

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

Department of the Treasury Internal Revenue Service

The organization may have to use a copy of this return to satisfy state reporting requirements.

A For the 2005 calendar year, or tax year beginning 2005, and ending

B Check if applicable: Address change, Name change, Initial return, Final return, Amended return, Application pending. C Name of organization REGIONAL HOUSING AND COMMUNITY DEVELOPMENT ALLIANCE. D Employer identification number 43-1611669. E Telephone number (314) 231-9400. F Accounting method: Cash, Accrual.

Section 501(c)(3) organizations and 4947(a)(1) nonexempt charitable trusts must attach a completed Schedule A (Form 990 or 990-EZ).

G Website: WWW.RHCDA.COM

J Organization type (check only one) X 501(c) (3) (insert no.) 4947(a)(1) or 527

K Check here if the organization's gross receipts are normally not more than \$25,000. The organization need not file a return with the IRS; but if the organization chooses to file a return, be sure to file a complete return. Some states require a complete return.

L Gross receipts: Add lines 6b, 8b, 9b, and 10b to line 12 3,744,717.

H and I are not applicable to section 527 organizations. H(a) Is this a group return for affiliates? Yes X No. H(b) If "Yes," enter number of affiliates. H(c) Are all affiliates included? Yes No. H(d) Is this a separate return filed by an organization covered by a group ruling? Yes X No. I Group Exemption Number. M Check if the organization is not required to attach Sch. B (Form 990, 990-EZ, or 990-PF).

Part I Revenue, Expenses, and Changes in Net Assets or Fund Balances (See the instructions.)

Table with 21 rows and 4 columns. Rows include: 1 Contributions, gifts, grants, and similar amounts received; 2 Program service revenue including government fees and contracts; 3 Membership dues and assessments; 4 Interest on savings and temporary cash investments; 5 Dividends and interest from securities; 6 a Gross rents, b Less: rental expenses, c Net rental income or (loss); 7 Other investment income; 8 a Gross amount from sales of assets other than inventory, b Less: cost or other basis and sales expenses, c Gain or (loss), d Net gain or (loss); 9 Special events and activities; 10 a Gross sales of inventory, less returns and allowances, b Less: cost of goods sold, c Gross profit or (loss); 11 Other revenue; 12 Total revenue; 13 Program services; 14 Management and general; 15 Fundraising; 16 Payments to affiliates; 17 Total expenses; 18 Excess or (deficit) for the year; 19 Net assets or fund balances at beginning of year; 20 Other changes in net assets or fund balances; 21 Net assets or fund balances at end of year.

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Part II Statement of Functional Expenses

All organizations must complete column (A). Columns (B), (C), and (D) are required for section 501(c)(3) and (4) organizations and section 4947(a)(1) nonexempt charitable trusts but optional for others. (See the instructions.)

Do not include amounts reported on line 6b, 8b, 9b, 10b, or 16 of Part I.		(A) Total	(B) Program services	(C) Management and general	(D) Fundraising
22	Grants and allocations (attach schedule) (cash \$ <u>600,000.</u> noncash \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	600,000.	600,000.	STMT 2	
23	Specific assistance to individuals (attach schedule)				
24	Benefits paid to or for members (attach schedule)				
25	Compensation of officers, directors, etc.	234,099.	124,150.	109,949.	
26	Other salaries and wages	568,054.	516,504.	51,550.	
27	Pension plan contributions	19,610.	15,662.	3,948.	
28	Other employee benefits	103,866.	82,954.	20,912.	
29	Payroll taxes	65,086.	51,716.	13,370.	
30	Professional fundraising fees				
31	Accounting fees				
32	Legal fees				
33	Supplies				
34	Telephone	19,832.	10,657.	9,175.	
35	Postage and shipping	7,557.	7,557.	NONE	
36	Occupancy				
37	Equipment rental and maintenance	9,033.	8,990.	43.	
38	Printing and publications	3,768.	3,768.	NONE	
39	Travel	4,024.	4,024.	NONE	
40	Conferences, conventions, and meetings				
41	Interest	22,594.	17,220.	5,374.	
42	Depreciation, depletion, etc. (attach schedule)	7,763.	6,198.	1,565.	
43	Other expenses not covered above (itemize):				
a	STMT 3	934,571.	891,832.	42,739.	
b					
c					
d					
e					
f					
g					
44	Total functional expenses. Add lines 22 through 43. (Organizations completing columns (B)-(D), carry these totals to lines 13-15).	2,599,857.	2,341,232.	258,625.	

