

Form **990-PF**Department of the Treasury  
Internal Revenue Service**Return of Private Foundation****or Section 4947(a)(1) Trust Treated as Private Foundation**

- Do not enter social security numbers on this form as it may be made public.
- Information about Form 990-PF and its instructions is at [www.irs.gov/form990pf](http://www.irs.gov/form990pf).

**2016****Open to Public  
Inspection****For calendar year 2016, or tax year beginning 01-01-2016 , and ending 12-31-2016**

<p>Name of foundation LIFELONG VISION FOUNDATION</p> <p>Number and street (or P O box number if mail is not delivered to street address) 1815 CLARKSON ROAD NO 140</p> <p>City or town, state or province, country, and ZIP or foreign postal code CHESTERFIELD, MO 630178412</p> <p><b>G</b> Check all that apply    <input type="checkbox"/> Initial return    <input type="checkbox"/> Initial return of a former public charity  <input type="checkbox"/> Final return    <input type="checkbox"/> Amended return  <input type="checkbox"/> Address change    <input type="checkbox"/> Name change</p> <p><b>H</b> Check type of organization    <input checked="" type="checkbox"/> Section 501(c)(3) exempt private foundation  <input type="checkbox"/> Section 4947(a)(1) nonexempt charitable trust    <input type="checkbox"/> Other taxable private foundation</p> <p><b>I</b> Fair market value of all assets at end of year (from Part II, col (c), line 16) ► \$ 1,576,971</p>		<p><b>A</b> Employer identification number 43-1911559</p> <p><b>B</b> Telephone number (see instructions) (636) 519-0318</p> <p><b>C</b> If exemption application is pending, check here ► <input type="checkbox"/></p> <p><b>D</b> 1. Foreign organizations, check here ► <input type="checkbox"/>  2. Foreign organizations meeting the 85% test, check here and attach computation ► <input type="checkbox"/></p> <p><b>E</b> If private foundation status was terminated under section 507(b)(1)(A), check here ► <input type="checkbox"/></p> <p><b>F</b> If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ► <input type="checkbox"/></p>					
		<p><b>J</b> Accounting method    <input checked="" type="checkbox"/> Cash    <input type="checkbox"/> Accrual  <input type="checkbox"/> Other (specify) _____</p> <p>(Part I, column (d) must be on cash basis )</p>					
<b>Part I Analysis of Revenue and Expenses</b> (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see instructions))		<b>(a)</b>	<b>Revenue and expenses per books</b>	<b>(b)</b>	<b>Net investment income</b>	<b>(c)</b>	<b>(d)</b>
Revenue	1 Contributions, gifts, grants, etc , received (attach schedule)		2,556				
	2 Check ► <input checked="" type="checkbox"/> if the foundation is not required to attach Sch B						
	3 Interest on savings and temporary cash investments						
	4 Dividends and interest from securities		40,672	40,672	40,672		
	5a Gross rents						
	b Net rental income or (loss)						
	6a Net gain or (loss) from sale of assets not on line 10		7,116				
	b Gross sales price for all assets on line 6a		102,757				
	7 Capital gain net income (from Part IV, line 2)			7,116			
	8 Net short-term capital gain					7,116	
	9 Income modifications						
	10a Gross sales less returns and allowances						
	b Less Cost of goods sold						
	c Gross profit or (loss) (attach schedule)						
	11 Other income (attach schedule)		262,679	0	262,679		
	12 Total. Add lines 1 through 11		313,023	47,788	310,467		
Operating and Administrative Expenses							
Operating and Administrative Expenses	13 Compensation of officers, directors, trustees, etc		42,735	0	42,735	0	
	14 Other employee salaries and wages		173,794	0	97,423	76,370	
	15 Pension plans, employee benefits		23,201	0	13,006	10,195	
	16a Legal fees (attach schedule)		199	0	112	87	
	b Accounting fees (attach schedule)		9,400	0	5,269	4,131	
	c Other professional fees (attach schedule)		19,935	7,500	6,970	5,465	
	17 Interest						
	18 Taxes (attach schedule) (see instructions)		575	0	322	253	
	19 Depreciation (attach schedule) and depletion		488	0	621		
	20 Occupancy		17,448	0	9,781	7,667	
	21 Travel, conferences, and meetings		8,608	0	4,825	3,783	
	22 Printing and publications						
	23 Other expenses (attach schedule)		143,201	0	129,403	13,800	
	24 Total operating and administrative expenses.						
	Add lines 13 through 23		439,584	7,500	310,467	121,751	
	25 Contributions, gifts, grants paid		9,536			9,536	
	26 Total expenses and disbursements. Add lines 24 and 25		449,120	7,500	310,467	131,287	
Revenue	27 Subtract line 26 from line 12		-136,097				
	a Excess of revenue over expenses and disbursements						
	b Net investment income (if negative, enter -0-)			40,288			
	c Adjusted net income(if negative, enter -0-)				0		

