

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)

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

A For the 2012 calendar year, or tax year beginning 09/01/12, and ending 08/31/13

B Check if applicable:
 Address change
 Name change
 Initial return
 Terminated
 Amended return
 Application pending

C Name of organization: **ST. LOUIS INTERNSHIP PROGRAM**
 Doing Business As: _____
 Number and street (or P.O. box if mail is not delivered to street address): **4232 FOREST PARK AVENUE**
 Room/suite: **1027**
 City, town or post office, state, and ZIP code: **ST LOUIS MO 63108**

D Employer identification number: **43-1741784**

E Telephone number: **314-371-7547**

G Gross receipts \$: **423,365**

F Name and address of principal officer:
KELVIN WESTBROOK
4232 FOREST PARK AVENUE #1027
ST LOUIS MO 63108

H(a) Is this a group return for affiliates? Yes No
H(b) Are all affiliates included? Yes No
 If "No," attach a list. (see instructions)

I Tax-exempt status: 501(c)(3) 501(c) () ◀ (insert no.) 4947(a)(1) or 527

J Website: ▶ **stlouisinternship.org**

K Form of organization: Corporation Trust Association Other ▶

L Year of formation: **1991** **M** State of legal domicile: **MO**

H(c) Group exemption number ▶ _____

Part I Summary

Activities & Governance	1 Briefly describe the organization's mission or most significant activities: TO BRING TOGETHER COMMUNITY AND PRIVATE SECTOR RESOURCES TO PREPARE LOW INCOME HIGH SCHOOL STUDENTS ATTENDING PUBLIC SCHOOLS IN THE CITY OF ST. LOUIS FOR THE FUTURE THROUGH ECONOMIC OPPORTUNITIES AND EDUCATION.		
	2 Check this box <input type="checkbox"/> 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)	3	16
	4 Number of independent voting members of the governing body (Part VI, line 1b)	4	16
	5 Total number of individuals employed in calendar year 2012 (Part V, line 2a)	5	61
	6 Total number of volunteers (estimate if necessary)	6	70
	7a Total unrelated business revenue from Part VIII, column (C), line 12	7a	0
b Net unrelated business taxable income from Form 990-T, line 34	7b	0	
Revenue	8 Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9 Program service revenue (Part VIII, line 2g)	216,884	236,970
	10 Investment income (Part VIII, column (A), lines 3, 4, and 7d)	77,172	185,056
	11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	1,078	1,039
	12 Total revenue – add lines 8 through 11 (must equal Part VIII, column (A), line 12)	-6,273	300
Expenses	13 Grants and similar amounts paid (Part IX, column (A), lines 1–3)		3,250
	14 Benefits paid to or for members (Part IX, column (A), line 4)		0
	15 Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	185,194	298,263
	16a Professional fundraising fees (Part IX, column (A), line 11e)	9,013	7,550
	b Total fundraising expenses (Part IX, column (D), line 25) ▶ 10,384		
	17 Other expenses (Part IX, column (A), lines 11a–11d, 11f–24e)	149,397	127,577
	18 Total expenses. Add lines 13–17 (must equal Part IX, column (A), line 25)	343,604	436,640
19 Revenue less expenses. Subtract line 18 from line 12	-54,743	-13,275	
Net Assets or Fund Balances	20 Total assets (Part X, line 16)	Beginning of Current Year	End of Year
	21 Total liabilities (Part X, line 26)	308,037	300,618
	22 Net assets or fund balances. Subtract line 21 from line 20	51,140	56,996
		256,897	243,622

Part II Signature Block

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.

Sign Here

Signature of officer: _____ Date: _____
JEFF KAISER **TREASURER**
 Type or print name and title

Paid Preparer Use Only

Print/Type preparer's name: **CARL J HABERSTROH** Preparer's signature: _____ Date: **12/04/13**
 Check if self-employed PTIN: **P00546134**
 Firm's name: ▶ **MADDOCK, HENSON & HABERSTROH, PC** Firm's EIN ▶ **43-1533361**
 Firm's address: ▶ **5353 S. LINDBERGH BLVD STE 200**
 ▶ **ST. LOUIS, MO 63126-3520** Phone no. **314-894-8400**

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

Part III Statement of Program Service Accomplishments

Check if Schedule O contains a response to any question in this Part III

1 Briefly describe the organization's mission:

TO BRING TOGETHER COMMUNITY AND PRIVATE SECTOR RESOURCES TO PREPARE LOW INCOME HIGH SCHOOL STUDENTS ATTENDING PUBLIC SCHOOLS IN THE CITY OF ST. LOUIS FOR THE FUTURE THROUGH ECONOMIC OPPORTUNITIES AND EDUCATION.

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 No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services?

Yes No

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 \$ 400,273 including grants of \$ 3,250) (Revenue \$ 184,960)

SELECTED, TRAINED, PLACED, AND MONITORED LOW-INCOME HIGH SCHOOL STUDENTS IN SUMMER JOBS AT VARIOUS PROFESSIONAL AND SERVICE BUSINESSES. THE ASSISTANCE INCLUDED UNIFORMS AND TRANSPORTATION FOR THE STUDENTS. YEAR ROUND POST-SECONDARY ACTIVITIES ENHANCING COLLEGE ACCESS WERE ALSO AVAILABLE FOR LOW-INCOME HIGH SCHOOL STUDENTS. ACTIVITIES INCLUDED COLLEGE VISITS, ACT PREPARATION, FASFA AND FINANCIAL LITERACY WORKSHOP AND FEE ASSISTANCE FOR DUAL ENROLLMENT FOR SENIORS AT ST. LOUIS COMMUNITY COLLEGE.

