EXTENDED TO NOVEMBER 16, 2020

1

SCANNED

	till/ Total Unrelated Business Taxable Income	43-602	J 1 4 1
32	fotal of unrelated business taxable income computed from all unrelated trades or businesses (see instructions)	32	
33	Amounts paid for disallowed fringes Charitable contributions (see instructions for limitation rules) STMT 4 STMT 5	34	
34	onal rability of the first fir		
35	Total unrelated business taxable income before pre-2018 NOLs and specific deduction Subtract line 34 from the sum of lines 32 and 33		
36	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instructions)	36	
37	Total of unrelated business taxable income before specific deduction. Subtract line 36 from line 35	37	1 1
38	Specific deduction (Generally \$1,000, but see line 38 instructions for exceptions)	38	1,
39	Unrelated business taxable income. Subtract line 38 from line 37. If line 38 is greater than line 37,	1	
<u> </u>	enter the smaller of zero or line 37	39	-
	t IV Tax Computation		
40	Organizations Taxable as Corporations. Multiply line 39 by 21% (0.21)	▶ 40	
41	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 39 from:	ļ	
	X Tax rate schedule or Schedule D (Form 1041)	► <u>41</u>	
42	Proxy tax. See instructions	► 42 <u> </u>	
43	Alternative minimum tax (trusts only)	43	
44	Tax on Noncompliant Facility Income. See Instructions	44	
45	Total. Add lines 42, 43, and 44 to line 40 or 41, whichever applies	. 45	
Par			
46 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	-	
b	Other credits (see instructions) 46b	_	
C	General business credit. Attach Form 3800	_	
d	Credit for prior year minimum tax (attach Form 8801 or 8827)		
е	Total credits. Add lines 46a through 46d	46e	
47	Subtract line 46e from line 45	47	
48	Other taxes. Check if from: Form 4255 Form 8611 Form 8697 Form 8866 Other (attach schedule	e) 48	
49	Total tax. Add lines 47 and 48 (see instructions)	49	
50	2019 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 3	50	
51 a	Payments: A 2018 overpayment credited to 2019		
b	2019 estimated tax payments 51b		
C	Tax deposited with Form 8868		
ď	Foreign organizations: Tax paid or withheld at source (see instructions) 51d		
e	Backup withholding (see instructions) 51e		
f	Credit for small employer health insurance premiums (attach Form 8941) 51f		
	Other credits, adjustments, and payments: Form 2439		
·	☐ Form 4136 ☐ Other ☐ Total ► 51g		
52	Total payments. Add lines 51a through 51g	52	
53	Estimated tax penalty (see instructions). Check if Form 2220 is attached	53	
54	Tax due. If line 52 is less than the total of lines 49, 50, and 53, enter amount owed	▶ 54	
55	Overpayment. If line 52 is larger than the total of lines 49, 50, and 53, enter amount overpaid	55	
56	Enter the amount of line 55 you want: Credited to 2020 estimated tax	56	
	t VI Statements Regarding Certain Activities and Other Information (see instructions)		
57	At any time during the 2019 calendar year, did the organization have an interest in or a signature or other authority		Yes
01	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization may have to file		168
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the foreign country		
	here		
58	During the tax year, glid the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust?		·
90	· n		<u> </u>
EU	If "Yes," see instructions for other forms the organization may have to file. Enter the amount of tax-exempt interest received or accrued during the tax year \$		1
		wledge and helief it in	true
Cian	Under penalties of perjury, dectare that I have examined this return, including accompanying schedules and statements, and to the best of my know correct, and compete Dectaration of preparer (original than taxpayer) is based on all information of which preparer has any knowledge		
211111		May the IRS discuss t	
Sign Here	TRESIDENT & CHO	the preparer shown be	
Here			
_	Sygnature of officer Date Title	instructions)?	res
_	Print/Type preparer's name Preparer's signature Date Check	if PTIN	Yes
_	Print/Type preparer's name Preparer's signature Date Check self- employe	ıf PTIN ed	
Here	Print/Type preparer's name Preparer's signature Date Check self- employe Darer JOAN B. HUMES JOAN B. HUMES 11/10/20	ıf PTIN ed P0094	3331
Paid Pre	Print/Type preparer's name Preparer's signature Date Check self- employe	ıf PTIN ed P0094	3331

