

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Return of Private Foundation

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

OMB No 1545-0052

▶ Do not enter social security numbers on this form as it may be made public.

2014

Internal Revenue Service ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Open to Public Inspection For calendar year 2014 or tax year beginning January 31 , 2014, and ending December 31 2014 Name of foundation A Employer identification number Longer Life Foundation 43-1819267 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number (see instructions) 16600 Swingley Ridge Road 636.736.8031 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here ▶ □ Chesterfield MO 63017-1706 G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here ▶□ ☐ Amended return ☐ Final return 2. Foreign organizations meeting the 85% test. X Address change ☐ Name change check here and attach computation ▶□ E If private foundation status was terminated under Check type of organization:

Section 501(c)(3) exempt private foundation section 507(b)(1)(A), check here ▶□ ☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation Fair market value of all assets at J Accounting method:
Cash X Accrual If the foundation is in a 60-month termination end of year (from Part II, col. (c), Other (specify) under section 507(b)(1)(B), check here line 16) ▶ \$ 72,631,00 (Part I, column (d) must be on cash basis) Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per books income purposes (cash basis only) the amounts in column (a) (see instructions)) 1 Contributions, gifts, grants, etc., received (attach schedule) 400,000 2 Check ▶ ☐ if the foundation is **not** required to attach Sch B Interest on savings and temporary cash investments 3 4 Dividends and interest from securities Gross rents . b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) 0.00 Я Net short-term capital gain 9 Income modifications 10a Gross sales less returns and allowances Less: Cost of goods sold . . . Gross profit or (loss) (attach schedule) . . 0.00 11 Other income (attach schedule) 12 400,000.00 Total. Add lines 1 through 11 0.00 0.00 13 Compensation of officers, directors, trustees, etc. Operating and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees (attach schedule) Accounting fees (attach schedule) Other professional fees (attach schedule) C 17 18 Taxes (attach schedule) (see instructions) 19 Depreciation (attach schedule) and depletion . . . 20 Occupancy 21 Travel, conferences, and meetings 3,933 3,933 22 Printing and publications . Other expenses (attach schedule) 23 1,228 1,228 24 Total operating and administrative expenses. Add lines 13 through 23 . 5,161.00 0.00 0.00 5,161.00 25 386,769 Contributions, gifts, grants paid 386,769 391,930.00 Total expenses and disbursements. Add lines 24 and 25 26 0.00 0.00 930.00 27 Subtract line 26 from line 12: ٠. ٠٠ . Excess of revenue over expenses and disbursements 8,070.00 Net investment income (if negative, enter -0-) . 0.00

For Paperwork Reduction Act Notice, see instructions.

Adjusted net income (if negative, enter -0-)

Form **990-PF** (2014)

0.00

SCANNED MAY

O

0

Pa	rt II	Ralance Sheets Attached schedules and amounts in the description column	Beginning of year		End o	of year	
		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Vale		(c) Fair Market Value	
	1	Cash—non-interest-bearing	64,561	72,	631	72,631	
	2	Savings and temporary cash investments					
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ►					
		Less: allowance for doubtful accounts ▶					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other			-		
		disqualified persons (attach schedule) (see instructions)					
	7	Other notes and loans receivable (attach schedule) ▶					
		Less: allowance for doubtful accounts ▶				 	
ß	8	Inventories for sale or use		 			
Assets	9	Prepaid expenses and deferred charges			_		
Asi	10a	Investments—U S. and state government obligations (attach schedule)		 	_		
•	b	Investments—corporate stock (attach schedule)					
	c	Investments—corporate bonds (attach schedule)					
	11	Investments—land huldings and equipment hasis		 			
	• •	Investments—land, buildings, and equipment basis ►					
	12	Investments—mortgage loans		· · · · · · · · · · · · · · · · · · ·			
	13						
	14	Investments—other (attach schedule)					
	14	Land, buildings, and equipment: basis ►					
	4.5	Less accumulated depreciation (attach schedule) ▶					
	15 16	Other assets (describe >)				. <u> </u>	
	10	Total assets (to be completed by all filers—see the					
	4-	instructions Also, see page 1, item I)	64,561.00	72,631	.00	72,631.00	
	17	Accounts payable and accrued expenses					
Si	18	Grants payable				,	
ij	19	Deferred revenue				,	
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons		 			
E.	21	Mortgages and other notes payable (attach schedule) .				* * *	
_	22	Other liabilities (describe ►)					
	23	otal liabilities (add lines 17 through 22)	0.00		.00		
alances		Foundations that follow SFAS 117, check here ▶ ☐ and complete lines 24 through 26 and lines 30 and 31.				,	
ŭ	24	Unrestricted					
ale	25	Temporarily restricted					
9	26	Permanently restricted		- ·		,	
Net Assets or Fund B		Foundations that do not follow SFAS 117, check here ▶ ☐ and complete lines 27 through 31.				, ,	
6	27	Capital stock, trust principal, or current funds	64,561	70	631		
ফ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	04,301	12,	021		
Se	29	Retained earnings, accumulated income, endowment, or other funds		-			
As	30	Total net assets or fund balances (see instructions)	64,561.00	72,631	- 00		
et	31	Total liabilities and net assets/fund balances (see	04,301.00	72,031			
z		instructions)	64,561.00	72,631	۸۸		
Рa	rt III	Analysis of Changes in Net Assets or Fund Balances	04,301.00	,2,031			
		net assets or fund balances at beginning of year—Part II, colur	nn (a), line 30 (must	agree with			
	end-				1	64,561.00	
3					3	8,070.00	
		er increases not included in line 2 (itemize) ► lines 1, 2, and 3..........................			4	72 621 00	
-	D	races not included in line O (Annalas)			5	72,631.00	
6	Tota	reases not included in line 2 (itemize) ► Il net assets or fund balances at end of year (line 4 minus line 5)—F	Part II. column (b) line	e 30	6	72 621 00	
					<u> </u>	72,631.00	