	Part II Balance Sheets	Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions )	Beginning of year	End of year	
			(a) Book Value	(b) Book Value	(c) Fair Market Value
	1 Cash—non-interest-bearing			518,120	518,120
	2 Savings and temporary cash investments		750,899	52,217	52,217
	3 Accounts receivable ►				
	Less allowance for doubtful accounts ►				
	4 Pledges receivable ►				
	Less allowance for doubtful accounts ►				
	5 Grants receivable				
	6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see instructions)				
	7 Other notes and loans receivable (attach schedule) ►				
	Less allowance for doubtful accounts ►				
	8 Inventories for sale or use				
	9 Prepaid expenses and deferred charges			800	800
	10a Investments—U S and state government obligations (attach schedule)				
	b Investments—corporate stock (attach schedule)				
	c Investments—corporate bonds (attach schedule)				
	11 Investments—land, buildings, and equipment basis ►				
	Less accumulated depreciation (attach schedule) ►				
	12 Investments—mortgage loans				
	13 Investments—other (attach schedule)		923,564	1,005,451	1,005,451
	14 Land, buildings, and equipment basis ►	81,209			
	Less accumulated depreciation (attach schedule) ►	80,826			
	15 Other assets (describe ►)		871	383	383
	16 Total assets (to be completed by all filers—see the instructions Also, see page 1, item I)		1,675,334	1,576,971	1,576,971
	17 Accounts payable and accrued expenses		461	4,500	
	18 Grants payable				
	19 Deferred revenue				
	20 Loans from officers, directors, trustees, and other disqualified persons				
	21 Mortgages and other notes payable (attach schedule)				
	22 Other liabilities (describe ►)	18,444	18,444	5,107	
	23 Total liabilities (add lines 17 through 22)		18,905	9,607	
	<b>Foundations that follow SFAS 117, check here ► <input checked="" type="checkbox"/></b> <b>and complete lines 24 through 26 and lines 30 and 31.</b>				
	24 Unrestricted		1,184,013	1,150,591	
	25 Temporarily restricted		472,416	416,773	
	26 Permanently restricted				
	<b>Foundations that do not follow SFAS 117, check here ► <input type="checkbox"/></b> <b>and complete lines 27 through 31.</b>				
	27 Capital stock, trust principal, or current funds				
	28 Paid-in or capital surplus, or land, bldg , and equipment fund				
	29 Retained earnings, accumulated income, endowment, or other funds				
	30 Total net assets or fund balances (see instructions)		1,656,429	1,567,364	
	31 Total liabilities and net assets/fund balances (see instructions)		1,675,334	1,576,971	

**Part III Analysis of Changes in Net Assets or Fund Balances**

1	Total net assets or fund balances at beginning of year—Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	1,656,429
2	Enter amount from Part I, line 27a	2	-136,097
3	Other increases not included in line 2 (itemize) ►	3	47,032
4	Add lines 1, 2, and 3	4	1,567,364
5	Decreases not included in line 2 (itemize) ►	5	0
6	Total net assets or fund balances at end of year (line 4 minus line 5)—Part II, column (b), line 30	6	1,567,364

**Part IV Capital Gains and Losses for Tax on Investment Income**

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.)			(b) How acquired P—Purchase D—Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1 a ENTERPRISE BANK			P		2016-12-31
b					
c					
d					
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)		
a 102,757		95,641	7,116		
b					
c					
d					
e					
Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69					
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	(l) Gains (Col (h) gain minus col (k), but not less than -0-) or Losses (from col (h))		
a			7,116		
b					
c					
d					
e					
2 Capital gain net income or (net capital loss)		If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7	2	7,116	
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6)			3	7,116	
If gain, also enter in Part I, line 8, column (c) (see instructions) If (loss), enter -0- in Part I, line 8					

