**PUBLIC DISCLOSURE COPY**

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

### A. For the 2017 calendar year, or tax year beginning and ending

#### B. Check if applicable:
- [ ] Address change
- [ ] Name change
- [x] Legal status change
- [ ] Initial return
- [ ] Final return/termination of existence
- [ ] Amended return/application pending

#### C. Name of organization

**THE GREATER ST. LOUIS ARTS AND EDUCATION COUNCIL**

Doing business as

3547 OLIVE STREET

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

ST. LOUIS, MO 63103-1014

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

#### D. Employer identification number

43-0790672

#### E. Telephone number

314-289-4000

#### G. Gross receipts

2,481,212.

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

Yes [X] No [ ]

#### H(b) Are all subordinates included?

Yes [X] No [ ]

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

#### J. Website

[WWW.KEEPARTHAPPENING.ORG](http://WWW.KEEPARTHAPPENING.ORG)

#### K. Form of organization

[ ] Corporation  [ ] Trust  [ ] Association  [ ] Other [ ]

#### L. Year of formation

1963

#### M. State of legal domicile

MO

### Part I Summary

1. Briefly describe the organization's mission or most significant activities:  
   **SEE SCHEDULE O**

2. Check the box [ ] if the organization discontinued its operations or disposed of more than 25% of its net assets.

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

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

5. Total number of individuals employed in calendar year 2017 (Part V, line 2a)

6. Total number of volunteers (estimate if necessary)

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

8. Net unrelated business taxable income from Form 990-T, line 34

### Revenue

<table>
<thead>
<tr>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contributions and grants (Part VIII, line 1h)</td>
<td>3,197,096</td>
<td>2,251,651</td>
</tr>
<tr>
<td>Program service revenue (Part VIII, line 2g)</td>
<td>163,580</td>
<td>152,334</td>
</tr>
<tr>
<td>Investment income (Part VIII, column (A), lines 3, 4, and 7d)</td>
<td>-15,021</td>
<td>-98</td>
</tr>
<tr>
<td>Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)</td>
<td>-145,117</td>
<td>-117,274</td>
</tr>
<tr>
<td>Total revenue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)</td>
<td>3,200,538</td>
<td>2,286,613</td>
</tr>
</tbody>
</table>

### Expenses

<table>
<thead>
<tr>
<th>Description</th>
<th>Prior Year</th>
<th>Current Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants and similar amounts paid (Part IX, column (A), lines 1-3)</td>
<td>826,893</td>
<td>690,374</td>
</tr>
<tr>
<td>Benefits paid to or for members (Part IX, column (A), line 4)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)</td>
<td>845,001</td>
<td>799,587</td>
</tr>
<tr>
<td>Professional fundraising fees (Part IX, column (A), line 11e)</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Total fundraising expenses (Part IX, column (D), line 25)</td>
<td>305,061</td>
<td></td>
</tr>
<tr>
<td>Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)</td>
<td>819,161</td>
<td>757,175</td>
</tr>
<tr>
<td>Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)</td>
<td>2,491,055</td>
<td>2,247,136</td>
</tr>
<tr>
<td>Revenue less expenses. Subtract line 18 from line 12</td>
<td>709,483</td>
<td>39,477</td>
</tr>
</tbody>
</table>

### Net Assets or Fund Balances

<table>
<thead>
<tr>
<th>Description</th>
<th>Beginning of Current Year</th>
<th>End of Year</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total assets (Part X, line 16)</td>
<td>3,185,957</td>
<td>3,365,784</td>
</tr>
<tr>
<td>Total liabilities (Part X, line 26)</td>
<td>2,542,995</td>
<td>2,690,628</td>
</tr>
<tr>
<td>Net assets or fund balances. Subtract line 21 from line 20</td>
<td>642,962</td>
<td>675,156</td>
</tr>
</tbody>
</table>

### Part II Signature Block

**Signature of officer**

**CYNTHIA PROST, PRESIDENT**

**Date**

11/14/18

**Type or print name and title**

Print/Type preparer's name

JUDITH E. MURPHY

Preparer's signature

Check if self-employed

PTIN P00325547

Firm's name

RUBINBROWN LLP

Firm's EIN

43-0765316

Firm's address

ONE NORTH BRENTWOOD

SAINT LOUIS, MO 63105

Phone no. (314) 290-3300

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

LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2017)
Form 8879-EO

IRS e-file Signature Authorization for an Exempt Organization

For calendar year 2017, or fiscal year beginning , 2017, and ending , 20 .

Do not send to the IRS. Keep for your records.

Go to www.irs.gov/Form8879EO for the latest information.

