**Return of Organization Exempt From Income Tax** 

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.

OMB No. 1545-0047 Open to Public Inspection

Department of the Treasury Internal Revenue Service

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

<u>A</u>	ror the	2022 calendar year, or tax year beginning	and	enaing		
В	Check if applicabl	C Name of organization			D Employer identifi	cation number
	Addre	THE SCHOLARSHIP FOUNDA	TION OF ST. LOUI	S	_	
	Name chang	Doing business as			43-60312	34
	Initial return	Number and street (or P.O. box if mail is not do	elivered to street address)	Room/suite	E Telephone numbe	r
	Final return	6825 CLAYTON AVE., STE	. 100		314-725-	7990
	termin ated	City or town, state or province, country, and	ZIP or foreign postal code		G Gross receipts \$	35,175,917.
	Amen		<b>G</b> .		H(a) Is this a group re	eturn
F	Applic tion		L NOWAK		for subordinates	
_	pendir	<sup>9</sup> 6825 CLAYTON AVE, STE 1		10 63	<b>H(b)</b> Are all subordinates in	—
T	Tax-ex	empt status: X 501(c)(3) 501(c) (	) (insert no.) 4947(a)(1)		7 ' '	list. See instructions
	Websi		/ (moore no.) 10 17 (u)(1)	01 021	H(c) Group exemption	
			ssociation Other	I Year	<del></del>	State of legal domicile: MO
	art I	Summary		<b>L</b> 1001	01101111ation: = = = = 1	otato or logar dominono,===
	_	Briefly describe the organization's mission or mos	t significant activities: THE	FOUNDA	TION PROVID	ES ACCESS
Activities & Governance		TO POST-SECONDARY EDUCATI				
nan	2		ontinued its operations or dispos			
Ze.	3	Number of voting members of the governing body			3	30
Ó	4	Number of independent voting members of the go				30
9	-	Total number of individuals employed in calendar				20
ies	5				_	68
⋛	6	Total number of volunteers (estimate if necessary)				0.
Ac	/ a	Total unrelated business revenue from Part VIII, co			7a 7b	0.
_	D	Net unrelated business taxable income from Form	990-1, Part I, line 11		Prior Year	Current Year
		Ocatalia sticas and averate (Dest VIII line 11)		-	7,082,792.	5,710,347.
ě	8				2,075,859.	
Revenue	9					2,272,995.
Be	10	Investment income (Part VIII, column (A), lines 3, 4			2,338,672.	-491,220.
	יין	Other revenue (Part VIII, column (A), lines 5, 6d, 8d			66,452.	95,300.
_		Total revenue - add lines 8 through 11 (must equa			11,563,775.	7,587,422.
	1	Grants and similar amounts paid (Part IX, column			4,706,156.	5,042,005.
	1	Benefits paid to or for members (Part IX, column (		0.	0.	
S.	15	Salaries, other compensation, employee benefits (			1,389,837.	1,570,029.
Expenses	16a	Professional fundraising fees (Part IX, column (A),	line 11e)	<u> </u>	0.	0.
Ž	b	Total fundraising expenses (Part IX, column (D), lir	ne 25) 434,2	17.		
Ш	''	Other expenses (Part IX, column (A), lines 11a-11c			2,198,227.	
	18	Total expenses. Add lines 13-17 (must equal Part	IX, column (A), line 25)		8,294,220.	9,042,342.
_	19	Revenue less expenses. Subtract line 18 from line	12		3,269,555.	-1,454,920.
Net Assets or	9			Ве	ginning of Current Year	End of Year
sets	20	Total assets (Part X, line 16)			49,025,721.	46,466,432.
t As	21	Total liabilities (Part X, line 26)			1,627,938.	2,978,042.
S.	22	Net assets or fund balances. Subtract line 21 from	line 20		47,397,783.	43,488,390.
P	art II	Signature Block				
Und	ler pena	lties of perjury, I declare that I have examined this return	, including accompanying schedule	s and statem	ents, and to the best of my	knowledge and belief, it is
true	, correc	t, and complete. Declaration of preparer (other than offic	er) is based on all information of wl	hich preparer	has any knowledge.	
Sig	n	Signature of officer			Date	
He		JILL NOWAK, TREASURER				
		Type or print name and title				
		Print/Type preparer's name	Preparer's signature		Date Check	PTIN
Pai	d	DENISE PISCIOTTA	DENISE PISCIOTTA	a k	05/11/23 of self-employ	P00560435
	parer				3-1305800	
	Only		INC. SUITE 100		THIN O LINE	<del></del>
	,	ST. LOUIS, MO 631			Phone no 31	4-615-1200
Ma	v the IF	RS discuss this return with the preparer shown abo			1. //0/10 110.0 1	X Yes No

Га	otatement of Frogram 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:  THE POLINDATION DROWING ACCESS TO DOST SECONDARY EDUCATION THROUGH
	THE FOUNDATION PROVIDES ACCESS TO POST-SECONDARY EDUCATION THROUGH INTEREST-FREE LOANS, GRANTS, AND SERVICES TO AREA STUDENTS WHO ARE IN
	FINANCIAL NEED AND WHO WOULD OTHERWISE NOT HAVE THE FINANCIAL MEANS TO
	FULFILL THEIR EDUCATIONAL GOALS.
2	Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ?  Yes X No
_	If "Yes," describe these new services on Schedule O.  Did the organization cease conducting, or make significant changes in how it conducts, any program services?  Yes X No
3	0, 0 0
	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 \$ 8,065,468. including grants of \$ 5,042,005.) (Revenue \$ 2,272,995.)
	THE FOUNDATION PROVIDES ACCESS TO POST-SECONDARY EDUCATION TO THOSE WHO
	OTHERWISE WOULD NOT HAVE THE FINANACIAL MEANS TO FULFILL THEIR
	EDUCATIONAL GOALS. OPERATING ON A NONDISCRIMINATORY BASIS, THE
	FOUNDATION PROVIDES ASSISTANCE TO APPLICANTS WITH SIGNIFICANT FINANCIAL
	NEED WHO DEMONSTRATE SATISFACTORY ACADEMIC PROGRESS AND GOOD CHARACTER
	AND ARE FROM THE ST. LOUIS METROPOLITAN AREA AS WELL AS A NUMBER OF
	OTHER COMMUNITIES IN MISSOURI AND ILLINOIS. DURING 2022, THE
	FOUNDATION OPERATED STUDENT PROGRAMS, CONSISTING OF A STUDENT GRANT
	PROGRAMS THAT AWARDED \$3,666,615 AND AN INTEREST-FREE LOAN PROGRAM THAT
	AWARDED \$1,375,390 AND STUDENT ADVISING SERVICES.
	<del></del>
4b	(Code:) (Expenses \$
4c	(Code:) (Expenses \$
4d	Other program services (Describe on Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses 8,065,468.

1 2 3 4 5	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?  If "Yes," complete Schedule A	1 2 3 4	X	X
<ul><li>3</li><li>4</li><li>5</li></ul>	Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions  Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If</i> "Yes," <i>complete Schedule C, Part I</i> Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If</i> "Yes," <i>complete Schedule C, Part II</i> 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 Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i> Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3		
<ul><li>3</li><li>4</li><li>5</li></ul>	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  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  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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	3	Х	
4	public office? If "Yes," complete Schedule C, Part I  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  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 Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III  Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to	4		
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6	similar amounts as defined in Rev. Proc. 98-19? <i>If</i> "Yes," <i>complete Schedule C, Part III</i>	5		
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			Х
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		Х
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		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		Х
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		Х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments			
	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	Х	
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.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	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		X
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	_X_	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			,,
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			, .
	Schedule D, Parts XI and XII	12a		X
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			, v
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		
O	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	114		x
15	or more? If "Yes," complete Schedule F, Parts I and IV  Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any	14b		<del></del>
IJ	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		x
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	13		<del> </del>
10	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		x
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	-:-		_ <u></u>
••	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I. See instructions	17		x
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	<u> Г</u>		<u> </u>
	1c and 8a? If "Yes," complete Schedule G, Part II	18		x
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		x
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
	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		Х

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS Page 4 Part IV Checklist of Required Schedules (continued) Yes No 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 Х 22 23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes." complete Х 23 Schedule J 24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Х 24a Schedule K. If "No," go to line 25a b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception? 24b 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? If "Yes," complete Schedule L, Part I 25a Х 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? If "Yes," complete Х 25b 26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% Х 26 controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III ....... Х 27 28 Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions): A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If "Yes," complete Schedule L, Part IV ..... 28a **b** A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If Х 28c "Yes," complete Schedule L, Part IV ...... Х Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M 29 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation Х contributions? If "Yes," complete Schedule M 30 Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I ..... Х 31 31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes." complete 32 Х Schedule N, Part II Did the organization own 100% of an entity disregarded as separate from the organization under Regulations Х sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I 33 Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and 34 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)? 35a 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)? If "Yes," complete Schedule R, Part V, line 2 35b Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? Х If "Yes," complete Schedule R, Part V, line 2 36 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI X 37 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Х Note: All Form 990 filers are required to complete Schedule O 38 Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response or note to any line in this Part V Yes No 22 1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 0 Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming

(gambling) winnings to prize winners?