Part	V Capital Gains and I	osses for Tax on Investment	Income			
(a) List and describe the kind(s) of property sold (e.g., real estate, (b) How acquired (c)		(c) Date acquired (mo , day, yr)	d (d) Date sold (mo , day, yr)			
1a						
<u>b</u>						
<u> </u>						
<u>d</u>						
ее		(6 Degreester allowed	(a) Coot or	ather beau	/b>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis nse of sale		Gain or (loss) us (f) minus (g)
<u>a</u> b				· ·-		
c						
d						
е						
	Complete only for assets show	ing gain in column (h) and owned by the	foundation	on 12/31/69	(I) Gains	(Col (h) gain minus
	(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), ıf any		not less than -0-) or es (from col (h))
а						
b					· · · · · · · · · · · · · · · · · · ·	
<u> </u>						
<u>d</u> _						
e	<u> </u>	If gain, also	enter in Pa	rt Lline 7		
2	Capital gain net income or (net capital loss) { if gain, also		S 1	2	
3	Net short-term capital gain	or (loss) as defined in sections 122		· · · · · · · · · · · · · · · · · · ·		-
		line 8, column (c) (see instructions				
	Part I, line 8		· · · · ·	· . }	3	
Part	V Qualification Under	r Section 4940(e) for Reduced	Tax on N	let Investment	Income	
(For or	otional use by domestic priva	ate foundations subject to the section	on 4940(a)	tax on net invest	ment income.)	
lf secti	on 4940(d)(2) applies, leave t	this nart hlank				
11 3000	on 4540(d)(z) applies, leave	une part blank.				
Was th	ne foundation hable for the se	ection 4942 tax on the distributable	amount of	any year in the b	ase period?	🗌 Yes 🗓 No
		ualify under section 4940(e). Do not		•	11.1.1	
1	(a)	nt in each column for each year; se	e the instru		aking any entrie	(d)
Cale	Base period years ndar year (or tax year beginning in)	(b) Adjusted qualifying distributions	Net value of	(c) f noncharitable-use as		Distribution ratio
Calc	2013	401,671		125,		(b) divided by col (c)) 3.1887
	2012	480,895		197,		2.4382
-	2011	374,476		237,		1.575
	2010	394,452		128,		3.0713
	2009	342,716			265	8.3052
2	Total of line 1, column (d)					18.578
3		r the 5-year base period—divide th			the	
	number of years the founda	tion has been in existence if less th	an 5 years		. 3	3.7157
4	Enter the net value of nonch	naritable-use assets for 2014 from F	Part X, line	5	4	165,71
_						
5	Multiply line 4 by line 3 .				. 5	615,735.2
6	Enter 1% of net investment	income (1% of Part I, line 27b)			. 6	(
7	Add lines 5 and 6				_	C15 725 25
7	Aud lines 5 and 6				7	615,735.28
8		s from Part XII, line 4			. 8	391,930
	Part VI instructions.	er than line 7, check the box in Part	vi, iine 1b	, and complete t	nat paπ using	a 1% tax rate. See th