4b (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code:) (Expenses \$ including grants of \$) (Revenue \$)

4d Other program services. (Describe in Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses ▶ 400,273

Part IV Checklist of Required Schedules

		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	X	
3	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		X
4	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		X
5	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 Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I		X
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		X
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III		X
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		X
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V		X
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.		
a	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	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		X
c	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		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		X
e	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	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		X
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional		X
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E		X
14a	Did the organization maintain an office, employees, or agents outside of the United States?		X
b	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 or more? If "Yes," complete Schedule F, Parts I and IV		X
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the United States? If "Yes," complete Schedule F, Parts III and IV		X
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)		X
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II		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		X
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H		X
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		

Part IV Checklist of Required Schedules (continued)

		Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II		X
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III		X
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 Schedule J		X
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 Schedule K. If "No," go to line 25		X
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?		
24b			
c	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) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I		X
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 Schedule L, Part I		X
25b			X
26	Was a loan to or by a current or former officer, director, trustee, key employee, highest compensated employee, or disqualified person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II		X
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III		X
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):		
a	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28a			X
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV		X
28b			X
c	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV		X
28c			X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M		X
29			X
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M		X
30			X
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I		X
31			X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II		X
32			X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I		X
33			X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Parts II, III, or IV, and Part V, line 1		X
34			X
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?		X
35a			X
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			
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2		X
36			X
37	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			X
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? Note. All Form 990 filers are required to complete Schedule O	X	
38		X	

Part V Statements Regarding Other IRS Filings and Tax Compliance

Check if Schedule O contains a response to any question in this Part V

Form 990-EO with questions 1a through 14b regarding IRS filings and tax compliance. Includes input fields for numbers and checkboxes for Yes/No.

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 in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI [X]

Section A. Governing Body and Management

Table with 5 columns: Question, 1a, 1b, Yes, No. Rows include questions about voting members, family relationships, management delegation, and governance decisions.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Table with 5 columns: Question, Yes, No. Rows include questions about local chapters, written policies, conflict of interest, whistleblower, and document retention.

Section 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 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply. [X] Own website [] Another's website [X] Upon request [] Other (explain in Schedule O)
19 Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year.
20 State the name, physical address, and telephone number of the person who possesses the books and records of the organization: SHANISE JOHNSON 4232 FOREST PARK AVE ST. LOUIS MO 63108 314-371-7547

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response to any question 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 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 and/or Box 7 of Form 1099-MISC) 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.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organizations compensated any current officer, director, or trustee.

(A) Name and Title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) SHANISE JOHNSON PROGRAM DIRECTOR	40.00 0.00	X						11,300	0	0
(2) KELVIN WESTBROOK PRESIDENT	0.00 0.00	X		X				0	0	0
(3) LYNN WHALEY VOGEL VICE PRESIDENT	0.00 0.00	X		X				0	0	0
(4) JEFF KAISER TREASURER	0.00 0.00	X		X				0	0	0
(5) LISA FILKINS SECRETARY	0.00 0.00	X		X				0	0	0
(6) RASHEEDAH FURQAN DIRECTOR	0.00 0.00	X						0	0	0
(7) DOMINIE SABATINO-DONAT DIRECTOR	0.00 0.00	X						0	0	0
(8) KEITH GROSZ DIRECTOR	0.00 0.00	X						0	0	0
(9) RUTH LEWIS DIRECTOR	0.00 0.00	X						0	0	0
(10) MERRILL NELSON DIRECTOR	0.00 0.00	X						0	0	0
(11) MARK LEVISON DIRECTOR	0.00 0.00	X						0	0	0

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(12) DOROTHY WHITE - COLEMAN	0.00									
DIRECTOR	0.00	X						0	0	0
(13) APOLLO CAREY	0.00									
DIRECTOR	0.00	X						0	0	0
(14) LAKESHA BROWN	0.00									
DIRECTOR	0.00	X						0	0	0
(15) CLAIRE DEVOTO	0.00									
DIRECTOR	0.00	X						0	0	0
(16) TEDDY FOSTER	0.00									
DIRECTOR	0.00	X						0	0	0
(17) KATIE STOVERINK	0.00									
DIRECTOR	0.00	X						0	0	0
(18)										
(19)										
1b Sub-total								11,300		
c Total from continuation sheets to Part VII, Section A										
d Total (add lines 1b and 1c)								11,300		

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **0**

	Yes	No
3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual		X
4 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		X
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person		X

Section B. Independent Contractors

1 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	(B) Description of services	(C) Compensation

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization **0**

Part VIII Statement of Revenue

Check if Schedule O contains a response to any question in this Part VIII.

