAs Po Box 104176 Jefferson City, MO 65109-4781	462527769	501(c)(3)	\$30,000
24	18-0341-CHO-18	GoNoodle, Inc. 209 10th Avenue South, Suite 350 Nashville, TN 37203	20-3456491		\$50,388
24		Total Childhood Obesity Prevention			\$1,954,774
2018 Count	Reference Number	Community Health and Prevention			
na	12-0142-CHG-12	Whole Health Outreach 180 County Road 700 Ellington, MO 63638-8005	431577997	501(c)(3)	(\$4,749)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	12-0169-CHG-12	Parkway School District 455 North Woods Mill Road Chesterfield, MO 63017-3327	43-6000857	Government	(\$11,793)
na	12-0205-CHG-12	Curators Of The University Of Missouri P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	(\$632)
na	12-0139-CHG-12	Skaggs Community Hospital Association PO Box 650 Branson, MO 65615-0650	440584290	501(c)(3)	(\$29,325)
na	12-0168-CHG-12	Missouri Baptist Hospital of Sullivan 751 Sappington Ridge Sullivan, MO, MO 63080-2354	43-1459495	501(c)(3)	(\$1,416)
		Total Community Health and Prevention			(\$47,852)
2018 Count	Reference Number	Emergency Grants			Amount
na	16-0083-EG-16	Southeast Missouri Network Against Sexual Violence Inc 73 Sheridan Cape Girardeau, MO 63703-4916	431799296	501(c)(3)	(\$23,823)
1	18-0366-EG-18	Operation Excel Inc 8865 Natural Bridge Rd Saint Louis, MO 63121-3933	431749041	501(c)(3)	\$100,000
1		Total Emergency Grants			\$76,177
2018 Count	Reference Number	Expanding Coverage			Amount
na	15-0468-COV-15	AIDS Resource Center Of Wisconsin, Inc. 820 N Plankinton Ave Milwaukee, WI 53203-1802	391534049	501(c)(3)	(\$5,070)
na	16-0285-COV-16	Lester E Cox Medical Center 1423 North Jefferson Ave Springfield, MO 65802-1917	440577118	501(c)(3)	(\$24,643)
na	16-0278-COV-16	Citizens Memorial Hospital District 1500 North Oakland Bolivar, MO 65613-3011	431142176	501(c)(3)	(\$6,674)
na	16-0279-COV-16	AIDS Resource Center Of Wisconsin, Inc. 820 N Plankinton Ave Milwaukee, WI 53203-1802	391534049	501(c)(3)	(\$7,273)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	16-0263-COV-16	East Missouri Action Agency Inc. 403 Parkway Dr PO Box 308 Park Hills, MO 63601-0308	430838255	501(c)(3)	(\$11,929)
na	16-0271-COV-16	Randolph County Caring Community Inc 101 West Coates Street, Suite 201 Moberly, MO 65270-2222	522199775	501(c)(3)	(\$7,060)
na	16-0265-COV-16	Community Action Agency of St. Louis County, Inc. 2709 Woodson Road Overland, MO 63114-4817	237037248	501(c)(3)	(\$681)
na	16-0268-COV-16	Freeman-Oak Hill Health System 1102 W. 32nd Street Joplin, MO 64804-3503	431704371	501(c)(3)	(\$541)
na	16-0281-COV-16	Knowledge Management Associates 200 N. Keene St. Ste. 101 Columbia, MO 65201-8145	431929874	501(c)(3)	(\$8,775)
na	17-0013-COV-17	Focus Navigators LLC 2829 Westown Pkwy Ste 335 West Des Moines, IA 50266-1340	46-3183792		(\$96)
na	15-0402-COV-15	Washington University Office of Sponsored Research Services Campus Box 1054 One Brookings Drive St. Louis, MO 63130-4862	430653611	501(c)(3)	(\$11,276)
na	16-0364-COV-16	Knowledge Management Associates 200 N. Keene St. Ste. 101 Columbia, MO 65201-8145	431929874	501(c)(3)	(\$50,368)
na	16-0317-COV-16	Legal Aid Association Greene County Missouri 809 North Campbell Avenue Springfield, MO 65802-3820	431106228	501(c)(3)	(\$31,633)
na	17-0133-COV-17	StratCommRx 333 South Kirkwood Road St. Louis, MO 63122	272948142		(\$23,586)
na	17-0032-COV-17	Health Literacy Media 911 Washington Ave., Suite 625 St. Louis, MO 63101-1262	271010875	501(c)(3)	(\$4,230)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	16-0395-COV-16	Community Catalyst Inc One Federal Street Boston, MA 02110-2012	43355127	501(c)(3)	(\$3,007)
na	17-0313-COV-17	Legal Aid Of Western Missouri 4001 Blue Parkway, Suite 300 Kansas City, MO 64130-2350	430824638	501(c)(3)	(\$18,419)
na	16-0446-COV-16	Family Health Center of Boone County 1001 West Worley Street Columbia, MO 65203-2037	431709422	501(c)(3)	(\$1,149)
na	16-0450-COV-16	Betty Jean Kerr Peoples Health Centers Inc 5701 Delmar Blvd. St. Louis, MO 63211-2617	431036785	501(c)(3)	(\$271)
na	16-0449-COV-16	Affinia Healthcare 1717 Biddle Saint Louis, MO 63106-3454	430817642	501(c)(3)	(\$394)
1	18-0006-COV-18	Focus ACA 2829 Westown Pkwy Ste 335 West Des Moines, IA 50266-1340	46-3183792		\$20,000
2	18-0084-COV-18	Health Literacy Media 911 Washington Ave., Suite 625 St. Louis, MO 63101-1262	271010875	501(c)(3)	\$99,974
3	18-0103-COV-18	Fleishman-Hillard Inc. 200 North Broadway St. Louis, MO 63102-2796	43-1791685		\$460,000
4	18-0107-COV-18	Randolph County Caring Community Partnership 101 West Coates Street, Suite 201 Moberly, MO 65270-2222	522199775	501(c)(3)	\$125,000
5	18-0108-COV-18	Legal Services of Southern Missouri 809 North Campbell Avenue Springfield, MO 65802-3820	431106228	501(c)(3)	\$75,000
6	18-0109-COV-18	Primaris Foundation 200 N. Keene St. Ste. 101 Columbia, MO 65201-8145	431929874	501(c)(3)	\$124,975
7	18-0110-COV-18	Mid-Missouri Legal Services Corporation 1201 West Broadway Columbia, MO 65203-2125	431122012	501(c)(3)	\$64,841