Part	VIExcise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—	-see in	stru	ctio	ns)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)	-	• ,	+^ +	ž,	
b	· · · · · · · · · · · · · · · · · · ·					
	here ▶ ☐ and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).	<u> </u>		* 4199	', · ·	
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)				0	
3	Add lines 1 and 2			(0.00	
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)				0	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0 5			(0.00	
6	Credits/Payments:					
а	2014 estimated tax payments and 2013 overpayment credited to 2014 6a				,	
b	Exempt foreign organizations—tax withheld at source 6b	1				
C	Tax paid with application for extension of time to file (Form 8868) . 6c	٠.				
_d	Backup withholding erroneously withheld	 				
7	Total credits and payments Add lines 6a through 6d	 -		(0.00	
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	 			0	
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed				0.00	
10 11	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10 Enter the amount of line 10 to be: Credited to 2015 estimated tax > Refunded > 11				0.00	
	Enter the amount of line 10 to be: Credited to 2015 estimated tax ► Refunded ► 11 VII-A Statements Regarding Activities			(0.00	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or or	did it		Yes	No	
	participate or intervene in any political campaign?	"	1a	163	X	
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes	(See	ıa			
_	Instructions for the definition)?	(500	1b		x	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mate	erials				
	published or distributed by the foundation in connection with the activities					
С	c Did the foundation file Form 1120-POL for this year?					
d						
	(1) On the foundation. ► \$ (2) On foundation managers. ► \$					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposon foundation managers. ▶ \$	sed	,	**		
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	. [2		Х	
	If "Yes," attach a detailed description of the activities.			***		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articl incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	les of	3		X	
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	. [4a		Х	
b	If "Yes," has it filed a tax return on Form 990-T for this year?		4b			
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T.		5		Х	
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	By language in the governing instrument, or			į		
	• By state legislation that effectively amends the governing instrument so that no mandatory directions	s that				
	conflict with the state law remain in the governing instrument?	. [6	Х		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Pai	irt XV	7	Х		
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ▶					
_	MISSOURI					
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney Ge	neral				
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation		8b	X		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(
	4942(j)(5) for calendar year 2014 or the taxable year beginning in 2014 (see instructions for Part XIV)? If " complete Part XIV	res,"				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing	. thoir	9		X	
10	names and addresses	aren	40		v	
		· .	10		X	

Part	VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement (see instructions)	12		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ▶ www.longerlife.org			
14	The books are in care of ▶ Jeffrey Boyer Telephone no. ▶ 636.73	6.80	31	
	Located at ▶ 16600 Swingley Ridge Road, Chesterfield, MO ZIP+4 ▶ 63017-	1706)	<u></u> .
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here and enter the amount of tax-exempt interest received or accrued during the year	٠	•	▶ □ 0
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority		Yes	No
	over a bank, securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the foreign country ▶	, •	*	
Dort				
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):		162	140
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			, i
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? . 🗓 Yes 🔲 No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	r	,	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?		,	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if the	ŧ		7 1
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)			,
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b		x
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			[<u>]</u>
	were not corrected before the first day of the tax year beginning in 2014?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)).			
а	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and	,	,	3. %
	6e, Part XIII) for tax year(s) beginning before 2014?		, e,	- 1
	If "Yes," list the years ▶ 20 , 20 , 20 , 20	, ,	, 4,	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		**	١, ١
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach statement—see instructions.)		**	
	•	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. 20 , 20 , 20 , 20	1		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise	,	· ,	, 1
	at any time during the year?		, i	
ь	If "Yes," did it have excess business holdings in 2014 as a result of (1) any purchase by the foundation or			\
-	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			<u> </u>
	foundation had excess business holdings in 2014.)	3b		<u> </u>
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?		ļ	<u> </u>
	chantable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2014?	4b		Х

-orm	990-PF	(2014)