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

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

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

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

 Yes  No

If "Yes," the foundation does not qualify under section 4940(e). Do not complete this part

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

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (col (b) divided by col (c))
2015	9,692	1,626,508	0 005959
2014	379,260	1,695,688	0 223661
2013	433,402	1,572,359	0 275638
2012	373,024	1,514,372	0 246323
2011	228,850	1,167,943	0 195943
<b>2 Total</b> of line 1, column (d)			0 947524
<b>3 Average</b> distribution ratio for the 5-year base period—divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years			0 189505
<b>4 Enter</b> the net value of noncharitable-use assets for 2016 from Part X, line 5			1,606,702
<b>5 Multiply</b> line 4 by line 3			304,478
<b>6 Enter</b> 1% of net investment income (1% of Part I, line 27b)			403
<b>7 Add</b> lines 5 and 6			304,881
<b>8 Enter</b> qualifying distributions from Part XIII, line 4			131,287

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

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

1a	Exempt operating foundations described in section 4940(d)(2), check here ► <input type="checkbox"/> and enter "N/A" on line 1 Date of ruling or determination letter _____ (attach copy of letter if necessary—see instructions)	1	806
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here ► <input type="checkbox"/> and enter 1% of Part I, line 27b		
c	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	2	0
3	Add lines 1 and 2.	3	806
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	4	0
5	<b>Tax based on investment income.</b> Subtract line 4 from line 3 If zero or less, enter -0- . . . . .	5	806
6	Credits/Payments		
a	2016 estimated tax payments and 2015 overpayment credited to 2016	6a	
b	Exempt foreign organizations—tax withheld at source	6b	
c	Tax paid with application for extension of time to file (Form 8868)	6c	
d	Backup withholding erroneously withheld	6d	
7	Total credits and payments Add lines 6a through 6d.	7	0
8	Enter any <b>penalty</b> for underpayment of estimated tax Check here <input type="checkbox"/> if Form 2220 is attached	8	23
9	<b>Tax due.</b> If the total of lines 5 and 8 is more than line 7, enter <b>amount owed</b> . . . . . ►	9	829
10	<b>Overpayment.</b> If line 7 is more than the total of lines 5 and 8, enter the <b>amount overpaid</b> . . . . . ►	10	
11	Enter the amount of line 10 to be <b>Credited to 2017 estimated tax</b> ►	Refunded	11

**Part VII-A Statements Regarding Activities**

1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign? . . . . .	1a	Yes	No
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see Instructions for definition)? . . . . .	1b	Yes	No
<i>If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities</i>				
c	Did the foundation file <b>Form 1120-POL</b> for this year? . . . . .	1c	Yes	No
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year (1) On the foundation ► \$ _____ 0 (2) On foundation managers ► \$ _____ 0			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers ► \$ _____ 0			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS? . . . . . <i>If "Yes," attach a detailed description of the activities</i>	2	Yes	No
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? <i>If "Yes," attach a conformed copy of the changes</i>	3	Yes	No
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year? . . . . .	4a	Yes	No
b	If "Yes," has it filed a tax return on <b>Form 990-T</b> for this year? . . . . .	4b	Yes	No
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year? . . . . . <i>If "Yes," attach the statement required by General Instruction T</i>	5	Yes	No
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either • By language in the governing instrument, or • By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law remain in the governing instrument? . . . . .	6	Yes	No
7	Did the foundation have at least \$5,000 in assets at any time during the year? <i>If "Yes," complete Part II, col (c), and Part XV</i>	7	Yes	No
8a	Enter the states to which the foundation reports or with which it is registered (see instructions) ►MO			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) of each state as required by General Instruction G? <i>If "No," attach explanation</i>	8b	Yes	No
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar year 2016 or the taxable year beginning in 2016 (see instructions for Part XIV)? <i>If "Yes," complete Part XIV</i>	9	Yes	No
10	Did any persons become substantial contributors during the tax year? <i>If "Yes," attach a schedule listing their names and addresses</i>	10		No

**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	No
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	No
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► <a href="http://WWW.LIFELONGVISIONFOUNDATION.ORG">WWW.LIFELONGVISIONFOUNDATION.ORG</a>	13	Yes

14	The books are in care of ► <a href="#">THE FOUNDATION</a>	Telephone no ► (636) 519-0318
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Located at ► 1815 CLARKSON ROAD NO 140 CHESTERFIELD MO