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
8	18-0111-COV-18	Ozark Action Inc. 710 E. Main St. West Plains, MO 65775-3307	430838508	501(c)(3)	\$36,210
9	18-0112-COV-18	Saint Louis Effort for AIDS 820 N Plankinton Ave Milwaukee, WI 53203-1802	391534049	501(c)(3)	\$125,000
10	18-0114-COV-18	CoxHealth 1423 North Jefferson Ave Springfield, MO 65802-1917	440577118	501(c)(3)	\$125,000
11	18-0115-COV-18	Central Missouri Community Action 807 B North Providence Road Columbia, MO 65203-4359	430835026	501(c)(3)	\$100,000
12	18-0116-COV-18	Legal Services of Eastern Missouri, Inc. 4232 Forest Park Avenue St. Louis, MO 63108-2811	430816805	501(c)(3)	\$125,000
13	18-0117-COV-18	Community Action Agency of St. Louis County (CAASTLC) 2709 Woodson Road Overland, MO 63114-4817	237037248	501(c)(3)	\$99,918
14	18-0118-COV-18	International Institute of Metropolitan St. Louis 3401 Arsenal Street St. Louis, MO 63118-2001	430652640	501(c)(3)	\$99,987
15	18-0119-COV-18	Legal Aid of Western Missouri 4001 Blue Parkway, Suite 300 Kansas City, MO 64130-2350	430824638	501(c)(3)	\$75,000
16	18-0120-COV-18	Planned Parenthood of the St Louis Region and Southwest Missouri 4251 Forest Park Avenue St. Louis, MO 63108-2810	430652666	501(c)(3)	\$150,000
17	18-0121-COV-18	East Missouri Action Agency 403 Parkway Dr PO Box 308 Park Hills, MO 63601-0308	430838255	501(c)(3)	\$125,000
18	18-0123-COV-18	StratCommRx 333 South Kirkwood Road St. Louis, MO 63122	272948142		\$135,000