Joint Costs. Check if you are following SOP 98-2.

Are any joint costs from a combined educational campaign and fundraising solicitation reported in (B) Program services? Yes No
 If "Yes," enter (i) the aggregate amount of these joint costs \$ _____; (ii) the amount allocated to Program services \$ _____;
 (iii) the amount allocated to Management and general \$ _____; and (iv) the amount allocated to Fundraising \$ _____

Part III Statement of Program Service Accomplishments (See the instructions.)

Form 990 is available for public inspection and, for some people, serves as the primary or sole source of information about a particular organization. How the public perceives an organization in such cases may be determined by the information presented on its return. Therefore, please make sure the return is complete and accurate and fully describes, in Part III, the organization's programs and accomplishments.

What is the organization's primary exempt purpose? REMIEDIATING NEIGHBORHOOD BLIGHT All organizations must describe their exempt purpose achievements in a clear and concise manner. State the number of clients served, publications issued, etc. Discuss achievements that are not measurable. (Section 501(c)(3) and (4) organizations and 4947(a)(1) nonexempt charitable trusts must also enter the amount of grants and allocations to others.)	Program Service Expenses (Required for 501(c)(3) and (4) orgs., and 4947(a)(1) trusts; but optional for others.)
a NEIGHBORHOOD SUPPORT COLLABORATIVE- PROVIDES FUNDING TO COMMUNITY-BASED DEVELOPMENT ORGANIZATIONS, WHICH IS COUPLED W/ TECHNICAL ASSISTANCE TO HELP DEVELOP THE CAPACITY OF COMMUNITY REVITALIZATION ORGANIZATIONS TO SUCCESSFULLY ADDRESS PROBLEMS AND UNDERTAKE REVITALIZATION OF THIER NEIGHBORHOODS IN A COORDINATED AND MULTI-DIMENSIONAL WAY. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	214,687.
b COMMUNITY DEVELOPMENT TECHNICAL ASSISTANCE PROGRAM- THE PRIMARY GOAL IS TO HELP BUILD THE REVITALIZATION CAPACITIES AND SKILLS OF PEOPLE WHO LIVE, WORK AND PROVIDE HOUSING AND ECONOMIC OPPORTUNITIES IN THE REGION'S DISTRESSED COMMUNITIES TO TRANSFORM THEM INTO VIABLE, SUSTAINABLE COMMUNITIES. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	40,258.
c SUSTAINABLE NEIGHBORHOODS INITIATIVE- DESIGNED TO TEST THE INTEGRATION OF PHYSICAL DEVELOPMENT AND SOCIAL SERVICES IN 9 DISTRESSED NEIGHBORHOODS IN THE ST LOUIS METRO AREA. LEADERS AND RESOURCE PROVIDERS WORK TOGETHER TO IMPLEMENT SUSTAINABLE CHANGES TO DISTRESSED COMMUNITIES BY BRINGING TOGETHER COMMITTED RESIDENTS, BUSINESSES AND INSTITUTIONS. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	1,026,441.
d PREDEVELOPMENT LOAN FUND- PROVIDES A SOURCE OF FUNDS FOR NEIGHBORHOOD BASED NOT-FOR-PROFIT ORGANIZATIONS TO PAY COSTS INCURRED DURING THE EARLY STAGES OF THEIR REAL ESTATE DEVELOPMENT PROJECTS WHEN CONVENTIONAL FINANCING WOULD NOT BE ABLE TO BE OBTAINED BY SUCH GROUPS. (Grants and allocations \$ _____) If this amount includes foreign grants, check here <input type="checkbox"/>	23,422.
e Other program services (attach schedule) SEE STATEMENT 4 (Grants and allocations \$ 600,000.) If this amount includes foreign grants, check here <input type="checkbox"/>	1,036,424.
f Total of Program Service Expenses (should equal line 44, column (B), Program services).	2,341,232.

