

Form **990-PF**
 Department of the Treasury
 Internal Revenue Service

Return of Private Foundation
or Section 4947(a)(1) Trust Treated as Private Foundation

▶ **Do not enter social security numbers on this form as it may be made public.**
 ▶ **Go to www.irs.gov/Form990PF for instructions and the latest information.**

OMB No 1545-0052
2018
Open to Public Inspection

For calendar year 2018, or tax year beginning 01-01-2018, and ending 12-31-2018

Name of foundation THE CLARK-FOX FAMILY FOUNDATION		A Employer identification number 81-1608523	
Number and street (or P O box number if mail is not delivered to street address) Room/suite 130 S BEMISTON AVENUE NO 303		B Telephone number (see instructions) (314) 899-5248	
City or town, state or province, country, and ZIP or foreign postal code CLAYTON, MO 63105		C If exemption application is pending, check here <input type="checkbox"/>	
G Check all that apply: <input type="checkbox"/> Initial return <input type="checkbox"/> Initial return of a former public charity <input type="checkbox"/> Final return <input type="checkbox"/> Amended return <input type="checkbox"/> Address change <input type="checkbox"/> Name change		D 1. Foreign organizations, check here <input type="checkbox"/> 2. Foreign organizations meeting the 85% test, check here and attach computation <input type="checkbox"/>	
H Check type of organization: <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust <input type="checkbox"/> Other taxable private foundation		E If private foundation status was terminated under section 507(b)(1)(A), check here <input type="checkbox"/>	
I Fair market value of all assets at end of year (from Part II, col (c), line 16) ▶ \$ <u>192,975</u>		F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here <input type="checkbox"/>	
J Accounting method: <input checked="" type="checkbox"/> Cash <input type="checkbox"/> Accrual <input type="checkbox"/> Other (specify) _____ <i>(Part I, column (d) must be on cash basis)</i>			

Part I Analysis of Revenue and Expenses <i>(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))</i>		(a) Revenue and expenses per books	(b) Net investment income	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
Revenue	1 Contributions, gifts, grants, etc., received (attach schedule)	614,018			
	2 Check <input type="checkbox"/> if the foundation is not required to attach Sch. B				
	3 Interest on savings and temporary cash investments				
	4 Dividends and interest from securities				
	5a Gross rents				
	b Net rental income or (loss)				
	6a Net gain or (loss) from sale of assets not on line 10				
	b Gross sales price for all assets on line 6a				
	7 Capital gain net income (from Part IV, line 2)		0		
	8 Net short-term capital gain			0	
	9 Income modifications				
	10a Gross sales less returns and allowances				
b Less Cost of goods sold					
c Gross profit or (loss) (attach schedule)					
11 Other income (attach schedule)	31,013	0	31,013		
12 Total. Add lines 1 through 11	645,031	0	31,013		
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc	0	0	0	0
	14 Other employee salaries and wages	238,516	0	0	238,516
	15 Pension plans, employee benefits				
	16a Legal fees (attach schedule)	1,985	0	0	1,985
	b Accounting fees (attach schedule)				
	c Other professional fees (attach schedule)	54,988	0	6,500	48,488
	17 Interest				
	18 Taxes (attach schedule) (see instructions)				
	19 Depreciation (attach schedule) and depletion	11,291	0	11,291	
	20 Occupancy	39,333	0	1,891	37,442
	21 Travel, conferences, and meetings	22,914	0	0	22,914
	22 Printing and publications	9,481	0	0	9,481
	23 Other expenses (attach schedule)	123,959	0	0	123,959
	24 Total operating and administrative expenses. Add lines 13 through 23	502,467	0	19,682	482,785
	25 Contributions, gifts, grants paid	99,000			99,000
26 Total expenses and disbursements. Add lines 24 and 25	601,467	0	19,682	581,785	
27 Subtract line 26 from line 12					
a Excess of revenue over expenses and disbursements	43,564				
b Net investment income (if negative, enter -0-)		0			
c Adjusted net income (if negative, enter -0-)			11,331		

Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)		Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
Assets	1 Cash—non-interest-bearing			
	2 Savings and temporary cash investments	59,998	114,853	114,853
	3 Accounts receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	4 Pledges receivable ▶ _____ Less allowance for doubtful accounts ▶ _____			
	5 Grants receivable			
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)			
	7 Other notes and loans receivable (attach schedule) ▶ _____ Less allowance for doubtful accounts ▶ _____			
	8 Inventories for sale or use			
	9 Prepaid expenses and deferred charges			
	10a Investments—U S and state government obligations (attach schedule)			
	b Investments—corporate stock (attach schedule)			
	c Investments—corporate bonds (attach schedule)			
	11 Investments—land, buildings, and equipment basis ▶ _____ Less accumulated depreciation (attach schedule) ▶ _____			
	12 Investments—mortgage loans			
	13 Investments—other (attach schedule)			
	14 Land, buildings, and equipment basis ▶ _____ 78,122 Less accumulated depreciation (attach schedule) ▶ 31,712	57,701	46,410	78,122
15 Other assets (describe ▶ _____)				
16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)	117,699	161,263	192,975	
Liabilities	17 Accounts payable and accrued expenses			
	18 Grants payable			
	19 Deferred revenue			
	20 Loans from officers, directors, trustees, and other disqualified persons			
	21 Mortgages and other notes payable (attach schedule)			
	22 Other liabilities (describe ▶ _____)			
	23 Total liabilities (add lines 17 through 22)	0	0	
Net Assets or Fund Balances	Foundations that follow SFAS 117, check here ▶ <input type="checkbox"/> and complete lines 24 through 26 and lines 30 and 31.			
	24 Unrestricted			
	25 Temporarily restricted			
	26 Permanently restricted			
	Foundations that do not follow SFAS 117, check here ▶ <input checked="" type="checkbox"/> and complete lines 27 through 31.			
	27 Capital stock, trust principal, or current funds	0	0	
	28 Paid-in or capital surplus, or land, bldg , and equipment fund	0	0	
29 Retained earnings, accumulated income, endowment, or other funds	117,699	161,263		
30 Total net assets or fund balances (see instructions)	117,699	161,263		
31 Total liabilities and net assets/fund balances (see instructions) .	117,699	161,263		

Part III Analysis of Changes in Net Assets or Fund Balances			
1 Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)		1	117,699
2 Enter amount from Part I, line 27a		2	43,564
3 Other increases not included in line 2 (itemize) ▶ _____		3	0
4 Add lines 1, 2, and 3		4	161,263
5 Decreases not included in line 2 (itemize) ▶ _____		5	0
6 Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30 .		6	161,263

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)	(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo, day, yr)	(d) Date sold (mo, day, yr)
1a			

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a			
b			
c			
d			
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	
a			
b			
c			
d			
e			

2 Capital gain net income or (net capital loss)	2	
{ If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 }		
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)	3	
{ If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8 }		

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes No
 If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year, see instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2017	363,646	29,239	12.437019
2016	233,608	17,370	13.448935
2015			
2014			
2013			

2 Total of line 1, column (d)	2	25.885954
3 Average distribution ratio for the 5-year base period—divide the total on line 2 by 5.0, or by the number of years the foundation has been in existence if less than 5 years	3	12.942977
4 Enter the net value of noncharitable-use assets for 2018 from Part X, line 5	4	124,471
5 Multiply line 4 by line 3	5	1,611,025
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	0
7 Add lines 5 and 6	7	1,611,025
8 Enter qualifying distributions from Part XII, line 4	8	581,785

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instructions)

Table with 11 rows for excise tax calculation. Includes fields for exempt foundations, tax under section 511, subtitle A tax, and credits/payments. Total amount due and overpayment are calculated on lines 8 and 9.

Part VII-A Statements Regarding Activities

Table with 10 rows for activity statements. Columns include question number, 'Yes', and 'No' responses. Questions cover political activities, unrelated business income, and asset requirements.

Part VII-A Statements Regarding Activities (continued)

11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions.
12 Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement See instructions
13 Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address WWW CLARKFOXSTL COM
14 The books are in care of TINA KLOCKE Telephone no (314) 899-5248
Located at 130 S BEMISTON AVENUE SUITE 303 CLAYTON MO ZIP+4 63105
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 -check here and enter the amount of tax-exempt interest received or accrued during the year 15
16 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114 If "Yes", enter the name of the foreign country

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.
1a During the year did the foundation (either directly or indirectly)
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?
(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?
(6) Agree to pay money or property to a government official? (Exception. Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).
b If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018?
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))
a At the end of tax year 2018, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? If "Yes," list the years
b Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement-see instructions).
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?
b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period?(Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018).
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2018?