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19	18-0174-COV-18	Primaris Foundation 200 N. Keene St. Ste. 101 Columbia, MO 65201-8145	431929874	501(c)(3)	\$124,965
20	18-0275-COV-18	Community Catalyst One Federal Street Boston, MA 02110-2012	43355127	501(c)(3)	\$140,000
21	18-0319-COV-18	Washington University Office of Sponsored Research Services Campus Box 1054 One Brookings Drive St. Louis, MO 63130-4862	430653611	501(c)(3)	\$79,999
22	18-0336-COV-18	Engage R+D 556 S. Fair Oaks Ave. Suite 101 #603 Pasadena, CA 91105	820676544		\$80,121
22		Total Expanding Coverage			\$2,373,975
2018 Count	Reference Number	Ferguson and Beyond			Amount
na	16-0362-FAB-16	Missouri Department of Elementary and Secondary Education 205 Jefferson St. Jefferson City, MO 65101-2901	44-6000987	Government	(\$57,193)
na	16-0085-FAB-16	St Louis Regional Health Commission 1113 Mississippi Avenue, Suite 113 St. Louis, MO 63104-2468	431883638	501(c)(3)	(\$29,560)
0		Total Ferguson and Beyond			(\$86,753)
2018 Count	Reference Number	Gun Violence Prevention			Amount
1	16-0262-GVP-18	Washington University Office of Sponsored Research Services Campus Box 1054 One Brookings Drive St. Louis, MO 63130-4862	430653611	501(c)(3)	\$1,675,072

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2	17-0648-GVP-18	University of Missouri - St. Louis Office of Research Administration 341 Woods Hall One University Boulevard St. Louis, MO 63121-4400	436003859	501(c)(3)	\$876,271
2		Total Gun Violence Prevention			\$2,551,343
2018 Count	Reference Number	Healthy Housing			Amount
na	15-0387-HH-15	Urban Institute 2100 M Street, NW Washington, DC 20037-1264	520880375	501(c)(3)	(\$18,666)
0		Total Healthy Housing			(\$18,666)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
2018 Count	Reference Number	Health Policy			Amount
na	12-0766-HPC-12	Missouri Center for Patient Safety 2410 Hyde Park Rd, Suite A Jefferson City, MO 65109	202267157	501(c)(3)	(\$28,712)
na	12-0766-HPC-12	Missouri Center for Patient Safety 2410 Hyde Park Rd, Suite A Jefferson City, MO 65109	202267157	501(c)(3)	(\$36,783)
na	16-0432-HPC-17	Missouri Health Advocacy Alliance 606 East Capitol Avenue Jefferson City, MO 65101-3010	263426303	501(c)(3)	(\$50,455)
na	16-0459-HPC-16	Missouri Association Of Rural Health Clinics P.O. Box 296 Jefferson City, MO 65102-0296	431903705	501(c)(6)	(\$43,520)
na	15-0481-HPC-15	FJH Management Services, LLC PO Box 684 Jefferson City, MO 65102-0684	26-0901531		(\$27,307)
na	17-0572-HPG-17	Legal Services of Eastern Missouri, Inc. 4232 Forest Park Avenue St. Louis, MO 63108-2811	430816805	501(c)(3)	(\$582)
na	16-0463-HPC-16	Empower Missouri 308 East High Street, Suite 100 Jefferson City, MO 65101-3237	440547548	501(c)(3)	(\$4,578)
na	17-0114-HPC-17	Keith Policy Solutions, LLC 308 Upshur Street NW Washington, DC 20011	814223427		(\$26)
na	15-0499-HPC-15	Empower Missouri 308 East High Street, Suite 100 Jefferson City, MO 65101-3237	440547548	501(c)(3)	(\$2,688)
na	16-0462-HPC-16	Dwight Fine 12675 Riviera Heights Road Holts Summit, MO 65043-2039			(\$3,000)
na	17-0057-HPG-17	Missouri Coalition For Community Behavioral Healthcare 221 Metro Drive Jefferson City, MO 65109-4412	431148537	501(c)(3)	(\$298)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	16-0393-HPC-16	Alliance For Justice 11 Dupont Circle NW, Suite 500 Washington, DC 20036	521009973	501(c)(3)	(\$18,727)
na	17-0479-HPC-17	Johego 20 S Sarah St St. Louis, MO 63108-2819	462123095	501(c)(3)	(\$4,539)
na	15-0068-HPC-15	Focus St Louis 815 Olive Street, Suite 110 St. Louis, MO 63101-1509	431750172	501(c)(3)	\$3,000
1	17-0580-HPG-18	Children's Rights Inc 88 Pine St Ste 800 New York, NY 10005-1828	133801864	501(c)(3)	\$125,000
2	17-0643-HPG-18	Missouri Coalition for Oral Health 213 Adams Street Jefferson City, MO 65101-3203	205032836	501(c)(3)	\$25,000
3	18-0057-HPG-18	Families And Communities Together Inc Of Marion County Missouri 4 Melgrove Lane Hannibal, MO 63401-2249	431848766	501(c)(3)	\$960
4	18-0060-HPG-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$225,782
5	18-0066-HPC-18	Health Policy Associates 847 25th Avenue San Francisco, CA 94121	94-3350383		\$106,000
6	18-0106-HPC-18	StratCommRx 333 South Kirkwood Road St. Louis, MO 63122	272948142		\$75,000
7	18-0153-HPG-18	National Academy for State Health Policy Two Monument Square, Suite 910 Portland, ME 04101	521576801	501(c)(3)	\$10,000
8	18-0154-HPG-18	National Conference of State Legislatures 7700 E. 1st Place Denver, CO 80230-7143	84-0772595	Government	\$13,352