OMB No. 1545-1979

THE GREATER ST. LOUIS ARTS AND EDUCATION COUNCIL

Name of exempt organization

Name and title of officer

CYNTHIA PROST

PRESIDENT

Employer identification number

43-0790672

Part I | Type of Return and Return Information (Whole Dollars Only)

Check this box for the return for which you are using this Form 8879-EO and enter the applicable amount, if any, from the return. If you check the box on line 1a, 2a, 3a, 4a, or 5a, below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, or 5b, whichever is applicable, blank (do not enter -0). But, if you entered -0 on the return, then enter -0 on the applicable line below.

Do not complete more than 1 line in Part I.

1a Form 990 check here [X] b Total revenue, if any (Form 990, Part VIII, column (A), line 12) 1b 2,286,613.
2a Form 990-EZ check here [ ] b Total revenue, if any (Form 990-EZ, line 3) 2b
3a Form 1120-POL check here [X] b Total tax (Form 1120-POL, line 22) 3b
4a Form 990-PF check here [X] b Tax based on investment income (Form 990-PF, Part VI, line 5) 4b
5a Form 8868 check here [X] b Balance Due (Form 8868, line 3c) 5b

Part II | Declaration and Signature Authorization of Officer

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization’s 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization’s electronic return and, if applicable, the organization’s consent to electronic funds withdrawal.

Officer’s PIN: check one box only

[X] I authorize RUBINBROWN LLP

ERO firm name

63105

Enter five numbers, but do not enter all zeros

as my signature on the organization’s tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return’s disclosure consent screen.

[ ] As an officer of the organization, I will enter my PIN as my signature on the organization’s tax year 2017 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return’s disclosure consent screen.

Officer’s signature

[ ]

Date 11-14-18

Part III | Certification and Authentication

ERO’s EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

43593343076

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2017 electronically filed return for the organization indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO’s signature RUBINBROWN LLP

Date

ER0 Must Retain This Form - See Instructions

Do Not Submit This Form to the IRS Unless Requested To Do So

Form 8879-EO (2017)

17170920 132842 00321.0000 2017.04010 THE GREATER ST. LOUIS ART 00321.01
**Form 8879-EO**

**IRS e-file Signature Authorization for an Exempt Organization**

For calendar year 2017, or fiscal year beginning _ _, 2017, and ending _ _, 2017.

- Do not send to the IRS. Keep for your records.
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- **2017** - OMB No. 1545-1878

#### Name of exempt organization
THE GREATER ST. LOUIS ARTS AND EDUCATION COUNCIL

#### Employer identification number
43-0790672

#### Name and title of officer
CYNTHIA PROST
PRESIDENT

**Part I - Type of Return and Return Information** (Whole Dollars Only)

<table>
<thead>
<tr>
<th>Line</th>
<th>Type of Return</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>1a</td>
<td>Form 990 check here</td>
<td>$2,286,613</td>
</tr>
<tr>
<td>2a</td>
<td>Form 990-EZ check here</td>
<td></td>
</tr>
<tr>
<td>2b</td>
<td>Total revenue, if any (Form 990, Part VIII, column (A), line 12)</td>
<td></td>
</tr>
<tr>
<td>3a</td>
<td>Form 1120-POL check here</td>
<td></td>
</tr>
<tr>
<td>3b</td>
<td>Total tax (Form 1120-POL, line 22)</td>
<td></td>
</tr>
<tr>
<td>4a</td>
<td>Form 990-PF check here</td>
<td></td>
</tr>
<tr>
<td>4b</td>
<td>Tax based on investment income (Form 990-PF, Part VI, line 8)</td>
<td></td>
</tr>
<tr>
<td>5a</td>
<td>Form 8868 check here</td>
<td></td>
</tr>
<tr>
<td>5b</td>
<td>Balance Due (Form 8868, line 3c)</td>
<td></td>
</tr>
</tbody>
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**Part II - Declaration and Signature Authorization of Officer**

Under penalties of perjury, I declare that I am an officer of the above organization and that I have examined a copy of the organization's 2017 electronic return and accompanying schedules and statements and to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the organization’s electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the organization’s return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the organization’s federal taxes owed on this return, and the financial institution to debit the entry to the account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the organization’s electronic return and, if applicable, the organization’s consent to electronic funds withdrawal.

**Officer’s PIN: check one box only**

[X] I authorize RUBINBROWN LLP to enter my PIN: 63105

Enter five numbers, but do not enter all zeros

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**Part III - Certification and Authentication**

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

<table>
<thead>
<tr>
<th>EFIN/PIN</th>
<th>43593343076</th>
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Do not enter all zeros

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**ERO's signature** RUBINBROWN LLP

Date: 11-14-18

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