Part V

2022) THE SCHOLARSHIP FOUNDATION OF ST. LOUIS 43-6031234 Page 5
Statements Regarding Other IRS Filings and Tax Compliance (continued)

					Yes	No
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	20		7.7	
	If at least one is reported on line 2a, did the organization file all required federal employment tax return	าร?		2b	Х	37
				3a		_X_
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule			3b		
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other a		•	١.		v
	financial account in a foreign country (such as a bank account, securities account, or other financial a	ccour	it)?	4a		X
D	If "Yes," enter the name of the foreign country  See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Ac		ho (ΓD Δ D)			
<b>5</b> 0				50		Х
	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			<u>5a</u> 5b		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transactif "Yes" to line 5a or 5b, did the organization file Form 8886-T?			5c		21
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the			30		
Va				6a		х
h	any contributions that were not tax deductible as charitable contributions?  If "Yes," did the organization include with every solicitation an express statement that such contributions.					
	and the state of t			6b		
7	Organizations that may receive deductible contributions under section 170(c).			0.5		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and ser	vices n	rovided to the payor?	7a		Х
b			rovided to the payor.	7b		
	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was					
	to file Form 8282?			7c		Х
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit co	ontrac	t?	7e		
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?		7f		
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 88	99 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organiza	tion fil	e a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by th	е			
	sponsoring organization have excess business holdings at any time during the year?			8		
9	Sponsoring organizations maintaining donor advised funds.					
а	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? $\dots$			9b		
10	Section 501(c)(7) organizations. Enter:	ı	I			
а	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:	١	I			
а	Gross income from members or shareholders	11a				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against	441.				
٠	amounts due or received from them.)	11b	<u> </u>	40-		
	<b>Section 4947(a)(1) non-exempt charitable trusts.</b> Is the organization filing Form 990 in lieu of Form If "Yes," enter the amount of tax-exempt interest received or accrued during the year	1041 12b	, 	12a		
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	120				
	Is the organization licensed to issue qualified health plans in more than one state?			13a		
u	Note: See the instructions for additional information the organization must report on Schedule O.			iou		
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				
С	Enter the amount of reserves on hand	13c				
				14a		Х
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedul			14b		
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuner					
	excess parachute payment(s) during the year?			15		Х
	If "Yes," see the instructions and file Form 4720, Schedule N.					
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	incon	ne?	16		Х
	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities	;			
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
	If "Yes," complete Form 6069.					

Page 6

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

	Check if Schedule O contains a response or note to any line in this Part VI			X							
Sec	tion 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										
	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 on Schedule O.										
b	Enter the number of voting members included on line 1a, above, who are independent 1b 30										
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		Х							
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision										
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х							
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х							
5											
6	Did the organization have members or stockholders?	6		X							
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or	,									
	more members of the governing body?	7a		Х							
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		Х							
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:										
а	The governing body?	8a	Х								
h	Each committee with authority to act on behalf of the governing body?	8b	X								
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the	00									
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х							
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)										
	(mis Section B requests information about policies not required by the internal nevenue code.)		Yes	No							
10a	Did the organization have local chapters, branches, or affiliates?	10a	100	X							
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,	iou									
-	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	Х								
b	Describe on Schedule O the process, if any, used by the organization to review this Form 990.										
12a											
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12a 12b	X								
c	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe										
_	on Schedule O how this was done	12c	Х								
13	Did the organization have a written whistleblower policy?	13	X								
14	Did the organization have a written document retention and destruction policy?	14	Х								
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?										
а	The organization's CEO, Executive Director, or top management official	15a	Х								
	Other officers or key employees of the organization	15b	X								
-	If "Yes" to line 15a or 15b, describe the process on 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		Х							
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									
Sec	tion C. Disclosure										
17	List the states with which a copy of this Form 990 is required to be filed NONE										
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s	only)	availat	ole							
	for public inspection. Indicate how you made these available. Check all that apply.	•									
	X Own website X Another's website X Upon request Other (explain on Schedule O)										
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	financ	cial								
=	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										
	CATHERINE HILL - (314)725-7990										
	6825 CLAYTON AVE. SUITE 100, ST. LOUIS, MO 63139										

# 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 the 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, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations. See the instructions for the order in which to list the persons above.

X Check this box if neither the organization no	or any related	orga	niza	tion	con	nper	sate	ed any current officer, di	rector, or trustee.	
(A)	(B)	(C)					(D)	(E)	(F)	
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	box, unless person is both an officer and a director/trustee)		compensation	compensation	amount of			
	week		Cer ai	lu a u	recid	Tritus	iee)	from	from related	other
	(list any hours for	Individual trustee or director						the organization	organizations (W-2/1099-MISC/	compensation from the
	related	e or c	stee			sated		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	truste	Institutional trustee		yee	m per		1099-NEC)	1000 (120)	and related
	below	idual	ution	, 5	Key employee	est co	er	,		organizations
	line)	Indiv	Instit	Officer	Key e	Highest compensated employee	Former			
(1) LAUREN NASH MING	10.00									
PRESIDENT		Х		X				0.	0.	0.
(2) DEBRA KENNARD	4.00									
VICE PRESIDENT		X		X				0.	0.	0.
(3) KAREN O. DRAKE	4.00									
VICE PRESIDENT		X		X				0.	0.	0.
(4) MATT DACE	4.00									
VICE PRESIDENT		X		X				0.	0.	0.
(5) JILL NOWAK	4.00									
TREASURER		Х		X				0.	0.	0.
(6) JACQUELINE MEADERS BOOTH	4.00									
SECRETARY		X		X				0.	0.	0.
(7) CLAYTON EVANS	4.00									
MEMBER AT LARGE		Х		X				0.	0.	0.
(8) GERALD AXELBAUM	2.00									
DIRECTOR		Х						0.	0.	0.
(9) AZMY AZMY	2.00									
DIRECTOR		Х						0.	0.	0.
(10) MARTHA ARONSON	2.00									
DIRECTOR		Х						0.	0.	0.
(11) CORY BRICKER	2.00									
DIRECTOR		Х						0.	0.	0.
(12) JIM CROWE	2.00									
DIRECTOR		Х						0.	0.	0.
(13) BURON BUFFKIN	2.00									
DIRECTOR		Х						0.	0.	0.
(14) BILL EASTMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(15) JOAN ESSERMAN	2.00							_	_	_
DIRECTOR		Х						0.	0.	0.
(16) JANET HENDRICKSON	2.00									_
DIRECTOR		Х						0.	0.	0.
(17) LAURA KIPNIS	2.00	_						_	_	_
DIRECTOR		Х						0.	0.	0.

232007 12-13-22 Form **990** (2022)

Form 990 (2022) THE SCHO.	LARSHIP	FΟ	UN	DA	TΤ	ON	O	F ST. LOUIS	43-6031	234 Page 8
Part VII Section A. Officers, Directors, Trus	tees, Key Em	oloye	es,	and	Hiç	ghes	t C	ompensated Employee	s (continued)	
(A)	(B)				C)			(D)	(E)	(F)
Name and title	Average hours per week	box,	not cl unles cer an	neck i	son is	than o	n an	Reportable compensation from	Reportable compensation from related	Estimated amount of other
	(list any hours for related organizations below line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC/ 1099-NEC)	organizations (W-2/1099-MISC/ 1099-NEC)	compensation from the organization and related organizations
(18) JENNIFER HAYNES	2.00									
DIRECTOR		Х						0.	0.	0.
(19) MUHAMMAD ISLAM	2.00									
DIRECTOR		Х						0.	0.	0.
(20) APRIL MICKENS JOLLY	2.00									
DIRECTOR		Х						0.	0.	0.
(21) JOAN MAGRUDER	2.00									
DIRECTOR		Х						0.	0.	0.
(22) LAINIE NEIMAN	2.00									
DIRECTOR		Х						0.	0.	0.
(23) DAVID MEYER	2.00									
DIRECTOR		Х						0.	0.	0.
(24) SUSAN PLASSMEYER	2.00									
DIRECTOR		Х						0.	0.	0.
(25) DANA ROMEIS	2.00									
DIRECTOR		Х						0.	0.	0.
(26) LAUREN SAGEL	2.00									
DIRECTOR		Х						0.	0.	0.
1b Subtotal	•							0.	0.	0.
c Total from continuation sheets to Part V							-	336,168.	0.	37,432.
d Total (add lines 1b and 1c)								336,168.	0.	37,432.
2 Total number of individuals (including but r								ceived more than \$100,	000 of reportable	
compensation from the organization										2
										Yes No

Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual 3 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? If "Yes," complete Schedule J for such individual 4 Х Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services Х rendered to the organization? If "Yes." complete Schedule J for such person .....