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
9	18-0155-HPC-18	Alliance for Justice 11 Dupont Circle NW, Suite 500 Washington, DC 20036	521009973	501(c)(3)	\$12,200
10	18-0196-HPC-18	Keith Policy Solutions, LLC 308 Upshur Street NW Washington, DC 20011	814223427		\$21,960
11	18-0272-HPG-18	American Academy Of Pediatrics, Missouri Chapter Po Box 1219 Jefferson Cty, MO 65102-1219	431561857	501(c)(6)	\$9,700
12	18-0158-HPC-18	Community Building Strategies, LLC 112 S. Water Street, Suite B Kent, OH 44240	81-1947120		\$40,000
13	18-0204-HPG-18	Washington University Office of Sponsored Research Services Campus Box 1054 One Brookings Drive St. Louis, MO 63130-4862	430653611	501(c)(3)	\$287,486
14	18-0278-HPC-18	Washington University Office of Sponsored Research Services Campus Box 1054 One Brookings Drive St. Louis, MO 63130-4862	430653611	501(c)(3)	\$10,626
15	18-0279-HPC-18	FOCUS St. Louis 815 Olive Street, Suite 110 St. Louis, MO 63101-1509	431750172	501(c)(3)	\$16,000
16	18-0298-HPG-18	Blue Cross Blue Shield of Massachusetts Foundation, Inc. 101 Huntington Ave Ste Boston, MA 02199-7603	43148824	501(c)(3)	\$19,000
17	18-0305-HPG-18	University of Missouri - St. Louis Office of Research Administration 341 Woods Hall One University Boulevard St. Louis, MO 63121-4400	436003859	501(c)(3)	\$140,000

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
18	18-0311-HPG-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$5,000
19	18-0338-HPG-18	Missouri Department of Corrections 2729 Plaza Drive Jefferson City, MO 65109-1146	43-1628745	Government	\$57,952
20	18-0342-HPC-18	Winton Policy Group, LLC 124 East High Street PO Box 1805 Jefferson, MO 65102	83-0674714		\$183,462
21	18-0343-HPC-18	Dwight Fine 12675 Riviera Heights Road Holts Summit, MO 65043-2039			\$42,500
22	18-0349-HPG-18	Legal Services of Eastern Missouri, Inc. 4232 Forest Park Avenue St. Louis, MO 63108-2811	430816805	501(c)(3)	\$6,760
23	18-0351-HPG-18	National Academy of Medicine Keck Center, Room 836 500 5th Street, NW Washington, DC 20001	53-0196932	501(c)(3)	\$50,000
24	18-0365-HPG-18	Missouri Health Care for All PO Box 190429 Saint Louis, MO 63119	273885910	501(c)(3)	\$249,965
24		Total Health Policy			\$1,515,390
2018 Count	Reference Number	Infant Mortality Reduction Initiative			Amount
na	16-0076-IM-16	St Louis University Office of Sponsored Programs Administration Fusz Memorial Hall, 3rd Floor 3700 West Pine Mall St. Louis, MO 63108-3306	430654872	501(c)(3)	(\$13,251)
na	16-0075-IM-16	Saint Francis Foundation 211 Saint Francis Drive Cape Girardeau, MO 63703-5049	431111276	501(c)(3)	(\$20,048)