Schedule A - Cost of Goods	Sold. Enter	method of invent	tory v	aluation > N/A					
1 Inventory at beginning of year	1		6	Inventory at end of year	r		6		
2 Purchases	2		7 Cost of goods sold. Subtract line 6			ine 6			
3 Cost of labor	3]	from line 5. Enter here	and in F	Part I,]	
4a Additional section 263A costs				line 2			. 7.	<u> </u>	
(attach schedule)	4a	<u> </u>	8	Do the rules of section	263A (v	with respect to		Yes	No
b Other costs (attach schedule)	4b			property produced or a	cquired	for resale) apply to			
5 Total. Add lines 1 through 4b	5			the organization?					
Schedule C - Rent Income ((see instructions)	From Real	Property and	Per	sonal Property L	ease	d With Real Prope	erty)	•	
1. Description of property									
(1)									
(2)									
(3)									
(4)									
		ed or accrued				3(a) Deductions directly	connec	ted with the income in	
(a) From personal property (if the perc rent for personal property is more 10% but not more than 50%)	centage of than	of rent for p	ersonal	onal property (if the percentag property exceeds 50% or if ed on profit or income)	ge	columns 2(a) an	d 2(b) (attach schedule)	•
(1)							_		
(2)									
(3)									
(4)								-	
Total	0.	Total			0.				
(c) Total income. Add totals of columns here and on page 1, Part I, line 6, column	(A)	•			0.	(b) Total deductions. Enter here and on page 1, Part I, line 6, column (B)	>		0.
Schedule E - Unrelated Deb	t-Financed	Income (see	ınstru	ctions)					
			2	. Gross income from or allocable to debt-		3. Deductions directly conr to debt-finance	ected ed prop	perty	
1. Description of debt-fir	nanced property			financed property	(a)	Straight line depreciation (attach schedule)		(b) Other deduction (attach schedule)	S
(1)							1		
(2)							T		
(3)							ĺ		
(4)									
 Amount of average acquisition debt on or allocable to debt-financed property (attach schedule) 	of or a debt-fina	adjusted basis allocable to nced property n schedule)	•	Column 4 divided by column 5		7. Gross income reportable (column 2 x column 6)		8. Allocable deductr (column 6 x total of co 3(a) and 3(b))	
(1)				%					
(2)				%					
(3)				%					
(4)				%					
						nter here and on page 1, Part I, line 7, column (A)		Enter here and on page Part I, line 7, column (
Totals				•		0 .			0.
Total dividends-received deductions	icluded in column	n 8		- 1					0.