			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, Gifts, Grants and Other Similar Amounts	1a Federated campaigns	1a					
	b Membership dues	1b					
	c Fundraising events	1c					
	d Related organizations	1d					
	e Government grants (contributions)	1e					
	f All other contributions, gifts, grants, and similar amounts not included above	1f	236,970				
	g Noncash contributions included in lines 1a-1f: \$						
	h Total. Add lines 1a-1f			236,970			
Program Service Revenue		Busn. Code					
	2a Saint Louis Mental Health Boa		114,288	114,288			
	b College planning - Mo Dept Hi		36,412	36,412			
	c Summer Intern Salary		15,360	15,360			
	d Administration Fees		10,750	10,750			
	e Uniform Fees		4,125	4,125			
	f All other program service revenue		4,121	4,121			
	g Total. Add lines 2a-2f			185,056			
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)		1,039			1,039	
	4 Income from investment of tax-exempt bond proceeds						
	5 Royalties						
	6a Gross rents	(i) Real	(ii) Personal				
	b Less: rental exps.						
	c Rental inc. or (loss)						
	d Net rental income or (loss)						
	7a Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
	b Less: cost or other basis & sales exps.						
	c Gain or (loss)						
	d Net gain or (loss)						
	8a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18	a					
		b Less: direct expenses	b				
c Net income or (loss) from fundraising events							
9a Gross income from gaming activities. See Part IV, line 19	a						
	b Less: direct expenses	b					
	c Net income or (loss) from gaming activities						
10a Gross sales of inventory, less returns and allowances	a						
	b Less: cost of goods sold	b					
	c Net income or (loss) from sales of inventory						
Miscellaneous Revenue		Busn. Code					
11a Miscellaneous Income			300	300			
b							
c							
d All other revenue							
e Total. Add lines 11a-11d			300				
12 Total revenue. See instructions.			423,365	185,356	0	1,039	

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).

Check if Schedule O contains a response to any question in this Part IX

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to governments and organizations in the U.S. See Part IV, line 21				
2 Grants and other assistance to individuals in the U.S. See Part IV, line 22	3,250	3,250		
3 Grants and other assistance to governments, organizations, and individuals outside the U.S. See Part IV, lines 15 and 16				
4 Benefits paid to or for members				
5 Compensation of current officers, directors, trustees, and key employees				
6 Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)				
7 Other salaries and wages	269,375	264,218	4,593	564
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions)				
9 Other employee benefits	5,937	5,165	594	178
10 Payroll taxes	22,951	21,803	918	230
11 Fees for services (non-employees):				
a Management				
b Legal				
c Accounting	12,030		12,030	
d Lobbying				
e Professional fundraising services. See Part IV, line 17	7,550			7,550
f Investment management fees				
g Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)	3,609	3,429	180	
12 Advertising and promotion	687			687
13 Office expenses	14,013	11,966	1,935	112
14 Information technology	549		549	
15 Royalties				
16 Occupancy	6,517	5,214	1,303	
17 Travel	20,265	20,265		
18 Payments of travel or entertainment expenses for any federal, state, or local public officials				
19 Conferences, conventions, and meetings	1,402	721	462	219
20 Interest				
21 Payments to affiliates				
22 Depreciation, depletion, and amortization	2,366	1,892	474	
23 Insurance	3,943	3,943		
24 Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O.)				
a Alumni Programs- College	24,020	24,020		
b Interns Professional Atti	14,306	14,306		
c Alumni Programs- Healthca	10,074	10,074		
d Training-Equipment and Fa	4,628	4,628		
e All other expenses	9,168	5,379	2,945	844
25 Total functional expenses. Add lines 1 through 24e	436,640	400,273	25,983	10,384
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 <input type="checkbox"/> if following SOP 98-2 (ASC 958-720)				

Part X Balance Sheet

Check if Schedule O contains a response to any question in this Part X

		(A) Beginning of year		(B) End of year
Assets	1 Cash—non-interest bearing	43,690	1	6,134
	2 Savings and temporary cash investments	252,022	2	274,859
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net	250	4	1,500
	5 Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions). Complete Part II of Schedule L		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	5,000	9	6,900
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a 28,331		
	b Less: accumulated depreciation	10b 17,106	7,075	10c 11,225
	11 Investments—publicly traded securities		11	
	12 Investments—other securities. See Part IV, line 11		12	
	13 Investments—program-related. See Part IV, line 11		13	
	14 Intangible assets		14	
	15 Other assets. See Part IV, line 11		15	
16 Total assets. Add lines 1 through 15 (must equal line 34)		308,037	16	300,618
Liabilities	17 Accounts payable and accrued expenses	780	17	10,759
	18 Grants payable		18	
	19 Deferred revenue	42,644	19	42,287
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	7,716	25	3,950
	26 Total liabilities. Add lines 17 through 25	51,140	26	56,996
Net Assets or Fund Balances	Organizations that follow SFAS 117 (ASC 958), check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.			
	27 Unrestricted net assets	247,791	27	232,760
	28 Temporarily restricted net assets	9,106	28	10,862
	29 Permanently restricted net assets		29	
	Organizations that do not follow SFAS 117 (ASC 958), check here <input type="checkbox"/> and complete lines 30 through 34.			
	30 Capital stock or trust principal, or current funds		30	
	31 Paid-in or capital surplus, or land, building, or equipment fund		31	
	32 Retained earnings, endowment, accumulated income, or other funds		32	
33 Total net assets or fund balances	256,897	33	243,622	
34 Total liabilities and net assets/fund balances	308,037	34	300,618	