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)

5a During the year did the foundation pay or incur any amount to			Yes	No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? See instructions.	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
b If any answer is "Yes" to 5a(1)–(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance? See instructions.	Organizations relying on a current notice regarding disaster assistance check here. <input type="checkbox"/>			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? <i>If "Yes," attach the statement required by Regulations section 53.4945–5(d)</i>	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? <i>If "Yes" to 6b, file Form 8870</i>	No			
7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?	No			
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors

1 List all officers, directors, trustees, foundation managers and their compensation. See instructions

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
MAXINE CLARK 130 S BEMISTON AVENUE CLAYTON, MO 63105	PRESIDENT 40 00	0	0	1,105
ROBERT FOX 130 S BEMISTON AVENUE CLAYTON, MO 63105	CHAIR 30 00	0	0	0
DANIEL WHITE 130 S BEMISTON AVENUE CLAYTON, MO 63105	SECRETARY 0 00	0	0	0
TINA KLOCKE 130 S BEMISTON AVENUE CLAYTON, MO 63105	TREASURER 30 00	0	0	1,105

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If 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 and deferred compensation	(e) Expense account, other allowances
ALLIE CICOTTE 130 S BEMISTON AVENUE CLAYTON, MO 63105	SENIOR PROGRAMS MANA 40 00	62,500	0	1,105
KERRIE MURRAY 130 S BEMISTON AVENUE CLAYTON, MO 63105	FOUNDATION ADMINISTR 40 00	52,500	0	1,105
SAMANTHA STANGL 130 S BEMISTON AVENUE CLAYTON, MO 63105	ASSISTANT PROGRAMS M 40 00	51,000	0	1,105

Total number of other employees paid over \$50,000. ▶ 0

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)

3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
Total number of others receiving over \$50,000 for professional services. ▶		0

Part IX-A Summary of Direct Charitable Activities

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc	Expenses
1 SUPPORT THE ECONOMIC DEVELOPMENT OF THE ST LOUIS METROPOLITAN REGION THROUGH PROGRAM DEVELOPMENT AND INVESTMENTS IN K-12, HIGHER EDUCATION, PUBLIC HEALTH, IMMIGRATION, SOCIAL JUSTICE, COMMUNITY LEADERSHIP AND ENTREPRENEURSHIP	590,176
2	
3	
4	

Part IX-B Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	
2	
All other program-related investments. See instructions	
3	
Total. Add lines 1 through 3 ▶	0

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities.	1a	0
b	Average of monthly cash balances.	1b	126,366
c	Fair market value of all other assets (see instructions).	1c	0
d	Total (add lines 1a, b, and c).	1d	126,366
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation).	1e	0
2	Acquisition indebtedness applicable to line 1 assets.	2	0
3	Subtract line 2 from line 1d.	3	126,366
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions).	4	1,895
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	124,471
6	Minimum investment return. Enter 5% of line 5.	6	6,224

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.)

1	Minimum investment return from Part X, line 6.	1	
2a	Tax on investment income for 2018 from Part VI, line 5.	2a	
b	Income tax for 2018 (This does not include the tax from Part VI).	2b	
c	Add lines 2a and 2b.	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1.	3	
4	Recoveries of amounts treated as qualifying distributions.	4	
5	Add lines 3 and 4.	5	
6	Deduction from distributable amount (see instructions).	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a	Expenses, contributions, gifts, etc.—total from Part I, column (d), line 26.	1a	581,785
b	Program-related investments—total from Part IX-B.	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes.	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required).	3a	
b	Cash distribution test (attach the required schedule).	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	581,785
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b. See instructions.	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4.	6	581,785

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years.