				_
-				c
_	-	~	_	 n

	90-PF (2014)		W-1-1-E-	4700	M D - D		-1 /	15	Page 6
	VII-B Statements Regarding Activit			4720	мау ве к	equire	a (continu	ea)	
ъа	 During the year did the foundation pay or incu (1) Carry on propaganda, or otherwise attempt (2) Influence the outcome of any specific put directly or indirectly, any voter registration 	ot to influe blic elect	ence legislatio	ion 495	5); or to ca	irry on,		⊠ No ⊠ No	
	(3) Provide a grant to an individual for travel,(4) Provide a grant to an organization other t section 4945(d)(4)(A)? (see instructions)	han a cha		organiz	ation desci	ibed in		⊠ No ⊠ No	
	(5) Provide for any purpose other than religion purposes, or for the prevention of cruelty	to childre	n or animals?				☐Yes [∑ No	C
b	If any answer is "Yes" to 5a(1)–(5), did any of Regulations section 53.4945 or in a current notion	ce regard	ing disaster a	ssistand	e (see instr	uctions	?	ed in	5b
c	Organizations relying on a current notice regal fithe answer is "Yes" to question 5a(4), doe because it maintained expenditure responsible.	s the fou lity for the	ndation clain grant?	exem	ption from	the tax		▶	
6a		ny funds,	directly or in	directly	, to pay pre		☐ Yes ☐	⊠ No	
	Did the foundation, during the year, pay prem If "Yes" to 6b, file Form 8870.		·	•	•			_	6b X
	At any time during the tax year, was the foundation if "Yes," did the foundation receive any process.	eds or ha	ve any net in	come a	ttributable	to the t	ransaction?		7b
Part	t VIII Information About Officers, Dir and Contractors	ectors,	Trustees, F	ounda	tion Man	agers,	Highly Pa	id Er	nployees,
1	List all officers, directors, trustees, founda	tion man	agers and th	eir con	npensatior	ı (see i	nstructions	s).	
	(a) Name and address	hou	e, and average urs per week ted to position	` (If ı	mpensation not pald, iter -0-)	emplo	Contributions to byee benefit pla erred compens	ans]	(e) Expense account, other allowances
SEE	STATEMENT 2								
		. <u>.</u>							
									<u></u>
2	Compensation of five highest-paid emplo "NONE."	yees (oth	er than tho	se incl	uded on li	ne 1—	see instruc	tions	i). If none, enter
	(a) Name and address of each employee paid more than \$5	0,000	(b) Title, and hours per videvoted to p	veek -	(c) Compe	nsation	(d) Contribution employee be plans and def compensat	nefit erred	(e) Expense account, other allowances
NONE									
				_					
Total	number of other employees paid over \$50,000					•		>	Form 990-PF (2014)

Part V		Em	ployees,
	and Contractors (continued)		- ,,
3 F	ive highest-paid independent contractors for professional services (see instructions). If none, enter "N	ONE	
	(a) Name and address of each person paid more than \$50,000 (b) Type of service		(c) Compensation
IONE		1	
		\dashv	
		\dashv	

otal nu	umber of others receiving over \$50,000 for professional services		
Part I	K-A Summary of Direct Charitable Activities		
List th organi	e foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number zations and other beneficiaries served, conferences convened, research papers produced, etc.	of	Expenses
1 N/	'A		
2			
3 —			
٠			
4			
Part I			
_	be the two largest program-related investments made by the foundation during the tax year on lines 1 and 2		Amount
1 <u>N</u>	<u>'A</u>		
2 -			
4			
All oth	er program-related investments. See instructions		
3			
Total. A	Add lines 1 through 3	>	0.0
			Form 990-PF (2014

Part	X Minimum Investment Return (All domestic foundations must complete this part. Forei	gn fou	ndations,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	0
b	Average of monthly cash balances	1b	168,234
¢	Fair market value of all other assets (see instructions)	1c	0
þ	Total (add lines 1a, b, and c)	1d	168,234.00
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	168,234.00
4	Cash deemed held for charitable activities. Enter 1 1/2 % of line 3 (for greater amount, see		
	instructions)	4	2,524
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	165,710.00
6	Minimum investment return. Enter 5% of line 5	6	8,285.50
Part	XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating f	ounda	tions
	and certain foreign organizations check here ▶ □ and do not complete this part.)		
1	Minimum investment return from Part X, line 6	1	8,286
2a	Tax on investment income for 2014 from Part VI, line 5	25%	
b	Income tax for 2014. (This does not include the tax from Part VI.) 2b 0		
¢	Add lines 2a and 2b	2c	0.00
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	8,286.00
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	8,286.00
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	8,286.00
Dor	Qualifying Distributions (see instructions)		
r all	Qualitying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	Yes	
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	391,930
b	Program-related investments—total from Part IX-B	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes	2	0
3	Amounts set aside for specific charitable projects that satisfy the	1	
а	Suitability test (prior IRS approval required)	3a	0
þ	Cash distribution test (attach the required schedule)	3b	C
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	391,930.00
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.		·
	Enter 1% of Part I, line 27b (see instructions)	5	C
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	391,930.00
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating		
	qualifies for the section 4940(e) reduction of tax in those years.		