Part XI Reconciliation of Net Assets

Check if Schedule O contains a response to any question in this Part XI

1	Total revenue (must equal Part VIII, column (A), line 12)	1	423,365
2	Total expenses (must equal Part IX, column (A), line 25)	2	436,640
3	Revenue less expenses. Subtract line 2 from line 1	3	-13,275
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	256,897
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain in Schedule O)	9	
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	243,622

Part XII Financial Statements and Reporting

Check if Schedule O contains a response to any question in this Part XII

		Yes	No
1	Accounting method used to prepare the Form 990: <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.		
2a	Were the organization's financial statements compiled or reviewed by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both: <input type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis		X
2b	Were the organization's financial statements audited by an independent accountant? If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both: <input checked="" type="checkbox"/> Separate basis <input type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separate basis	X	
2c	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.	X	
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		X
3b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits		

SCHEDULE A
(Form 990 or 990-EZ)

Public Charity Status and Public Support

OMB No. 1545-0047

2012

Open to Public Inspection

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. ▶ See separate instructions.

Department of the Treasury
Internal Revenue Service

Name of the organization ST. LOUIS INTERNSHIP PROGRAM	Employer identification number 43-1741784
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Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 11, check only one box.)

- 1 A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i)**.
- 2 A school described in **section 170(b)(1)(A)(ii)**. (Attach Schedule E.)
- 3 A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii)**.
- 4 A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii)**. Enter the hospital's name, city, and state:
- 5 An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv)**. (Complete Part II.)
- 6 A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v)**.
- 7 An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 8 A community trust described in **section 170(b)(1)(A)(vi)**. (Complete Part II.)
- 9 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 exempt 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)**. (Complete Part III.)
- 10 An organization organized and operated exclusively to test for public safety. See **section 509(a)(4)**.
- 11 An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2). See **section 509(a)(3)**. Check the box that describes the type of supporting organization and complete lines 11e through 11h.
 - a Type I b Type II c Type III—Functionally integrated d Type III—Non-functionally integrated
- e By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2).
- f If the organization received a written determination from the IRS that it is a Type I, Type II, or Type III supporting organization, check this box
- g Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?
 - (i) A person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the supported organization?
 - (ii) A family member of a person described in (i) above?
 - (iii) A 35% controlled entity of a person described in (i) or (ii) above?

	Yes	No
11g(i)		
11g(ii)		
11g(iii)		

h Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1–9 above or IRC section (see instructions))	(iv) Is the organization in col. (i) listed in your governing document?		(v) Did you notify the organization in col. (i) of your support?		(vi) Is the organization in col. (i) organized in the U.S.?		(vii) Amount of monetary support
			Yes	No	Yes	No	Yes	No	
(A)									
(B)									
(C)									
(D)									
(E)									
Total									

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

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization'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						
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)						
6 Public support. Subtract line 5 from line 4.						

Section B. Total Support

Calendar year (or fiscal year beginning in) ►	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
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 assets (Explain in Part IV.)						
11 Total support. Add lines 7 through 10						
12 Gross receipts from related activities, etc. (see instructions)					12	
13 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

14 Public support percentage for 2012 (line 6, column (f) divided by line 11, column (f))	14	%
15 Public support percentage from 2011 Schedule A, Part II, line 14	15	%
16a 33 1/3% support test—2012. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 33 1/3% support test—2011. If the organization did not check a box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
17a 10%-facts-and-circumstances test—2012. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
b 10%-facts-and-circumstances test—2011. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the "facts-and-circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts-and-circumstances" test. The organization qualifies as a publicly supported organization <input type="checkbox"/>		
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions <input type="checkbox"/>		

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

(Complete only if you checked the box on line 9 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.)

Section A. Public Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	161,181	154,942	258,351	224,384	236,970	1,035,828
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	227,323	242,095	97,489	77,172	185,055	829,134
3 Gross receipts from activities that are not an unrelated trade or business under section 513						
4 Tax revenues levied for the organization'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	388,504	397,037	355,840	301,556	422,025	1,864,962
7a Amounts included on lines 1, 2, and 3 received from disqualified persons	36,656	33,004	130,578	86,848	136,727	423,813
b 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	210,349	199,539	86,314	74,464	158,182	728,848
c Add lines 7a and 7b	247,005	232,543	216,892	161,312	294,909	1,152,661
8 Public support. (Subtract line 7c from line 6.)						712,301

Section B. Total Support

Calendar year (or fiscal year beginning in) ▶	(a) 2008	(b) 2009	(c) 2010	(d) 2011	(e) 2012	(f) Total
9 Amounts from line 6	388,504	397,037	355,840	301,556	422,025	1,864,962
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	2,480	5,315	3,305	1,078	1,039	13,217
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
c Add lines 10a and 10b	2,480	5,315	3,305	1,078	1,039	13,217
11 Net income from unrelated business activities not included in 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 IV.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)	390,984	402,352	359,145	302,634	423,064	1,878,179
14 First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here <input type="checkbox"/>						

Section C. Computation of Public Support Percentage

15 Public support percentage for 2012 (line 8, column (f) divided by line 13, column (f))	15	37.93 %
16 Public support percentage from 2011 Schedule A, Part III, line 15	16	44.45 %