## **Section B. Independent Contractors**

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 NONE	(B) Description of services	(C) Compensation

Total number of independent contractors (including but not limited to those listed above) who received more than 

	LARSHIP	FC	<u> </u>	IDA	TT	ON	U	F ST. LOUIS	43-603	1234
Part VII   Section A. Officers, Directors, Tru	ustees, Key Er	nplo	yee	s, ar	nd H	lighe	est	Compensated Employe	es (continued)	
(A)	(B)			((				(D)	(E)	(F)
Name and title	Average			Posi				Reportable	Reportable	Estimated
Tame and the	hours	(c		all t			ly)	compensation	compensation	amount of
	per						,,, 	from	from related	other
	week					ee Ge		the	organizations	compensation
	(list any	ctor				- Gu		organization	(W-2/1099-MISC)	from the
	hours for	rdire				ed en		(W-2/1099-MISC)	,	organization
	related	tee o	ustee			ensat				and related
	organizations	Individual trustee or director	Institutional trustee		Key employee	Highest compensated employee				organizations
	below	vidua	itutio	Je.	emp	nest o	Former			
	line)	Indi	Insti	Officer	Key	High	Form			
(27) TOM RUWITCH	2.00									
DIRECTOR		Х						0.	0.	0.
(28) BETH-ANNE YAKUBU	2.00									
DIRECTOR		Х						0.	0.	0.
(29) JUDY GLADNEY	2.00								•	
DIRECTOR		х						0.	0.	0.
(30) JOHN MILONAS	2.00	25						•	•	•
DIRECTOR	2.00	Х						0.	0.	0.
(31) BOB SCHMALZ	2.00	Λ						0.	0.	0 •
	2.00	Х						0.	0.	0
DIRECTOR	2 00	Δ						0.	0.	0.
(32) JERMAL SEWARD II	2.00	٠,,							0	•
DIRECTOR	0.00	Х						0.	0.	0.
(33) HEIDI VERON	2.00	ļ								
DIRECTOR		Х						0.	0.	0.
(34) FAITH SANDLER	55.00								_	
EXECUTIVE DIRECTOR					Х			208,706.	0.	23,492.
(35) ROBERT FOLEY	45.00									
DIRECTOR OF PLANNING & TEC						Х		127,462.	0.	13,940.
		1								
		1								
		1								
		-								
				$\vdash$						
		-								
		-								
	1		_	Ш		_				
		1								
			L				L			
Total to Part VII, Section A, line 1c								336,168.		37,432.
										,

		Check if Schedule O	contains a	response	or note to any lin	e in this Part VIII			
						(A)	(B)	(C)	(D)
						Total revenue	Related or exempt function revenue	Unrelated business revenue	Revenue excluded from tax under
							lanction revenue	business revenue	sections 512 - 514
S S	1 a	Federated campaigns		1a					
an an				1b					
⊋ ह		Fundraising events		1c					
ifts Ir A		Related organizations		1d					
n ii G		Government grants (contri		1e					
Sir		All other contributions, gifts,	-						
k E	_	similar amounts not included		1f	5,710,347.				
	g			1g \$	436,986.				
Contributions, Gifts, Grants and Other Similar Amounts	-	Total. Add lines 1a-1f		-9 I+	•	5,710,347.			
					Business Code	, ,			
σ.	2 a	STUDENT LOANS REPAIL	)		900099	2,272,995.	2,272,995.		
<u>Ş</u>	2 u b					, , -	, , ,		
Ser	c								
E N	d								
gra Re	۰ و								
Program Service Revenue	f	All other program service	revenue						
		Total. Add lines 2a-2f				2,272,995.			
$\overline{}$	3	Investment income (includ				, , -			
	Ū					460,593.			460,593.
	4	Income from investment of				, -			, -
	5	Royalties		-	1000000				
	Ū	rioyanico		(i) Real	(ii) Personal				
	6 a	Gross rents	6a	()	()				
	b		6b						
		Rental income or (loss)	6c						
	q	Net rental income or (loss)							
		Gross amount from sales of		Securities	(ii) Other				
	, u	assets other than inventory	<u>''</u>	636,682.	( )				
	h	Less: cost or other basis	/ <b>u</b>	, .					
<u>o</u>		and sales expenses	7b 27.	583,914.	4,581.				
Revenue	c			947,232.					
ě.		Net gain or (loss)				-951,813.			-951,813.
ther F		Gross income from fundraising				,			,
₽	0 4	including \$							
Ĭ		contributions reported on							
		Part IV, line 18	-						
	b	Less: direct expenses		I					
		Net income or (loss) from							
		Gross income from gamin							
		Part IV, line 19							
	b	Less: direct expenses							
		Net income or (loss) from							
		Gross sales of inventory, I							
		and allowances		I					
	b	Less: cost of goods sold							
		Net income or (loss) from							
		, , ,		<u>,</u>	Business Code				
Miscellaneous Revenue	11 a	MISCELLANEOUS INCOME	3		900099	95,300.	95,300.		
ane Duc	b								
eve	С								
JSC B	d	All other revenue							
		Total. Add lines 11a-11d				95,300.			
	12	Total revenue. See instruction	ns			7,587,422.	2,368,295.	0.	-491,220.

# 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).

Secti	on 501(c)(3) and 501(c)(4) organizations must comp.  Check if Schedule O contains a response			ipiete column (A).	
	. 1		(B)	(C)	(D)
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	<b>(A)</b> Total expenses	Program service expenses	Management and general expenses	<b>(D)</b> Fundraising expenses
1	Grants and other assistance to domestic organizations		ехрепзез	general expenses	ехрепзез
•	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
2		5,042,005.	5,042,005.		
3	individuals. See Part IV, line 22  Grants and other assistance to foreign	3,042,003.	3,042,003.		
3	organizations, foreign governments, and foreign				
	individuals. See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors,				
3	trustees, and key employees	376,409.	200,617.	114,811.	60,981.
6	Compensation not included above to disqualified	37071031	200,017	111/0111	00/3011
U	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salaries and wages	953,904.	613,624.	130,215.	210,065.
, 8	Pension plan accruals and contributions (include	JJJ, JU4•	010,024.	10,210	210,003
0	section 401(k) and 403(b) employer contributions)	29 319	17,945.	5,400.	5 974
9	Other employee benefits	29,319. 117,192.	70,200.	23,624.	5,974. 23,368.
10	Payroll taxes	93,205.	57,048.	17,167.	18,990.
11	Fees for services (nonemployees):	33,203.	37,040.	17,107.	10,3301
	Management				
	Legal	5,729.		5,729.	
	Accounting	33,943.		33,943.	
	Lobbying	33,7233		00/2201	
	Professional fundraising services. See Part IV, line 17				
f	Investment management fees	39,517.		39,517.	
	Other. (If line 11g amount exceeds 10% of line 25,	,			
3	column (A), amount, list line 11g expenses on Sch O.)	133,851.	83,474.	47,777.	2,600.
12	Advertising and promotion	,	•		•
13	Office expenses	8,250.	5,240.	1,429.	1,581.
14	Information technology	129,695.	78,472.	24,560.	1,581. 26,663.
15	Royalties				
16	Occupancy	182,924.	111,962.	33,692.	37,270.
17	Travel				
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	56,214.	47,551.	3,766.	4,897.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	26,457. 17,277.	16,194.	4,873.	5,390.
23	Insurance	17,277.	10,575.	3,182.	3,520.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If				
	line 24e amount exceeds 10% of line 25, column (A).				
	amount, list line 24e expenses on Schedule O.)	1 544 501	1 544 504		
а	BAD DEBTS & ALLOWANCES	1,544,721.	1,544,721.		
b	COLLECTION FEES	112,364.	112,364.	15 044	15 044
С	BANK SERVICE CHARGES	60,977.	30,489.	15,244.	15,244.
d	ADMINISTRATION	29,522.	15,171.	9,553.	4,798.
	All other expenses	48,867.	7,816.	28,175.	12,876.
25	Total functional expenses. Add lines 1 through 24e	9,042,342.	8,065,468.	542,657.	434,217.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.  Check here if following SOP 98-2 (ASC 958-720)				
	Check here if following SOP 98-2 (ASC 958-720)				5 <b>000</b> (2222)

