

OPEN TO PUBLIC INSPECTION

Anders Minkler Huber & Helm LLP

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EXTENDED TO NOVEMBER 15, 2023 Return of Organization Exempt From Income Tax

OMB No. 1545-0047

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations) Do not enter social security numbers on this form as it may be made public. Go to www.irs.gov/Form990 for instructions and the latest information. 2022 Open to Public Inspection

	nal Reve	Inspection			
<u>A</u>	For th	e 2022 cale			
B	Check if applicab	C Name	of organization	D Employer identific	ation number
	Addre		SOURI BAPTIST CHILDREN'S HOME		
-	Chang	e	business as	43-069704	6
F	chang Initial returr		per and street (or P.O. box if mail is not delivered to street address) Room/si		
	Final Final	113	00 ST. CHARLES ROCK ROAD	314-739-6	811
	termi ated	n	r town, state or province, country, and ZIP or foreign postal code	G Gross receipts \$	5,526,679.
	Amer returr	nded DOT	DGETON, MO 63044-2793	H(a) Is this a group ret	
	Appli tion	ca- F Nam	and address of principal officer: RUSSELL L. MARTIN	for subordinates?	
	pend	1130	0 ST. CHARLES ROCK ROAD, BRIDGETON, MO	H(b) Are all subordinates inc	luded? Yes No
<u> </u>	Tax-ex			527 If "No," attach a li	st. See instructions
	Webs		MBCH.ORG	H(c) Group exemption	
				'ear of formation: 1886 M	State of legal domicile: MO
Pa	art I		-		
ø	1		ribe the organization's mission or most significant activities:		
Governance			EDS OF CHILDREN, YOUTH, AND FAMILIES TO		
ērn	2	Check this		1 1	27
200	3		voting members of the governing body (Part VI, line 1a)		27
			ndependent voting members of the governing body (Part VI, line 1b)		24
ties	5		er of individuals employed in calendar year 2022 (Part V, line 2a)		2
Activities &	0		er of volunteers (estimate if necessary) ted business revenue from Part VIII, column (C), line 12		0.
Ac	'a		ted business revenue from Part VIII, column (C), line 12		0.
		i i i i i i i i i i i i i i i i i i i		Prior Year	Current Year
	8	Contributio	ns and grants (Part VIII, line 1h)	3,675,913.	3,645,690.
Revenue	9		rvice revenue (Part VIII, line 2g)	476,905.	391,433.
eve	10	Investment	income (Part VIII, column (A), lines 3, 4, and 7d)	980,603.	1,211,895.
č	11		ue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	30,359.	332,503.
	12		ue - add lines 8 through 11 (must equal Part VIII, column (A), line 12)	5,163,780.	5,581,521.
	13	Grants and	similar amounts paid (Part IX, column (A), lines 1-3)	1,889,877.	2,012,221.
	14	Benefits pa	d to or for members (Part IX, column (A), line 4)	0.	0.
ŝ	15		ner compensation, employee benefits (Part IX, column (A), lines 5-10)	1,196,045.	1,150,921.
, Sus	16a	Professiona	l fundraising fees (Part IX, column (A), line 11e)	0.	0.
Expenses	. b		aising expenses (Part IX, column (D), line 25) 518,575.		1 1 5 4 0 0 0
ш	''		nses (Part IX, column (A), lines 11a-11d, 11f-24e)	1,212,816.	1,164,299.
			ses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,298,738.	4,327,441.
	19	Revenue le	ss expenses. Subtract line 18 from line 12	865,042.	1,254,080.
S OI				Beginning of Current Year	End of Year
Net Assets or	20		(Part X, line 16)	28,799,310.	28,396,285.
let A	21		es (Part X, line 26)	385,782. 28,413,528.	<u>290,651.</u> 28,105,634.
	<u>art II</u>		or fund balances. Subtract line 21 from line 20	20,413,520.	20,105,054.
		U U	y, I declare that I have examined this return, including accompanying schedules and stat	ements and to the hest of my	nowledge and helief it is
Unu	or hou	a aloo or porju	, i acciare shari nave oxaninea ano retarn, nerading accompanying sencuties and star	ionionito, una to the boot of thy i	momougo una bonoi, it lo

true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.

Sign	Signature of officer			Date
-	RUSSELL L. MARTIN, PRESIDE	ENT		
	Type or print name and title			
	Print/Type preparer's name	Preparer's signature	Date	
Paid	THOMAS S. HELM, JR.			self-employed P01342210
Preparer	Firm's name ANDERS MINKLER HU	BER & HELM LLP		Firm's EIN 43-0831507
Use Only	Firm's address 800 MARKET STREET	, SUITE 500		
	ST. LOUIS, MO 631	01-2501		Phone no. (314)655-5500
May the IF	RS discuss this return with the preparer shown abo	ve? See instructions		X Yes No
232001 12-1	3-22 LHA For Paperwork Reduction Act Notic	e, see the separate instructions.		Form 990 (2022)

SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Pai	1990 (2022) MISSOURI BAPTIST CHILDREN'S HOME 43-0697046 Pag t III Statement of Program Service Accomplishments
- ai	
	Check if Schedule O contains a response or note to any line in this Part III
•	Briefly describe the organization's mission: TO SERVE GOD BY RESPONDING TO THE NEEDS OF CHILDREN, YOUTH AND
	FAMILIES TO MAKE A LASTING DIFFERENCE IN THEIR LIVES.
2	Did the organization undertake any significant program services during the year which were not listed on the
	prior Form 990 or 990-EZ?
	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?
	If "Yes," describe these changes on Schedule O.
ł	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.
la	(Code:) (Expenses \$3, 465, 132. including grants of \$2, 012, 221.) (Revenue \$391, 433
	TO PROVIDE SUPPORT TO VARIOUS AFFILIATED AGENCIES TO ENSURE THEIR
	ABILITY TO CARRY OUT THEIR MISSION.
L	
b	(Code:) (Expenses \$ including grants of \$) (Revenue \$)
c	(Code:) (Expenses \$ including grants of \$) (Revenue \$
ŀd	Other program services (Describe on Schedule O.)
ld le	Other program services (Describe on Schedule O.) (Expenses \$ including grants of \$) (Revenue \$) Total program service expenses

10551003 781445 30022.000

Form	990	(2022)

Form 990 (2022) MISSOURI BAPTIST CHILDREN'S HOME
Part IV Checklist of Required Schedules