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2012 (line 10c, column (f) divided by line 13, column (f))	17	1 %
18 Investment income percentage from 2011 Schedule A, Part III, line 17	18	1 %

- 19a 33 1/3% support tests—2012.** If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- b 33 1/3% support tests—2011.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization
- 20 Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

**SCHEDULE D
(Form 990)**

Supplemental Financial Statements

OMB No. 1545-0047

2012

**Open to Public
Inspection**

▶ **Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.**
▶ **Attach to Form 990. ▶ See separate instructions.**

Department of the Treasury
Internal Revenue Service

Name of the organization

Employer identification number

ST. LOUIS INTERNSHIP PROGRAM

43-1741784

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate contributions to (during year)		
3 Aggregate grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised 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 advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? Yes No

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

<input type="checkbox"/> Preservation of land for public use (e.g., recreation or education)	<input type="checkbox"/> Preservation of an historically important land area
<input type="checkbox"/> Protection of natural habitat	<input type="checkbox"/> Preservation of a certified historic structure
<input type="checkbox"/> Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included in (a)	2c
d Number of conservation easements included in (c) acquired after 8/17/06, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year ▶

4 Number of states where property subject to conservation easement is located ▶

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? Yes No

6 Staff and volunteer hours devoted to monitoring, inspecting, and enforcing conservation easements during the year ▶

7 Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$

8 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? Yes No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a If the organization elected, as permitted under SFAS 116 (ASC 958), not 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 furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under SFAS 116 (ASC 958), 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 furtherance of public service, provide the following amounts relating to these items:

(i) Revenues included in Form 990, Part VIII, line 1	▶ \$
(ii) Assets included in Form 990, Part X	▶ \$

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items:

a Revenues included in Form 990, Part VIII, line 1	▶ \$
b Assets included in Form 990, Part X	▶ \$

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

- 3** Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection items (check all that apply):
- a** Public exhibition
 - b** Scholarly research
 - c** Preservation for future generations
 - d** Loan or exchange programs
 - e** Other
- 4** Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.
- 5** During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes No

Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

- 1a** Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes No
- b** If "Yes," explain the arrangement in Part XIII and complete the following table:
- | | Amount |
|--|-----------|
| c Beginning balance | 1c |
| d Additions during the year | 1d |
| e Distributions during the year | 1e |
| f Ending balance | 1f |
- 2a** Did the organization include an amount on Form 990, Part X, line 21? Yes No
- b** If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII

Part V Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance					
b Contributions					
c Net investment earnings, gains, and losses					
d Grants or scholarships					
e Other expenditures for facilities and programs					
f Administrative expenses					
g End of year balance					

- 2** Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:
- a** Board designated or quasi-endowment ▶ %
 - b** Permanent endowment ▶ %
 - c** Temporarily restricted endowment ▶ %
- The percentages in lines 2a, 2b, and 2c should equal 100%.

- 3a** Are there endowment funds not in the possession of the organization that are held and administered for the organization by:
- | | Yes | No |
|--|---------------|----|
| (i) unrelated organizations | 3a(i) | |
| (ii) related organizations | 3a(ii) | |
| b If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R? | 3b | |

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land				
b Buildings				
c Leasehold improvements				
d Equipment				
e Other		28,331	17,106	11,225

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10(c).) ▶ **11,225**

Part VII Investments—Other Securities. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely-held equity interests		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
(I)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	▶	

Part VIII Investments—Program Related. See Form 990, Part X, line 13.

(a) Description of investment type	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)	▶	

Part IX Other Assets. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
(10)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	▶

Part X Other Liabilities. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value	
(1) Federal income taxes		
(2) Lease Payable - IKON Financial Servi	3,825	
(3) Accrued Payroll	125	
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
(10)		
(11)		
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	3,950	

2. FIN 48 (ASC 740) Footnote. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII

SCHEDULE O
(Form 990 or 990-EZ)

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 990-EZ.

OMB No. 1545-0047
2012
Open to Public
Inspection

Name of the organization
ST. LOUIS INTERNSHIP PROGRAM

Employer identification number
43-1741784

Form 990, Part VI, Line 11b - Organization's Process to Review Form 990

**THE TREASURER AND PROGRAM DIRECTOR REVIEW AND DISCUSS THE FORM ALONG WITH
THE PREPARER.**

Form 990, Part VI, Line 12c - Enforcement of Conflicts Policy

**THE CONFLICT OF INTEREST POLICY IS DISCUSSED ANNUALLY AT A BOARD MEETING
AND ANY POSSIBLE CONFLICTS ARE VERBALLY DISCLOSED BY THE BOARD MEMBERS.**

Form 990, Part VI, Line 19 - Governing Documents Disclosure Explanation

**THE ORGANIZATION'S GOVERNING DOCUMENTS, CONFLICT OF INTEREST POLICY AND
FINANCIAL STATEMENTS ARE AVAILABLE UPON WRITTEN REQUEST AT THE
ORGANIZATION'S OFFICE DURING NORMAL OFFICE HOURS.**

Form **4562**

Depreciation and Amortization

(Including Information on Listed Property)

OMB No. 1545-0172

2012

Attachment Sequence No. **179**

Department of the Treasury
Internal Revenue Service (99)

▶ See separate instructions. ▶ Attach to your tax return.

