

EXTENDED TO NOVEMBER 15, 2019

Form 990-T

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

OMB No 1545-0687

2018

For calendar year 2018 or other tax year beginning and ending

Go to www.irs.gov/Form990T for instructions and the latest information

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

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

Department of the Treasury Internal Revenue Service

Check box if address changed

Exempt under section 501(c)(3) 03 408(e) 220(e) 408A 530(a) 529(a)

Print or Type

Name of organization (Check box if name changed and see instructions.) ST. LOUIS COMMUNITY FOUNDATION Number, street, and room or suite no. If a P.O. box, see instructions 2 OAK KNOLL PARK City or town, state or province, country, and ZIP or foreign postal code ST. LOUIS, MO 63105

Employer identification number (Employees' trust, see instructions) 43-6023126

Unrelated business activity code (See instructions) 525990

Book value of all assets at end of year 78,701,120.

F Group exemption number (See instructions.) G Check organization type 501(c) corporation 501(c) trust 401(a) trust Other trust

H Enter the number of the organization's unrelated trades or businesses 1 Describe the only (or first) unrelated trade or business here PASSTHROUGH INCOME FROM K-1 If only one, complete Parts I-V. If more than one, describe the first in the blank space at the end of the previous sentence, complete Parts I and II, complete a Schedule M for each additional trade or business, then complete Parts III-V.

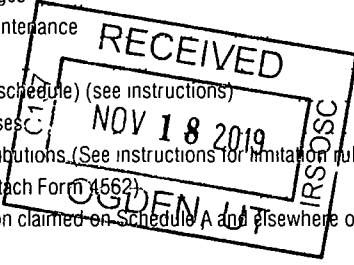
I During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? Yes No

J The books are in care of DWIGHT CANNING Telephone number 314-588-8200

Table with 4 columns: Part I Unrelated Trade or Business Income, (A) Income, (B) Expenses, (C) Net. Rows include Gross receipts or sales, Cost of goods sold, Capital gain net income, etc.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income)

Table with 4 columns: Line number, Description, Amount, and Sub-column. Rows include Compensation of officers, directors, and trustees; Salaries and wages; Charitable contributions; etc.



SCANNED JAN 07 2020

Part III Total Unrelated Business Taxable Income

Table with 3 columns: Line number, Description, and Amount. Line 33: -92,415. Line 36: -92,415. Line 37: 1,000. Line 38: -92,415.

Part IV Tax Computation

Table with 3 columns: Line number, Description, and Amount. Line 40: 0. Line 44: 0.

Part V Tax and Payments

Table with 3 columns: Line number, Description, and Amount. Line 46: 0. Line 48: 0. Line 49: 0. Line 51: 0. Line 53: 0. Line 54: 0. Line 55: 0.

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

Table with 3 columns: Question number, Question text, and Yes/No response. Question 56: No. Question 57: No. Question 58: \$.

Sign Here: Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge. Signature of officer: [Signature] Date: 11/6/19 Title: PRESIDENT & CEO

May the IRS discuss this return with the preparer shown below (see instructions)? [X] Yes [] No

Table with 4 columns: Print/Type preparer's name, Preparer's signature, Date, Check self-employed, PTIN, Firm's name, Firm's EIN, Firm's address, Phone no. Preparer: JOAN B. HUMES, CLIFTONLARSONALLEN LLP, 600 WASHINGTON AVENUE, SUITE 1800, ST. LOUIS, MO 63101.

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

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

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

(see instructions)

1 Description of property			
(1)			
(2)			
(3)			
(4)			
2 Rent received or accrued			
(a) From personal property (if the percentage of rent for personal property is more than 10% but not more than 50%)	(b) From real and personal property (if the percentage of rent for personal property exceeds 50% or if the rent is based on profit or income)	3(a) Deductions directly connected with the income in columns 2(a) and 2(b) (attach schedule)	
(1)			
(2)			
(3)			
(4)			
Total	0.	Total	0.
(c) Total income Add totals of columns 2(a) and 2(b) Enter here and on page 1, Part I, line 6, column (A)		(b) Total deductions Enter here and on page 1, Part I, line 6, column (B)	
0.		0.	