Form 990 (2022)
Part X Balance Sheet

Par	rt X	Balance Sheet					
		Check if Schedule O contains a response or r	note to any li	ne in this Part X			
					<b>(A)</b> Beginning of year		<b>(B)</b> End of year
	1	Cash - non-interest-bearing			94,648.	1	56,598.
	2	Savings and temporary cash investments			2,887,951.	2	3,012,243.
	3	Pledges and grants receivable, net			135,825.	3	69,545.
	4	Accounts receivable, net		4			
	5	Loans and other receivables from any current					
		trustee, key employee, creator or founder, sul					
		controlled entity or family member of any of the		5			
	6	Loans and other receivables from other disqu					
		under section 4958(f)(1)), and persons describ	ed in section	n 4958(c)(3)(B)		6	
Ø	7	Notes and loans receivable, net			26,329,015.	7	23,886,689.
Assets	8	Inventories for sale or use				8	
As	9				45,358.	9	65,845.
	10a	Land, buildings, and equipment: cost or other	r				
		basis. Complete Part VI of Schedule D	10a	261,209.			
	b	Less: accumulated depreciation	10b	133,044.	138,793.	10c	128,165.
	11	Investments - publicly traded securities	19,268,464.	11	18,440,819.		
	12	Investments - other securities. See Part IV, lin		12			
	13	Investments - program-related. See Part IV, lir		13			
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		125,667.	15	806,528.	
	16	Total assets. Add lines 1 through 15 (must e			49,025,721.	16	46,466,432.
	17	Accounts payable and accrued expenses			100,493.	17	856,783.
	18	Grants payable		18			
	19	Deferred revenue		19			
	20	Tax-exempt bond liabilities			20		
	21	Escrow or custodial account liability. Complete	te Part IV of	Schedule D		21	
es	22	Loans and other payables to any current or for					
Liabilities		trustee, key employee, creator or founder, su					
iab		controlled entity or family member of any of the				22	
_	23	Secured mortgages and notes payable to unr		· · · · · · · · · · · · · · · · · · ·		23	
	24	Unsecured notes and loans payable to unrela				24	
	25	Other liabilities (including federal income tax,					
		parties, and other liabilities not included on lin	· ·	· .	1 505 445		0 101 050
		of Schedule D			1,527,445.		2,121,259.
	26			77	1,627,938.	26	2,978,042.
s		Organizations that follow FASB ASC 958, o	heck here	X			
JCe		and complete lines 27, 28, 32, and 33.			21 607 016		21 400 740
alar	27	Net assets without donor restrictions			34,687,016. 12,710,767.	27	31,409,749. 12,078,641.
Θ	28	Net assets with donor restrictions			12,/10,/0/.	28	12,070,041.
Ĕ.		Organizations that do not follow FASB ASC	; 958, check	inere			
ρF		and complete lines 29 through 33.					
)ts	29	Capital stock or trust principal, or current fund			29		
SSE	30	Paid-in or capital surplus, or land, building, or				30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated			47,397,783.	31	43,488,390.
ž	32	Total link liking and not accept // und halances			49,025,721.	32	46,466,432.
	33	Total liabilities and net assets/fund balances			43,043,141.	33	40,400,434.

Form **990** (2022)

Uniform Guidance, 2 C.F.R. Part 200, Subpart F?

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 on Schedule O and describe any steps taken to undergo such audits

Form 990 (2022)

За

Х

### **SCHEDULE A**

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public Inspection

**Employer identification number** 

			P FOUNDATION				4	3-6031234
Part I	Reason for Public (	Charity Status. (	(All organizations must c	omplete th	nis part.) S	ee instruction	S.	
The organ	ization is not a private found							
1 📋	A church, convention of ch	,	•	•	•	I)(A)(i).		
2	A school described in sect	•				χ , , ,		
3	A hospital or a cooperative				(b)(1)(A)(ii	ii).		
4	A medical research organiz					•	Viii) Enter	the hospital's name
т 🗀	city, and state:	acion operated in con	ijanotion with a noopitar	docomboa	000110		Milly: Lincon	the respitar s marris,
5	An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental u	nit describe	ad in
3 <u> </u>	section 170(b)(1)(A)(iv). (0		lege of difficulty owned	or operat	cd by a gc	verimental a	THE GCSCHID	5 <b>4</b> III
e 🗀			antal unit described in	<del></del>	70/6//4// 8/	()		
6 L	A federal, state, or local go							and the first of a second second second
/ A	An organization that norma		ntial part of its support if	om a gove	ernmentai	unit or from tr	ie generai į	public described in
• 🗀	section 170(b)(1)(A)(vi). (C							
8	A community trust describe							
9 📖	An agricultural research org	-			-		-	-
	or university or a non-land-o	grant college of agricu	ulture (see instructions).	Enter the i	name, city	, and state of	the college	e or
	university:							
10	An organization that norma							
	activities related to its exen	npt functions, subject	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
	income and unrelated busing	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
	See section 509(a)(2). (Co	mplete Part III.)						
11 🖳	An organization organized a	and operated exclusi	vely to test for public saf	ety. See	section 50	09(a)(4).		
12	An organization organized a	and operated exclusi	vely for the benefit of, to	perform t	he functio	ns of, or to ca	rry out the	purposes of one or
	more publicly supported or	ganizations described	d in <b>section 509(a)(1)</b> o	r <b>section</b> :	509(a)(2).	See section !	509(a)(3). (	Check the box on
	lines 12a through 12d that	describes the type of	f supporting organization	and com	plete lines	12e, 12f, and	12g.	
a	Type I. A supporting orga	anization operated, su	upervised, or controlled I	by its supp	orted org	anization(s), ty	pically by	giving
	the supported organization	on(s) the power to reg	gularly appoint or elect a	majority o	of the direc	tors or truste	es of the su	upporting
	organization. You must o	complete Part IV, Se	ctions A and B.					
b	Type II. A supporting org	anization supervised	or controlled in connect	ion with its	s supporte	ed organizatio	n(s), by hav	ving
	control or management o	of the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	ported
	organization(s). You mus	t complete Part IV,	Sections A and C.					
С	Type III functionally inte	grated. A supporting	g organization operated i	in connect	tion with, a	and functional	ly integrate	ed with,
	its supported organization	n(s) (see instructions)	You must complete F	Part IV, Se	ctions A,	D, and E.		
d 🗌	Type III non-functionally						ted organiz	zation(s)
	that is not functionally int						-	* *
	requirement (see instruct	-		•		-		
е 🗌	Check this box if the orga	•	•	•			II. Type III	
	functionally integrated, or					31 · , 31	, ,,	
<b>f</b> Ente	er the number of supported of		,9	9 9				
	vide the following information	•	d organization(s).					
	i) Name of supported	(ii) EIN	(iii) Type of organization	(iv) Is the orga in your governi	nization listed	(v) Amount of	monetary	(vi) Amount of other
	organization		(described on lines 1-10 above (see instructions))	Yes	No	support (see ir	structions)	support (see instructions)
			above (see instructions))					
Total								1

# Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support													
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total						
1	Gifts, grants, contributions, and												
	membership fees received. (Do not												
	include any "unusual grants.")	4383342.	7693789.	6135213.	7082792.	5710347.	31005483.						
2	Tax revenues levied for the organ-												
	ization's benefit and either paid to												
	or expended on its behalf												
3	The value of services or facilities												
	furnished by a governmental unit to												
	the organization without charge												
4	Total. Add lines 1 through 3	4383342.	7693789.	6135213.	7082792.	5710347.	31005483.						
5	The portion of total contributions												
	by each person (other than a												
	governmental unit or publicly												
	supported organization) included												
	on line 1 that exceeds 2% of the												
	amount shown on line 11,												
	column (f)						15226300.						
	Public support. Subtract line 5 from line 4.						<u> 15779183.</u>						
	ction B. Total Support												
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020 6135213.	(d) 2021	(e) 2022	(f) Total						
	Amounts from line 4	4383342.	7693789.	6135213.	7082792.	5/1034/.	31005483.						
8	Gross income from interest,												
	dividends, payments received on												
	securities loans, rents, royalties,	210 560	206 500	200 220	201 724	460 503	1677006						
	and income from similar sources	319,560.	386,599.	209,330.	301,724.	460,593.	1677806.						
9	Net income from unrelated business												
	activities, whether or not the												
	business is regularly carried on												
10	Other income. Do not include gain												
	or loss from the sale of capital	4,351.	74,396.	102,467.	66,452.	05 300	342,966.						
	assets (Explain in Part VI.)	4,331.	14,390.	102,407.	00,452.		33026255.						
	<b>Total support.</b> Add lines 7 through 10					12	p3020233.						
	Gross receipts from related activities, First 5 years. If the Form 990 is for the			iourth or fifth town									
13		-		· · · · · · · · · · · · · · · · · · ·									
Sec	organization, check this box and stop ction C. Computation of Publi			• • • • • • • • • • • • • • • • • • • •									
	Public support percentage for 2022 (li			rolumn (f))		14	47.78 %						
	Public support percentage from 2021					15	50.74 %						
	<b>33 1/3% support test - 2022.</b> If the o												
	<b>stop here.</b> The organization qualifies												
b	33 1/3% support test - 2021. If the o												
-	and <b>stop here.</b> The organization qual												
17a	10% -facts-and-circumstances test												
	and if the organization meets the facts	_											
	meets the facts-and-circumstances te					viriow and organiz							
b	10% -facts-and-circumstances test	ŭ	•										
	more, and if the organization meets the	ū				•							
	· · · · · · · · · · · · · · · · · · ·				-								
18	•			organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization  Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions									

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

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

Se	ction A. Public Support		•				
Cale	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions,						
	merchandise sold or services per-						
	formed, or facilities furnished in any activity that is related to the						
	organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
5	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
6	Total. Add lines 1 through 5						
78	Amounts included on lines 1, 2, and						
	3 received from disqualified persons						
k	Amounts included on lines 2 and 3 received						
	from other than disqualified persons that exceed the greater of \$5,000 or 1% of the						
	amount on line 13 for the year						
(	Add lines 7a and 7b						
8	Public support. (Subtract line 7c from line 6.)						
Se	ction B. Total Support		T				,
	ndar year (or fiscal year beginning in)	(a) 2018	<b>(b)</b> 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses						
	acquired after June 30, 1975						
	Add lines 10a and 10b						
11	Net income from unrelated business activities not included on line 10b,						
	whether or not the business is						
	regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital						
	assets (Explain in Part VI.)						
	Total support. (Add lines 9, 10c, 11, and 12.)						<u> </u>
14	First 5 years. If the Form 990 is for the	-			•		
0-	check this box and stop here						
	ction C. Computation of Publi			. (5)		T .= T	
	Public support percentage for 2022 (I			.,,		15	%
	Public support percentage from 2021 ction D. Computation of Inves					16	%
				10 l (f)		47	0/
	Investment income percentage for 20					17	<u>%</u>
	Investment income percentage from					18	7 is not
198	33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						L
k	33 1/3% support tests - 2021. If the						
00	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organization	in ala not check a	DOX on line 14, 198	a, or 190, check th	iis box and see ins	structions	

### Part IV Supporting Organizations

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

# Section A. All Supporting Organizations

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

		Vss	N-
		Yes	No
	1		
	2		
	3a		
	3b		
	3c		
	4a		
	4b		
	TU		
	4c		
	5a		
	5b 5c		
	JC		
	6		
	7		
	8		
	9a		
	9b		
	9c		
	10a		
مارر	10b A (Forn	n gan	2022
uie	- A (FUIT	いっつつい	24//

Part VI the reasons for the organization's position that its supported organization(s) would have engaged in

Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No" provide details in Part VI.

these activities but for the organization's involvement.

Parent of Supported Organizations. Answer lines 3a and 3b below.

2b

За

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS 43-6031234 Page 6 Schedule A (Form 990) 2022 Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 ( explain in Part VI). See instructions. All other Type III non-functionally integrated supporting organizations must complete Sections A through E. (B) Current Year Section A - Adjusted Net Income (A) Prior Year (optional) 1 Net short-term capital gain 2 Recoveries of prior-year distributions 3 Other gross income (see instructions) 3 4 4 Add lines 1 through 3. 5 5 Depreciation and depletion Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or 6 maintenance of property held for production of income (see instructions) 7 Other expenses (see instructions) 8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4) 8 (B) Current Year Section B - Minimum Asset Amount (A) Prior Year (optional) 1 Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year): **a** Average monthly value of securities 1a **b** Average monthly cash balances 1b **c** Fair market value of other non-exempt-use assets 1c d Total (add lines 1a, 1b, and 1c) 1d e Discount claimed for blockage or other factors (explain in detail in Part VI): 2 Acquisition indebtedness applicable to non-exempt-use assets 2 3 3 Subtract line 2 from line 1d. Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, 4 see instructions). 5 Net value of non-exempt-use assets (subtract line 4 from line 3) 5 6 6 Multiply line 5 by 0.035. 7 Recoveries of prior-year distributions 7 8 Minimum Asset Amount (add line 7 to line 6) Section C - Distributable Amount **Current Year** 1 Adjusted net income for prior year (from Section A, line 8, column A) 1 2 Enter 0.85 of line 1. 2

6	Distributable Amount. Subtract line 5 from line 4, unless subject to						
	emergency temporary reduction (see instructions).	6					
7	Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see						
	instructions).						

Minimum asset amount for prior year (from Section B, line 8, column A)

3

4

5

Schedule A (Form 990) 2022

3

5

Enter greater of line 2 or line 3.

Income tax imposed in prior year

Sche <b>Pa</b> i		IP FOUNDATION (			3-6031234	Page 7
	on D - Distributions	a)(o) Supporting Orga	inizations <sub>(continu</sub>	iea)	Current Ye	
<u>3ect</u>	Amounts paid to supported organizations to accomplish exer	mpt purposes		1	Current Ye	ar
2	Amounts paid to supported organizations to accomplish exemp			_ '		
2	organizations, in excess of income from activity	t purposes or supported		2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations		3		
4	Amounts paid to acquire exempt-use assets	4				
5	Qualified set-aside amounts (prior IRS approval required - pro	5				
6	Other distributions (describe in Part VI). See instructions.	ovide details in Fait VI)		6		
7	Total annual distributions. Add lines 1 through 6.			7		
8						
Ū						
9	(provide details in Part VI). See instructions.  Distributable amount for 2022 from Section C, line 6					
10	Line 8 amount divided by line 9 amount	10				
	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistribution Pre-2022	ıs	(iii) Distributab Amount for 2	
_1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
a	From 2017					
b	From 2018					
c	From 2019					
d	From 2020					
e	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
<u>h</u>	Applied to 2022 distributable amount					
i_	Carryover from 2017 not applied (see instructions)					
<u>j_</u>	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
<u>a</u>	Applied to underdistributions of prior years					
b	Applied to 2022 distributable amount					
<u>c</u>	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					

Schedule A (Form 990) 2022

than zero, explain in Part VI. See instructions.
 Remaining underdistributions for 2022. Subtract lines 3h and 4b from line 1. For result greater than zero, explain in

7 Excess distributions carryover to 2023. Add lines 3j

Part VI. See instructions.

and 4c.
 B Breakdown of line 7:
 a Excess from 2018
 b Excess from 2019
 c Excess from 2020
 d Excess from 2021
 e Excess from 2022

# SCHEDULE C

(Form 990)

# Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

Complete if the organization is described below. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047

2022

Open to Public

Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (See separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (See separate instructions), then

Section 501(c)(4), (5), or (6) organizations: Complete Part III.