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2018				
a Enter amount for 2017 only.				
b Total for prior years 20___, 20___, 20___				
3 Excess distributions carryover, if any, to 2018				
a From 2013.				
b From 2014.				
c From 2015.				
d From 2016.				
e From 2017.				
f Total of lines 3a through e.				
4 Qualifying distributions for 2018 from Part XII, line 4 ▶ \$ _____				
a Applied to 2017, but not more than line 2a				
b Applied to undistributed income of prior years (Election required—see instructions).				
c Treated as distributions out of corpus (Election required—see instructions).				
d Applied to 2018 distributable amount.				
e Remaining amount distributed out of corpus				
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))				
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5				
b Prior years' undistributed income Subtract line 4b from line 2b				
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed.				
d Subtract line 6c from line 6b Taxable amount—see instructions				
e Undistributed income for 2017 Subtract line 4a from line 2a Taxable amount—see instructions				
f Undistributed income for 2018 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2019				
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election may be required - see instructions).				
8 Excess distributions carryover from 2013 not applied on line 5 or line 7 (see instructions).				
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a				
10 Analysis of line 9				
a Excess from 2014.				
b Excess from 2015.				
c Excess from 2016.				
d Excess from 2017.				
e Excess from 2018.				

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2018, enter the date of the ruling. 2016-02-17

b Check box to indicate whether the organization is a private operating foundation described in section 4942(j)(3) or 4942(j)(5)

	Tax year				(e) Total
	(a) 2018	(b) 2017	(c) 2016	(d) 2015	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	6,224	1,462	0	0	7,686
b 85% of line 2a	5,290	1,243	0	0	6,533
c Qualifying distributions from Part XII, line 4 for each year listed	581,785	363,646	233,608	0	1,179,039
d Amounts included in line 2c not used directly for active conduct of exempt activities	0	0	0	0	0
e Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c	581,785	363,646	233,608	0	1,179,039
3 Complete 3a, b, or c for the alternative test relied upon					
a "Assets" alternative test—enter					
(1) Value of all assets			78,122		78,122
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)			78,122		78,122
b "Endowment" alternative test— enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.	4,149	975	505	0	5,629
c "Support" alternative test—enter					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					0
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii).					0
(3) Largest amount of support from an exempt organization					0
(4) Gross investment income					0

Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year—see instructions.)

1 Information Regarding Foundation Managers:
a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
 See Additional Data Table

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs:

Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds If the foundation makes gifts, grants, etc to individuals or organizations under other conditions, complete items 2a, b, c, and d See instructions

a The name, address, and telephone number or email address of the person to whom applications should be addressed

b The form in which applications should be submitted and information and materials they should include

c Any submission deadlines

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Part XV **Supplementary Information** (continued)**3 Grants and Contributions Paid During the Year or Approved for Future Payment**

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i> See Additional Data Table				
Total				▶ 3a
b <i>Approved for future payment</i>				
Total				▶ 3b

Form 990PF Part XV Line 1a - List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000).

MAXINE CLARK

ROBERT FOX

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ART UNLEASHED INC13379 OLIVE BLVD CHESTERFIELD, MO 63017		PC	SCHOLARSHIP	2,500
CITY OF HAZELWOOD 415 ELM GROVE LANE HAZELWOOD, MO 63042		GOV	SCHOLARSHIP	2,500
CHAPEL OF THE CROSS SUMMER CAMP 11645 BENHAM ROAD ST LOUIS, MO 63136		PC	SCHOLARSHIP	2,500
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
LAUMEIER SCULPTURE PARK 12580 ROTT ROAD ST LOUIS, MO 63127		PC	SCHOLARSHIP	2,500
SAINT LOUIS ZOO ASSOCIATION ONE GOVERNMENT DRIVE ST LOUIS, MO 63110		PC	SCHOLARSHIP	2,500
BRICKS 4 KIDZ1840 SPARKS COURT WILDWOOD, MO 63011		NC	SCHOLARSHIP	2,500
Total				99,000