Name(s) shown on return

ST. LOUIS INTERNSHIP PROGRAM

Identifying number
43-1741784

Business or activity to which this form relates

Indirect Depreciation

Part I Election To Expense Certain Property Under Section 179

Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount (see instructions)	1	500,000
2	Total cost of section 179 property placed in service (see instructions)	2	
3	Threshold cost of section 179 property before reduction in limitation (see instructions)	3	2,000,000
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions	5	
6	(a) Description of property	(b) Cost (business use only)	(c) Elected cost
7	Listed property. Enter the amount from line 29	7	
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7	8	
9	Tentative deduction. Enter the smaller of line 5 or line 8	9	
10	Carryover of disallowed deduction from line 13 of your 2011 Form 4562	10	
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instructions)	11	
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11	12	
13	Carryover of disallowed deduction to 2013. Add lines 9 and 10, less line 12	13	

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions)

14	Special depreciation allowance for qualified property (other than listed property) placed in service during the tax year (see instructions)	14	
15	Property subject to section 168(f)(1) election	15	
16	Other depreciation (including ACRS)	16	2,366

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)

Section A

17	MACRS deductions for assets placed in service in tax years beginning before 2012	17	0
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here		

Section B—Assets Placed in Service During 2012 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only—see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a	3-year property					
b	5-year property					
c	7-year property					
d	10-year property					
e	15-year property					
f	20-year property					
g	25-year property		25 yrs.		S/L	
h	Residential rental property		27.5 yrs.	MM	S/L	
i	Nonresidential real property		39 yrs.	MM	S/L	

Section C—Assets Placed in Service During 2012 Tax Year Using the Alternative Depreciation System

20a	Class life				S/L	
b	12-year		12 yrs.		S/L	
c	40-year		40 yrs.	MM	S/L	

Part IV Summary (See instructions.)

21	Listed property. Enter amount from line 28	21	
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations—see instructions	22	2,366
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs	23	

For Paperwork Reduction Act Notice, see separate instructions.

Form **4562** (2012)

43-1741784

Federal Asset Report

FYE: 8/31/2013

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
Other Depreciation:									
9	FURNITURE & FIXTURES	3/01/96	3,150			3,150	7 MO S/L	3,150	0
10	INSPIRON 1100 NOTEBOOK COMPUTE	11/04/03	1,752			1,752	5 MO S/L	1,752	0
11	XEON PROCESSOR	11/28/06	3,341			3,341	5 MO S/L	3,341	0
12	MINI TOWER PENTIUM - QTY 4	11/28/06	3,808			3,808	5 MO S/L	3,808	0
13	HP LASERJET PRINTER P2015DN	1/18/08	490			490	10 MO200DB	313	35
14	HP LASERJET PRINTER M2727	1/18/08	524			524	10 MO200DB	334	38
15	COPIER	6/16/11	8,750			8,750	5 MO S/L	2,042	1,750
16	Computer systems	4/01/13	6,516			6,516	5 MO S/L	0	543
	Total Other Depreciation		<u>28,331</u>			<u>28,331</u>		<u>14,740</u>	<u>2,366</u>
	Total ACRS and Other Depreciation		<u>28,331</u>			<u>28,331</u>		<u>14,740</u>	<u>2,366</u>
	Grand Totals		28,331			28,331		14,740	2,366
	Less: Dispositions and Transfers		0			0		0	0
	Less: Start-up/Org Expense		0			0		0	0
	Net Grand Totals		<u>28,331</u>			<u>28,331</u>		<u>14,740</u>	<u>2,366</u>

43-1741784

State Asset Report

FYE: 8/31/2013

Form 990, Page 1

Asset	Description	Date In Service	Cost	Basis for Depr	State Prior	State Current	Federal Current	Difference Fed - State
5-year GDS Property:								
16	Computer systems	4/01/13	6,516	3,258	0	3,910	543	-3,367
			<u>6,516</u>	<u>3,258</u>	<u>0</u>	<u>3,910</u>	<u>543</u>	<u>-3,367</u>
Prior MACRS:								
9	FURNITURE & FIXTURES	3/01/96	0	0	0	0	0	0
10	INSPIRON 1100 NOTEBOOK COMPUTE	11/04/03	1,752	876	1,752	0	0	0
11	XEON PROCESSOR	11/28/06	3,341	3,341	3,341	0	0	0
13	HP LASERJET PRINTER P2015DN	1/18/08	490	245	476	14	35	21
14	HP LASERJET PRINTER M2727	1/18/08	524	262	509	15	38	23
15	COPIER	6/16/11	8,750	0	8,750	0	1,750	1,750
			<u>14,857</u>	<u>4,724</u>	<u>14,828</u>	<u>29</u>	<u>1,823</u>	<u>1,794</u>
Other Depreciation:								
12	MINI TOWER PENTIUM - QTY 4	11/28/06	3,808	3,808	3,808	0	0	0
	Total Other Depreciation		<u>3,808</u>	<u>3,808</u>	<u>3,808</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>3,808</u>	<u>3,808</u>	<u>3,808</u>	<u>0</u>	<u>0</u>	<u>0</u>
	Grand Totals		25,181	11,790	18,636	3,939	2,366	-1,573
	Less: Dispositions		0	0	0	0	0	0
	Less: Start-up/Org Expense		0	0	0	0	0	0
	Net Grand Totals		<u>25,181</u>	<u>11,790</u>	<u>18,636</u>	<u>3,939</u>	<u>2,366</u>	<u>-1,573</u>