14a Did the organization maintain an office, employees, or agents outside of the United States? 14a 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 14a X 15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 15 X 16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If</i> "Yes," <i>complete Schedule F, Parts II and IV</i> 16 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? <i>If</i> "Yes," <i>complete Schedule G, Part I</i> . See instructions 17 X 18 Did the organization report more than \$15,000 of gross income from graming activities on Part VIII, line 9a? <i>If</i> "Yes," <i>complete Schedule G, Part II</i> 18 X 20a X Did the organization operate one or more hospital facilities? <i>If</i> "Yes," <i>complete Schedule H</i> 20a X 20a X Did the organization operate one or more				Yes	No
2 bit the organization engine in direct or index policitic campaign activities on behalf of or in opposition to candidates for public offlex? If 'Yes,' complete Schedule C, Part I 3 X 3 Dot the organization engine in the organization engage in lobbing activities, or have a section 501(b) election in effect or index policitic campaign activities, or have a section 501(b) election in effect or index policitic campaign activities, or have a section 501(b) election in effect or index policitic campaign activities, or have a section 501(b) election in effect or index policitic campaign activities, or have a section 501(b) election in estimate of the '''''''''''''''''''''''''''''''''''	1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
3 Old the organization engage in direct or indirect patical campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I 3 X 4 Section 501(b) organizations. Did the organization engage in totbying activities, or have a section 501(b) election in effect of the organization activities of totol(b) organization activities of totol(b). Sol 10(b): Organization that receives membership dues, assessments, or animar amounts as defined in Rev. Proc. 8019(R) "Yes," complete Schedule D, Part II. 4 X 5 Did the organization membrain and yoon activised tunko or any sonifier funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tunko or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such tunko or accounts for which donors have the right to provide advice on the distribution are assement, hichtoria tracutures? If Yes, "complete Schedule D, Part II. 6 X 9 Did the organization methation attribution structures? If Yes, "complete Schedule D, Part IV. 7 X 9 Did the organization, director through a related organization, hold assets in donor-restricted endowments? If Yes, "complete Schedule D, Part V. 10 X 10 Did the organization report an amount for insettments. Program related in Part X, line 10? If Yes, "complete Schedule D, Part V. 10 X 10 Did the organization report an amount for insettments. Pr		If "Yes," complete Schedule A			
public office? If 'Yes,' complete Schedule C, Part I 3 X 4 Section 501(k) or ganization. Did the organization engage in lobbying activities, or have a section 501(k) election in effect 4 X 5 Is the organization a section 501(k), 501(k)(k), 501(k),	2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	X	
4 Section 501(kg) organizations. Dot the organization nagage in lobbying activities, or have a section 501(kg) election in effect 4 X 5 Is the organization a section 501(kg)(kg), 501(kg)(kg), or 501(kg), or	3				
during the tax year? If Yes, 'complete Schedule C, Part II 4 X 5 is the organization a section Solic(is) (Solic(is)) (Solic(3		<u> </u>
5 Is the organization ascience 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Rev. Proc. 99197. If "Yes," complete Schedule C, Part II. S X D Did the organization market any doorn advised funds or any similar funds or accounts? If "Yes," complete Schedule D, Part II. 6 X D Did the organization market any doorn advised in easement. Including easements to processor open space, the environment, historic land areas, or historic structure? If "Yes," complete Schedule D, Part II. 7 X 9 Did the organization market any and own advised in that organization all account in ability, serve as a custodian for amounts not lated in Part X, ine 21, for secret or outstodial account liability, serve as a custodian for amounts not lated in Part X, or provide credit counseling, dobt maragement, credit repair, or dobt negolitation services? If "Yes," complete Schedule D, Part IV 10 X 11 The organization any of the following questions in "Yes," then complete Schedule D, Part VI. 10 X 12 Did the organization services? 11a X 13 X 11a X 14 the organization services? 11a X 14 the organization report an amount for invogin melated organization, hold assets in donor-estricted endowments? 11a X 14	4				37
eminar amounts as defined in Rev Proc. 98-197 (#*es," complete Schedule D, Part II 5 X 6 Did the organization maintain areas, or historic durds or any similar funds or accounts? (# *Yes," complete Schedule D, Part II 6 X 7 Did the organization maintain collections of works of art, historical treasures, or other seminars assets? (# 'Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other seminar assets? (# 'Yes," complete Schedule D, Part II 8 X 9 Did the organization maintain acollections of works of art, historical treasures, or other seminar assets? (# 'Yes," complete Schedule D, Part II 8 X 9 Did the organization, directly or through a nelated organization, hold assets in donor-restricted endowments or in quasi endowments? (# 'Yes," complete Schedule D, Part V 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? (# 'Yes," complete Schedule D, Part V 10 X 11 If the organization report an amount for investments - other securities in Part X, line 10? (# 'Yes," complete Schedule D, Part V 11a X 12 Did the organization report an amount for investments - program related in Part X, line 10? (# 'Yes," complete Schedule D, Part V 11a X 13 Did the organization report an amount for investments - program related in Part X, line 10? (# 'Yes," complete Schedule	_		4		<u> </u>
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 in audit funds or accounts for which donors have the right to provide advice on the distribution or investment in such funds or accounts for which donors have the right to provide advice on the distribution or investment in such funds or accounts for which donors have the right to provide advice on the distribution or investment in such assets? If "Yes," complete Schedule D, Part II 6 X 7 X 8 X 8 X 8 Did the organization maintain addition or investment of an exerce or custodial factorn tiability, serve as a custodian for anounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 9 Did the organization maintain any donor yot the following questions is "Yes," then complete Schedule D, Part V 10 X 9 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part X 11 X 9 Did the organization report an amount for investments - or bree securities in Part X, line 12, Itat is 5% or more of its total assets reported in Part X, line 17 If "Yes," complete Schedule D, Part X 11 X 9 Did the organization report an amount for investments - or program related in Part X, line 12, Itat is 5% or more of its total assets reported in Part X, line	5				37
provide advice on the distribution or investment of amounts in such funds or account? If "Yes," complete Schedule D, Part II 6 X 7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic istructures? If "Yes," complete Schedule D, Part II 7 X 8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part II 8 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, ves, "complete Schedule D, Part IV 8 X 10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments 10 X 11 If the organization identity or through a related organization, hold assets in donor-restricted endowments 10 X 12 Ub the organization report an amount for investments - organ related in Part X, line 10? If "Yes," complete Schedule D, Part VI 11 X 13 Did the organization report an amount for investments - organ 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 X 11 X 14 Did the organization report an amount for orber assets in Part X, line 15, that is 5%			5		
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II. 7 X 8 X 8 X 9 Did the organization maintain collections of works of art, historical treasures, or due similar assets? If "Yes," complete Schedule D, Part III. 8 X 9 Did the organization report an amount in Part X, line 21, for escrew or custodial account liability, serve as a custodian for amounts not listed in Part X, ion provide credit counseling, debt management, credit repair, or debt negotiation services? 9 X 10 Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "res," complete Schedule D, Part VI 10 X 11 If the organization report an amount for investments - other securities in Part X, line 10? If "res," complete Schedule D, Part VI 11a X 12 Did the organization report an amount for investments - other securities in Part X, line 10? If "res," complete Schedule D, Part VI 11a X 13 Did the organization report an amount for investments in Part X, line 21, If wits 5% or more of its total assets reported in Part X, line 17 If "res," complete Schedule D, Part VI 11a X 14 Did the organization schede consolidated, independent audted financial statements for the tax year? If "res," complete Schedule	6				v
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8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 8 X 9 Did the organization report an amount in Part X, line 21, for escrew 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? 9 X 10 Did the organization / answer to any of the following questions is "Yes," then complete Schedule D, Part V 9 X 11 If the organization report an amount for land, buildings, and equipment in Part X, line 127 /# "Yes," complete Schedule D, Part V 10 X 12 Did the organization report an amount for lond, buildings, and equipment in Part X, line 127 /# "Yes," complete Schedule D, Part VI 11 X 13 Did the organization report an amount for investments - order securities in Part X, line 127 /# "Yes," complete Schedule D, Part XI 11 X 14 Did the organization report an amount for other assets in Part X, line 157, that is 5% or more of its total assets reported in Part X, line 167 /# "Yes," complete Schedule D, Part XI 11d X 15 Did the organization report an amount for other assets in Part X, line 257 /# "Yes," complete Schedule D, Part XI 11d X 16 the organization solution under TH Ald Ald SCS 7407 /# "Yes," complete Schedule D, Part X 11d <td>7</td> <td></td> <td> _</td> <td></td> <td>v</td>	7		_		v
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11 If the organization's answer to any of the following questions is 'Yes,' then complete Schedule D, Parts VI, VII, VIII, VX, or X, as applicable. 11 In the organization report an amount for land, buildings, and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI 11a X b Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VII 11a 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 11d X c 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 XI 11d X c Did the organization report an amount for other assets in Part X, line 25? If 'Yes,' complete Schedule D, Part X 11d X 11d X 11d X	10		10	x	
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domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I. Parts I and II			200		<u> </u>
	21		24	x	
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			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		x
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
20	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
2.14	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 25a	24a		x
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
•	any tax-exempt bonds?	24c		
Ь	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		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	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26		x
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
	instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
	"Yes," complete Schedule L, Part IV	28a		x
b	A family member of any individual described in line 28a? If "Yes," complete Schedule L, Part IV	28b		х
	A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? If			
	"Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		Х
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		Х
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		х
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	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	Х	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
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	Х	
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	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	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule 0 t V Statements Regarding Other IRS Filings and Tax Compliance	38	Х	
Pa	t V Statements Regarding Other IRS Filings and Tax Compliance			
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a	-		
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b C	-		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	X	
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Par	Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)						
0-	Enter the granther of another uses and an Enter MO. Treasurity of Money and Tay Otatemants			Yes	No		
za	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return	2a 24					
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur		2b	х			
3a			3a		Х		
	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule		3b				
	At any time during the calendar year, did the organization have an interest in, or a signature or other a						
	financial account in a foreign country (such as a bank account, securities account, or other financial a		4a		х		
b	If "Yes," enter the name of the foreign country	,					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccounts (FBAR).					
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?		5a		Х		
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction		5b		Х		
с	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?		5c				
	Does the organization have annual gross receipts that are normally greater than \$100,000, and did th						
	any contributions that were not tax deductible as charitable contributions?		6a		Х		
b	If "Yes," did the organization include with every solicitation an express statement that such contributi	ons or gifts					
	were not tax deductible?		6b				
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and set	vices provided to the payor?	7a		X		
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?		7b				
с	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	as required					
	to file Form 8282?		7c		X		
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contraction of the second se	ontract?	7e				
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contra	act?	7f				
g	If the organization received a contribution of qualified intellectual property, did the organization file Fo	rm 8899 as required?	7g				
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization	tion file a Form 1098-C?	7h				
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained	by the					
			8				
9	Sponsoring organizations maintaining donor advised funds.						
а			<u>9a</u>				
b			9b				
10	Section 501(c)(7) organizations. Enter:						
a	Initiation fees and capital contributions included on Part VIII, line 12	10a	-				
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b	-				
11	Section 501(c)(12) organizations. Enter:						
a	Gross income from members or shareholders	11a	-				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against						
40-	amounts due or received from them.)	11b	10-				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form	1041?	12a				
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	ובט					
13 a	Is the organization licensed to issue qualified health plans in more than one state?		13a				
a	Note: See the instructions for additional information the organization must report on Schedule O.		154				
b	Enter the amount of reserves the organization is required to maintain by the states in which the						
D	organization is licensed to issue qualified health plans	13b					
с	Enter the amount of reserves on hand	13c	-				
14a			14a		Х		
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedu		14b				
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune						
	excess parachute payment(s) during the year?		15		х		
	If "Yes," see the instructions and file Form 4720, Schedule N.						
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment	income?	16		Х		
	If "Yes," complete Form 4720, Schedule O.						
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any ac	tivities					
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?		17				
	If "Yes," complete Form 6069.						
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MISSOURI BAPTIST CHILDREN'S HOME