▶ **3a**

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST LOUIS SCIENCE CENTER 5050 OAKLAND AVE ST LOUIS, MO 63110		PC	SCHOLARSHIP	2,500
GLOBALHACK INC 1221 WASHINGTON AVE ST LOUIS, MO 63103		NC	SCHOLARSHIP	2,500
PIANOS FOR PEOPLE 5856 CHRISTY BLVD ST LOUIS, MO 63116		PC	SCHOLARSHIP	2,500
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
GIRL SCOUTS OF EASTERN MISSOURI INC 2300 BALL DRIVE ST LOUIS, MO 63146		PC	SCHOLARSHIP	2,500
ST LOUIS YOUTH CAMPS INC 300 CHESTERFIELD CENTER SUITE 255 CHESTERFIELD, MO 63017		PC	SCHOLARSHIP	2,500
RANKEN TECHNICAL COLLEGE 4431 FINNEY AVE ST LOUIS, MO 63113		PC	SCHOLARSHIP	2,500
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ST LOUIS COUNTY LIBRARY FOUNDATION 1640 S LINDBERGH BLVD ST LOUIS, MO 63131		PC	SCHOLARSHIP	2,500
GIFTED RESOURCE COUNCIL 357 MARSHALL AVE SUITE 6 ST LOUIS, MO 63119		PC	SCHOLARSHIP	2,500
MIRIAM LEARNING CENTER 51 BACON AVE ST LOUIS, MO 63119		PC	SCHOLARSHIP	2,500
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
EARTHWAYS CENTER 4344 SHAW BLVD ST LOUIS, MO 63110		PC	SCHOLARSHIP	2,500
FONTBONNE UNIVERSITY 6800 WYDOWN BLVD ST LOUIS, MO 63105		PC	SCHOLARSHIP	2,500
ELITE SCHOLARS STEM ACADEMY 100 ANDORA DRIVE SUITE 1 BELLVILLE, IL 62221		PC	SCHOLARSHIP	2,300
Total				99,000

▶ **3a**

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MAD SCIENCE OF ST LOUIS 8420 - R OLIVE BLVD ST LOUIS, MO 63132		NC	SCHOLARSHIP	2,200
CENTER OF CREATIVE ARTS 524 TRINITY AVE ST LOUIS, MO 63130		PC	SCHOLARSHIP	2,000
BOYS & GIRLS CLUB OF BETHALTO INC 324 E CENTRAL STREET BETHALTO, IL 62010		PC	SCHOLARSHIP	2,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
MARYVILLE UNIVERSITY OF ST LOUIS 650 MARYVILLE UNIVERSITY DRIVE ST LOUIS, MO 63141		PC	SCHOLARSHIP	2,000
MATHEWS-DICKEY BOYS' & GIRLS' CLUB 4245 N KINGSHIGHWAY BLVD ST LOUIS, MO 63115		PC	SCHOLARSHIP	2,000
THE SINAI FAMILY LIFE CENTER 1200 ST LOUIS AVE EAST ST LOUIS, IL 62201		PC	SCHOLARSHIP	2,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
UNLEASHING POTENTIAL 1000 N VANDEVENTER AVE 2ND FLOOR ST LOUIS, MO 63113		PC	SCHOLARSHIP	2,000
TEAMS ACTIVITIES FOR SPECIAL KIDS INC 980 HORAN DRIVE FENTON, MO 63026		PC	SCHOLARSHIP	2,000
ENDANGERED WOLF CENTER 6750 TYSON VALLEY ROAD EUREKA, MO 63025		PC	SCHOLARSHIP	1,500
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
DAYSPRING ARTS & EDUCATION 2500 METRO MARYLAND HEIGHTS, MO 63043		PC	SCHOLARSHIP	1,500
IGNITE THEATRE COMPANY 3510 GILES ST LOUIS, MO 63116		PC	SCHOLARSHIP	1,000
LIFEBRIDGE PARTNERSHIP 1187 CORPORATE LAKE DRIVE SUITE 100 ST LOUIS, MO 63132		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CIRCUS HARMONY4120 PARKER ROAD FLORISSANT, MO 63033		PC	SCHOLARSHIP	1,000
CENTRAL INSTITUTE FOR THE DEAF 825 S TAYLOR AVE ST LOUIS, MO 63110		PC	SCHOLARSHIP	1,000
ST LOUIS ARC1177 N WARSON ROAD ST LOUIS, MO 63132		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
SYLVAN LEARNING CENTER OF LAKE ST LOUIS 141 CIVIC CENTER DRIVE LAKE ST LOUIS, MO 63367		NC	SCHOLARSHIP	1,000
THE SOULARD SCHOOL 1110 VICTOR STREET ST LOUIS, MO 63104		PC	SCHOLARSHIP	1,000
ARTSCOPEPO BOX 63128 ST LOUIS, MO 63163		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CAMP BARNABASP O BOX 3200 SPRINGFIELD, MO 65808		PC	SCHOLARSHIP	1,000
YMCA OF THE OZARKS 13528 STATE HWY AA POTOSI, MO 63664		PC	SCHOLARSHIP	1,000
TYMEMACHINE INC 9 PEBBLE CREEK ROAD ST LOUIS, MO 63124		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
ELIOT CHAPEL NURSERY SCHOOL 216 ARGONNE AVENUE KIRKWOOD, MO 63122		PC	SCHOLARSHIP	1,000
CAMP ENCOURAGE 4025 CENTRAL STREET KANSAS CITY, MO 64111		PC	SCHOLARSHIP	1,000
STRENGTH AND HONOR MENTORING AND TUTORING 2575 CAMBRIDGE DRIVE FLORISSANT, MO 63033		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
JEWISH COMMUNITY CENTER 2 MILLSTONE CAMPUS DRIVE ST LOUIS, MO 63146		PC	SCHOLARSHIP	1,000
CONSUMING KINETICS DANCE COMPANY 465 NORTH TAYLOR AVE ST LOUIS, MO 63108		PC	SCHOLARSHIP	1,000
BRAIN INJURY ASSOCIATION OF MISSOURI INC 2265 SCHUETZ ROAD ST LOUIS, MO 63146		PC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
a <i>Paid during the year</i>				
CHALLENGER LEARNING CENTER- ST LOUIS 8855 DUNN ROAD HAZELWOOD, MO 63042		GOV	SCHOLARSHIP	5,000
HERBERT HOOVER BOYS AND GIRLS CLUB OF ST LOUIS INC 2901 NORTH GRAND AVE ST LOUIS, MO 63107		PC	SCHOLARSHIP	5,000
GIRLS INCORPORATED OF ST LOUIS 3801 NELSON DRIVE ST LOUIS, MO 63121		PC	SCHOLARSHIP	5,000
Total ▶ 3a				99,000