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

1 Description of debt-financed property		2 Gross income from or allocable to debt-financed property	3. Deductions directly connected with or allocable to debt-financed property	
			(a) Straight line depreciation (attach schedule)	(b) Other deductions (attach schedule)
(1)				
(2)				
(3)				
(4)				
4 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule)	5 Average adjusted basis of or allocable to debt-financed property (attach schedule)	6 Column 4 divided by column 5	7 Gross income reportable (column 2 x column 6)	8 Allocable deductions (column 6 x total of columns 3(a) and 3(b))
(1)		%		
(2)		%		
(3)		%		
(4)		%		
Totals			Enter here and on page 1, Part I, line 7, column (A)	Enter here and on page 1, Part I, line 7, column (B)
Total dividends-received deductions included in column 8			0.	0.

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

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

Nonexempt Controlled Organizations

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

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

Schedule G - Investment Income of a Section 501(c)(7), (9), or (17) Organization
(see instructions)

1 Description of income	2 Amount of income	3 Deductions directly connected (attach schedule)	4 Set-asides (attach schedule)	5 Total deductions and set-asides (col 3 plus col 4)
(1)				
(2)				
(3)				
(4)				
Enter here and on page 1, Part I, line 9, column (A)				Enter here and on page 1, Part I, line 9, column (B)
Totals		0.		0.

Schedule I - Exploited Exempt Activity Income, Other Than Advertising Income
(see instructions)

1 Description of exploited activity	2 Gross unrelated business income from trade or business	3 Expenses directly connected with production of unrelated business income	4 Net income (loss) from unrelated trade or business (column 2 minus column 3) If a gain, compute cols 5 through 7	5 Gross income from activity that is not unrelated business income	6 Expenses attributable to column 5	7 Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)						
(2)						
(3)						
(4)						
Enter here and on page 1, Part I, line 10, col (A)	Enter here and on page 1, Part I, line 10, col (B)					Enter here and on page 1, Part II, line 26
Totals	0.	0.				0.

Schedule J - Advertising Income (see instructions)

Part I Income From Periodicals Reported on a Consolidated Basis

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

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

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

Enter here and on page 1, Part I, line 11, col (A)

Enter here and on page 1, Part I, line 11, col (B)

Enter here and on page 1, Part II, line 27

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

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

FORM 990-T	INCOME (LOSS) FROM PARTNERSHIPS	STATEMENT	1
DESCRIPTION		NET INCOME OR (LOSS)	
RANDALL MFG. INVESTMENT HOLDINGS, LLC - ORDINARY BUSINESS INCOME (LOSS)		-1,456.	
PLYMOUTH STREET HOLDINGS, LLC - NET RENTAL REAL ESTATE INCOME		-82,619.	
TOTAL INCLUDED ON FORM 990-T, PAGE 1, LINE 5		-84,075.	

FORM 990-T	CONTRIBUTIONS	STATEMENT	2
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
CONTRIBUTIONS	N/A	5,523,142.	
TOTAL TO FORM 990-T, PAGE 1, LINE 20		5,523,142.	

FORM 990-T	OTHER DEDUCTIONS	STATEMENT	3
DESCRIPTION		AMOUNT	
LEGAL FEES		678.	
ACCOUNTING FEES		1,227.	
TOTAL TO FORM 990-T, PAGE 1, LINE 28		1,905.	

FORM 990-T

CONTRIBUTIONS SUMMARY

STATEMENT 4

CARRYOVER OF PRIOR YEARS UNUSED CONTRIBUTIONS

FOR TAX YEAR 2013	4,688,070
FOR TAX YEAR 2014	5,088,762
FOR TAX YEAR 2015	15,879,375
FOR TAX YEAR 2016	
FOR TAX YEAR 2017	8,211,210