43-1741784

AMT Asset Report

FYE: 8/31/2013

Form 990, Page 1

Asset	Description	Date In Service	Cost	Bus %	Sec 179Bonus	Basis for Depr	PerConv Meth	Prior	Current
5-year GDS Property:									
16	Computer systems	4/01/13	6,516		X	3,258	5 HY 200DB	0	3,910
			<u>6,516</u>			<u>3,258</u>		<u>0</u>	<u>3,910</u>
Prior MACRS:									
9	FURNITURE & FIXTURES	3/01/96	3,150			3,150	10 HY 150DB	3,150	0
10	INSPIRON 1100 NOTEBOOK COMPUTE	11/04/03	1,752		X	876	5 HY 200DB	1,752	0
11	XEON PROCESSOR	11/28/06	3,341			3,341	5 HY 200DB	3,341	0
13	HP LASERJET PRINTER P2015DN	1/18/08	490		X	245	5 HY 200DB	476	14
14	HP LASERJET PRINTER M2727	1/18/08	524		X	262	5 HY 200DB	509	15
15	COPIER	6/16/11	8,750		X	0	5 MQ200DB	8,750	0
			<u>18,007</u>			<u>7,874</u>		<u>17,978</u>	<u>29</u>
Other Depreciation:									
12	MINI TOWER PENTIUM - QTY 4	11/28/06	3,808			3,808	5 MO S/L	3,808	0
	Total Other Depreciation		<u>3,808</u>			<u>3,808</u>		<u>3,808</u>	<u>0</u>
	Total ACRS and Other Depreciation		<u>3,808</u>			<u>3,808</u>		<u>3,808</u>	<u>0</u>
	Grand Totals		28,331			14,940		21,786	3,939
	Less: Dispositions and Transfers		<u>0</u>			<u>0</u>		<u>0</u>	<u>0</u>
	Net Grand Totals		<u>28,331</u>			<u>14,940</u>		<u>21,786</u>	<u>3,939</u>

Depreciation Adjustment Report

All Business Activities

<u>Form</u>	<u>Unit</u>	<u>Asset</u>	<u>Description</u>	<u>Tax</u>	<u>AMT</u>	<u>AMT Adjustments/ Preferences</u>
There are no assets that meet the criteria of this report						

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>Tax</u>	<u>AMT</u>
<u>Other Depreciation:</u>					
9	FURNITURE & FIXTURES	3/01/96	3,150	0	0
10	INSPIRON 1100 NOTEBOOK COMPUTER	11/04/03	1,752	0	0
11	XEON PROCESSOR	11/28/06	3,341	0	0
12	MINI TOWER PENTIUM - QTY 4	11/28/06	3,808	0	0
13	HP LASERJET PRINTER P2015DN	1/18/08	490	32	0
14	HP LASERJET PRINTER M2727	1/18/08	524	35	0
15	COPIER	6/16/11	8,750	1,750	0
16	Computer sysems	4/01/13	6,516	1,303	1,042
	Total Other Depreciation		<u>28,331</u>	<u>3,120</u>	<u>1,042</u>
	Total ACRS and Other Depreciation		<u>28,331</u>	<u>3,120</u>	<u>1,042</u>
	Grand Totals		<u>28,331</u>	<u>3,120</u>	<u>1,042</u>

<u>Asset</u>	<u>Description</u>	<u>Date In Service</u>	<u>Cost</u>	<u>State</u>	<u>AMT</u>
<u>Other Depreciation:</u>					
9	FURNITURE & FIXTURES	3/01/96	0	0	0
10	INSPIRON 1100 NOTEBOOK COMPUTER	11/04/03	1,752	0	0
11	XEON PROCESSOR	11/28/06	3,341	0	0
12	MINI TOWER PENTIUM - QTY 4	11/28/06	3,808	0	0
13	HP LASERJET PRINTER P2015DN	1/18/08	490	0	0
14	HP LASERJET PRINTER M2727	1/18/08	524	0	0
15	COPIER	6/16/11	8,750	0	0
16	Computer sysems	4/01/13	6,516	1,042	1,042
Total Other Depreciation			<u>25,181</u>	<u>1,042</u>	<u>1,042</u>
Total ACRS and Other Depreciation			<u>25,181</u>	<u>1,042</u>	<u>1,042</u>
Grand Totals			<u>25,181</u>	<u>1,042</u>	<u>1,042</u>

Federal Statements**Taxable Interest on Investments**

<u>Description</u>	<u>Amount</u>	<u>Unrelated Business Code</u>	<u>Exclusion Code</u>	<u>Postal Code</u>	<u>Acquired after 6/30/75</u>	<u>US Obs (\$ or %)</u>
Interest income						
\$			14			
Interest Income - Money Mkt	858		14			
Interest Income- Bank of Amer	181		14			
Total	\$ 1,039					