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
na	16-0075-IM-16	Saint Francis Foundation 211 Saint Francis Drive Cape Girardeau, MO 63703-5049	431111276	501(c)(3)	(\$6,858)
na	15-0449-IM-15	Sudden Infant Death Syndrome Resources Inc 1120 South 6th Street Suite 100 St. Louis, MO 63104-3602	431344645	501(c)(3)	(\$507)
na	16-0077-IM-16	St Louis University Office of Sponsored Programs Administration Fusz Memorial Hall, 3rd Floor 3700 West Pine Mall St. Louis, MO 63108-3306	430654872	501(c)(3)	(\$87,235,
na	15-0489-IM-15	Center for Systems Integration 2717 Welton Street Denver, CO 80205-2913	20-5031635		(\$12,921)
na	16-0287-IM-16	Standing Partnership 1610 Des Peres Road Suite 200 Des Peres, MO 63131-1849	43-1590202		(\$10,267)
na	16-0297-IM-16	Bold Marketing 1917 William Street Cape Girardeau, MO 63703-5949	90-0955039		(\$3,042)
na	17-0123-IM-17	Center for Systems Integration 2717 Welton Street Denver, CO 80205-2913	20-5031635		(\$24)
na	17-0547-IM-17	Bold Marketing 1917 William Street Cape Girardeau, MO 63703-5949	90-0955039		(\$601)
1	18-0011-IM-18	The Rome Group 3120 Locust Street St. Louis, MO 63103	43-1803220		\$27,362
2	18-0029-IM-18	Network for Strong Communities 8764 Manchester Road Suite 203 Brentwood, MO 63144-2735	431752694	501(c)(3)	\$108,160

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
3	18-0302-IM-18	Network for Strong Communities - fiscal sponsor for Bootheel Babies and Families 107 W. Center Street, Suite A Sikeston, MO 63801	431752694	501(c)(3)	\$299,357
4	18-0303-IM-18	Generate Health STL 1300 Hampton Ave Ste 111 Saint Louis, MO 63139-3189	412139772	501(c)(3)	\$2,797,328
5	18-0312-IM-18	Family Counseling Center, Inc. 925 Highway V V Box 71 Kennett, MO 63857-3009	431116734	501(c)(3)	\$200,000
6	18-0315-IM-18	Mississippi County Health Department 1200 East Marshall Charleston, MO 63834-1336	43-6004231	Government	\$200,000
7	18-0316-IM-18	Dexter Community Regional Healthcare Foundation 215 West Grant Dexter, MO 63841-2043	436054187	501(c)(3)	\$200,000
8	18-0363-IM-18	Simply Strategy 730 Greeley Avenue St. Louis, MO 63119-1943	26-2845601		\$263,730
8		Total Infant Mortality Reduction Initiative			\$3,932,183
2018 Count	Reference Number	Leadership			Amount
na	17-0567-LP-17	Morgan Graves Consultants, LLC 1430 Washington Avenue Suite 228 St. Louis, MO 63103	47-4292794		\$14,000
0		Total Leadership			\$14,000
2018 Count	Reference Number	Missouri Capture			Amount
na	17-0562-MC-17	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			(\$47,603)

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na	17-0633-MC-17	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		(\$3,563)
1	17-0092-MC-18	Schmersahl Treloar & Co 10805 Sunset Office Drive, Suite 400 St. Louis, MO 63127			\$4,000
2	17-0566-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,000
3	17-0639-MC-18	Suzanne Hansford-Bowles 1109 South Glenwood Avenue Columbia, MO 65203-2876			\$544
4	17-0642-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,300
5	17-0649-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,200
6	18-0002-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,300
7	18-0003-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$14,550
8	18-0004-MC-18	Suzanne Hansford-Bowles 1109 South Glenwood Avenue Columbia, MO 65203-2876			\$1,013
9	18-0005-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$12,294
10	18-0008-MC-18	Suzanne Hansford-Bowles 1109 South Glenwood Avenue Columbia, MO 65203-2876			\$788
11	18-0010-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$22,500

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12	18-0014-MC-18	Simply Strategy 730 Greeley Avenue St. Louis, MO 63119-1943	26-2845601		\$18,000
13	18-0015-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$28,200
14	18-0016-MC-18	Open Health, LLC 1113 Mississippi St. Louis, MO 63104-2469	30-0342649		\$20,198
15	18-0017-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$28,200
16	18-0018-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$15,000
17	18-0023-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$3,800
18	18-0024-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$31,544
19	18-0026-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$24,500
20	18-0027-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$4,500
21	18-0031-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$4,500
22	18-0036-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$7,260
23	18-0037-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$13,200