Part IV Balance Sheets (See the instructions.)

Note: Where required, attached schedules and amounts within the description column should be for end-of-year amounts only.

		(A) Beginning of year		(B) End of year	
Assets	45 Cash - non-interest-bearing	205,173.	45	156,614.	
	46 Savings and temporary cash investments	568,936.	46	871,896.	
	47a Accounts receivable	253,677.			
	b Less: allowance for doubtful accounts				
			215,083.	47c	253,677.
	48a Pledges receivable	22,750.			
	b Less: allowance for doubtful accounts				
			384,750.	48c	22,750.
	49 Grants receivable		23,795.	49	17,525.
	50 Receivables from officers, directors, trustees, and key employees (attach schedule)			50	
	51a Other notes and loans receivable (attach schedule)	6,401,661.			
	b Less: allowance for doubtful accounts				
			5,219,076.	51c	6,401,661.
	52 Inventories for sale or use			52	
	53 Prepaid expenses and deferred charges		2,350.	53	2,350.
	54 Investments - securities (attach schedule)			54	
	55a Investments - land, buildings, and equipment: basis				
	b Less: accumulated depreciation (attach schedule)				
				55c	
56 Investments - other (attach schedule)		367,044.	56	693,423.	
57a Land, buildings, and equipment: basis	35,505.				
b Less: accumulated depreciation (attach schedule)					
	25,732.	15,824.	57c	9,773.	
58 Other assets (describe)		218,072.	58	84,100.	
59 Total assets (must equal line 74). Add lines 45 through 58.		7,220,103.	59	8,513,769.	
Liabilities	60 Accounts payable and accrued expenses	81,685.	60	75,058.	
	61 Grants payable		61		
	62 Deferred revenue		62		
	63 Loans from officers, directors, trustees, and key employees (attach schedule)			63	
	64a Tax-exempt bond liabilities (attach schedule)			64a	
	b Mortgages and other notes payable (attach schedule)		981,733.	64b	382,919.
	65 Other liabilities (describe)		102,943.	65	530,811.
66 Total liabilities. Add lines 60 through 65.		1,166,361.	66	988,788.	
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 67 through 69 and lines 73 and 74.				
	67 Unrestricted	6,053,742.	67	7,524,981.	
	68 Temporarily restricted		68		
	69 Permanently restricted		69		
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 70 through 74.				
	70 Capital stock, trust principal, or current funds			70	
	71 Paid-in or capital surplus, or land, building, and equipment fund			71	
	72 Retained earnings, endowment, accumulated income, or other funds			72	
	73 Total net assets or fund balances (add lines 67 through 69 or lines 70 through 72; column (A) must equal line 19; column (B) must equal line 21)		6,053,742.	73	7,524,981.
	74 Total liabilities and net assets/fund balances. Add lines 66 and 73.		7,220,103.	74	8,513,769.

Part V-A Current Officers, Directors, Trustees, and Key Employees (continued)

75a Enter the total number of officers, directors, and trustees permitted to vote on organization business at board meetings 22

Yes No

b Are any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, related to each other through family or business relationships? If "Yes," attach a statement that identifies the individuals and explains the relationship(s)

75b X

c Do any officers, directors, trustees, or key employees listed in Form 990, Part V-A, or highest compensated employees listed in Schedule A, Part I, or highest compensated professional and other independent contractors listed in Schedule A, Part II-A or II-B, receive compensation from any other organizations, whether tax exempt or taxable, that are related to this organization through common supervision or common control? Note. Related organizations include section 509(a)(3) supporting organizations.