Part	Unaistributea income (see instruction	ons)			
1	Distributable amount for 2014 from Part XI,	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
	line 7				8,286.00
2	Undistributed income, if any, as of the end of 2014:		ļ.		
а	Enter amount for 2013 only				
b	Total for prior years: 20,20,20				···
3	Excess distributions carryover, if any, to 2014:				
а	From 2009]			
b	From 2010	1 1			
С	From 2011	<u> </u>			
d	From 2012				
e	From 2013				
f	Total of lines 3a through e	1,957,679.00			
4	Qualifying distributions for 2014 from Part XII,				
	line 4: ▶ \$ 391,930	}			
a	Applied to 2013, but not more than line 2a .				
Þ	Applied to undistributed income of prior years	<u> </u>			
	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election			ł	
_	required—see instructions)				
d	Applied to 2014 distributable amount				
е	Remaining amount distributed out of corpus	391,930			
5	Excess distributions carryover applied to 2014	8,286			8,286
	(If an amount appears in column (d), the same amount must be shown in column (a))				
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e. Subtract line 5	2,341,323.00			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0.00		
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a)				
	tax has been previously assessed				
d					
•	amount—see instructions		0.00	Ĭ	
е	Undistributed income for 2013 Subtract line				
·	4a from line 2a Taxable amount—see				
	instructions			0.00	
f	Undistributed income for 2014. Subtract lines				···
•	4d and 5 from line 1 This amount must be				
	distributed in 2015				0.00
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section				
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)				
8	Excess distributions carryover from 2009 not				
	applied on line 5 or line 7 (see instructions).	340,653			
9	Excess distributions carryover to 2015.				
	Subtract lines 7 and 8 from line 6a	2,000,670.00			
10	Analysis of line 9:				
а	Excess from 2010				
b	Excess from 2011		}		
C	Excess from 2012 471,033		·		•
d	Excess from 2013 395,373	-1			
e	Excess from 2014 383, 644	- 1			

Part	XIV Private Operating Foundation	tions (see instru	ctions and Part \	VII-A, question 9)		
1a	If the foundation has received a ruling	or determination	letter that it is a p			
	foundation, and the ruling is effective for		_			
b	Check box to indicate whether the four		operating foundati		tion <u>4942(j)(3</u>	or 4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
	investment return from Part X for	(a) 2014	(b) 2013	(c) 2012	(d) 2011	
	each year listed					0.00
b	85% of line 2a	0.00	0.00	0.00	0.00	0.00
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					0.00
d	Amounts included in line 2c not used directly for active conduct of exempt activities					0.00
е	Qualifying distributions made directly for active conduct of exempt activities.					
•	Subtract line 2d from line 2c	0.00	0.00	0.00	0.00	0.00
3	Complete 3a, b, or c for the alternative test relied upon.					
а	"Assets" alternative test—enter.					
	(1) Value of all assets					0.00
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					0.00
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					0.00
С	"Support" alternative test-enter		<u> </u>			
	(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)) as reveltion					
	512(a)(5)), or royalties)					0.00
	(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j(3)(B)(iii)					0.00
	(3) Largest amount of support from an exempt organization					
	(4) Gross investment income					0.00
Pari	XV Supplementary Information	on (Complete th	is nart only if th	ne foundation h	ad \$5 000 or mo	re in assets at
ı aı	any time during the year-	•	•	ic roundation in	aa 40,000 or mo	ic iii assets at
1	Information Regarding Foundation	Managers:			<u> </u>	
а	List any managers of the foundation	who have contribu	ited more than 2%	of the total contri	butions received b	y the foundation
	before the close of any tax year (but o	only if they have co	intributed more th	an \$5,000). (See se	ection 507(d)(2).)	
b	List any managers of the foundation	who own 10% or	more of the stoc	k of a corporation	(or an equally larg	ge portion of the
	ownership of a partnership or other e	ntity) of which the	foundation has a 1	10% or greater inte	rest.	
2	Information Regarding Contribution	n, Grant, Gift, Loa	n, Scholarship, e	tc Programs:		
_	Check here ▶ ☐ if the foundation				organizations and	does not accept
	unsolicited requests for funds. If the f					
	other conditions, complete items 2a,			`		,
a	The name, address, and telephone nu		dress of the perso	on to whom applica	tions should be ac	idressed:
-	The hame, address, and telephone he	anno or o man ad	oress or the perso	on to whom applice	itionis snould be ac	idiossed.
SEE	STATEMENT 3					
	The form in which applications should	be submitted and	information and	materials they shou	uld include:	
	STATEMENT 3		· · · · · · · · · · · · · · · · · · ·			
	Any submission deadlines:				<u> </u>	
	STATEMENT 3					
	Any restrictions or limitations on av	vards, such as hi	v geographical an	eas charitable fie	ds kinds of insti	tutions or other
	factors:	talas, saoli as b	, accaratilical al	cus, chartable lie	וופנוו וט פטוווא ויפטו	tations, or other
SEE	STATEMENT 3					