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24	18-0038-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425	319-64-9834		\$4,988
25	18-0042-MC-18	Dunlap Grantworks, LLC 209 NW 80th Street Kansas City, MO 64118	45-4418567		\$5,525
26	18-0046-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$28,200
27	18-0047-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$7,500
28	18-0048-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$15,000
29	18-0049-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$22,500
30	18-0050-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$15,000
31	18-0059-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$25,000
32	18-0062-MC-18	Suzanne Hansford-Bowles 1109 South Glenwood Avenue Columbia, MO 65203-2876			\$356
33	18-0063-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$1,000
34	18-0064-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$26,294
35	18-0079-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$7,500

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
36	18-0080-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$7,500
37	18-0081-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$4,000
38	18-0087-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$8,750
39	18-0090-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$1,000
40	18-0091-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$1,900
41	18-0092-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$4,500
42	18-0093-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,200
43	18-0097-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$3,450
44	18-0100-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$30,000
45	18-0101-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$34,344
46	18-0102-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$2,400
47	18-0124-MC-18	The GrantWell LLC PO Box 11069 Springfield, MO 65808	261194701		\$4,500

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
48	18-0125-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$23,363
49	18-0132-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$11,645
50	18-0133-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$25,000
51	18-0139-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$4,050
52	18-0145-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$30,000
53	18-0156-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$1,100
54	18-0160-MC-18	Open Health, LLC 1113 Mississippi St. Louis, MO 63104-2469	30-0342649		\$27,353
55	18-0165-MC-18	Suzanne Hansford-Bowles 1109 South Glenwood Avenue Columbia, MO 65203-2876			\$619
56	18-0178-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$3,450
57	18-0179-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$30,000
58	18-0185-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$3,700
59	18-0191-MC-18	Grant Writing Training Foundation Po Box 7590 Goodyear, AZ 85338-0644	331178568	501(c)(3)	\$25,000

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60	18-0192-MC-18	Rebecca Scott 1239 Moccasin Road McPherson, KS 67460-8075			\$7,000
61	18-0193-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$2,900
62	18-0201-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$67,500
63	18-0202-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$25,200
64	18-0213-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$60,000
65	18-0216-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$4,375
66	18-0218-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$3,600
67	18-0223-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$10,285
68	18-0224-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$15,000
69	18-0273-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$7,140
70	18-0284-MC-18	Ray & Associates LLC P. O. Box 7608 Cave Creek, AZ 85327-7608			\$6,000
71	18-0321-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$19,200

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72	18-0322-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$680
73	18-0327-MC-18	Blackmon Accounting & Consulting 1448 Mill Point Court Lawrenceville, GA 30043-9111	43-1937168		\$16,820
74	18-0328-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$34,913
75	18-0339-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$4,000
76	18-0344-MC-18	Simply Strategy 730 Greeley Avenue St. Louis, MO 63119-1943	26-2845601		\$38,350
77	18-0346-MC-18	Ramona Ellen King 7430 Mercier Kansas City, MO 64114-1553			\$8,000
78	18-0348-MC-18	Pick Strategies, LLC 450 Conway Village Drive St. Louis, MO 63141-5804			\$5,889
79	18-0352-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$22,500
80	18-0353-MC-18	Peggy North-Jones 1326 Dietrich Oaks Drive Ballwin, MO 63021			\$500
81	18-0361-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$12,835
82	18-0362-MC-18	Bev Browning, LLC PO Box 7590 Goodyear, AZ 85338-0644	83-1011997		\$32,000
83	18-0367-MC-18	Bev Browning, LLC PO Box 7590 Goodyear, AZ 85338-0644	83-1011997		\$17,500

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84	18-0370-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$20,250
85	18-0372-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$28,200
86	18-0377-MC-18	Teresa Wilke 3726 Old Hopper Road Cape Girardeau, MO 63701-3425			\$21,875
87	18-0379-MC-18	Bev Browning, LLC PO Box 7590 Goodyear, AZ 85338-0644	83-1011997		\$15,500
88	18-0394-MC-18	Community Asset Builders 2412 Hyde Park Suite B Jefferson City, MO 65109-4781	43 1927151		\$30,000
89	18-0403-MC-18	Jezreel Consulting, LLC 4206 Shaw Blvd. St. Louis, MO 63110-3527	81-3869484		\$10,200
89		Total Missouri Capture			\$1,219,120
2018 Count	Reference Number	Opportunity Fund			Amount
na	17-0261-OF-17	St. Louis College of Pharmacy 4588 Parkview Place St. Louis, MO 63116	430652675	501(c)(3)	{ \$744 }
1	17-0044-OF-18	CareSTL Health 5471 Dr. Martin Luther King Dr St. Louis, MO 63112-4265	430917230	501(c)(3)	\$250,000
2	17-0280-OF-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$47,499
3	17-0297-OF-18	Mission: St. Louis 3108 N Grand Blvd Saint Louis, MO 63107-2502	208983607	501(c)(3)	\$131,542
4	17-0344-OF-18	Share Pregnancy and Infant Loss Support, Inc. 402 Jackson Street St. Charles, MO 63301-3468	371282573	501(c)(3)	\$224,679