75c X

If "Yes," attach a statement that identifies the individuals, explains the relationship between this organization and the other organization(s), and describes the compensation arrangements, including amounts paid to each individual by each related organization.

d Does the organization have a written conflict of interest policy?

75d X

Part V-B Former Officers, Directors, Trustees, and Key Employees That Received Compensation or Other Benefits

(If any former officer, director, trustee, or key employee received compensation or other benefits (described below) during the year, list that person below and enter the amount of compensation or other benefits in the appropriate column. See the instructions.)

Table with 5 columns: (A) Name and address, (B) Loans and Advances, (C) Compensation, (D) Contributions to employee benefit plans & deferred compensation plans, (E) Expense account and other allowances. Row 1 shows -0- in all columns.

Part VI Other Information (See the instructions.)

Yes No

76 Did the organization engage in any activity not previously reported to the IRS? If "Yes," attach a detailed description of each activity.

76 X

77 Were any changes made in the organizing or governing documents but not reported to the IRS? . . . STMT. 22 . . . If "Yes," attach a conformed copy of the changes.

77 X

78a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?

78a X

b If "Yes," has it filed a tax return on Form 990-T for this year?

78b N/A

79 Was there a liquidation, dissolution, termination, or substantial contraction during the year? If "Yes," attach a statement

79 X

80a Is the organization related (other than by association with a statewide or nationwide organization) through common membership, governing bodies, trustees, officers, etc., to any other exempt or nonexempt organization?

80a X

b If "Yes," enter the name of the organization ▶ STMT 23

81a Enter direct and indirect political expenditures. (See line 81 instructions). and check whether it is [X] exempt or [X] nonexempt

81a NONE

b Did the organization file Form 1120-POL for this year?

81b N/A

Part VI Other Information (continued)

Yes No

82 a Did the organization receive donated services or the use of materials, equipment, or facilities at no charge or at substantially less than fair rental value? 82a X

b If "Yes," you may indicate the value of these items here. Do not include this amount as revenue in Part I or as an expense in Part II. (See instructions in Part III.) 82b 45,510.

83 a Did the organization comply with the public inspection requirements for returns and exemption applications? 83a X

b Did the organization comply with the disclosure requirements relating to quid pro quo contributions? 83b N/A

84 a Did the organization solicit any contributions or gifts that were not tax deductible? 84a N/A

b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 84b N/A

85 501(c)(4), (5), or (6) organizations. a Were substantially all dues nondeductible by members? 85a N/A

b Did the organization make only in-house lobbying expenditures of \$2,000 or less? 85b N/A

If "Yes" was answered to either 85a or 85b, do not complete 85c through 85h below unless the organization received a waiver for proxy tax owed for the prior year.

c Dues, assessments, and similar amounts from members 85c N/A

d Section 162(e) lobbying and political expenditures 85d N/A

e Aggregate nondeductible amount of section 6033(e)(1)(A) dues notices 85e N/A

f Taxable amount of lobbying and political expenditures (line 85d less 85e) 85f N/A

g Does the organization elect to pay the section 6033(e) tax on the amount on line 85f? 85g N/A

h If section 6033(e)(1)(A) dues notices were sent, does the organization agree to add the amount on line 85f to its reasonable estimate of dues allocable to nondeductible lobbying and political expenditures for the following tax year? 85h N/A

86 501(c)(7) orgs. Enter: a Initiation fees and capital contributions included on line 12 86a N/A

b Gross receipts, included on line 12, for public use of club facilities 86b N/A

87 501(c)(12) orgs. Enter: a Gross income from members or shareholders 87a N/A

b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 87b N/A

88 At any time during the year, did the organization own a 50% or greater interest in a taxable corporation or partnership, or an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Part IX 88 X