Form 9	990-PF (2014)				Page 11
	XV Supplementary Information (co	ontinued)			
	Grants and Contributions Paid Durin Recipient	If recipient is an individual, show any relationship to	Foundation status of		Amount
	Name and address (home or business)	or substantial contributor	recipient	Contribution	
а	Paid dunng the year				
WASI	HINGTON UNIVERSITY				
	SOUTH EUCLID				
	NT LOUIS, MO 63110	N/A	N/A	MEDICAL RESEARCH	386,769
			ĺ		
					}
]
			}		
	Total			·	3a 386,769.00
b				T	000000000000000000000000000000000000000
N/A			ļ		
			[
]
			<u></u>	<u></u>	
	Total				

Form **990-PF** (2014)

Pa	rt XVI	-A Analysis of Income-Producing Ac	tivities				
nte	r gross	s amounts unless otherwise indicated.	Unrelated bu	isiness income	Excluded by sect	ion 512, 513, or 514	(0)
1	Progr	am service revenue:	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
•		/A					
	b 147	/A			 		
	~ —						
	d _						
		···· <u>···</u>			<u> </u>		
	f -				<u> </u>		
	g Fe	ees and contracts from government agencies			 	,	
2	_	bership dues and assessments			 		
3		st on savings and temporary cash investments			 		
4		ends and interest from securities					
5		ental income or (loss) from real estate	1.7 million 1881	ANTE COLUMN	31.25 SAN TO SEE	State of the State	4277, 18, 121
5		ebt-financed property	43.61.33.434	The second of th	2 2 x 2 x 2 x 2	, , , , , , , , , , , ,	* * * * * * * * * * * * * * * * * * *
		ot debt-financed property			 		
6		ental income or (loss) from personal property					
6		r investment income					
7		or (loss) from sales of assets other than inventory					
8							
9		ncome or (loss) from special events					
10		s profit or (loss) from sales of inventory			 		
11		r revenue. a	ļ				
	p _						
	d _			· · · · · · · · · · · · · · · · · · ·			
40	e Cuba	atal Add ashimona (b) (d) and (c)		0.00	, , , , ,	0.00	
		otal. Add columns (b), (d), and (e)			<u> </u>	0.00	
		l. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculatior				. 13	0.00
	rt XVI			ant of Evamo	4 Burnaga		
	e No.	· · · · · · · · · · · · · · · · · · ·	-			I-A contributed in	mportantly to the
	▼	Explain below how each activity for which accomplishment of the foundation's exempt put	rposes (other tha	n by providing fun	ds for such purp	oses) (See instru	ctions)
		N/A				···	
							