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5	17-0369-OF-18	International Institute of Metropolitan St. Louis 3401 Arsenal Street St. Louis, MO 63118-2001	430652640	501(c)(3)	\$298,012
6	17-0370-OF-18	Jordan Valley Family Health Foundation 440 E Tampa St Springfield, MO 65806-1131	821901945	501(c)(3)	\$1,518,140
7	17-0386-OF-18	Christian Action Ministries 610 South 6th Street, Ste. 102 Branson, MO 65616-2813	431355905	501(c)(3)	\$227,710
8	17-0387-OF-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$201,067
9	17-0395-OF-18	Jefferson County Health Department 405 Main Street Hillsboro, MO 63050-4351	43-1390883	Government	\$284,113
10	17-0433-OF-18	Perry County Senior Citizens 4 North Spring Perryville, MO 63775-2039	431423078	501(c)(3)	\$190,490
11	17-0441-OF-18	Family Care Health Centers 401 Holly Hills Avenue St. Louis, MO 63111-2410	237076112	501(c)(3)	\$514,944
12	17-0442-OF-18	Justine Petersen Housing And Reinvestment Corporation 1023 N Grand Blvd Saint Louis, MO 63106-1641	431769074	501(c)(3)	\$471,015
13	17-0462-OF-18	The Salvation Army - Midland Division 1130 Hampton Avenue St. Louis, MO 63139-3147	440545998	501(c)(3)	\$936,591
14	17-0472-OF-18	Community Builders Network Of Metro St Louis One University Boulevard, 461 SSB Saint Louis, MO 63121-4400	800847990	501(c)(3)	\$72,388
15	17-0475-OF-18	IFF Southern Region 911 Washington Avenue Suite 203 St. Louis, MO 63101-1208	363656836	501(c)(3)	\$36,500

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16	17-0476-OF-18	Urban Strategies, Inc. 720 Olive Street, Suite 2600 St. Louis, MO 63103-2315	431141027	501(c)(3)	\$229,942
17	17-0552-OF-18	GlobalHack 911 Washington Ave, Suite 657 St. Louis, MO 63101-1212	46-3747215	501(c)(3)	\$79,184
18	17-0574-OF-18	Whole Kids Outreach 62143 Hwy 21 Ellington, MO 63638-7703	431839370	501(c)(3)	\$498,199
19	17-0582-OF-18	University of Missouri - St. Louis Office of Research Administration 341 Woods Hall One University Boulevard St. Louis, MO 63121-4400	436003859	501(c)(3)	\$318,758
20	17-0654-OF-18	Beyond Housing 6506 Wright Way Pine Lawn, MO 63121-3209	510179471	501(c)(3)	\$0
21	18-0028-OF-18	Saint Louis Effort for AIDS 820 N Plankinton Ave Milwaukee, WI 53203-1802	391534049	501(c)(3)	\$1,699,815
22	18-0043-OF-18	Bi-State Development Research Institute 211 North Broadway, Suite 700 St. Louis, MO 63102-2759	471116768	501(c)(3)	\$20,000
23	18-0088-OF-18	Big Brothers Big Sisters of Eastern Missouri 501 North Grand, Suite 100 St. Louis, MO 63103	430669085	501(c)(3)	\$763,195
24	18-0130-OF-18	ORS Impact 1100 Olive Way, Suite 1350 Seattle, WA 98101	91-1588023		\$154,500
25	18-0136-OF-18	City of St. Louis 1200 Market St. Room 200 St. Louis, MO 63103-2877	43-6003231	Government	\$300,000
26	18-0283-OF-18	The Rippel Foundation 14 Maple Ave Morristown, NJ 07960-5451	221559427	501(c)(3)	\$300,000