Check if Schedule O contains a response or note to any line in this Part VI

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

			_	Yes	No
1a	Enter the number of voting members of the governing body at the end of the tax year	1a 2	27		
	If there are material differences in voting rights among members of the governing body, or if the governing				
	body delegated broad authority to an executive committee or similar committee, explain on Schedule O.				
b	Enter the number of voting members included on line 1a, above, who are independent	1b 2	27		
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship	with any other			
	officer, director, trustee, or key employee?		. 2		X
3	Did the organization delegate control over management duties customarily performed by or under the	direct supervision			
	of officers, directors, trustees, or key employees to a management company or other person?		. 3		X
4	Did the organization make any significant changes to its governing documents since the prior Form 99	90 was filed?	. 4		X
5	Did the organization become aware during the year of a significant diversion of the organization's asse	ets?	. 5		X
6	Did the organization have members or stockholders?			Х	
7a	Did the organization have members, stockholders, or other persons who had the power to elect or ap				
	more members of the governing body?		7a	Х	
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, sto				
	persons other than the governing body?		7b	х	
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year				
a	The governing body?	, ,	8a	x	
	Each committee with authority to act on behalf of the governing body?			X	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be read			<u></u>	
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O		9		x
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Rev		9		
	tion 211 onoices (This Section B requests information about policies not required by the internal Rev	<i>lenue Code.)</i>		Yes	No
0-	Did the organization have local chapters, branches, or affiliates?		10a	165	X
	Did the organization have local chapters, branches, or affiliates?				- 11
D	If "Yes," did the organization have written policies and procedures governing the activities of such cha		101		
	and branches to ensure their operations are consistent with the organization's exempt purposes?			x	
	Has the organization provided a complete copy of this Form 990 to all members of its governing body	before filing the form?	11a		
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			77	
	Did the organization have a written conflict of interest policy? If "No," go to line 13				
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise		12b	X	
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Y	,			
	on Schedule O how this was done			X	
13	Did the organization have a written whistleblower policy?			X	
14	Did the organization have a written document retention and destruction policy?		. 14	X	
15	Did the process for determining compensation of the following persons include a review and approval	by independent			
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?				
а	The organization's CEO, Executive Director, or top management official		. 15a	Х	
b	Other officers or key employees of the organization		. 15b	X	
	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.				
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangem	ent with a			
	taxable entity during the year?		. 16a		X
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate				
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organi				
	exempt status with respect to such arrangements?		. 16b		
Sec	tion C. Disclosure				
17	List the states with which a copy of this Form 990 is required to be filed NONE				
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, an	d 990-T (section 501(c)	(3)s onlv)	availal	ole
-	for public inspection. Indicate how you made these available. Check all that apply.		()= 2y)		
		on Schedule O)			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, con	,	and finan	cial	
	statements available to the public during the tax year.	mot of interest policy,	and mall	Ju	
20		ks and records			
20	State the name, address, and telephone number of the person who possesses the organization's boo ANDY HELTON - 314-739-6811 11200 CONTROL FOR THE STATE OF THE				
	11300 ST. CHARLES ROCK ROAD, BRIDGETON, MO 63044-2	193			
				n 990	

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

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year. • List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation.

Enter -0- in columns (D), (E), and (F) if no compensation was paid. List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee)

who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

 List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

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

(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average	(do	Positior do not check more		itior			Reportable	Reportable	Estimated
	hours per	box	, unles	ss per	rson i	s both	n an	compensation	compensation	amount of
	week		cer an	dad	irecto	or/trus T	tee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or di	ee			sated		organization	(W-2/1099-MISC/	from the
	organizations	rustee	l trus		ee,	npen		(W-2/1099-MISC/ 1099-NEC)	1099-NEC)	organization and related
	below	dual ti	utiona	_	nploy	st cor	1	1000 NEO)		organizations
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) RUSSEL MARTIN	20.00									
PRESIDENT/TREASURER	39.00			Х				175,995.	0.	56,703.
(2) CHUCK EASTER	2.00									
CHAIRMAN	2.00	X		Х				0.	0.	0.
(3) REV. MARK ABLEE	2.00									
CHAIRMAN (THRU 10/22)	0.00	Х		х				0.	Ο.	0.
(4) MURIEL ELDER	2.00									
RECORDING SECRETARY	2.00	Х		Х				0.	0.	0.
(5) MARY ANN ALLEN	2.00									
TRUSTEE	2.00	Х						0.	0.	0.
(6) MICHAEL BEASLEY	2.00									
TRUSTEE	2.00	Х						0.	0.	0.
(7) TRACI BYRD	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(8) REV. WAYNE CARRIGAN	2.00									
TRUSTEE	2.00	Х						0.	0.	0.
(9) BETTY COX	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(10) REV. MATTHEW CREATH	2.00									_
TRUSTEE	0.00	Х						0.	0.	0.
(11) MARSHA DRAKE	2.00									•
TRUSTEE	0.00	Х						0.	0.	0.
(12) LYDIA EMBREY	2.00								0	0
TRUSTEE	0.00	Х						0.	0.	0.
(13) SHEILA GATLIN	2.00								0	0
TRUSTEE	0.00	Х						0.	0.	0.
(14) REV. JIMMY GENTRY	2.00							0.	0.	0
TRUSTEE		Х						0.	0.	0.
(15) REV. KEVIN GRIFFEY TRUSTEE	2.00	v						0.	0.	0
(16) BEVERLY HAWKINS	2.00	^						U •	0.	0.
TRUSTEE	2.00	v						0.	0.	0
(17) REV. KEN HAWKINS	2.00					-		U •	0.	0.
(17) REV. KEN HAWKINS TRUSTEE	2.00	v						0.	0.	0.
	<u> </u>	Δ			L	I	I	I 0.	0.	Form 990 (2022)
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MISSOURI BAPTIST CHILDREN'S HOME 43-0697046 Page 8

Part VII Section A. Officers, Directors, Trust	tees, Key Emp	loye	ees,	anc	d Hig	ghes	st C	ompensated Employee	s (continued)			
(A)	(B)				C)			(D)	(E)		(F)	
Name and title	Average	(-1-		Pos				Reportable	Reportable		Estimate	ed
	hours per	box,	, unles	ss per	rson i	than d is both	n an	compensation	compensation		amount	of
	week	offic	cer an	d a d	irecto	or/trus	tee)	from	from related		other	
	(list any	ector						the	organizations		compensa	
	hours for related	or dir	e			ated		organization	(W-2/1099-MISC	/	from th	
	organizations	ustee	truste		Ð	bens		(W-2/1099-MISC/	1099-NEC)		organizat	
	below	ual tr	ional		ploye	t com		1099-NEC)			and relat organizati	
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former				organizati	0113
(18) REV. EAN HENDRIX	2.00	-	=	0	×	<u> </u>				-		
TRUSTEE	0.00	Х						0.	(b .		0.
(19) BRENDA HIBBARD	2.00									<u> </u>		
TRUSTEE	2.00	х						0.	(b .		0.
(20) DR. COURTNEY JANES	2.00											
TRUSTEE	0.00	х						0.	(b .		0.
(21) REV. WELBY JONES	2.00											
TRUSTEE	4.00	х						0.	(b .		0.
(22) REV. LANCE LONG	2.00											
TRUSTEE	2.00	х						0.	(b .		Ο.
(23) DR. KRISTY MCCALL	2.00											
TRUSTEE	0.00	х						0.	(b .		Ο.
(24) REV. RICK POSEY	2.00											
TRUSTEE	2.00	х						0.	(b .		0.
(25) ELSY SHUFORD	2.00											
TRUSTEE	2.00	х						0.	(b .		0.
(26) REV. DAVID STEPHENSON	2.00											
TRUSTEE	2.00	х						0.	(b .		Ο.
1b Subtotal						-		175,995.		0.	56,7	
c Total from continuation sheets to Part VI								0.		0.		0.
d Total (add lines 1b and 1c)							••	175,995.		5.	56,7	
2 Total number of individuals (including but no							o re		000 of reportable			
compensation from the organization						,		,				1
											Yes	No
3 Did the organization list any former officer,	director, truste	e, k	ev e	mpl	ove	e, or	hig	hest compensated empl	oyee on			
line 1a? If "Yes," complete Schedule J for su			•		•		-	· · · ·	-	- F	3	X
4 For any individual listed on line 1a, is the su												
and related organizations greater than \$150											4 X	
5 Did any person listed on line 1a receive or a												
rendered to the organization? If "Yes." com	plete Schedule	Jfo	or su	ich i	bers	on .		-			5	X
Section B. Independent Contractors												
1 Complete this table for your five highest cor	npensated ind	epe	nder	nt co	ontra	acto	rs th	nat received more than \$	100,000 of compe	nsati	on from	
the organization. Report compensation for t	he calendar ye	ear e	ndin	ıg w	rith c	or wi	thin	the organization's tax ye	ear.			
(A)								(B)			(C)	
Name and business	address							Description of s		Co	ompensatio	n
MARCO TECHNOLOGIES LLC					~ ~			REMOTE I.T. 1				~ ~
4510 HEATHERWOOD ROAD, ST	CLOUD,	M	N.	56	30	1	_	MONITORING AN	ND SYSTE		112,2	38.
2 Total number of independent contractors (ir	ncluding but no	ot lin	nited	l to i	thos	se lis	ted	above) who received mo	ore than			
\$100,000 of compensation from the organiz					1	1						
SEE PART VII, SECTION		IN	UA	ΤI	ON	S	ΗĒ	ETS		F	orm 990 (2022)