			<u> </u>				
							·
						 	

		Exempt Or	ganizations					_		_		
1	in se			ngage in any of the follow ection 501(c)(3) organizat							Yes	No
а	Trans	sfers from the rec	orting foundation to	a noncharitable exempt	organization o	of:						j
_			=		-				1	la(1)		
	• •	Other assets						•		a(2)		
									- -	a(2)		X
b		r transactions:							-			
			a noncharitable exen	. •		•				lb(1)		_X_
	(2) F	urchases of asse	ets from a nonchantat	ole exempt organization					. [1	b(2)		X
	(3) F	Rental of facilities,	, equipment, or other	assets					. 1	lb(3)		Х
	(4) F	Reimbursement ai	rrangements						. 1	b(4)		Х
									_ <u> </u>	b(5)		X
		•		p or fundraising solicitation					-	Ib(6)		
_				s, other assets, or paid e				•	·	1c		
С.									. L			<u> </u>
d				" complete the following								
				es given by the reporting								
	value	e in any transaction		ment, show in column (d	<u> </u>							
(a) Lin	e no	(b) Amount involved	(c) Name of noncha	ritable exempt organization	(d) Descri	otion of transfe	rs, transa	ictions, a	nd sharı	ng arra	angeme	ents
	-											
								·		····		
												
						· · · · · · · · · · · · · · · · · · ·						
					1							
	+											
												
												
			<u> </u>		L							
2a				iated with, or related to			ot orga	nızatioı	ns			
			• • • • • • • • • • • • • • • • • • • •	her than section 501(c)(3)) or in sectio	n 527? .		•		Yes	X	No
b	If "Y	es," complete the	e following schedule.									
		(a) Name of organ	ization	(b) Type of organizat	ion		(c) Descr	iption of	relations	hip		
												
											_	
							· · · · · · · · · · · · · · · · · · ·					
				 								
	1 020	ar nanatkina ak a anii a 14	dealess that I have seen as a	this cations in all discussions			4-46-6-	-1 -1 1			h = b . * . *	-
D:				this return, including accompanying taxpayer) is based on all informat				stor my k	knowledg	e and l	penef, it	is true,
Sign	' K .	and domplete deal	4	المسلمان المسلم	.c.r o. winon prepe	noo any kno	ouge		y the IRS			
Here)	XUAMILLA I	4. Boyer	5 8 20 5 1	REASURER				h the pre			
	_	natyre of officer of tru			ītle			(264	e instruct	iviis)/	res	
D-:-1		Print/Type preparer	's name	Preparer's signature		Date	T,	Shoot: C	ı PT	1N		
Paid		!						Check elf-emplo				
	arer			<u>.</u>		1		<u></u>	·1			
Use	Only						Firm's E					
		Firm's address ▶					Phone r	10				

Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

► Attach to Form 990, Form 990-EZ, or Form 990-PF.

▶ Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Employer identification number

LONGE	LONGER LIFE FOUNDATION 43-1819267				
Organiz	ation type (check on	е).			
Filers o	f:	Section:			
Form 99	0 or 990-EZ	☐ 501(c)() (enter number) organization			
		4947(a)(1) nonexempt charitable trust not treated as a private four	ndation		
		☐ 527 political organization			
Form 99	0-PF	∑ 501(c)(3) exempt private foundation			
		4947(a)(1) nonexempt charitable trust treated as a private foundate	tion		
		501(c)(3) taxable private foundation			
	nly a section 501(c)(7)	covered by the General Rule or a Special Rule.), (8), or (10) organization can check boxes for both the General Rule a	nd a Special Rule. See		
Genera	l Rule				
X	For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.				
Special	Rules				
	regulations under se 13, 16a, or 16b, and	described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 ections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 99) that received from any one contributor, during the year, total contribut	90 or 990-EZ), Part II, line tions of the greater of (1)		
	contributor, during th	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that ne year, total contributions of more than \$1,000 exclusively for religious all purposes, or for the prevention of cruelty to children or animals. Con	, charitable, scientific,		
	contributor, during the contributions totaled during the year for a General Rule applie	described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that he year, contributions exclusively for religious, charitable, etc., purposed more than \$1,000. If this box is checked, enter here the total contribution exclusively religious, charitable, etc., purpose. Do not complete any est to this organization because it received nonexclusively religious, charitable, etc., purpose.	es, but no such utions that were received of the parts unless the		

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

Name of organization
LONGER LIFE FOUNDATION

Employer identification number
43-1819267

Part I	Contributors (see instructions). Use duplicate co	pies of Part I if additional space is	needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	RGA REINSURANCE COMPANY 16600 SWINGLEY RIDGE ROAD CHESTERFIELD, MO 63017-1706	\$ 400,000	Person 🗵 Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		 \$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$ 	Person
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person

Name of organization Employer identification number
LONGER LIFE FOUNDATION 43-1819267

Part II	Noncash Property (see instructions). Use auplicate co	opies of Part II if additional spa-	ce is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	N/A		
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