Schedule F - Interest,	<u>Annuitie</u>	s, Royal	ties, an	d Rents	From Co	ntrolle	d Organiza	ations	(see ins	struction	5)
				Exempt (Controlled O	rganızat	ions				
Name of controlled organiz	ation ,	2. Em identifi num	cation	3. Net unr (loss) (see	elated income instructions)		tal of specified ments made	ınclud	t of column 4 ed in the contr ation's gross i	rolling	6. Deductions directly connected with income in column 5
(1)				<u></u>				┼			
(2)								 	,		
(3)				_		~	•	<u> </u>			
(4)											
Nonexempt Controlled Organ	nzations	<u> </u>								<u> </u>	
7 Taxable Income	1	nrelated incon	no (loco)	O Total	of specified pays	nonto	10. Part of colu	mn O tha	t io included	11 Do	dustions directly consected
/ Taxable Income		see instruction		9 , 10tas	made	nens	in the controll	ing orgar s income	uzation's	with	ductions directly connected income in column 10
_(1)											
(2)	<u> </u>				•						
(3)	<u> </u>					-					
(4)	 										
_(4)				1			Add colur	nns 5 an	d 10	Ad	d columns 6 and 11
		,					Enter here and		1, Part I,	Enterh	ere and on page 1, Part I, line 8, column (B)
Totals						•	İ		0.		0.
Schedule G - Investm	ent Incor	ne of a S	Section	501(c)(7	'). (9). or (17) Or	ganization				
	structions)			(-)(.	,, (-), -: (,	J				
							3. Deduction		4. Set-		5. Total deductions
1. De	scription of inco	me			2. Amount of	income	directly conne (attach sched			schedule)	and set-asides (cot 3 plus cot 4)
(1)							,				,
(2)											
(3)											
(4)											···
					Enter here and	on pago 1	masagnifássgannýmassann	TOWNSHIND STORE OF THE PARTY OF	1 Amaiihannannannasiii	iancijancini e e e e	Enter here and on page 1
					Part I, line 9 co		trapith marcanado				Part I, line 9, column (B)
Totale				_		0.		ight. W	1-1/3- 1		0.
Schedule I - Exploited	l Evemnt	Activity	Income	Other	Than Adv			., , , ,	· · · · · · · · · · · · · · · · · · ·		<u> </u>
•	ructions)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,			.9				
(444	1		3 5		4 Net incon	ne (loss)			<u> </u>		7 5
1. Description of exploited activity	unrelated incom	Gross I business ne from business	directly of with pro of uni	penses connected oduction related s income	from unrelated business (co minus colum gain, comput through	trade or olumn 2 n 3) If a e cols 5	5. Gross income from activity is not unrelated business income.	that ted	attribut	penses able to mn 5	7. Excess exempt expenses (column 6 minus column 5, but not more than column 4)
(1)											
(2)											
(3)							·		ĺ		
(4)	1										
	page 1	re and on i, Part I, col (A)	page 1	re and on I, Part I, col (B)							Enter here and on page 1, Part II, line 25
Totals	<u>-</u>	0.		0.				<u> </u>		<u>~~~~~</u>	0.
Schedule J - Advertis			nstruction								
Rart I Income From	Periodic	als Rep	orted o	n a Con	solidated	Basis					
1 Name of periodical		2. Gross advertising income		3. Direct ertising costs	or (loss) (c col 3) If a g	tising gain ol 2 minus ain, compu arough 7			6. Read		7. Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)			<u> </u>		44.7	* 70 m	*				
(2)			+		\dashv				 		
(3)			_						 -		
							79. Ka		 		
_(4)			+		\$500 SERVICE	and the second	346				TANK TO MEN THE PROPERTY SERVINGS
Totals (carry to Part II, line (5))	•		o.	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.)

		,,	<u> </u>				
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	Excess readership costs (column 6 minus column 5, but not more than column 4)
(1)	,,,,						
(2)			,				
(3)		<u></u>					
(4)							
Totals from Part I	•	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 26
Totals, Part II (lines 1-5)	▶	0.	0.				0.
Schedille K - Compan	cation	of Officers	Directors and	Tructoon /	-4		

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

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

Form 990-T (2019)

FORM 990-T	IN	ICOME (LOSS)	FROM PA	RTNERSHIPS	STATEMENT 1
DESCRIPTION	I				NET INCOME OR (LOSS)
PLYMOUTH ST INCOME	82,520				
TOTAL INCLU	82,520				
FORM 990-T		OTHER	DEDUCTI	ONS	STATEMENT 2
DESCRIPTION	ī				AMOUNT
LEGAL FEES ACCOUNTING	FEES				276 9 4 0
ACCOUNTING	FEES ORM 990-T, PAGE	1, LINE 27			
ACCOUNTING	ORM 990-T, PAGE	1, LINE 27	IG LOSS D	EDUCTION	940
ACCOUNTING TOTAL TO FO	ORM 990-T, PAGE	IET OPERATIN LOS PREVIO	SS DUSLY	EDUCTION LOSS REMAINING	1,216
ACCOUNTING TOTAL TO FO	DRM 990-T, PAGE	LOS PREVIO APPL	SS DUSLY	LOSS	940 1,216 STATEMENT 3 AVAILABLE

FORM 990-T	CONTRIBUTIONS	STATEMENT 4	
DESCRIPTION/KIND OF PROPERTY	METHOD USED TO DETERMINE FMV	AMOUNT	
CONTRIBUTIONS	N/A	4,046,173.	
TOTAL TO FORM 990-T, PAGE 2, L	INE 34	4,046,173.	