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(27) REV. BRIAN VEAL 2 TRUSTEE 2 (28) DEBBIE WALKER 2	ine)	ndivio	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
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				ons			5,581,521.	694,051.	0.	1241780. Form 990 (2022

MISSOURI BAPTIST CHILDREN'S HOME 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 or note to any line in this Part IX **(D)** Fundraising (C) Management and general expenses (B) (A) Do not include amounts reported on lines 6b, Program service expenses Total expenses 7b, 8b, 9b, and 10b of Part VIII. expenses Grants and other assistance to domestic organizations 2,012,221. 2,012,221. and domestic governments. See Part IV, line 21 2 Grants and other assistance to domestic individuals. See Part IV, line 22 3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16 Benefits paid to or for members 4 5 Compensation of current officers, directors, 232,698. 232,698. trustees, and key employees Compensation not included above to disqualified 6 persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) 743,060. 743,060. Other salaries and wages 7 8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions) 113,496. 113,496. Other employee benefits 9 61,667. 61,667. 10 Payroll taxes 11 Fees for services (nonemployees): Management а 4,582. 4,582. b Legal 68,775. 68,775. С Accounting Lobbying d Professional fundraising services. See Part IV, line 17 е Investment management fees f Other. (If line 11g amount exceeds 10% of line 25, g column (A), amount, list line 11g expenses on Sch 0.) 6,207. 6,207. Advertising and promotion 12 66,027. 48,890. 17,137. Office expenses 13 Information technology 14 15 Royalties 3,116. 3,116. 16 Occupancy 12,775. 10,275. 2,500. 17 Travel 18 Payments of travel or entertainment expenses for any federal, state, or local public officials 26,179. 26,179. Conferences, conventions, and meetings 19 20 Interest Payments to affiliates 21 54,048. 54,048. Depreciation, depletion, and amortization 22 60,589. 60,589. 23 Insurance Other expenses. Itemize expenses not covered 24 above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule 0.) 518,575. 518,575. PAYMENTS TO RELATED PAR а CONTRACT WORK 102,107. 102,107. h 64,550. 64,550. DESIGNATED RESTRICTED E С 56,037. 56,037. d EMPLOYEE RECRUITING AND 120,732. 78,474. 42,258. e All other expenses 4,327,441. 3,465,132. 343,734. 518,575. Total functional expenses. Add lines 1 through 24e 25 26 Joint costs. Complete this line only if the organization

12

232010 12-13-22

Check here

Form 990 (2022)

10551003 781445 30022.000

reported in column (B) joint costs from a combined educational campaign and fundraising solicitation.

if following SOP 98-2 (ASC 958-720)

10551003 781445 30022.000

MISSOURI	BAPTIST	CHILDREN'S	HOME
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	1 990 (/ rt X	2022) MISSOURI BAPTI Balance Sheet	ST C	CHILDREN'S HOM	Е	43-	0697046 Page 11
		Check if Schedule O contains a response or not	e to an	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing			778,952.	1	537,130.
	2	Savings and temporary cash investments			1,068,632.	2	820,416.
	3	Pledges and grants receivable, net				3	-
	4	Accounts receivable, net			114,139.	4	40,335.
	5	Loans and other receivables from any current or			· ·		
		trustee, key employee, creator or founder, subst					
		controlled entity or family member of any of thes				5	
	6	Loans and other receivables from other disqualit					
		under section 4958(f)(1)), and persons described				6	
S	7	Notes and loans receivable, net				7	
Assets	8	Inventories for sale or use				8	
As	9				88,582.	9	149,206.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	1,302,870.			
	b	Less: accumulated depreciation	10b	1,164,018.	262,692.	10c	138,852.
	11	Investments - publicly traded securities				11	
	12	Investments - other securities. See Part IV, line 1			6,288,898.	12	7,562,399.
	13	Investments - program-related. See Part IV, line				13	
	14	Intangible assets				14	
	15	Other assets. See Part IV, line 11			20,197,415.	15	19,147,947.
	16	Total assets. Add lines 1 through 15 (must equa			28,799,310.	16	28,396,285.
	17	Accounts payable and accrued expenses			328,379.	17	284,088.
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities				20	
	21	Escrow or custodial account liability. Complete I	Part IV (of Schedule D		21	
S	22	Loans and other payables to any current or form	er offic	er, director,			
litie		trustee, key employee, creator or founder, subst	antial c	ontributor, or 35%			
Liabilities		controlled entity or family member of any of thes	se perso	ons		22	
	23	Secured mortgages and notes payable to unrela	ted thir	d parties		23	
	24	Unsecured notes and loans payable to unrelated	d third p	arties		24	
	25	Other liabilities (including federal income tax, pa					
		parties, and other liabilities not included on lines	17-24)	Complete Part X	/ ^ /		
		of Schedule D		·····	57,403.	25	6,563.
	26	Total liabilities. Add lines 17 through 25			385,782.	26	290,651.
6		Organizations that follow FASB ASC 958, che	ck here				
icei		and complete lines 27, 28, 32, and 33.			0 040 407		0 700 601
alan	27			······	8,049,407.	27	8,799,621.
ä	28			······	20,364,121.	28	19,306,013.
ŭ		Organizations that do not follow FASB ASC 9	58, che	ck here			
г		and complete lines 29 through 33.					
ts	29	Capital stock or trust principal, or current funds				29	
sse	30	Paid-in or capital surplus, or land, building, or ec		Г		30	
Net Assets or Fund Balances	31	Retained earnings, endowment, accumulated in		F	20 112 520	31	20 105 624
Re	32	Total net assets or fund balances			28,413,528. 28,799,310.	32	28,105,634.
	33	Total liabilities and net assets/fund balances			40,133,31U.	33	28,396,285.

Form 990 (2022)

	<u>1990 (2022)</u> MISSOURI BAPTIST CHILDREN'S HOME	43-0	697046	Pag	_{je} 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	5,581		
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,327	-	
3	Revenue less expenses. Subtract line 2 from line 1	3	1,254		
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	28,413		
5	Net unrealized gains (losses) on investments	5	-246	5,69	<u>}1.</u>
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 on Schedule O)	9	-1,315	5,28	33.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,				
	column (B))	10	28,105	5,63	34.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response or note to any line in this Part XII				X
				Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other				
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	О.			
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
	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:				
	Separate basis Consolidated basis Both consolidated and separate basis				
b	Were the organization's financial statements audited by an independent accountant?		2b	Х	
	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:				
	Separate basis X Consolidated basis Both consolidated and separate basis				
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule O.			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the				
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	red audit			
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits				
			-	aan "	~~~~

Form **990** (2022)

232012 12-13-22

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Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