Form 990PF Part XV Line 3 - Grants and Contributions Paid During the Year or Approved for Future Payment

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
YOUTH & FAMILY CENTER 818 CASS AVE ST LOUIS, MO 63106		PC	SCHOLARSHIP	2,000
KELLY'S MARTIAL ARTS 8 CEDAR LANE ST LOUIS, MO 63128	NONE	NC	SCHOLARSHIP	1,000
Total ▶ 3a				99,000

Note: To capture the full content of this document, please select landscape mode (11" x 8.5") when printing.

TY 2018 Depreciation Schedule

Name: THE CLARK-FOX FAMILY FOUNDATION

EIN: 81-1608523

Depreciation Schedule

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
OFFICE FURNITURE	2016-02-17	46,372	12,145	SL	7 000000000000	6,624	0	6,624	
COMPUTERS	2016-02-17	19,126	7,013	SL	5 000000000000	3,825	0	3,825	
LHI LESS ALLOWANCE	2016-02-17	12,624	1,263	SL	15 000000000000	842	0	842	

**TY 2018 Land, Etc.
Schedule****Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523

Category / Item	Cost / Other Basis	Accumulated Depreciation	Book Value	End of Year Fair Market Value
OFFICE FURNITURE	46,372	18,769	27,603	46,372
COMPUTERS	19,126	10,838	8,288	19,126
LHI LESS ALLOWANCE	12,624	2,105	10,519	12,624

TY 2018 Legal Fees Schedule**Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
LEGAL	1,985	0	0	1,985

TY 2018 Other Expenses Schedule**Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523**Other Expenses Schedule**

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
COPIER LEASE	2,546	0	0	2,546
INSURANCE	2,227	0	0	2,227
POSTAGE AND SHIPPING	4,093	0	0	4,093
ADVERTISING	56,426	0	0	56,426
BANK CHARGES	203	0	0	203
PARKING	11,435	0	0	11,435
PROGRAM EXPENSES	9,451	0	0	9,451
SOFTWARE LICENSE	4,246	0	0	4,246
OFFICE EXPENSE	18,982	0	0	18,982
DUES AND SUBSCRIPTIONS	14,200	0	0	14,200

Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
MISCELLANEOUS ADMINISTRATIVE	150	0	0	150

TY 2018 Other Income Schedule**Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523**Other Income Schedule**

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
PROGRAM SOFTWARE LICENSE	30,000		30,000
ECO SYSTEM MAPPING	1,013		1,013