ZIP+4 ► 630178412

15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> —Check here . . . . . ► <input type="checkbox"/>	15	
16	At any time during calendar year 2016, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See instructions for exceptions and filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). If "Yes", enter the name of the foreign country ►	16	Yes No

**Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required****File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.**

1a	During the year did the foundation (either directly or indirectly)		Yes	No
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(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)? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	(6) Agree to pay money or property to a government official? ( <b>Exception.</b> Check "No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days) . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If any answer is "Yes" to 1a(1)–(6), did <b>any</b> 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)? . . . . . ► <input type="checkbox"/>		1b	
c	Organizations relying on a current notice regarding disaster assistance check here. . . . . ► <input type="checkbox"/>			
2	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2016? . . . . .		1c	No
a	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
a	At the end of tax year 2016, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2016? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
	If "Yes," list the years ► 20____, 20____, 20____, 20____			
b	Are there any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section 4942(a)(2) (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to <b>all</b> years listed, answer "No" and attach statement—see instructions) . . . . .		2b	
c	If the provisions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the years here ► 20____, 20____, 20____, 20____			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? . . . . .	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
b	If "Yes," did it have excess business holdings in 2016 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2016) . . . . .		3b	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? . . . . .		4a	No
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 2016? . . . . .		4b	No

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

- 5a During the year did the foundation pay or incur any amount to

(1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?  Yes  No

(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? . . . . .  Yes  No

(3) Provide a grant to an individual for travel, study, or other similar purposes?  Yes  No

(4) Provide a grant to an organization other than a charitable, etc., organization described in section 4945(d)(4)(A)? (see instructions). . . . .  Yes  No

(5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? . . . . .  Yes  No

b If any answer is "Yes" to 5a(1)–(5), did **any** of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)? . . . . . Organizations relying on a current notice regarding disaster assistance check here. . . . . ►

c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? . . . . .  Yes  No  
*If "Yes," attach the statement required by Regulations section 53.4945–5(d)*

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? . . . . .  Yes  No

b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . . . . If "Yes" to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?  Yes  No

b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? . . . . .

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

**1. List all officers, directors, trustees, foundation managers and their compensation (see instructions).**

2 Compensation of five highest-paid employees (other than those included on line 1—see instructions). If none, enter "NONE."

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

**3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "NONE".**

**Total number of others receiving over \$50,000 for professional services.** . . . . . ►

**Part IX-A Summary of Direct Charitable Activities**

List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.

<p><b>1</b> LIFELONG VISION FOUNDATION SUPPORTS RESEARCH EFFORTS IN OPHTHALMOLOGY, TO EDUCATE PHYSICIANS AND THE GENERAL PUBLIC IN THE DIAGNOSIS AND TREATMENT OF OCULAR DISEASE, AND TO PROVIDE VISION SCREENING AND CORRECTIVE PROGRAMS TO SPECIFIC UNDERSERVED COMMUNITIES. LVF ACHIEVES ITS GOALS THROUGH PEPOSE VISION INSTITUTE (PVI) STUDIES AND CLINICAL TRIALS AND THROUGH THE GENEROUS SUPPORT OF PATIENTS AND THEIR FAMILY MEMBERS, CORPORATE CITIZENS, AND FOUNDATIONS WHO SHARE THE VISION OF LIFELONG EXCELLENCE IN EYE CARE. CURRENTLY, LVF IS PARTICIPATING IN 17 STUDIES INVOLVING 70 PARTICIPANTS. LVF'S SUPPORT IS DERIVED PRIMARILY FROM FEES EARNED FOR PERFORMING THESE STUDIES, GRANT INCOME, AND CONTRIBUTIONS FROM INDIVIDUALS, CORPORATIONS AND FOUNDATIONS</p>	
<b>2</b>	310,467
<b>3</b>	
<b>4</b>	

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

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2

1	_____	
	_____	
2	_____	
	_____	
All other program-related investments See instructions		
3	_____	

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All other program-related investments See instructions

3 \_\_\_\_\_  
\_\_\_\_\_

**Total:** Add lines 1 through 3

0

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

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc , purposes		
a	Average monthly fair market value of securities. . . . .	1a	961,096
b	Average of monthly cash balances. . . . .	1b	670,074
c	Fair market value of all other assets (see instructions). . . . .	1c	0
d	<b>Total</b> (add lines 1a, b, and c). . . . .	1d	1,631,170
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation). . . . .	1e	0
2	Acquisition indebtedness applicable to line 1 assets. . . . .	2	0
3	Subtract line 2 from line 1d. . . . .	3	1,631,170
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions). . . . .	4	24,468
5	<b>Net value of noncharitable-use assets.</b> Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,606,702
6	<b>Minimum investment return.</b> Enter 5% of line 5. . . . .	6	80,335