Name of organization	tions. complete r art iii.		E	nployer identification number
•	OLARSHIP FOUNDAT	ION OF ST. I		43-6031234
Part I-A   Complete if the org	janization is exempt und	ler section 501(c)	or is a section 527	
<ol> <li>Provide a description of the organiz</li> <li>Political campaign activity expendit</li> <li>Volunteer hours for political campai</li> </ol>	ures ign activities			
	janization is exempt und	. , ,	· -	
1 Enter the amount of any excise tax	incurred by the organization un	der section 4955		\$
2 Enter the amount of any excise tax	incurred by organization manag	gers under section 4955		\$
3 If the organization incurred a section				
4a Was a correction made?				Yes No
b If "Yes," describe in Part IV.  Part I-C Complete if the organization	janization is exempt und	ler section 501(c)	except section 50:	1(0)(3)
	<u> </u>			
1 Enter the amount directly expended				<b>a</b>
2 Enter the amount of the filing organ exempt function activities		•		¢
3 Total exempt function expenditures				\$
line 17b			•	\$
4 Did the filing organization file Form				
5 Enter the names, addresses and en				
made payments. For each organiza			-	
contributions received that were pro-	omptly and directly delivered to	a separate political orga	anization, such as a sepa	rate segregated fund or a
political action committee (PAC). If	additional space is needed, pro	vide information in Part	IV.	
(a) Name	(b) Address	(c) EIN	(d) Amount paid from	1 ' '
			filing organization's funds. If none, enter-	
			lulius. Il florie, effici	delivered to a separate
				political organization.
				If none, enter -0

Schedule C (Form 990) 2022					6031234 Page 2			
Part II-A Complete if the or	ganization is exer	npt under sectior	1 501(c)(3) and file	d Form 5768 (el	ection under			
section 501(h)).								
A Check if the filing organiz	ation belongs to an affi	liated group (and list in	Part IV each affiliated (	group member's nan	ne, address, EIN,			
	are of excess lobbying	• /						
B Check if the filing organiz	ation checked box A a	nd "limited control" pro	visions apply.					
	nits on Lobbying Expe nditures" means amou			(a) Filing organization's totals	(b) Affiliated group totals			
1a Total lobbying expenditures to inf	luence public opinion (	grassroots lobbying)						
<b>b</b> Total lobbying expenditures to int	luence a legislative boo	dy (direct lobbying)						
c Total lobbying expenditures (add	Total lobbying expenditures (add lines 1a and 1b)							
e Total exempt purpose expenditur	Total exempt purpose expenditures (add lines 1c and 1d)							
f Lobbying nontaxable amount. En	ter the amount from the	e following table in both	n columns.					
If the amount on line 1e, column (a)	or (b) is: The lob	bying nontaxable am	ount is:					
Not over \$500,000	20% of	the amount on line 1e.						
Over \$500,000 but not over \$1,00	ess over \$500,000.							
Over \$1,000,000 but not over \$1,	500,000 \$175,00	00 plus 10% of the exc	ess over \$1,000,000.					
Over \$1,500,000 but not over \$17	ss over \$1,500,000.							
Over \$17,000,000	Over \$17,000,000 \$1,000,000.							
g Grassroots nontaxable amount (e	g Grassroots nontaxable amount (enter 25% of line 1f)							
h Subtract line 1g from line 1a. If ze	ero or less, enter -0-							
i Subtract line 1f from line 1c. If ze			_					
j If there is an amount other than z	ero on either line 1h or	line 1i, did the organiza	ation file Form 4720					
reporting section 4911 tax for this	•				Yes No			
		eraging Period Under	• •					
(Some organizations		01(h) election do not l ate instructions for lir	have to complete all of	f the five columns b	elow.			
	<u> </u>							
		nditures During 4-Yea ⊺	ir Averaging Period					
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2019	<b>(b)</b> 2020	(c) 2021	(d) 2022	(e) Total			
2a Lobbying nontaxable amount								
<b>b</b> Lobbying ceiling amount								
(150% of line 2a, column(e))								
c Total lobbying expenditures								
<b>d</b> Grassroots nontaxable amount								
e Grassroots ceiling amount								
(150% of line 2d, column (e))								

Schedule C (Form 990) 2022

f Grassroots lobbying expenditures

# Schedule C (Form 990) 2022 THE SCHOLARSHIP FOUNDATION OF ST. LOUIS 43-6031234 Page 3 Part II-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

For e	or each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description		)	(b)		
	e lobbying activity.	Yes	No	Amo	ount	
1	During the year, did the filing organization attempt to influence foreign, national, state, or					
	local legislation, including any attempt to influence public opinion on a legislative matter					
	or referendum, through the use of:					
а	Volunteers?	X				
	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	X				
С	Media advertisements?					
	Mailings to members, legislators, or the public?					
	Publications, or published or broadcast statements?	X				
f	Grants to other organizations for lobbying purposes?					
g	Direct contact with legislators, their staffs, government officials, or a legislative body?	X				
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?	X				
i	Other activities?	X				
j	Total. Add lines 1c through 1i					
	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?		X			
b	If "Yes," enter the amount of any tax incurred under section 4912					
	If "Yes," enter the amount of any tax incurred by organization managers under section 4912					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
Par	t III-A Complete if the organization is exempt under section 501(c)(4), section	า 501(c)(5	), or sec	tion		
	501(c)(6).					
				Yes	No	
1	Were substantially all (90% or more) dues received nondeductible by members?		1			
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2			
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
Par	t III-B Complete if the organization is exempt under section 501(c)(4), section		•			
	501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered	'No" OR (	(b) Part I	II-A, line	3, is	
	answered "Yes."					
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political	al				
	expenses for which the section 527(f) tax was paid).					
а	Current year		2a			
b	Carryover from last year		2b			
	Total					
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the exce	ess				
	does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and po	olitical				
	expenditures next year?		4			
	Taxable amount of lobbying and political expenditures. See instructions		5			
Par	t IV Supplemental Information					
Provi	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated group	list); Part II-A	A, lines 1 a	nd 2 (See		
instru	ictions); and Part II-B, line 1. Also, complete this part for any additional information.					
PAF	RT II-B, LINE 1, LOBBYING ACTIVITIES:					
THE	E SCHOLARSHIP FOUNDATION ENGAGES EDUCATION POLICY FE	LLOWS	TO RE	SEARCH	Į.	
PRO	POSED AND EXISTING LEGISLATION AFFECTING LOW-INCOME	POST-	SECON	DARY		
ST(	DENTS. ADVOCACY ACTIVITIES ARE TARGETED AT INFORMI	NG LEG	ISLAT	ORS OF	1	
THE	E EFFECTS OF LEGISLATION IN HOPES THAT SUCH INFORMAT	ION WI	LL AF	FECT		
THE	EIR DECISION MAKING. THE SCHOLARSHIP FOUNDATION SHA	RES FI	NDING	S WITH	ĺ	

Schedule (	C (Form 990) 2022	יוויי	E SCHOLA	RSHIP	FOU	NDATION	OF	ST.	LOUIS	43-6031234	Page 4
Part IV	Supplemental	Information	on (continued)								3- •
	NONPROFITS			ADVOC	ACY	POSITIO	ONS	IN E	PUBLIC		
PRESEI	NTATIONS.										

# **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 instructions and the latest information.

OMB No. 1545-0047 Inspection

Name of the organization

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS

**Employer identification number** 43-6031234

Pai	t I Organizations Maintaining Donor Advised	d Funds or Other Similar Funds	or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, line	e 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 v	writing that the assets held in donor advis	sed 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 ad		
	for charitable purposes and not for the benefit of the donor or	r donor advisor, or for any other purpose	conferring
Pai	t II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7.
1	Purpose(s) of conservation easements held by the organization	on (check all that apply).	
	Preservation of land for public use (for example, recreat	tion or education) Preservation o	f a historically important land area
	Protection of natural habitat	Preservation o	f a certified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	ied conservation contribution in the form	
	day of the tax year.		Held at the End of the Tax Year
	Total number of conservation easements		2a
			I I
	Number of conservation easements on a certified historic stru	2c	
d	Number of conservation easements included in (c) acquired a		
	historic structure listed in the National Register		
3	Number of conservation easements modified, transferred, rele	eased, extinguished, or terminated by the	e organization during the tax
	year		
4	Number of states where property subject to conservation eas	•	
5	Does the organization have a written policy regarding the per		
•	violations, and enforcement of the conservation easements it		
6	Staff and volunteer hours devoted to monitoring, inspecting,	nariding of violations, and emorcing con-	servation easements during the year
7	Amount of expenses incurred in monitoring, inspecting, hand	ling of violations, and onforcing consorva	tion assamants during the year
′	Amount of expenses incurred in monitoring, inspecting, name	iling of violations, and emorcing conserva	tion easements during the year
8	Does each conservation easement reported on line 2(d) above	e satisfy the requirements of section 170	(h)(4)(R)(i)
Ū			
9	In Part XIII, describe how the organization reports conservation		
_	balance sheet, and include, if applicable, the text of the footn	•	
	organization's accounting for conservation easements.		
Pai	t III Organizations Maintaining Collections of	Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	990, Part IV, line 8.	
1a	If the organization elected, as permitted under FASB ASC 956	8, not to report in its revenue statement a	and balance sheet works
	of art, historical treasures, or other similar assets held for pub	olic exhibition, education, or research in fu	urtherance of public
	service, provide in Part XIII the text of the footnote to its finan	icial statements that describes these item	ns.
b	If the organization elected, as permitted under FASB ASC 958	8, 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 furtl	nerance of public service,
	provide the following amounts relating to these items:		
	(i) Revenue included on Form 990, Part VIII, line 1		\$
2	If the organization received or held works of art, historical treat		
	the following amounts required to be reported under FASB AS	SC 958 relating to these items:	
а	Revenue included on Form 990, Part VIII, line 1		\$ <u></u>
h	Assats included in Form 000 Part V		¢