FORM 990-T	CONTRIBUTIONS SUMMARY		STATEMENT 5
CARRYOVER OF PRIOR YEARS U	NUSED CONTRIBUTIONS -	60% LIMIT	
FOR TAX YEAR 2018			
TOTAL CARRYOVER TOTAL CURRENT YEAR 60% CON	TRIBUTIONS		
TOTAL CONTRIBUTIONS AVAILAD TAXABLE INCOME LIMITATION		0	
EXCESS 60% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS		0 0	
ALLOWABLE CONTRIBUTIONS DE	DUCTION		0
TAXABLE INCOME FOR LIMITAT	ION AFTER 60% CONTRIBU	TIONS	-14,629
CARRYOVER OF PRIOR YEARS U	NUSED CONTRIBUTIONS -	50% LIMIT	
FOR TAX YEAR 2014 FOR TAX YEAR 2015 FOR TAX YEAR 2016	5,088,762 15,879,375		
FOR TAX YEAR 2017 FOR TAX YEAR 2018	8,211,210 5,523,142		
TOTAL CARRYOVER TOTAL CURRENT YEAR 50% CON	TRIBUTIONS	34,702,489 4,046,173	
TOTAL CONTRIBUTIONS AVAILAD TAXABLE INCOME LIMITATION A		38,748,662	
EXCESS 50% CONTRIBUTIONS TOTAL EXCESS CONTRIBUTIONS		38,748,662 38,748,662	
ALLOWABLE CONTRIBUTIONS DE	DUCTION		0
TOTAL CONTRIBUTION DEDUCTION	ON	_	0

SCHEDULE I (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Alternative Minimum Tax - Estates and Trusts

► Attach to Form 1041.

► Go to www.irs.gov/Form1041 for instructions and the latest information.

OMB No 1545-0092

2019

Employer identification number

ST. LOUIS COMMUNITY FOUNDATION 43-6023126 Part I Estate's or Trust's Share of Alternative Minimum Taxable Income Adjusted total income or (loss) (from Form 1041, line 17) ESBTs, see instructions 1 2 Interest 2 3 Taxes 3 Refund of taxes 4 Depletion (difference between regular tax and AMT) 5 SEE STATEMENT 6 74,786. Net operating loss deduction. Enter as a positive amount 6 6 7 Interest from specified private activity bonds exempt from the regular tax 7 Qualified small business stock (see instructions) R 8 Exercise of incentive stock options (excess of AMT income over regular tax income) 9 9 Other estates and trusts (amount from Schedule K-1 (Form 1041), box 12, code A) 10 10 6,400. Disposition of property (difference between AMT and regular tax gain or loss) 11 11 Depreciation on assets placed in service after 1986 (difference between regular tax and AMT) 12 12 13 Passive activities (difference between AMT and regular tax income or loss) 13 Loss limitations (difference between AMT and regular tax income or loss) 14 14 Circulation costs (difference between regular tax and AMT) 15 15 Long-term contracts (difference between AMT and regular tax income) 16 16 17 Mining costs (difference between regular tax and AMT) 17 Research and experimental costs (difference between regular tax and AMT) 18 18 Income from certain installment sales before January 1, 1987 19 19 Intangible drilling costs preference 20 20 21 Other adjustments, including income-based related adjustments 21 73,067.) 22 Alternative tax net operating loss deduction (See the instructions for the limitation that applies) 22 STATEMENT 7 119 Adjusted alternative minimum taxable income. Combine lines 1 through 22 23 23 Note: Complete Part II below before going to line 24. N/A STATEMENT 8 24 Income distribution deduction from Part II, line 42 N/A Estate tax deduction (from Form 1041, line 19) 26 26 Add lines 24 and 25 8,119. 27 Estate's or trust's share of alternative minimum taxable income Subtract line 26 from line 23 27 If line 27 is \$25,000 or less, stop here and enter -0- on Form 1041, Schedule G, line 1c. The estate or trust isn't liable for the alternative minimum tax. Over \$25,000, but less than \$183,500, go to line 43 \$183,500 or more, enter the amount from line 27 on line 49 and go to line 50 ESBTs, see instructions Part II Income Distribution Deduction on a Minimum Tax Basis N/A

28	Adjusted alternative minimum taxable income (see instructions)	28	
29	Adjusted tax-exempt interest (other than amounts included on line 7)	_29	
30	Total net gain from Schedule D (Form 1041), line 19, column (1). If a loss, enter -0-	30	
31	Capital gains for the tax year allocated to corpus and paid or permanently set aside for charitable		
	purposes (from Form 1041, Schedule A, line 4)	31	
32	Capital gains paid or permanently set aside for charitable purposes from gross income (see instructions)	32	
33	Capital gains computed on a minimum tax basis included on line 23	33	()
34	Capital losses computed on a minimum tax basis included on line 23. Enter as a positive amount	34	
35	Distributable net alternative minimum taxable income (DNAMTI) Combine lines 28 through 34 If zero		
	or less, enter -0-	35	
36	Income required to be distributed currently (from Form 1041, Schedule B, line 9)	36	
37	Other amounts paid, credited, or otherwise required to be distributed (from Form 1041, Schedule B, line 10)	37	
38	Total distributions. Add lines 36 and 37	38	
39	Tax-exempt income included on line 38 (other than amounts included on line 7)	. 39	
40	Tentative income distribution deduction on a minimum tax basis. Subtract line 39 from line 38	. 40	

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule I (Form 1041) (2019).