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

OMB No. 1545-0047
2022
Open to Public Inspection

Name of the organization

Name	e of t	he organization						Employer	identification number	
		MISS	OURI BAPTIS	ST CHILDREN'S	S HOME	2		4	3-0697046	
Par	tl	Reason for Public (Charity Status.	All organizations must c	omplete th	nis part.) S	ee instruction	S.		
The o	rgani	ization is not a private found	ation because it is: (F	For lines 1 through 12, cl	neck only	one box.)				
1 [A church, convention of ch	urches, or associatio	n of churches described	in sectio	n 170(b)(1	I)(A)(i).			
2 [A school described in section 170(b)(1)(A)(ii). (Attach Schedule E (Form 990).)								
з [A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).			
4 [A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A)(iii). Enter	the hospital's name,	
		city, and state:								
5 [An organization operated for	or the benefit of a col	lege or university owned	or operat	ed by a go	vernmental u	nit describe	ed in	
_		section 170(b)(1)(A)(iv). (C	Complete Part II.)							
6		A federal, state, or local gov	vernment or governm	nental unit described in	section 17	′0(b)(1)(A)	(v).			
7 [Х	An organization that norma	Ily receives a substar	ntial part of its support fr	om a gove	ernmental	unit or from th	ne general	public described in	
-		section 170(b)(1)(A)(vi). (C	omplete Part II.)							
8		A community trust describe	ed in section 170(b)(1)(A)(vi). (Complete Parl	t II.)					
9 [An agricultural research org	ganization described	in section 170(b)(1)(A)(i	ix) operate	ed in conju	inction with a	land-grant	college	
		or university or a non-land-g	grant college of agric	ulture (see instructions).	Enter the I	name, city	, and state of	the college	e or	
		university:								
10		An organization that norma								
		activities related to its exem		-					•	
		income and unrelated busir		(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.	
r		See section 509(a)(2). (Cor								
11 [An organization organized a	-	•	•					
12 [An organization organized a	-	-				•		
		more publicly supported or	-						Jneck the box on	
-		lines 12a through 12d that						-	aiviaa	
а		Type I. A supporting orga		-	• • • •	-				
		the supported organization			majority d	i the alrea	tors or truste	es or the st	porting	
h		organization. You must o	-		ion with it	oupporte	d organizatio	n(a) by ba	lina	
b		J Type II. A supporting org control or management o	-				-		-	
		organization(s). You mus			ame perso	ns that co		ye ine supp	Joned	
с		Type III functionally inte	-		in connect	ion with	and functional	ly integrate	ad with	
C		its supported organization	• • • •					ly integrate	ia with,	
d		Type III non-functionally		-				ted organi:	zation(s)	
u	L	that is not functionally int	• •					•		
		requirement (see instructi		• •	•		-	anatona		
е		Check this box if the orga						II. Type III		
		functionally integrated, or					·) ·, ·)	,		
f	Ente	er the number of supported c			0 0					
		vide the following information	•						<u> </u>	
		i) Name of supported	(ii) EIN	(iii) Type of organization (described on lines 1-10	(iv) Is the orga in your governi	inization listed ng document?	(v) Amount of	,	(vi) Amount of other	
		organization		above (see instructions))	Yes	No	support (see ir	nstructions)	support (see instructions)	
Total									1	

Schedule A (Form 990) 2022 Part II Support Sch

MISSOURI BAPTIST CHILDREN'S HOME

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.)

Sec	tion A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	3086820.	2646053.	3330001.	3675913.	3645690.	16384477.
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	3086820.	2646053.	3330001.	3675913.	3645690.	16384477.
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,						<i></i>
	column (f)						64,791.
	Public support. Subtract line 5 from line 4.						16319686.
	tion B. Total Support						(n
	ndar year (or fiscal year beginning in)	(a) 2018 3086820.	(b)2019 2646053.	(c) 2020 3330001.	(d) 2021 3675913.	(e) 2022	(f) Total 16384477.
	Amounts from line 4	3000020.	2040055.	3330001.	30/3913.	3043090.	10304477.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties,	962,941.	955,143.	1001447.	1007597.	1177043.	5104171.
9	and income from similar sources Net income from unrelated business	502,541.	JJJ,14J.	100144/.	1007557.	II//043.	51041710
э							
	activities, whether or not the business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	24,761.	168,607.	2,013.	1,430.	302,618.	499,429.
11	Total support. Add lines 7 through 10	, -	,	,	,		21988077.
	Gross receipts from related activities,	etc. (see instructio	ins)			12	867,931.
13	First 5 years. If the Form 990 is for th	ne organization's fir				01(c)(3)	
	organization, check this box and stop	phere					
Sec	ction C. Computation of Publi	ic Support Per	centage				
14	Public support percentage for 2022 (I	ine 6, column (f), d	ivided by line 11, c	olumn (f))		14	74.22 %
	Public support percentage from 2021					15	75.12 %
1 6a	33 1/3% support test - 2022. If the o	organization did no	t check the box or	n line 13, and line 1	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies						
b	33 1/3% support test - 2021. If the o				line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact			-		VI how the organiz	ation
	meets the facts-and-circumstances te	-		• • • •			
b	10% -facts-and-circumstances test						10% or
	more, and if the organization meets the						
10	organization meets the facts-and-circu		•	. ,			L
18	Private foundation. If the organization	T UIU HOL CHECK A I		a, 100, 178, 01 170	, oneok this box af		;
						Solicule A	1. SIII SOUL LOLL

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	qualify under the tests listed b	elow, please comp	olete Part II.)	C C		Ũ	
Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that						
	are not an unrelated trade or bus- iness under section 513						
4	Tax revenues levied for the organ- ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to the organization without charge						
6	Total. Add lines 1 through 5						
7:	Amounts included on lines 1, 2, and 3 received from disqualified persons						
ł	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.)						
	ction B. Total Support		1	Γ	1	1	
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 6 a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
k	Unrelated business taxable income						
	(less section 511 taxes) from businesses acquired after June 30, 1975						
, 11	Add lines 10a and 10b Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
14	First 5 years. If the Form 990 is for the	e organization's fi	rst, second, third,	fourth, or fifth tax	year as a section s	501(c)(3) organizatio	on,
0.1							
	ction C. Computation of Publi						
	Public support percentage for 2022 (I						<u>%</u>
	Public support percentage from 2021 ction D. Computation of Inves					16	%
	Investment income percentage for 20			ine 13 column (f))		17	%
18							<u>%</u>
	a 33 1/3% support tests - 2022. If the						
	more than 33 1/3%, check this box ar						
ł	33 1/3% support tests - 2021. If the						
	line 18 is not more than 33 1/3%, che						
20	Private foundation. If the organizatio						
-	23 12-09-22		·				(Form 990) 2022
			17	1			

Schedule A (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to

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1

2

3a

3b

3c

4a

4b

4c

5a

5b

5c

6

7

8

9a

9b

9c

10a

Yes No

Part IV | Supporting Organizations

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

Section A. All Supporting Organizations

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

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Schedule A (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME

Pa	rt IV Supporting Organizations (continued)		
		Yes	No
11	Has the organization accepted a gift or contribution from any of the following persons?		
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and		
	11c below, the governing body of a supported organization? 11a		
b	A family member of a person described on line 11a above? 11b		
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide		
	detail in Part VI. 11c		
Sec	tion B. Type I Supporting Organizations		
		Yes	No
1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2	Did the organization operate for the benefit of any supported organization other than the supported		
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in		
	Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised or controlled the supporting organization 2		
Sec	supervised, or controlled the supporting organization. 2		
		Vee	Na
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors	Yes	No
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control		
	or management of the supporting organization was vested in the same persons that controlled or managed		

	the supported organization(s).	1		
Sec	ction D. All Type III Supporting Organizations			
			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the			
	organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax			
	year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported			
	organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a			
	significant voice in the organization's investment policies and in directing the use of the organization's			
	income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's			
	supported organizations played in this regard.	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the	organization used to satisf	y the Integral Part Test during	the year (see instructions).
---	---	-----------------------------	---------------------------------	------------------------------

a ____ The organization satisfied the Activities Test. Complete line 2 below.

b		The organization is the	parent of each of its supported	organizations. Complete line 3 below.
---	--	-------------------------	---------------------------------	---------------------------------------

С		The organization supported a g	governmental entity.	Describe in Part VI how	you supported a gove	ernmental entity (see instruct	ion <u>s)</u> .
---	--	--------------------------------	----------------------	-------------------------	----------------------	--------------------------------	-----------------

- 2 Activities Test. Answer lines 2a and 2b below.
- **a** Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- **3** Parent of Supported Organizations. **Answer lines 3a and 3b below.**

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

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in Part VI the role played by the organization in this regard.* 232025 12-09-22

3b | | | Schedule A (Form 990) 2022

2a

2b

3a

Yes No

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2022.04030 MISSOURI BAPTIST CHILDREN 30022.01

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Schedule A (Fo	orm 990)	2022
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Schedule A (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

_			N 00 1070 (
1	Check here if the organization satisfied the Integral Part Test as a qualifyin		•	Part VI). See instructions.
	All other Type III non-functionally integrated supporting organizations must	<u>complete</u>	Sections A through E.	
Sect	ion A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
_1	Net short-term capital gain	1		
2	Recoveries of prior-year distributions	2		
3	Other gross income (see instructions)	3		
4	Add lines 1 through 3.	4		
5	Depreciation and depletion	5		
6	Portion of operating expenses paid or incurred for production or			
	collection of gross income or for management, conservation, or			
	maintenance of property held for production of income (see instructions)	6		
7	Other expenses (see instructions)	7		
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Sect	ion B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see			
	instructions for short tax year or assets held for part of year):			
a	Average monthly value of securities	1a		
b	Average monthly cash balances	1b		
C	Fair market value of other non-exempt-use assets	1c		
d	Total (add lines 1a, 1b, and 1c)	1d		
е	Discount claimed for blockage or other factors			
	(explain in detail in Part VI):			
2	Acquisition indebtedness applicable to non-exempt-use assets	2		
3	Subtract line 2 from line 1d.	3		
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
	see instructions).	4		
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6	Multiply line 5 by 0.035.	6		
7	Recoveries of prior-year distributions	7		
8	Minimum Asset Amount (add line 7 to line 6)	8		
Sect	ion C - Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1		
2	Enter 0.85 of line 1.	2		
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4	Enter greater of line 2 or line 3.	4		
5	Income tax imposed in prior year	5		
6	Distributable Amount. Subtract line 5 from line 4, unless subject to			
	emergency temporary reduction (see instructions).	6		

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see 7 instructions).