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27	18-0009-OF-18	SWMO Coalition Against Human Trafficking 712 South Main Street Joplin, MO 64801-4502	272523416	501(c)(3)	\$5,000
28	18-0033-OF-18	Neighborhood Funders Group 436 14Th St Ste 425 Oakland, CA 94612-2728	61368627	501(c)(3)	\$10,000
29	18-0058-OF-18	Catholic Charities of Central and Northern Missouri 2201 West Main Street Jefferson City, MO 65109-0914	45-2395310	501(c)(3)	\$9,066
30	18-0164-OF-18	University of Missouri - Columbia P.O. Box 56 Columbia, MO 65205	436003859	501(c)(3)	\$7,500
30		Total Opportunity Fund			\$9,799,105
2018 Count	Reference Number	Oral Health			Amount
na	13-0703-OH-13	State of Missouri 920 Wildwood Dr. Jefferson City, MO 65109-5796	44-6000987	Government	(\$2,123)
na	13-0717-OH-14	Skaggs Community Hospital Association PO Box 650 Branson, MO 65615-0650	440584290	501(c)(3)	(\$154,096)
na	13-0718-OH-14	Burrell Inc 1300 Bradford Parkway Springfield, MO 65804-4264	431081715	501(c)(3)	(\$9,722)
0		Total Oral Health			(\$165,445)
2018 Count	Reference Number	Preventing Unintended Pregnancy			Amount
1	18-0296-PUP-18	Mathematica Policy Research 955 Massachusetts Avenue, Suite 801 Cambridge, MA 02139-3226	22-2112296		\$934,606
2	18-0297-PUP-18	Power to Decide 1201 New York Ave Nw Ste 900 Washington, DC 20005-6100	521974611	501(c)(3)	\$1,800,000

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		(a) Name and address of organization or government	(b) EIN	(c) IRC Section	(d) Amount of cash grant
3	18-0299-PUP-18	Missouri Family Health Council, Inc. 1909 Southridge Drive P.O. Box 104475 Jefferson City, MO 65110-4475	431266696	501(c)(3)	\$8,450,000
3		Total Preventing Unintended Pregnancy			\$11,184,606
2018 Count	Reference Number	Special Projects			Amount
na	14-0030-SP-14	Share Pregnancy and Infant Loss Support, Inc. 402 Jackson Street St. Charles, MO 63301-3468	371282573	501(c)(3)	(\$20,732)
na	15-0072-SP-15	St. Anthony's Medical Center 10010 Kennerly Road St. Louis, MO 63128-2106	43-0980256	501(c)(3)	(\$147,799)
na	13-0368-SP-13	Urban League of Metropolitan St. Louis 3701 Grandel Square St. Louis, MO 63108-3627	43-0653605	501(c)(3)	(\$16,190)
na	13-0647-SP-13	Kenny Rogers Children's Center 300 Floyd Drive P.O. Box 608 Sikeston, MO 63801	237136099	501(c)(3)	(\$7,805)
na	15-0080-SP-15	Putnam County Memorial Hospital 1926 Oak Street Unionville, MO 63565-1180	43-0794461	Government	(\$136,360)
na	14-0643-SP-14	Phelps County Regional Medical Center 1000 West 10th Street Rolla, MO 65401-2905	436004435	501(c)(3)	(\$21,132)
na	16-0122-SP-16	Skaggs Foundation PO Box 650 545 N. Business Highway 65 Branson, MO 65616-4500	300107007	501(c)(3)	(\$8,457)
na	14-0591-SP-14	St Louis Childrens Hospital 4353 Clayton Avenue, Room 164 St. Louis, MO 63110-1077	430654870	501(c)(3)	(\$14,132)
0		Total Special Projects			(\$372,657)
2018 Count	Reference Number	Community Activities			Amount
na		Community Activities			\$275,440

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0		Total Community Activities			\$275,440
2018 Count	Reference Number	Technical Assistance			Amount
1	18-0094-TA-18	MWR Consulting LLC PO Box 410294 Saint Louis, MO 63141			\$1,500
2	18-0345-TA-18	Youthbridge Community Foundation 12977 N 40 Dr Ste 368 Saint Louis, MO 63141-8656	436064111	501(c)(3)	\$25,000
2		Total Technical Assistance			\$26,500

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2018 Count	Reference Number	Corinne Walentik Award			Amount
		Jamaa Birth Village			
		8 Church St.			
1	18-0393-CW-18	Ferguson, MO 63135	475592021	501(c)(3)	\$25,000
1		Total Corinne Walentik Award			\$25,000
236		Total Grants and Allocations			\$46,946,979