Sch	edule I (Form 1041) (2019) ST. LOUIS COMMUNITY FOUNDAT	43	43-6023126 Page 2		
_	rt II Income Distribution Deduction on a Minimum Tax Basis	N/A			
41	Tentative income distribution deduction on a minimum tax basis. Subtract line 29	•			
	If zero or less, enter -0-			41	
42	Income distribution deduction on a minimum tax basis. Enter the smaller of lin				
	Enter here and on line 24	42			
Pa	rt.IIIs Alternative Minimum Tax				
43	Exemption amount			43	\$25,000
44	Enter the amount from line 27	44		. 5.	•
45	Phase-out of exemption amount	45	\$83,500	25.22	
46	Subtract line 45 from line 44 If zero or less, enter -0-	46			
47	Multiply line 46 by 25% (0 25)			47	
48	Subtract line 47 from line 43 If zero or less, enter -0-			48	
	Subtract line 48 from line 44			49	and the same the section of the section of
50	Go to Part IV of Schedule I to figure line 50 if the estate or trust has qualified dividends or ha	-			
	of column (2) of Schedule D (Form 1041) (as refigured for the AMT, if necessary). Otherwise	e, if line	49 is:		
	• \$194,800 or less, multiply line 49 by 26% (0 26)				
	 Over \$194,800, multiply line 49 by 28% (0 28) and subtract \$3,896 from the result. 	ılt		50	
	Alternative minimum foreign tax credit (see instructions)			51	
	Tentative minimum tax Subtract line 51 from line 50			52	*****
	Enter the tax from Form 1041, Schedule G, line 1a (minus any foreign tax credit fro		•	53	
54	Alternative minimum tax. Subtract line 53 from line 52. If zero or less, enter -0-	54			
Pä	Form 1041, Schedule G, line 1c ├───────────────────────────────────	25		. 1 34 1	
K1.0	Caution: If you didn't complete Part V of Schedule D (Form 1041), the Schedule D		Vorksheet		
	or the Qualified Dividends Tax Worksheet in the Instructions for Form 1041, see the				
	before completing this part	10 111311	actions		
55	Enter the amount from line 49			55	
	Enter the amount from line 26 of Schedule D (Form 1041), line 13 of the Schedule D Tax			1/2	
	Worksheet, or line 4 of the Qualified Dividends Tax Worksheet in the Instructions for				
	Form 1041, whichever applies (as refigured for the AMT, if necessary)	56		3,41	
57	Enter the amount from Schedule D (Form 1041), line 18b, column (2)				
	(as refigured for the AMT, if necessary). If you didn't complete	l		253	
	Schedule D for the regular tax or the AMT, enter -0-	57			
58	If you didn't complete a Schedule D Tax Worksheet for the regular tax or the	1		,	
	AMT, enter the amount from line 56 Otherwise, add lines 56 and 57 and enter		3	27	
	the smaller of that result or the amount from line 10 of the Schedule D Tax			数 次多	
	Worksheet (as refigured for the AMT, if necessary)	58			
59	Enter the smaller of line 55 or line 58			59	
60	Subtract line 59 from line 55			60	
61	If line 60 is \$194,800 or less, multiply line 60 by 26% (0.26) Otherwise, multiply line	e 60 b	y		
	28% (0 28) and subtract \$3,896 from the result	۱	J	► 61 >, 3	
	Maximum amount subject to the 0% rate	62	\$2,650		
63	Enter the amount from line 27 of Schedule D (Form 1041), line 14 of the Schedule D				
	Tax Worksheet, or line 5 of the Qualified Dividends Tax Worksheet in the Instructions			Ç.	
	for Form 1041, whichever applies (as figured for the regular tax). If you didn't				
	complete Schedule D or either worksheet for the regular tax, enter the amount	62			
GA.	from Form 1041, line 23; if zero or less, enter -0-	63 64			
64 65	Subtract line 63 from line 62. If zero or less, enter -0- Enter the smaller of line 55 or line 56	65			
66	Enter the smaller of line 55 or line 56 Enter the smaller of line 64 or line 65. This amount is taxed at 0%	66			
67	Subtract line 66 from line 65	67			
	2 12-13-19		_ -	Schedu	le I (Form 1041) (2019)