Sche <b>Da</b> i	dule D (F <b>t III</b>   <b>(</b>		OLARSHIP FO						43-60 Accete			ige 2
		Organizations Maintaining C								(continu	<u>.ied)</u>	
3	•	ne organization's acquisition, accession	on, and other records	s, check any of the	following that	: make si	ignific	ant u	ise of its			
		on items (check all that apply):										
а	$\equiv$	ublic exhibition	d		change progra	am						
b	_	cholarly research	е	Other								
С		reservation for future generations										
4		a description of the organization's co							se in Part	XIII.		
5	•	he year, did the organization solicit o		•						٦.,		1
Dai		ld to raise funds rather than to be ma Escrow and Custodial Arranç								Yes		No
ı uı		eported an amount on Form 990, Par		ete ii the organizatio	on answered	res on	FOIII	1 990	, Part IV, I	irie 9, or		
10		ganization an agent, trustee, custodia		iany for contribution	e or other acc	note not i	inclus	lod				
Ia		ganization an agent, trustee, custodi		•						Yes	X	No
h		explain the arrangement in Part XIII								_ 1es	21	INO
b	11 163,	explain the arrangement in rait Air a	and complete the for	lowing table.			Г			Amount		
_	Reginnir	ng balance						1c				
	-	ns during the year					. –	1d				
e		tions during the year						1e				
f		palance					- 1	1f				
		organization include an amount on Fo								Yes		No
		explain the arrangement in Part XIII.					•			_		]
Pai		Indowment Funds. Complete in										
	•		(a) Current year	(b) Prior year	(c) Two year			ree y	ears back	(e) Four	years l	back
1a	Beginnir	ng of year balance	7,436,293.	6,589,190.	6,182	2,424.		4,1	09,102.	4,	684,2	202.
		utions	150,450.	314,835.	168	3,600.		1,4	28,000.		14,9	950.
С		estment earnings, gains, and losses	-704,334.	751,763.	455	5,956.		8	20,294.	-	418,5	539.
d	Grants of	or scholarships										
е	Other ex	penditures for facilities										
	and pro	grams	241,382.	219,495.	. 217	7,790.		1	74,972.		171,	511.
f	Adminis	trative expenses										
g	End of y	rear balance	6,641,027.	7,436,293.	6,589	9,190.		6,1	82,424.	4,	109,3	102.
2	Provide	the estimated percentage of the curr	•	e (line 1g, column (a	i)) held as:							
а	Board d	esignated or quasi-endowment	21.4000	_%								
b	Perman	ent endowment 65.9000	%									
С			%									
	-	centages on lines 2a, 2b, and 2c shou	=									
3а	Are ther	e endowment funds not in the posses	ssion of the organiza	ition that are held a	nd administer	ed for th	ie			Г	<del></del> .	
	organiza	•									Yes	No
		elated organizations								3a(i)	$\dashv$	<u>X</u>
	(ii) Rela	ated organizations								3a(ii)	$\rightarrow$	<u>X</u>
_		on line 3a(ii), are the related organiza								3b		
Dai		e in Part XIII the intended uses of the and, Buildings, and Equipm		wment funds.								
Га		Complete if the organization answered		Dort IV line 11a 9	Soo Earm 000	Dort V	lino 1	Λ				
		<u> </u>							<u></u>	(a) D 1		
		Description of property	(a) Cost or o		t or other (other)	٠,	ccum precia		a	(d) Book	value	•
4-	l on d		<del>- '</del>	Dasis	(Ou ioi)	ue	Pi COI	ALIOI I				
		•										
		S			17,888.		25	,92	25	21	.,96	53
		old improvements	I		3,275.			, 78			, 49	
		ent			0,046.			, 33			.,43	
	Other	oo 1a through 1a (O. L (I)		1 ~	, o , o <del>-</del> o •		50	, , ,	, , , ,	128	•	

Scriedule D	(FUIII 990) 2022	
Dort VIII	Invoctments	Othor Co

	Investments - Other Securities.			ttelle i lage -
	Complete if the organization answered "Yes" of	on Form 990, Part IV, line	11b. See Form 990, Part X, line 12.	
(a) Descrip	otion of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-	of-year market value
	al derivatives			
• •	held equity interests			
(3) Other				
(A)				
(B)				
(C)				
(D)				
(E)				
(F)				
(G)				
(H)				
	b) must equal Form 990, Part X, col. (B) line 12.)			
Part VIII	Investments - Program Related.			
	Complete if the organization answered "Yes" o	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-vear market value
(1)	,	(4)		, , , , , , , , , , , , , , , , , , , ,
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
			<del> </del>	
<u>(8)</u> (9)			<u> </u>	
	h) must aqual Form 000, Part V, col. (P) line 12.)			
Part IX	b) must equal Form 990, Part X, col. (B) line 13.)  Other Assets.			
	Complete if the organization answered "Yes" of	on Form 990. Part IV. line	11d. See Form 990. Part X. line 15.	
		Description		(b) Book value
(1)	(3)			(D) Doon raide
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				
(8)				
<u>(8)</u> (9)				
	ımn (b) must equal Form 990, Part X, col. (B) line	15 \		
Part X	Other Liabilities.	13.)		
	Complete if the organization answered "Yes" of	on Form 990 Part IV line	11e or 11f See Form 990 Part X line 25	
4	(a) Description of liability	5111 5111 555, 1 di t 17, iii 15	110 01 1111 000 1 01111 000, 1 01171, 1110 201	(b) Book value
1. (1) Foo	· · · · · · · · · · · · · · · · · · ·			(b) Book value
	deral income taxes INUITIES PAYABLE			1,656.
	COMISES-TO-GIVE FOR FUTUR	) 다		1,050.
	RWARD PROGRAM	7.17		102,783.
	HER DEFERRED REVENUE			2,016,820.
	HER DEFERRED REVENUE			4,010,040.
(6)				
(7)				
(8)				
(9)				2 121 252
	ımn (b) must equal Form 990, Part X, col. (B) line			2,121,259.
	for uncertain tax positions. In Part XIII, provide		_	
organiz	ation's liability for uncertain tax positions under	FASB ASC 740. Check h	ere if the text of the footnote has been pro	vided in Part XIII L

Schedule D (Form 990) 2022

232054 09-01-22 Schedule D (Form 990) 2022

### SCHEDULE I (Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

# **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.

2022

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** 

THE SCHOLA		43-6031234					
Part I General Information on Grants an							
1 Does the organization maintain records to							
criteria used to award the grants or assist	ance?						X Yes No
2 Describe in Part IV the organization's prod							
Part II Grants and Other Assistance to D recipient that received more than \$6					anization answered "`	Yes" on Form 990, Part IV	, line 21, for any
1 (a) Name and address of organization or government	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance
<ul><li>2 Enter total number of section 501(c)(3) and</li><li>3 Enter total number of other organizations</li></ul>	-	~					

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
GRANTS MADE TO STUDENTS	404	3,666,615.	0.		
INTEREST-FREE AND FEE-FREE STUDENT LOAN AWARDS	179	1,375,390.	0.		
Part IV Supplemental Information. Provide the information re	equired in Part I, lin	e 2; Part III, column	(b); and any other ac	dditional information.	
SCHEDULE I, PART IV LINE 1					
THE SCHOLARSHIP FOUNDATION MONITOR	RS THE USE	OF LOANS	AND GRANTS	AWARDED	
TO STUDENTS THROUGH CAREFUL EVALUA	ATION OF T	HE EDUCATI	ONAL AND F	INANCIAL	
INFORMATION PROVIDED BY PERSONS AN	PPLYING FO	R GRANTS C	OR LOANS AN	D BY	
REVIEW OF DOCUMENTS RECEIVED FROM	THE APPLI	CANTS AND	FROM APPLI	CANTS'	
EDUCATIONAL INSTITUTIONS.					

## SCHEDULE J (Form 990)

# **Compensation Information**

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

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

Attach to Form 990.