89 a 501(c)(3) organizations. Enter: Amount of tax imposed on the organization during the year under: section 4911 NONE; section 4912 NONE; section 4955 NONE

b 501(c)(3) and 501(c)(4) orgs. Did the organization engage in any section 4958 excess benefit transaction during the year or did it become aware of an excess benefit transaction from a prior year? If "Yes," attach a statement explaining each transaction 89b X

c Enter: Amount of tax imposed on the organization managers or disqualified persons during the year under sections 4912, 4955, and 4958 NONE

d Enter: Amount of tax on line 89c, above, reimbursed by the organization NONE

90 a List the states with which a copy of this return is filed

b Number of employees employed in the pay period that includes March 12, 2005 (See instructions.) 90b 16

91 a The books are in care of MR. RON KRAUS Telephone no. 314-231-9400
 Located at 611 OLIVE STREET, STE 1641, ST. LOUIS, MO ZIP + 4 63101

b At any time during the calendar year, did the organization have an interest in or a signature or other authority over a financial account in a foreign country (such as a bank account, securities account, or other financial account)? 91b X

If "Yes," enter the name of the foreign country

See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.

c At any time during the calendar year, did the organization maintain an office outside of the United States? 91c X

If "Yes," enter the name of the foreign country

92 Section 4947(a)(1) nonexempt charitable trusts filing Form 990 in lieu of Form 1041 - Check here

and enter the amount of tax-exempt interest received or accrued during the tax year 92 N/A

Part VII Analysis of Income-Producing Activities (See the instructions.)

Note: Enter gross amounts unless otherwise indicated.

	Unrelated business income		Excluded by section 512, 513, or 514		(E) Related or exempt function income
	(A) Business code	(B) Amount	(C) Exclusion code	(D) Amount	
93 Program service revenue:					
a DEVELOPMENT FEES					51,000.
b MANAGEMENT FEES					302,637.
c CONSULTING FEES					98,026.
d					
e					
f Medicare/Medicaid payments					
g Fees and contracts from government agencies					
94 Membership dues and assessments					
95 Interest on savings and temporary cash investments			14	96,428.	
96 Dividends and interest from securities					
97 Net rental income or (loss) from real estate:					
a debt-financed property					
b not debt-financed property					
98 Net rental income or (loss) from personal property					
99 Other investment income					
100 Gain or (loss) from sales of assets other than inventory					
101 Net income or (loss) from special events					
102 Gross profit or (loss) from sales of inventory					
103 Other revenue: a					
b MISC INCOME			01	1,500.	
c					
d					
e					
104 Subtotal (add columns (B), (D), and (E))				97,928.	451,663.
105 Total (add line 104, columns (B), (D), and (E))					549,591.

Note: Line 105 plus line 1d, Part I, should equal the amount on line 12, Part I.

Part VIII Relationship of Activities to the Accomplishment of Exempt Purposes (See the instructions.)

Line No.	Explain how each activity for which income is reported in column (E) of Part VII contributed importantly to the accomplishment of the organization's exempt purposes (other than by providing funds for such purposes).
▼	STMT 25

Part IX Information Regarding Taxable Subsidiaries and Disregarded Entities (See the instructions.)

(A) Name, address, and EIN of corporation, partnership, or disregarded entity	(B) Percentage of ownership interest	(C) Nature of activities	(D) Total income	(E) End-of-year assets
STMT 26	%		326,377.	897,374.
	%			
	%			
	%			

Part X Information Regarding Transfers Associated with Personal Benefit Contracts (See the instructions.)

- (a) Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Yes No
- (b) Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? Yes No

Note: If "Yes" to (b), file Form 8870 and Form 4720 (see instructions).