Federal Statements**Form 990, Part IX, Line 11g - Other Fees for Service (Non-employee)**

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Payroll Service For Staff & I	\$ 3,609	\$ 3,429	\$ 180	\$
Total	<u>\$ 3,609</u>	<u>\$ 3,429</u>	<u>\$ 180</u>	<u>\$ 0</u>

Form 990, Part IX, Line 24e - All Other Expenses

<u>Description</u>	<u>Total Expenses</u>	<u>Program Service</u>	<u>Management & General</u>	<u>Fund Raising</u>
Student Recruitment Activ	\$ 2,490	\$ 2,490	\$	\$
Storage Charges	2,340		2,340	
Kick Off Expense	1,820	1,820		
Credit Card Service Fees	844			844
Business Recruitment Expe	580	580		
Miscellaneous expense	462		462	
Mock Trial	367	367		
Overage in Administrative	98		98	
Alumni Expenses	69	69		
Student recruitment - mee	53	53		
Dues and Subscriptions	45		45	
Total	<u>\$ 9,168</u>	<u>\$ 5,379</u>	<u>\$ 2,945</u>	<u>\$ 844</u>

Federal Statements

Schedule A, Part III, Line 7a - Support from Disqualified Persons

<u>Donor Name</u>	<u>2008</u>	<u>2009</u>	<u>2010</u>	<u>2011</u>	<u>2012</u>
AG EDWARDS & SONS, INC	\$	\$	\$	\$	\$
CLAIRE DEVOTO					100
CORAY GROVE	500				
DAUGHTERS OF CHARITY			45,000		34,241
DOMINIE SABATINO	150	244	200	100	250
DOROTHY MOOG CHARITABLE TRUST		3,000			
DOROTHY WHITE-COLEMAN	1,000	1,000	1,000	4,100	1,000
JAMES & JENNIFER CUNNANE	500				
JEFF KAISER	500	500	500	500	500
JOSEPH & ANNIE SCHLAFLY	1,500		500		
KATIE STOVERINK					150
KEITH GROSZ	500		250	250	250
KELLY LINEHAN	400				
KELVIN WESTBROOK	1,000	1,000	1,000	2,000	1,000
LAKESHA BROWN			250	150	150
LINDA RIEKES		560			
LISA FILKINS	200				
MARIA MALONEY		250			
MARK LEVISON	1,000	1,000	1,000	250	1,000
MARY ELIZABETH GRIMES	150	100	50		
MISSOURI FOUNDATION FOR HEALTH			45,003	45,003	60,636
NORMAN STUPP FOUNDATION	8,500	8,500	15,000	12,500	10,000
PAUL & LYNN VOGEL	244	250	250	250	
RASHEEDAH FURQAN				125	1,150
ROBERT HILL	200	200	250		
RUTH LEWIS		200	125		200
STEVEN COUSINS		100			
THEODORE FOSTER					100
THOMAS HULVERSON		500	10,000	10,000	
THOMAS HULVERSON FOUNDATION	10,000			1,000	10,500
TMN STAFFING, INC	312	600	200	620	500
TRIO FOUNDATION		5,000	5,000	10,000	10,000
WALTER & NANCY GALVIN	10,000	10,000	5,000		5,000
Total	\$ 36,656	\$ 33,004	\$ 130,578	\$ 86,848	\$ 136,727

Federal Statements**Schedule A, Part III, Line 7b - Excess Gross Receipts**

<u>Donor Name</u>	<u>Total</u>	<u>Excess</u>
EMERSON	\$	\$
2012	22,482	17,482
2011	27,176	22,176
2010	22,320	17,320
2009	30,060	25,060
2008	29,820	24,820
HUMAN DEVELOPMENT CORP		
2009	18,792	13,792
2008	13,205	8,205
ST LOUIS MENTAL HEALTH BOARD		
2012	114,288	109,288
2009	120,051	115,051
2008	166,588	161,588
MISSOURI DEPT OF HIGHER EDUCATION		
2012	36,412	31,412
2011	35,604	30,604
2010	45,494	40,494
2009	42,172	37,172
GRAYBAR ELECTRIC		
2009	6,120	1,120
SONYA GLASSBERG		
2011	10,000	5,000
2010	20,000	15,000
2008	10,000	5,000
SAIGH FOUNDATION		
2011	7,500	2,500
2010	10,000	5,000
2009	10,000	5,000
2008	10,000	5,000
EMPLOYEE COMMUNITY FUND OF BOEING		
2011	6,500	1,500
2010	13,500	8,500
2008	7,500	2,500
SALEES SEDDON		
2011	7,784	2,784
2009	7,344	2,344
2008	8,236	3,236
ROBERT FOX		
2011	5,900	900
MARY NEAL		
2011	5,500	500
SAVVIS COMMUNICATIONS		
2011	8,500	3,500
THE INCARNATE WORD FOUNDATION		
2011	10,000	5,000
Total	\$ <u>888,848</u>	\$ <u>728,848</u>

Federal Statements**Schedule A, Part III, Line 10a(e)**

<u>Description</u>	<u>Amount</u>
Interest income	\$
Interest Income - Money Mkt	858
Interest Income- Bank of Amer	<u>181</u>
Total	\$ <u><u>1,039</u></u>