**2022** 

OMB No. 1545-0047

Open to Public Inspection

Name of the organization

Department of the Treasury

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

Employer identification number

43-6031234

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS
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. First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax indemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (such as maid, chauffeur, chef) b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a? 2 Indicate which, if any, of the following the 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. X Written employment contract Compensation committee X Compensation survey or study X Independent compensation consultant Form 990 of other organizations X Approval by the board or compensation committee 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 Х **b** Participate in or receive payment from a supplemental nonqualified retirement plan? 4b X c Participate in or receive payment from an equity-based compensation arrangement? 4c If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III. Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 5 contingent on the revenues of: Х a The organization? 5a X Any related organization? 5b

If "Yes" on line 5a or 5b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation 6 contingent on the net earnings of: X a The organization? 6a X b Any related organization? 6b If "Yes" on line 6a or 6b, describe in Part III. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III X 7 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 Х 8

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

Regulations section 53.4958-6(c)?

If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in

Schedule J (Form 990) 2022

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

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

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

		(B) Breakdown of W	/-2 and/or 1099-MISo compensation	C and/or 1099-NEC	other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) FAITH SANDLER	(i)	208,706.	0.	0.	6,116.	17,376.	232,198.	0.
	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
	(i)							
'	(ii)							
	(i)							
'	(ii)							
	(i)							
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	(i) (ii)							
·	(i)							
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	(ii)							
'	(i)							
	(ii)							
'	(i)							
	(ii)							
	(i)							
	(ii)							

Part III   Supplemental Information
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

# **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. Attach to Form 990.

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

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS Employer identification number 43-6031234

Pai	rti iy	pes of Property								
			(a)	(b)	(c)	(d)				
			Check if	Number of contributions or	Noncash contribution amounts reported on	Method of d				
			applicable		Form 990, Part VIII, line	noncash contrib	ution ar	nount	S	
1	Art - Work	s of art								
2		rical treasures								
3		ional interests								
4		d publications								
5		nd household goods								
6		other vehicles								
7		planes								
8	Intellectua			10	426 226	/	~=-			
9		- Publicly traded	X	18	436,986	. AVE HI/LOW	STO	JK J	<u>EXC</u>	
10		- Closely held stock								
11	Securities	- Partnership, LLC, or								
	trust inter	ests								
12	Securities	- Miscellaneous								
13	Qualified of	conservation contribution -								
	Historic st	ructures								
14	Qualified of	conservation contribution - Other								
15		e - Residential								
16		e - Commercial								
17		e - Other								
18		es								
19		ntory								
20		l medical supplies								
21		·								
22		artifacts								
23		specimens								
24	Archeolog	ical artifacts								
25	Other	( )								
26	Other	( )								
27	Other	( )								
28	Other	(								
29	Number o	f Forms 8283 received by the organiz	zation during	g the tax year for c	ontributions					
		the organization completed Form 828								
								Yes	No	
30a	During the	e year, did the organization receive by	v contributio	n any property rep	orted in Part I, lines 1 thro	ugh 28, that it				
	must hold for at least 3 years from the date of the initial contribution, and which isn't required to be used for exempt purposes for the entire holding period?								х	
h	<b>b</b> If "Yes," describe the arrangement in Part II.									
31										
o∠d	32a Does the organization hire or use third parties or related organizations to solicit, process, or sell noncash									
	contributions?									
	•	escribe in Part II.		_						
33	_	nization didn't report an amount in c	olumn (c) fo	r a type of property	tor which column (a) is cl	пескед,				
	describe i									
LHA	For Pag	erwork Reduction Act Notice, see	the Instruct	tions for Form 990	).	Schedule I	M (Forn	n 990)	2022	

Schedule M	(Form 990) 2022	THE S	CHOLARS	SHTB I	FOUNDA	TTON	OF S	т. ьс	JUIS	43-60	31234	Page 2
Part II	Supplemental is reporting in Part this part for any ac	Informat t I, column (I dditional info	<b>tion.</b> Provided b), the number or mation.	de the info er of cont	ormation red ributions, th	quired by ne numbe	Part I, lin r of items	es 30b, 3 s received	32b, and 33 d, or a com	, and whethe bination of bo	the organiz th. Also con	ation nplete

# SCHEDULE O (Form 990)

Department of the Treasury

Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

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

Attach to Form 990 or Form 990-EZ.

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

2022 Open to Public Inspection

OMB No. 1545-0047

Name of the organization

THE SCHOLARSHIP FOUNDATION OF ST. LOUIS

Employer identification number 43-6031234

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:

TO AREA STUDENTS WHO ARE IN FINANCIAL NEED AND WHO WOULD OTHERWISE NOT

HAVE THE FINANCIAL MEANS TO FULFILL THEIR EDUCATIONAL GOALS.

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

MANAGEMENT OF THE SCHOLARSHIP FOUNDATION PROVIDES A COPY OF THE FORM 990 IN ELECTRONIC FORMAT TO EACH OF ITS OFFICERS AND DIRECTORS FOR REVIEW. A TIMELINE IS ESTABLISHED DURING WHICH MANAGEMENT ADDRESSES QUESTIONS OR COMMENTS FROM BOARD MEMBERS ON THE CONTENT OF THE RETURN. ANY ADJUSTMENTS TO THE RETURN ARE SHARED WITH ALL OFFICERS AND DIRECTORS. UPON COMPLETION OF THE REVIEW PROCESS AND AFTER MAKING ANY PRESCRIBED CHANGES, A REPRESENTATIVE OF THE FOUNDATION SIGNS THE FORM 990 AND THE RETURN IS ELECTRONICALLY FILED WITH THE IRS.

FORM 990, PART VI, SECTION B, LINE 12C:

THE SCHOLARSHIP FOUNDATION HAS A CONFLICT OF INTEREST POLICY THAT IS

INCLUDED IN THE FOUNDATION'S BY-LAWS AND REVIEWED WITH ALL BOARD MEMBERS.

THE SCHOLARSHIP FOUNDATION ALSO REQUIRES BOARD MEMBERS AND KEY EMPLOYEES TO

COMPLETE A REPORT FORM EACH YEAR FOR REVIEW BY THE TREASURER. A COPY OF

THE POLICY IS ATTACHED TO THE FORM PROVIDED TO BOARD MEMBERS. THE REPORTS

AND ANY COMMENTS OR QUESTIONS ARE THEN SUBMITTED TO THE EXECUTIVE

COMMITTEE.

FORM 990, PART VI, SECTION B, LINE 15:

THERE IS NO COMPENSATION BASED ON SALES, PROFITS, OR OTHER PERFORMANCE

CRITERIA FOR ANY OF THE EMPLOYEES OF THE SCHOLARSHIP FOUNDATION. THERE ARE

Schedule O (Form 990) 2022 Page **2** 

Schedule O (Form 990) 202		Page 2
Name of the organization	THE SCHOLARSHIP FOUNDATION OF ST. LOUIS	Employer identification number 43-6031234
NO CONTINGENT	COMPENSATION AGREEMENTS. THERE ARE NO BONUS	ES. THE
EXECUTIVE DIRE	CTOR HAS A WRITTEN CONTRACT. THE PERFORMANC	E OF THE
EXECUTIVE DIRE	CTOR IS REVIEWED ANNUALLY BY THE PRESIDENT,	IN CONSULTATION
WITH THE EXECU	TIVE COMMITTEE OF THE BOARD, IN A FORMAL PRO	CESS. PERIODIC
EXTERNAL COMPE	NSATION STUDIES ARE PERFORMED TO VALIDATE AN	D SUBSTANTIATE
SALARY RANGES	FOR ALL POSITIONS.	
FORM 990, PART	VI, SECTION C, LINE 19:	_
UPON REQUEST:	THE SCHOLARSHIP FOUNDATION WILL MAKE ITS GOV	ERNING DOCUMENTS,
ITS CONFLICT C	F INTEREST POLICY, AND ITS FINANCIAL STATEME	NTS AVAILABLE TO
THE PUBLIC AT	THE FOUNDATION'S OFFICES DURING NORMAL BUSIN	ESS HOURS.
		_
FORM 990, PART	XI, LINE 9, CHANGES IN NET ASSETS:	_
STUDENT LOANS	REPAID	-2,272,995.
STUDENT LOANS	AWARDED	1,375,390.
TOTAL TO FORM	990, PART XI, LINE 9	-897,605.
FORM 990, PART	XII, LINE 2C:	
NO CHANGE FROM	I PRIOR YEAR.	