83 Enter the smaller of line 81 or line 82 here and on line 50

Schedule I (Form 1041) (2019)

SCHEDULE I	NET OP	ERATING LOSS CARRYOVER	STATEMENT 6
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	AMOUNT
12/31/18	89,415.	0.	89,415.
TOTAL TO SO	CHEDULE I, LINE 6		89,415.

SCHEDULE I	ALTERNAT]	VE MINIMUM TAX NOL CARRYOVER	STATEMENT 7
TAX YEAR	LOSS SUSTAINED	LOSS PREVIOUSLY APPLIED	AMOUNT
12/31/18	89,415.	0.	89,415.
	SCHEDULE I, LINE 23 CT TO LIMITATION		89,415.

SCHEDULE I		K NET OPERATING I O COMPUTATION OF		STATEMENT 8	
DESCRIPTION		TOTAL AMT NOL CARRYFORWARD	AMT NOL USED THIS YEAR	UNUSED AMT NOL CARRYFORWARD	
AMT NOL CARRYFORWARD		89,415.	73,067.	16,348.	
TOTAL TO SCHEI	OULE I, LINE 24		73,067.	16,348.	

SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service **Capital Gains and Losses**

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.

OMB No. 1545-0092

2019

Name of estate or trust Employer identification number ST. LOUIS COMMUNITY FOUNDATION 43-6023126 X No Did you dispose of any investment(s) in a qualified opportunity fund during the tax year? If "Yes," attach Form 8949 and see its instructions for additional requirements for reporting your gain or loss. Note: Form 5227 filers need to complete only Parts I and II 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) (e) (h) Gain or (loss) (g) Adjustments Sùbtract column (é) Proceeds Cost to gain or loss from from column (d) and (sales price) (or other basis) This form may be easier to complete if you round off cents to whole dollars. Form(s) 8949, Part I combine the result with column (g) line 2, column (g) 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 Totals for all transactions reported on Form(s) 8949 with Box B checked Totals for all transactions reported on Form(s) 8949 with Box C checked Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 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 2018 Capital Loss Carryover Worksheet 6 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 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) (e) (h) Gain or (loss) (g) Adjustments Subtract column (e) Proceeds Cost from column (d) ànd to gain or loss from (sales price) (or other basis) This form may be easier to complete if you round off cents to whole dollars. Form(s) 8949, Part II. combine the result with column (g) line 2, column (g) 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 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 Gain from Form 4797, Part I 14 14 Long-term capital loss carryover. Enter the amount, if any, from line 14 of the 2018 Capital Loss 15 6,400 Carryover Worksheet 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