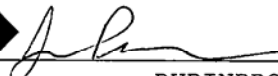
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Please Sign Here

Signature of officer _____ Date _____

Type or print name and title. _____

Paid Preparer's Use Only

Preparer's signature:  Date: 11-14-06 Check if self-employed: Preparer's SSN or PTIN (See Gen. Inst. W):

Firm's name (or yours if self-employed), address, and ZIP + 4: RUBINBROWN LLP, ONE NORTH BRENTWOOD, SAINT LOUIS, MO 63105

EIN: 43-0765316 Phone no.: 314-290-3300

SCHEDULE A
(Form 990 or 990-EZ)

Department of the Treasury
Internal Revenue Service

Organization Exempt Under Section 501(c)(3)

(Except Private Foundation) and Section 501(e), 501(f), 501(k), 501(n),
or 4947(a)(1) Nonexempt Charitable Trust

Supplementary Information - (See separate instructions.)

▶ **MUST be completed by the above organizations and attached to their Form 990 or 990-EZ**

OMB No. 1545-0047

2005

Name of the organization **REGIONAL HOUSING AND COMMUNITY DEVELOPMENT ALLIANCE** Employer identification number **43-1611669**

Part I Compensation of the Five Highest Paid Employees Other Than Officers, Directors, and Trustees
(See page 1 of the instructions. List each one. If there are none, enter "None.")

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans & deferred compensation	(e) Expense account and other allowances
SEE STATEMENT 27				
Total number of other employees paid over \$50,000 . . . ▶		2		

Part II-A Compensation of the Five Highest Paid Independent Contractors for Professional Services
(See page 2 of the instructions. List each one (whether individuals or firms). If there are none, enter "None.")

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services ▶		NONE

Part II-B Compensation of the Five Highest Paid Independent Contractors for Other Services
(List each contractor who performed services other than professional services, whether individuals or firms. If there are none, enter "None." See page 2 of the instructions.)

(a) Name and address of each independent contractor paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of other contractors receiving over \$50,000 for other services ▶		NONE

For Paperwork Reduction Act Notice, see the Instructions for Form 990 and Form 990-EZ.

Schedule A (Form 990 or 990-EZ) 2005

Part III Statements About Activities (See page 2 of the instructions.)

	Yes	No
1 During the year, has the organization attempted to influence national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum? If "Yes," enter the total expenses paid or incurred in connection with the lobbying activities ► \$ _____ (Must equal amounts on line 38, Part VI-A, or line i of Part VI-B.)		X
Organizations that made an election under section 501(h) by filing Form 5768 must complete Part VI-A. Other organizations checking "Yes" must complete Part VI-B AND attach a statement giving a detailed description of the lobbying activities.		
2 During the year, has the organization, either directly or indirectly, engaged in any of the following acts with any substantial contributors, trustees, directors, officers, creators, key employees, or members of their families, or with any taxable organization with which any such person is affiliated as an officer, director, trustee, majority owner, or principal beneficiary? (If the answer to any question is "Yes," attach a detailed statement explaining the transactions.)		
a Sale, exchange, or leasing of property?		X
b Lending of money or other extension of credit?		X
c Furnishing of goods, services, or facilities?		X
d Payment of compensation (or payment or reimbursement of expenses if more than \$1,000)?	X	
e Transfer of any part of its income or assets?		X
3a Do you make grants for scholarships, fellowships, student loans, etc.? (If "Yes," attach an explanation of how you determine that recipients qualify to receive payments.)		X
b Do you have a section 403(b) annuity plan for your employees?		X
c During the year, did the organization receive a contribution of qualified real property interest under section 170(h)?		X
4a Did you maintain any separate account for participating donors where donors have the right to provide advice on the use or distribution of funds?		X
b Do you provide credit counseling, debt management, credit repair, or debt negotiation services?		X

Part IV Reason for Non-Private Foundation Status (See pages 3 through 6 of the instructions.)

The organization is not a private foundation because it is: (Please check only ONE applicable box.)