Schedule A (Form 990) 2022

232026 12-09-22

_		IST CHILDREN'S		4	3-0697046	Page 7
Par	t V Type III Non-Functionally Integrated 509(a)(3) Supporting Orga	nizations (continu	ied)		
Sect	on D - Distributions				Current Yea	ar
1	Amounts paid to supported organizations to accomplish exer	mpt purposes		1		
2	Amounts paid to perform activity that directly furthers exemp	t purposes of supported				
	organizations, in excess of income from activity			2		
3	Administrative expenses paid to accomplish exempt purpose	s of supported organizations	3	3		
4	Amounts paid to acquire exempt-use assets			4		
5	Qualified set-aside amounts (prior IRS approval required - pro	ovide details in Part VI)		5		
6	Other distributions (<i>describe in</i> Part VI). See instructions.			6		
7	Total annual distributions. Add lines 1 through 6.			7		
8	Distributions to attentive supported organizations to which the	e organization is responsive				
	(provide details in Part VI). See instructions.			8		
9	Distributable amount for 2022 from Section C, line 6			9		
10	Line 8 amount divided by line 9 amount		1	10		
Sect	on E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	าร	(iii) Distributab Amount for 2	
1	Distributable amount for 2022 from Section C, line 6					
2	Underdistributions, if any, for years prior to 2022 (reason-					
	able cause required - explain in Part VI). See instructions.					
3	Excess distributions carryover, if any, to 2022					
а	From 2017					
b	From 2018					
с	From 2019					
d	From 2020					
е	From 2021					
f	Total of lines 3a through 3e					
g	Applied to underdistributions of prior years					
h	Applied to 2022 distributable amount					
i	Carryover from 2017 not applied (see instructions)					
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.					
4	Distributions for 2022 from Section D,					
	line 7: \$					
а	Applied to underdistributions of prior years					
b	Applied to 2022 distributable amount					
C	Remainder. Subtract lines 4a and 4b from line 4.					
5	Remaining underdistributions for years prior to 2022, if					
	any. Subtract lines 3g and 4a from line 2. For result greater					
	than zero, explain in Part VI. See instructions.					
6	Remaining underdistributions for 2022. Subtract lines 3h					
	and 4b from line 1. For result greater than zero, explain in					
	Part VI. See instructions.					
7	Excess distributions carryover to 2023. Add lines 3j					
	and 4c.					
8	Breakdown of line 7:					
а	Excess from 2018					
b	Excess from 2019					
c	Excess from 2020					
d	Excess from 2021					
е	Excess from 2022					

Schedule A (Form 990) 2022

232027 12-09-22

Schedule A	(Form 990) 2022	MISSOURI	BAPTIST	CHILDREN'	S HOME	43-0697046	Page 8
Part VI	Supplemental Infor Part IV, Section A, lines 1 line 1; Part IV, Section D,	, 2, 3b, 3c, 4b, 4c, lines 2 and 3; Part	5a, 6, 9a, 9b, 9c IV, Section E, lir	, 11a, 11b, and 110 es 1c, 2a, 2b, 3a, a	c; Part IV, Section B, lines and 3b; Part V, line 1; Par	or 17b; Part III, line 12; s 1 and 2; Part IV, Section t V, Section B, line 1e; Par	C.
	Section D, lines 5, 6, and (See instructions.)	8; and Part V, Sect	ion E, lines 2, 5,	and 6. Also compl	ete this part for any addit	tional information.	,
232028 12-09-2	2					Schedule A (Form 9	90) 2022
				22			• -

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SCHEDULI	ΕD
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epartment of the Treasury

Internal Revenue Service

(Form	990)
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Supplemental Financial Statements

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

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

OMB No. 1545-0047 Inspection

Employer identification number

Name	of the	organization
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MISSOURI BAPTIST CHILDREN'S HOME

43-0697046 Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the Part I organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year 1 Aggregate value of contributions to (during year) 2 3 Aggregate value of grants from (during year) Aggregate value at end of year 4 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? No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). Preservation of land for public use (for example, recreation or education) Preservation of a historically important land area Protection of natural habitat Preservation of a certified historic structure Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last 2 Held at the End of the Tax Year day of the tax year. Total number of conservation easements 2a а b Total acreage restricted by conservation easements 2b Number of conservation easements on a certified historic structure included in (a) 2c С Number of conservation easements included in (c) acquired after July 25,2006, 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 vear Number of states where property subject to conservation easement is located 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 violations, and enforcement of the conservation easements it holds? Yes No 6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 and section 170(h)(4)(B)(ii)? Yes No In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and 9 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. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. 1a If the organization elected, as permitted under FASB 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 FASB 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) Revenue included on Form 990, Part VIII, line 1 (ii) Assets included in Form 990, Part X If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide 2 the following amounts required to be reported under FASB ASC 958 relating to these items: a Revenue included on Form 990, Part VIII, line 1 Assets included in Form 990, Part X

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Sche		I BAPTIST C				4	43-06	9704	6 Ра	age 2
Par	t III Organizations Maintaining C	ollections of Art	, Historical Tre	asures, or	^r Other	Similar	Assets	(conti	nued)	
3	Using the organization's acquisition, accessi	on, and other records	, check any of the f	ollowing that	make sig	gnificant u	ise of its			
	collection items (check all that apply):									
а	Public exhibition	d	Loan or exc	hange progra	ım					
b	Scholarly research	е	Other							
С	Preservation for future generations									
4	Provide a description of the organization's co	ollections and explain	how they further th	e organizatio	n's exem	pt purpos	se in Part	XIII.		
5	During the year, did the organization solicit of		,	,	er similar a	assets		_		_
	to be sold to raise funds rather than to be ma					<u></u>		Yes		No
Par	t IV Escrow and Custodial Arran reported an amount on Form 990, Pa		te if the organizatio	n answered "	Yes" on I	Form 990	, Part IV, I	ine 9, or		
	· · · · ·									
1a	Is the organization an agent, trustee, custod							7 ¥ • •		
Ь	on Form 990, Part X?						∟	Yes		No
b		and complete the foll	owing table.					Amoun	t	
~	Reginning balance					1c		,	-	
	Beginning balance Additions during the year									
	Distributions during the year									
f	Ending balance					1f				
2a	Did the organization include an amount on F							Yes		No
	If "Yes," explain the arrangement in Part XIII.							_		Ī
Par						0.				
		(a) Current year	(b) Prior year	(c) Two year	rs back 🛛 🌔	(d) Three y	ears back	(e) Fou	r years	back
1a	Beginning of year balance	20,197,090.	18,871,692.	18,727	,165.	16,40	59,479.	17	,399,	916.
b	Contributions									
с	Net investment earnings, gains, and losses								-930,	437.
d	Grants or scholarships									
е	Other expenditures for facilities									
	and programs									
f	Administrative expenses									
g	End of year balance	19,141,982.	20,197,090.	18,871	,692.	18,72	27,165.	16	,469,	479.
2	Provide the estimated percentage of the curr	rent year end balance	(line 1g, column (a)) held as:						
а	Board designated or quasi-endowment		_%							
b	Permanent endowment	%								
С		%								
	The percentages on lines 2a, 2b, and 2c sho									
3a	Are there endowment funds not in the posse	ession of the organizat	tion that are held an	id administer	ed for the	9		ĺ	Yes	Ne
	organization by:								X	No
	(i) Unrelated organizations							3a(i)	~	X
L.	(ii) Related organizations							3a(ii)		
D								3b		
Par	Describe in Part XIII the intended uses of the t VI Land, Buildings, and Equipm		inent lunus.							
	Complete if the organization answere		Part IV. line 11a. S	ee Form 990.	. Part X. I	ine 10.				
	Description of property	(a) Cost or ot		or other		cumulate	d	(d) Boo	k valu	
	beschption of property	basis (investm	• • •	(other)	• •	reciation		(u) Boo	it valu	C
1a	Land		,	0,675.				2	0,6	75.
	Buildings			7,789.	1	15,89	90.		1,8	
	Leasehold improvements			,		.,	-		, .	
	Equipment		1,10	8,485.	1,0	42,20)7.	6	6,2	78.
	Other			5,921.		5,92	21.		•	0.
	. Add lines 1a through 1e. (Column (d) must e							13	8,8	
			· · · · · · · · · · · · · · · · · · ·				Cabadula			