TY 2018 Other Professional Fees Schedule**Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
OTHER PROFESSIONAL FEES	54,988	0	6,500	48,488

**TY 2018 Substantial Contributors
Schedule****Name:** THE CLARK-FOX FAMILY FOUNDATION**EIN:** 81-1608523

Name	Address
ROBERT FOX AND MAXINE CLARK	155 N BEMISTON CLAYTON, MO 63105
ST LOUIS COMMUNITY FOUNDATION	2 OAK KNOLL HILL CLAYTON, MO 63105
MR AND MRS JOHN F MCDONNELL	1034 S BRENTWOOD BLVD STE 1840 ST LOUIS, MO 63117

Schedule B
(Form 990, 990-EZ,
or 990-PF)
Department of the Treasury
Internal Revenue Service

Schedule of Contributors
▶ Attach to Form 990, 990-EZ, or 990-PF
▶ Go to www.irs.gov/Form990 for the latest information

OMB No 1545-0047
2018

Name of the organization
THE CLARK-FOX FAMILY FOUNDATION

Employer identification number
81-1608523

Organization type (check one)

Filers of:

Section:

Form 990 or 990-EZ

- 501(c)() (enter number) organization
- 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
- 527 political organization

Form 990-PF

- 501(c)(3) exempt private foundation
- 4947(a)(1) nonexempt charitable trust treated as a private foundation
- 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

- For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or other property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

- For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33¹ 3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 *exclusively* for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year. ▶ \$ _____

Caution. An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), but it **must** answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on its Form 990PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization
THE CLARK-FOX FAMILY FOUNDATION

Employer identification number
81-1608523

Part I Contributors (See Instructions) Use duplicate copies of Part I if additional space is needed

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
—	See Additional Data Table	\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)
—		\$ _____	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contribution)

Name of organization THE CLARK-FOX FAMILY FOUNDATION	Employer identification number 81-1608523
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Part III Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) ▶ \$ _____
Use duplicate copies of Part III if additional space is needed

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	_____	_____	_____
	_____	_____	_____

(e) Transfer of gift	
Transferee's name, address, and ZIP 4	Relationship of transferor to transferee
_____	_____
_____	_____

Additional Data

Software ID:

Software Version:

EIN: 81-1608523

Name: THE CLARK-FOX FAMILY FOUNDATION

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	ST LOUIS COMMUNITY FOUNDATION	\$ 387,701	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	2 OAK KNOLL HILL		
	CLAYTON, MO 63105		
2	MR MRS JOHN F MCDONNELL	\$ 100,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	1034 S BRENTWOOD BLVD STE 1840		
	ST LOUIS, MO 63117		
3	BJC HEALTHCARE	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	4249 CLAYTON AVENUE SUITE 310		
	ST LOUIS, MO 63110		
4	CENTENE CHARITABLE FOUNDATION	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	7700 FORSYTH BLVD		
	ST LOUIS, MO 63105		
5	DR WILLIAM H DANFORTH	\$ 6,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	7425 FORSYTH BLVD SUITE 262		
	ST LOUIS, MO 63105		
6	EMERSON	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	8000 W FLORISSANT AVENUE		
	ST LOUIS, MO 63136		

Form 990 Schedule B, Part I - Contributors (see Instructions) Use duplicate copies of Part I if additional space is needed.

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	EXPRESS SCRIPTS	\$ 25,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	1 EXPRESS WAY		
	ST LOUIS, MO 63121		
8	INCARNATE WORD FOUNDATION	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	5257 SHAW AVENUE SUITE 309		
	ST LOUIS, MO 63110		
9	LUTHERAN FOUNDATION OF ST LOUIS	\$ 15,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	8860 LADUE ROAD SUITE 200		
	ST LOUIS, MO 63124		
10	REX AND JEANNE SINQUEFIELD	\$ 5,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	9 HORTENSE PLACE		
	ST LOUIS, MO 63108		
11	THE SAIGH FOUNDATION	\$ 7,500	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	231 S BEMISTON AVENUE SUITE 735		
	ST LOUIS, MO 63105		
12	THE UNITED WAY OF GREATER ST LOUIS	\$ 10,000	Person <input checked="" type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II for noncash contributions)
	910 N 11TH STREET		
	ST LOUIS, MO 63101		