- 5 A church, convention of churches, or association of churches. Section 170(b)(1)(A)(i).
- 6 A school. Section 170(b)(1)(A)(ii). (Also complete Part V.)
- 7 A hospital or a cooperative hospital service organization. Section 170(b)(1)(A)(iii).
- 8 A Federal, state, or local government or governmental unit. Section 170(b)(1)(A)(v).
- 9 A medical research organization operated in conjunction with a hospital. Section 170(b)(1)(A)(iii). Enter the hospital's name, city, and state ► _____
- 10 An organization operated for the benefit of a college or university owned or operated by a governmental unit. Section 170(b)(1)(A)(iv). (Also complete the Support Schedule in Part IV-A.)
- 11 a An organization that normally receives a substantial part of its support from a governmental unit or from the general public. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 11 b A community trust. Section 170(b)(1)(A)(vi). (Also complete the Support Schedule in Part IV-A.)
- 12 An organization that normally receives: (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its charitable, etc., functions - subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See section 509(a)(2). (Also complete the Support Schedule in Part IV-A.)
- 13 An organization that is not controlled by any disqualified persons (other than foundation managers) and supports organizations described in: (1) lines 5 through 12 above; or (2) section 501(c)(4), (5), or (6), if they meet the test of section 509(a)(2). Check the box that describes the type of supporting organization: Type 1 Type 2 Type 3

Provide the following information about the supported organizations. (See page 6 of the instructions.)

(a) Name(s) of supported organization(s)	(b) Line number from above

- 14 An organization organized and operated to test for public safety. Section 509(a)(4). (See page 6 of the instructions.)

Part IV-A Support Schedule (Complete if you checked a box on line 10, 11, or 12.) Use cash method of accounting.

Note: You may use the worksheet in the instructions for converting from the accrual to the cash method of accounting.

Table with columns for Calendar year (or fiscal year beginning in), (a) 2004, (b) 2003, (c) 2002, (d) 2001, and (e) Total. Rows include: 15 Gifts, grants, and contributions received; 16 Membership fees received; 17 Gross receipts from admissions, merchandise sold or services performed; 18 Gross income from interest, dividends; 19 Net income from unrelated business activities; 20 Tax revenues levied; 21 Value of services or facilities furnished; 22 Other income; 23 Total of lines 15 through 22; 24 Line 23 minus line 17; 25 Enter 1% of line 23; 26 Organizations described on lines 10 or 11; 27 Organizations described on line 12; 28 Unusual Grants.

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
CLIFTON BERRY 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
MARK BOTTERMAN 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
KATHLEEN BRADY 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
MARY CAMPBELL 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
JOHN DUBINSKY 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	CHAIRMAN 1.5	NONE	NONE	NONE
SETH LEADBEATER 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
DAVID MASON	DIRECTOR 1.5	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
611 OLIVE STREET 1641 SAINT LOUIS, MO 63101				
DEBRA MOORE 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
TOM PICKEL 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
TOM REEVES 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
RICHARD ROLOFF 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
GINA RYAN 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
BETH STOHR 611 OLIVE STREET 1641	DIRECTOR 1.5	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
SAINT LOUIS, MO 63101				
PETER BENOIST 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
KATHY KINGSBURY 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	SECRETARY 40	54,324.	12,069.	NONE
STEPHEN ACREE 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	PRESIDENT 40	98,400.	10,800.	NONE
RONALD KRAUS 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	TREASURER 40	81,375.	15,491.	NONE
ELIZABETH WRIGHT 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
ROBERT CANNON 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
WILLIAM DONIUS 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
JIM HOLTZMAN 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
MARK MCDERMOTT 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
GREG VATTEROTT 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
JILL CLAYBOUR 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE
RICHARD BARON 611 OLIVE STREET 1641 SAINT LOUIS, MO 63101	DIRECTOR 1.5	NONE	NONE	NONE

FORM 990, PART V-A - CURRENT OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS	TITLE AND TIME DEVOTED TO POSITION	COMPENSATION	CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	EXPENSE ACCT AND OTHER ALLOWANCES
		234,099.	38,360.	NONE
GRAND TOTALS				