Schedule D (Form 990) 2022

Part VII Investments - Other Securities. Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11b. 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 en	d-of-year market value
(1) Financial derivatives			
(2) Closely held equity interests			
(3) Other			
(A) INVESTMENT IN SECURITIES	7,562,399.	END-OF-YEAR MARKET	VALUE
(B)			
<u>(C)</u>			
(D)(E)			
(E)			
(F) (G)			
(H)			
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	7,562,399.		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"	on Form 990, Part IV, line 1	11c. See Form 990, Part X, line 13.	
(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9) Total. (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
	Description		(b) Book value
	ERPETUAL TRUST	<u>'S</u>	19,141,981.
			5,900.
(3) (4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Part X Other Liabilities. Complete if the organization answered "Yes"			<u> 19,147,947.</u>
(a) Description of lightlity			(b) Book value
(1) Federal income taxes			
(2) DUE TO AFFILIATES			6,563.
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
Total. (Column (b) must equal Form 990, Part X, col. (B) lin			6,563.
2. Liability for uncertain tax positions. In Part XIII, provide		-	
organization's liability for uncertain tax positions unde	r FASB ASC 740. Check he	re if the text of the footnote has been pr	ovided in Part XIII 🛛 🔣

MISSOURI BAPTIST CHILDREN'S HOME

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022

Sche	dule D (Form 990) 2022 MISSOURI BAPTIST CHILDRE		43-0697046 Page 4
Par	t XI Reconciliation of Revenue per Audited Financial State	ements With Revenue	e per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	
1	Total revenue, gains, and other support per audited financial statements		
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
а	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
с	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)		
е	Add lines 2a through 2d		2e
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		
5	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.)		
Pa	t XII Reconciliation of Expenses per Audited Financial Sta	tements With Expens	es per Return.
	Complete if the organization answered "Yes" on Form 990, Part IV, line	e 12a.	
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
а	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
с	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
е	Add lines 2a through 2d		
3	Subtract line 2e from line 1		
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIII.)	4b	
с	Add lines 4a and 4b		4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990. Part I. line 18		
Pa	t XIII Supplemental Information.		

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART V, LINE 4:

ENDOWMENT FUNDS WILL BE USED TO SUPPORT THE FUTURE CHARITABLE ACTIVITIES

OF THE HOME.

PART X, LINE 2:

THE ORGANIZATION AND AFFILIATES ARE EXEMPT FROM FEDERAL INCOME TAXES UNDER

SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE (THE "CODE"), EXCEPT ON NET

INCOME DERIVED FROM UNRELATED BUSINESS ACTIVITIES AS DEFINED IN THE CODE.

ACCORDINGLY, THE ORGANIZATION AND AFFILIATES FILE AS TAX EXEMPT

ORGANIZATIONS.

THE	ORGANIZAT	ION AND	AFFILIATES	FOLLOWS	GUIDANC	E ISSUE	D BY	THE	FASB	ON		
232054 0	9-01-22							Se	chedule D	(Form	990) 2022	
				30								
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	MISSOURI BAPT	IST CHILDREN'S	S HOME	43-0697046 Page 5
Part XIII Supplemental Infor	mation (continued)			
ACCOUNTING FOR INCOM	ME TAXES AND HA	S EVALUATED I	TS TAX POSITIO	ONS, EXPIRING
STATUTES OF LIMITAT	IONS, AUDITS, H	ROPOSED SETTL	EMENTS, CHANGE	ES IN TAX LAW
AND NEW AUTHORITATIV	VE RULINGS, ANI) BELIEVES THA	T NO PROVISION	N FOR INCOME
				000000000000000000000000000000000000000
TAXES IS NECESSARY	FO COVER ANY U	ICERTAIN TAX P	OSITIONS. THE	ORGANIZATION
AND AFFILIATES' RET	JRNS FOR TAX YI	ARS 2019 AND	LATER REMAIN S	SUBJECT TO
EXAMINATION BY TAXII	NG AUTHORITIES			

Schedule D (Form 990) 2022

232055 09-01-22

SCHEDULE I (Form 990)		Go	irants and Oth vernments, ar	nd Individual	ls in the Ŭni	ted States		OMB No. 1545-0047	
Complete if the organization answered "Yes" on Form 990, Part IV, line 21 or 22.									
Department of the Treasury Attach to Form 990. Internal Revenue Service Go to www.irs.gov/Form990 for the latest information.									
Name of the organization	ation			sige wither the second				Inspection Employer identification number	
Nume of the organize		BAPTIST CI	HILDREN'S H	OME				43-0697046	
Part I General	Information on Grants a	nd Assistance							
1 Does the organ	nization maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	tance, and the selecti		
criteria used to	award the grants or assis	stance?						X Yes No	
2 Describe in Pa	rt IV the organization's pro	ocedures for monite	oring the use of grant	funds in the United	l States.				
	and Other Assistance to	•				anization answered "Y	es" on Form 990, Parl	: IV, line 21, for any	
	t that received more than \$	1	· ·	1		(f) Method of	()		
• •	address of organization povernment	(b) EIN	(c) IRC section (if applicable)	(d) Amount of cash grant	(e) Amount of noncash assistance	valuation (book, FMV, appraisal, other)	(g) Description of noncash assistance	(h) Purpose of grant or assistance	
MBCH CHILDREN AN MINISTRIES - 113 ROCK ROAD - BRII 63044-2793	300 ST. CHARLES	43-1948009	501 (C) (3)	2,001,471.	0.			ORGANIZATION ASSISTANCE	
MBCH PROPERTIES									
11300 ST. CHARLE									
BRIDGETON, MO 63	3044-2793	43-1948011	501 (C) (3)	10,750.	0.			ORGANIZATION ASSISTANCE	
2 Enter total nun	nber of section 501(c)(3) a	I nd government orc	l Janizations listed in th	L e line 1 table	1	I	1	2.	
	nber of other organizations							^	

3 Enter total number of other organizations listed in the line 1 table

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

232102 10-31-22

Schedule I (Form 990) 2022

Part III can be duplicated if additional space is needed.

Part III

MISSOURI BAPTIST CHILDREN'S HOME

Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22.

 (a) Type of grant or assistance
 (b) Number of recipients
 (c) Amount of cash grant
 (d) Amount of cash assistance
 (e) Method of valuation (book, FMV, appraisal, other)
 (f) Description of noncash assistance

 Image: I

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Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

ASSISTANCE BETWEEN RELATED PARTIES IS DETERMINED BY THE BOARD APPROVED

BUDGETS AND IS MONITORED THROUGH THE DETAILED FINANCIAL STATEMENTS.

SC	HEDULE J	I	OMB No. 1545-0047			
(Fo	rm 990)	Compensation Information For certain Officers, Directors, Trustees, Key Employees, and Highest		2022)
		Compensated Employees		ZU		•
Dena	Department of the Treasury Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.					ic
	al Revenue Service		Inspe			
Nam	e of the organization			identificatio		nber
		MISSOURI BAPTIST CHILDREN'S HOME	43-0	069704	5	
Ра	rt I Question	s Regarding Compensation				
					Yes	No
1a		ate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
		line 1a. Complete Part III to provide any relevant information regarding these items.				
	First-class or c	°				
	Travel for com					
		cation and gross-up payments				
		spending account Personal services (such as maid, chauffer	Ir, cnet)			
D	•	on line 1a are checked, did the organization follow a written policy regarding payment or		41.		
~	•			1b		<u> </u>
2	•	n require substantiation prior to reimbursing or allowing expenses incurred by all directors,		2		
	trustees, and onice	rs, including the CEO/Executive Director, regarding the items checked on line 1a?				
3	Indicato which if a	ny, of the following the organization used to establish the compensation of the organization's				
5		ector. Check all that apply. Do not check any boxes for methods used by a related organization of the orga				
		ation of the CEO/Executive Director, but explain in Part III.	51110			
	Compensation					
	·	compensation consultant X Compensation survey or study				
	X Form 990 of o		ommittee			
			Ommittee			
4	During the year, did	any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
•	organization or a re					
а	-	e payment or change-of-control payment?		4a		x
b		eive payment from a supplemental nonqualified retirement plan?				X
С	-	eive payment from an equity-based compensation arrangement?				X
-	-	nes 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
	,					
	Only section 501(c	:)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
5		on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r					
а	-					X
		ation?				X
		or 5b, describe in Part III.				
6	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensatio	n			
	contingent on the r	et earnings of:				
а						X
b		ation?				X
		or 6b, describe in Part III.				
7	For persons listed of	on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	;			
		nes 5 and 6? If "Yes," describe in Part III		7		X
8		reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the				
	initial contract exce	ption described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III		8		X
9	If "Yes" on line 8, d	id the organization also follow the rebuttable presumption procedure described in				
		n 53.4958-6(c)?	<u></u>	9		
LHA	For Paperwork R	eduction Act Notice, see the Instructions for Form 990.	Scheo	dule J (Forn	1 990)	2022

232111 10-18-22

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

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

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

		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) RUSSEL MARTIN	(i)	175,995.	0.	0.	25,398.	31,305.	232,698.	0.
PRESIDENT/TREASURER	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							
	(i)							
	(ii)							
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	(ii)							
	(i)							
	(ii)							
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Schedule J (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME

Part III Supplemental Information

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

Schedule J (Form 990) 2022

SCHEDULE O (Form 990)

Department of the Treasury Internal Revenue Service Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



MISSOURI BAPTIST CHILDREN'S HOME

Employer identification number 43 - 0697046

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

DIFFERENCE IN THEIR LIVES.