TOTAL CARRYOVER	33,867,417
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TOTAL CURRENT YEAR 50% CONTRIBUTIONS	5,523,142
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TOTAL CONTRIBUTIONS AVAILABLE	39,390,559
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TAXABLE INCOME LIMITATION AS ADJUSTED	0
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EXCESS 50% CONTRIBUTIONS	39,390,559
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TOTAL EXCESS CONTRIBUTIONS	39,390,559
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ALLOWABLE CONTRIBUTIONS DEDUCTION	0
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TOTAL CONTRIBUTION DEDUCTION	0
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**SCHEDULE D
(Form 1041)**

Capital Gains and Losses

OMB No. 1545-0092

2018

Department of the Treasury
Internal Revenue Service

- ▶ Attach to Form 1041, Form 5227, or Form 990-T
- ▶ Use Form 8949 to list your transactions for lines 1b, 2, 3, 8b, 9 and 10
- ▶ Go to www.irs.gov/F1041 for instructions and the latest information

Name of estate or trust

Employer identification number

ST. LOUIS COMMUNITY FOUNDATION

43-6023126

Note Form 5227 filers need to complete only Parts I and II

Part I Short-Term Capital Gains and Losses-Generally Assets Held One Year or Less (See instructions)

See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part I, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars				
1 a Totals for all short-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions). However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 1b				
1 b Totals for all transactions reported on Form(s) 8949 with Box A checked				
2 Totals for all transactions reported on Form(s) 8949 with Box B checked				
3 Totals for all transactions reported on Form(s) 8949 with Box C checked				
4 Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824				4
5 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts				5
6 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2017 Capital Loss Carryover Worksheet				6 ()
7 Net short-term capital gain or (loss) Combine lines 1a through 6 in column (h). Enter here and on line 17, column (3) on page 2				7

Part II Long-Term Capital Gains and Losses-Generally Assets Held More Than One Year (See instructions)

See instructions for how to figure the amounts to enter on the lines below	(d) Proceeds (sales price)	(e) Cost (or other basis)	(g) Adjustments to gain or loss from Form(s) 8949, Part II, line 2, column (g)	(h) Gain or (loss) Subtract column (e) from column (d) and combine the result with column (g)
This form may be easier to complete if you round off cents to whole dollars.				
8 a Totals for all long-term transactions reported on Form 1099-B for which basis was reported to the IRS and for which you have no adjustments (see instructions) However, if you choose to report all these transactions on Form 8949, leave this line blank and go to line 8b				
8 b Totals for all transactions reported on Form(s) 8949 with Box D checked				
9 Totals for all transactions reported on Form(s) 8949 with Box E checked				
10 Totals for all transactions reported on Form(s) 8949 with Box F checked				
11 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824				11
12 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts				12
13 Capital gain distributions				13
14 Gain from Form 4797, Part I				14
15 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2017 Capital Loss Carryover Worksheet				15 (6,400.)
16 Net long-term capital gain or (loss) Combine lines 8a through 15 in column (h) Enter here and on line 18a, column (3) on page 2				16 -6,400.

Part III Summary of Parts I and II	(1) Beneficiaries'	(2) Estate's or trust's	(3) Total
<i>Caution: Read the instructions before completing this part</i>			
17 Net short-term gain or (loss)	17		
18 Net long-term gain or (loss).			
a Total for year	18a	-6,400.	-6,400.
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	18b		
c 28% rate gain	18c		
19 Total net gain or (loss) Combine lines 17 and 18	19	-6,400.	-6,400.

Note: If line 19, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 990-T, Part I, line 4a) If lines 18a and 19, column (2), are net gains, go to Part V, and don't complete Part IV. If line 19, column (3), is a net loss, complete Part IV and the Capital Loss Carryover Worksheet, as necessary

Part IV Capital Loss Limitation	20
20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I, line 4c, if a trust), the smaller of: a The loss on line 19, column (3) or b \$3,000	(3,000.)