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2019

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Schedule D /Form 1041) 2010 ST. LOUIS COMMINI	TY FOINDATION	ī			43-6	023	126 Page 2
Schedule D (Form 1041) 2019 ST. LOUIS COMMUNITY FOUNDATION Part III Summary of Parts and			(1) Beneficiaries'		2) Estate's		(3) Total
Caution: Read the Instructions before completing	thic part		(1) Deliciticianes		trust's		(3) Total
17 Net short-term gain or (loss)		17	······································			\neg	
18 Net long-term gain or (loss):		''				_	
a Total for year	,	8a		(6,40	0.	-6,400.
b Unrecaptured section 1250 gain (see line 18 of the worksheet)	<u>-</u>	8b					
c 28% rate gain		8c					
19 Total net gain or (loss) Combine lines 17 and 18a	• "	19			6,40	0.	-6,400.
Note: If line 19, column (3), is a net gain, enter the gain on Form	n 1041. line 4 (or Form 990)-T, F	Part I, line 4a) If lines	18a and	d 19. co	lumn (2	2), are net gains,
go to Part V, and don't complete Part IV. If line 19, column (3),	is a net loss, complete Par	t IV a	and the Capital Loss C	arryover	Worksh	eet, a	necessary
Part IV Capital Loss Limitation							
20 Enter here and enter as a (loss) on Form 1041, line 4 (or Form 9	990-T, Part I, line 4c, if a trust), the	smaller of:		ا 👧 ا	,	3,000.)
a The loss on line 19, column (3) or b \$3,000 Note: If the loss on line 19, column (3), is more than \$3,000, or	ıf Form 1041, page 1, lıne	23 (c	or Form 990-T, line 3	ا 9), ıs a lo	20 (oss, cor	nplete	
Loss Carryover Worksheet in the instructions to figure your capit Part V Tax Computation Using Maximum				_			
Form 1041 filers. Complete this part only if both lines 18a and 19 in			t is entered in Dart I or	Dart II a	nd there	10 20 00	try on Form 1041
line 2b(2), and Form 1041, line 23, is more than zero.	column (2) are yams, or an ar	illouil	it is cilicicu ili Fait i Oi	ганна	iia (lici c	15 411 611	ary official 1041,
Caution: Skip this part and complete the Schedule D Tax Worksh	neet in the instructions if						
• Either line 18b, col. (2) or line 18c, col. (2) is more than zero							
Both Form 1041, line 2b(1), and Form 4952, line 4g are more							
Form 990-T trusts Complete this part only if both lines 18a and 19 a	re gains, or qualified dividend	s are	included in income in	Part I of i	Form 990	0-T , an	form 990-T, line
39, is more than zero. Skip this part and complete the Schedule D Ta	x Worksheet in the instruction	ons if	either line 18b, col. (2)	or line 1	8c, col.	(2) is m	ore than zero.
21 Enter taxable income from Form 1041, line 23 (or Form 990-T, line	ne 39)	21					
22 Enter the smaller of line 18a or 19 in column (2)							
but not less than zero 22							
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 24							
25 If the estate or trust is filing Form 4952, enter the							
amount from line 4g; otherwise, enter -0-			4				
26 Subtract line 25 from line 24. If zero or less, enter -0-		26					
27 Subtract line 26 from line 21. If zero or less, enter -0- 28 Enter the smaller of the amount on line 21 or \$2,650		27 28					
29 Enter the smaller of the amount on line 27 or line 28		29	 				
30 Subtract line 29 from line 28. If zero or less, enter -0 This amount	Int is taxed at 0%	23	I	_	30		
31 Enter the smaller of line 21 or line 26		31					
32 Subtract line 30 from line 26		32	1				
33 Enter the smaller of line 21 or \$12,950		33					
34 Add lines 27 and 30							
35 Subtract line 34 from line 33. If zero or less, enter -0-							
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)					37		
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-					\Box		
41 Multiply line 40 by 20% (0.20)			Ì		41		
42 Figure the tax on the amount on line 27. Use the 2019 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 2019 Tax Rate Schedule for Estates							
and Trusts (see the Schedule G instructions in the instructions for Form 1041)					<u> </u>		
45 Tax on all taxable income. Enter the smaller of line 43 or line 4	4 nere and on Form 1041, Sc	nedul	e		٫		
G, Part I, line 1a (or Form 990-T, line 41)			·		45	ا داده دا	0 /5 40443 0040
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SCH:	EDULE D CAPITAL LOSS CARRYOVER WORKSHEET STA	TEMENT 9
1.	ENTER THE AMOUNT FROM FORM 990-T, LINE 39	0
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	3,000
	ENTER THE SMALLER OF LINE 2 OR LINE 3	3,000
	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.	
· .	ENTER THE LOSS FROM SCH D, LINE 7, AS A POSITIVE AMOUNT	0
5.	ENTER ANY GAIN FROM SCHEDULE D, LINE 16 0	
7.	ADD LINES 4 AND 6	3,000
3.	SHORT-TERM CAPITAL LOSS CARRYOVER TO 2020 . 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.	
	ENTER THE LOSS FROM SCHEDULE D, LINE 16, AS A POSITIVE AMT	6,400
.0.	ENTER ANY GAIN FROM SCHEDULE D, LINE 7 0	
L 1.	SUBTRACT LINE 5 FROM LINE 4. IF ZERO OR LESS, ENTER -0	
L2.	ADD LINES 10 AND 11	3,000
.3.	LONG-TERM CAPITAL LOSS CARRYOVER TO 2020 . SUBTRACT LINE 12 FROM LINE 9. IF ZERO OR LESS, ENTER -0	3,400