FORM 990, PART VI, SECTION A, LINE 6:

MISSOURI BAPTIST CONVENTION HAS THE RIGHT TO APPOINT THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7A:

THE MISSOURI BAPTIST CONVENTION ELECTS THE BOARD OF TRUSTEES.

FORM 990, PART VI, SECTION A, LINE 7B:

MISSOURI BAPTIST CONVENTION MUST AGREE TO ANY CHARTER CHANGES AND TO ANY

SALES OF ALL OR SUBSTANTIALLY ALL OF THE ASSETS.

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

THE ORGANIZATION SENT A COPY OF THE 990 VIA E-MAIL TO THE BOARD OF TRUSTEES

BEFORE THE RETURN WAS FILED.

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

OFFICERS, DIRECTORS, AND KEY EMPLOYEES ARE REQUIRED TO DISCLOSE CONFLICTS

OF INTERESTS ANNUALLY.

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

THE ADMINISTRATIVE COMMITTEE REVIEWS AND MAKES RECOMMENDATIONS REGARDING

COMPENSATION PACKAGES. THE ADMINISTRATIVE COMMITTEE RECEIVED AND REVIEWED

COMPENSATION STUDIES FROM TWO INDEPENDENT SURVEYS AS WELL AS REVIEWING

COMPENSATION FOR SENIOR EMPLOYEES OF LOCAL COMPARABLE AGENCIES.

LHAFor Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.Schedule O (Form 990) 202223221110-28-22

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Name of the organization MISSOURI BAPTIST CHILDREN'S HOME	Employer identification num 43-0697046
MISSOURI BAPTIST CHILDREN S HOME	43-0697046
ORM 990, PART VI, SECTION C, LINE 19:	
BY REQUEST.	
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
CHANGE IN BENEFICIAL INTERESTS IN PERPETUAL TRUSTS	-1,055,108
PROGRAM SUPPORT	-260,175
FOTAL TO FORM 990, PART XI, LINE 9	-1,315,283
FORM XII LINE 2C	
NO CHANGE FROM PRIOR YEAR	

10551003 781445 30022.000

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number 43 - 0697046

Department of the Treasury Internal Revenue Service

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

Name of the organization

MISSOURI BAPTIST CHILDREN'S HOME

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	contr	g) 512(b)(13) rolled tity?
				501(c)(3))		Yes	No
MBCH CHILDREN AND FAMILY MINISTRIES -	PROVIDE PROGRAMS AND						
43-1948009, 11300 ST. CHARLES ROCK ROAD,	SERVICES FOR CHILDREN,				MISSOURI BAPTIST		
BRIDGETON, MO 63044-2793	YOUTH AND FAMILIES	MISSOURI	501(C)(3)	LINE 10	CHILDREN'S HOME	X	
MBCH PROPERTIES - 43-1948011	OWNS THE CAMPUSES THAT						
11300 ST. CHARLES ROCK ROAD	HOUSE THE SERVICES AND				MISSOURI BAPTIST		
BRIDGETON, MO 63044-2793	PROGRAMS OF MBCH CFM	MISSOURI	501(C)(3)	LINE 12A, I	CHILDREN'S HOME	x	
MBCH FOUNDATION - 43-1892785	MANAGE ENDOWMENT OF MBCH						
11300 ST. CHARLES ROCK ROAD	AND INVESTMENT PROPERTIES				MISSOURI BAPTIST		
BRIDGETON, MO 63044-2793	AND RAISE FUNDS FOR MBCH	MISSOURI	501(C)(3)	LINE 12A, I	CHILDREN'S HOME	x	
THE L.I.G.H.T HOUSE, INC 43-1569525	PROVIDE LOVE, SUPPORT, &						
PO BOX 22553	GUIDANCE TO THOSE				MBCH CHILDREN AND		
KANSAS CITY, MO 64113	EXPERIENCING UNPLANNED	MISSOURI	501(C)(3)	LINE 7	FAMILY MINISTRIES		х

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

SEE PART VII FOR CONTINUATIONS

Schedule R (Form 990) 2022

232161 09-14-22 LHA

Part II Continuation of Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity	organia	rolled zation?
				501(c)(3))		Yes	No
MISSOURI BAPTIST CONVENTION - 44-0559931							
400 E. HIGH STREET	SERVE TOGETHER TO GROW						
JEFFERSON CITY, MO 65101-3253	GREAT COMMISSION CHURCHES	MISSOURI	501(C)(3)	LINE 1			X
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Schedule R (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME

43-0697046 Page 2

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

		· j ·									
(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under	Share of total income	Share of end-of-year assets		ortionate itions?	Code V-UBI amount in box 20 of Schedule	Genera manag partne	or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	lo
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											<u> </u>
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	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(C) Legal domicile (state or foreign	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	Sec 512(l contr ent	(i) ction (b)(13) trolled tity?
		country)		0				Yes	No
									\square

Schedule R (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	s N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)		X	
c Gift, grant, or capital contribution from related organization(s)		X	
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			
f Dividends from related organization(s)	1f		
g Sale of assets to related organization(s)	1g		+
n Purchase of assets from related organization(s)	1h		
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)	<u>1j</u>		+
Lease of facilities, equipment, or other assets from related organization(s)	<u>1k</u>		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)		X	
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	X	
Sharing of paid employees with related organization(s)		X	
Reimbursement paid to related organization(s) for expenses			
Reimbursement paid by related organization(s) for expenses			+
Other transfer of cash or property to related organization(s)	1r		
Other transfer of cash or property from related organization(s)	1s		

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) MBCH CHILDREN AND FAMILY MINISTRIES	В	2,001,471.	CASH
(2) MBCH FOUNDATION	с	983,034.	САЅН
(3) MBCH FOUNDATION	М	518,575.	CASH
<u>(4)</u>			
<u>(5)</u>			
_(6)			

Schedule R (Form 990) 2022 MISSOURI BAPTIST CHILDREN'S HOME

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(e) Are all partners se 501(c)(3) orgs.?		(h Dispro tiona allocati) por- ite ons?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General managin partner	(k) Percentage ownership
			3000013 012 014)	Yes No	5	Yes	NO		Yes N	

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022	MISSOURI	BAPTIST	CHILDREN'S	HOME	43-0697046	Page 5

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

PART II, IDENTIFICATION OF RELATED TAX-EXEMPT ORGANIZATIONS:

NAME OF RELATED ORGANIZATION:

MBCH CHILDREN AND FAMILY MINISTRIES

PRIMARY ACTIVITY: PROVIDE PROGRAMS AND SERVICES FOR CHILDREN, YOUTH AND

FAMILIES THROUGHOUT MO

NAME OF RELATED ORGANIZATION:

THE L.I.G.H.T HOUSE, INC.

PRIMARY ACTIVITY: PROVIDE LOVE, SUPPORT, & GUIDANCE TO THOSE EXPERIENCING

UNPLANNED PREGNANCY

Schedule R (Form 990) 2022

232165 09-14-22

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Туре о	Name of exempt organization or other filer, see inst	Taxpayer identification number (TIN)					
print	MISSOURI BAPTIST CHILDREN'	S HOME	!		43-0697046		
File by th due date filing you return. Se	Number, street, and room or suite no. If a P.O. box,	see instruct			10 0007		
instructio	City, town or post office, state, and ZIP code. For a BRIDGETON , MO $63044-2793$						
Enter t	he Return Code for the return that this application is for (file a separa	te application for each return)			0 1	
Applic	ation	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	990 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form 9	990-PF	04	Form 5227			10	
Form 9	990-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
	990-T (trust other than above)	06	Form 8870			12	
Form 9	990-T (corporation) ANDY HELTON	07					
• If th • If th box • 1 I 1	request an automatic 6-month extension of time until the organization named above. The extension is for the or	t Group Exe and atta NOVEI ganization's , ar check rease	mption Number (GEN), . ach a list with the names and TINs of MBER 15, 2023 , to file return for: ad ending on: Initial return	If this is fo all membe	r the whole grou ers the extension npt organization	n is for.	
	f this application is for Forms 990-PF, 990-T, 4720, or 606 any nonrefundable credits. See instructions.	59, enter the	tentative tax, less	3a	\$	0.	
	f this application is for Forms 990-PF, 990-T, 4720, or 606 estimated tax payments made. Include any prior year over	\$	0.				
c l	Balance due. Subtract line 3b from line 3a. Include your p	payment wit	h this form, if required, by				
	using EFTPS (Electronic Federal Tax Payment System). See instructions. 3c						
Cautio instruc	n: If you are going to make an electronic funds withdrawations.	al (direct del	bit) with this Form 8868, see Form 84	453-TE and	d Form 8879-TE	for payment	
LHA	For Privacy Act and Paperwork Reduction Act Notice	e, see instru	ictions.		Form 8868	B (Rev. 1-2022)	

223841 04-01-22