Note: If the loss on line 19, column (3), is more than \$3,000, or if Form 1041, page 1, line 22 (or Form 990-T, line 38), is a loss, complete the Capital Loss Carryover Worksheet in the instructions to figure your capital loss carryover

Part V Tax Computation Using Maximum Capital Gains Rates	21	22	23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
Form 1041 filers Complete this part only if both lines 18a and 19 in column (2) are gains, or an amount is entered in Part I or Part II and there is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more than zero																									
Caution Skip this part and complete the Schedule D Tax Worksheet in the instructions if: • Either line 18b, col (2) or line 18c, col (2) is more than zero, or • Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero																									
Form 990-T trusts Complete this part only if both lines 18a and 19 are gains, or qualified dividends are included in income in Part I of Form 990-T, and Form 990-T, line 38, is more than zero. Skip this part and complete the Schedule D Tax Worksheet in the instructions if either line 18b, col. (2) or line 18c, col. (2) is more than zero																									
21 Enter taxable income from Form 1041, line 22 (or Form 990-T, line 38)																									
22 Enter the smaller of line 18a or 19 in column (2) but not less than zero																									
23 Enter the estate's or trust's qualified dividends from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T)																									
24 Add lines 22 and 23																									
25 If the estate or trust is filing Form 4952, enter the amount from line 4g; otherwise, enter -0-																									
26 Subtract line 25 from line 24. If zero or less, enter -0-																									
27 Subtract line 26 from line 21. If zero or less, enter -0-																									
28 Enter the smaller of the amount on line 21 or \$2,600																									
29 Enter the smaller of the amount on line 27 or line 28																									
30 Subtract line 29 from line 28. If zero or less, enter -0-. This amount is taxed at 0%																									
31 Enter the smaller of line 21 or line 26																									
32 Subtract line 30 from line 26																									
33 Enter the smaller of line 21 or \$12,700																									
34 Add lines 27 and 30																									
35 Subtract line 34 from line 33. If zero or less, enter -0-																									
36 Enter the smaller of line 32 or line 35																									
37 Multiply line 36 by 15% (0.15)																									
38 Enter the amount from line 31																									
39 Add lines 30 and 36																									
40 Subtract line 39 from line 38. If zero or less, enter -0-																									
41 Multiply line 40 by 20% (0.20)																									
42 Figure the tax on the amount on line 27. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)																									
43 Add lines 37, 41, and 42																									
44 Figure the tax on the amount on line 21. Use the 2018 Tax Rate Schedule for Estates and Trusts (see the Schedule G instructions in the instructions for Form 1041)																									
45 Tax on all taxable income Enter the smaller of line 43 or line 44 here and on Form 1041, Schedule G, line 1a (or Form 990-T, line 40)																									

SCHEDULE D	CAPITAL LOSS CARRYOVER WORKSHEET	STATEMENT	5
1.	ENTER THE AMOUNT FROM FORM 990-T, LINE 38	-92,415	
2.	ENTER THE LOSS FROM SCHEDULE D, LINE 20, AS A POSITIVE AMT . .	3,000	
3.	COMBINE LINES 1 AND 2. IF ZERO OR LESS, ENTER -0-	0	
4.	ENTER THE SMALLER OF LINE 2 OR LINE 3	0	
NOTE: IF LINE 7 OF SCHEDULE D IS A LOSS, GO TO LINE 5; OTHERWISE, ENTER -0- ON LINE 5 AND GO TO LINE 9.			
5.	ENTER THE LOSS FROM SCH D, LINE 7, AS A POSITIVE AMOUNT . . .	0	
6.	ENTER ANY GAIN FROM SCHEDULE D, LINE 16	0	
7.	ADD LINES 4 AND 6	0	
8.	SHORT-TERM CAPITAL LOSS CARRYOVER TO 2019. SUBTRACT LINE 7 FROM LINE 5. IF ZERO OR LESS, ENTER -0-	0	
NOTE: IF LINE 16 OF SCHEDULE D IS A LOSS, GO TO LINE 9; OTHERWISE, SKIP LINES 9 THROUGH 13.			
9.	ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMT . .	6,400	
10.	ENTER ANY GAIN FROM SCHEDULE D, LINE 7	0	
11.	SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0-	0	
12.	ADD LINES 10 AND 11	0	
13.	LONG-TERM CAPITAL LOSS CARRYOVER TO 2019. SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0-	6,400	