Name of organization

Employer identification number

Schedule B (Form 990, 990-EZ, or 990-PF) (2014)

LONGER	LIFE FOUNDATION			43-1819267						
Part III	the following line entry. For organization contributions of \$1,000 or less for the	the year from any one of tions completing Part III, one the year. (Enter this information	c ontributor . C enter the total	complete columns (a) through (e) and of exclusively religious, charitable, etc.						
(a) No.	Use duplicate copies of Part III if add	litional space is needed.								
from Part I	(b) Purpose of gift	(c) Use of gift	:	(d) Description of how gift is held						
	N/A									
		(e) Transfer of	gift							
	Transferee's name, address, a			ship of transferor to transferee						
/a\ Na										
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee									
(a) No.										
from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
		(e) Transfer of gift								
	Transferee's name, address, and ZIP + 4			ship of transferor to transferee						
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift		(d) Description of how gift is held						
}	(e) Transfer of gift									
	Transferee's name, address, a		Relationship of transferor to transferee							

Longer Life Foundation 43-1819267 Attachment to Form 990-PF Return of Private Foundation 31-Dec-14

Part I, Line 23 - Other expenses:

State of Missouri Annual Registration Report Fee	115
Bank Fees	1,113
	1,228

Longer Life Foundation 43-1819267 Attachment to Form 990-PF Return of Private Foundation 31-Dec-14

Part VIII, Line 1 - Schedule of all officers, directors, trustees, & managers:

(a) Name and Address	(b) Title & average hrs/week	(c) Compensation	(d) Contributions to employee benefit plans & deferred comp.	(e) Expense account & other allowances
A Greig Woodring 16600 Swingley Ridge Road Chesterfield, MO 63017-1706	Chairman and Director	None	None	None
Robert M. Musen 16600 Swingley Ridge Road Chesterfield, MO 63017-1706	Governor	None	None	None
Larry Shapiro, M D Washington University School of Medicine Campus Box 8106 666 S Euclid Avenue St Louis, MO 63110-1093	Vice Chairman	None	None	None
Philip S Smalley, M D 77 King Street West, Suite 2200 PO Box 188 Toronto, Ontario, Canada M5K 1H6	Managing Director	None	None	None
J Carl Holowaty, M.D. 16600 Swingley Ridge Road Chesterfield, MO 63017-1706	Deputy Managing Director	None	None	None
Sara McCarty 16600 Swingley Ridge Road Chesterfield, MO 63017-1706	Secretary	None	None	None
Joan Heins Washington University School of Medicine Campus Box 8031 666 S Euclid Avenue St Louis, MO 63110	Assistant Secretary	None	None	None
Jeffrey Boyer 16600 Swingley Ridge Road Chesterfield, MO 63017-1706	Treasurer	None	None	None

Longer Life Foundation 43-1819267 Attachment to Form 990-PF Return of Private Foundation 31-Dec-14

<u>Part XV, Line 2a - Name, address, & telephone number of the person to whom applications should be addressed:</u>

Applications can be mailed to

Dr Philip Smalley M.D. FRCPC

Managing Director

Longer Life Foundation

77 King Street West, Suite 2200

PO Box 188

Toronto, Ontario, Canada

M5K 1H6

Applications can be sent electronically to:

Dr Philip Smalley M.D. FRCPC

Managing Director

Longer Life Foundation

Psmalley@rgare com

<u>Part XV, Line 2b - The form in which applications should be submitted</u> and information and materials they should include:

- 1. Abstract (1 page)
- 2. Summary and Description in lay language (1 page)
- 3. Rationale and Key Background Literature (1 page)
- 4. Previous work, experience, and capacity of applicant(s) (2 pages)
- 5. Methods and research questions or expected results of project (5 pages)
- 6. Significance to Mission of Foundation (1 page)
- 7. Projected Budget (direct costs only)

Part XV, Line 2c - Any submission deadlines:

April 1st is the informal deadline, however the Foundation is willing to review grant proposals or letters of intent at any time throughout the year

Part XV, Line 2d - Any restrictions or limitations:

The only restriction is that the area of research must be in-line with the Foundation's mission statement:

Mission of the Foundation

To study factors that assist in predicting mortality and morbidity of selected populations and to research methods to promote improvements in longevity and health by analyzing the effects of changes in medicine and advances in public health practices.