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

1	Minimum investment return from Part X, line 6. . . . .	1	
2a	Tax on investment income for 2016 from Part VI, line 5. . . . .	2a	
b	Income tax for 2016 (This does not include the tax from Part VI ). . . . .	2b	
c	Add lines 2a and 2b. . . . .	2c	
3	Distributable amount before adjustments Subtract line 2c from line 1. . . . .	3	
4	Recoveries of amounts treated as qualifying distributions. . . . .	4	
5	Add lines 3 and 4. . . . .	5	
6	Deduction from distributable amount (see instructions). . . . .	6	
7	<b>Distributable amount</b> as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1. . . . .	7	

**Part XII Qualifying Distributions** (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc , purposes		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26. . . . .	1a	131,287
b	Program-related investments—total from Part IX-B. . . . .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc , purposes. . . . .	2	
3	Amounts set aside for specific charitable projects that satisfy the		
a	Suitability test (prior IRS approval required). . . . .	3a	
b	Cash distribution test (attach the required schedule). . . . .	3b	
4	<b>Qualifying distributions.</b> Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	131,287
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions). . . . .	5	0
6	<b>Adjusted qualifying distributions.</b> Subtract line 5 from line 4. . . . .	6	131,287
<b>Note:</b> The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years			

**Part XIII Undistributed Income (see instructions)**

	(a) Corpus	(b) Years prior to 2015	(c) 2015	(d) 2016
<b>1</b> Distributable amount for 2016 from Part XI, line 7				0
<b>2</b> Undistributed income, if any, as of the end of 2016			0	
<b>a</b> Enter amount for 2015 only. . . . .			0	
<b>b</b> Total for prior years 20____, 20____, 20____		0		
<b>3</b> Excess distributions carryover, if any, to 2016				
<b>a</b> From 2011. . . . .	170,535			
<b>b</b> From 2012. . . . .	297,370			
<b>c</b> From 2013. . . . .				
<b>d</b> From 2014. . . . .				
<b>e</b> From 2015. . . . .				
<b>f</b> <b>Total</b> of lines 3a through e. . . . .	467,905			
<b>4</b> Qualifying distributions for 2016 from Part XII, line 4 ► \$ _____			0	
<b>a</b> Applied to 2015, but not more than line 2a			0	
<b>b</b> Applied to undistributed income of prior years (Election required—see instructions). . . . .		0		
<b>c</b> Treated as distributions out of corpus (Election required—see instructions). . . . .	0			
<b>d</b> Applied to 2016 distributable amount. . . . .			0	
<b>e</b> Remaining amount distributed out of corpus	0			
<b>5</b> Excess distributions carryover applied to 2016 (If an amount appears in column (d), the same amount must be shown in column (a) )	0			0
<b>6</b> <b>Enter the net total of each column as indicated below:</b>				
<b>a</b> Corpus Add lines 3f, 4c, and 4e Subtract line 5	467,905			
<b>b</b> Prior years' undistributed income Subtract line 4b from line 2b. . . . .		0		
<b>c</b> 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. . . . .		0		
<b>d</b> Subtract line 6c from line 6b Taxable amount—see instructions . . . . .		0		
<b>e</b> Undistributed income for 2015 Subtract line 4a from line 2a Taxable amount—see instructions . . . . .			0	
<b>f</b> Undistributed income for 2016 Subtract lines 4d and 5 from line 1 This amount must be distributed in 2017. . . . .				0
<b>7</b> 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) . . . . .	0			
<b>8</b> Excess distributions carryover from 2011 not applied on line 5 or line 7 (see instructions) . . . . .	170,535			
<b>9</b> <b>Excess distributions carryover to 2017.</b> Subtract lines 7 and 8 from line 6a. . . . .	297,370			
<b>10</b> Analysis of line 9				
<b>a</b> Excess from 2012. . . . .	297,370			
<b>b</b> Excess from 2013. . . . .				
<b>c</b> Excess from 2014. . . . .				
<b>d</b> Excess from 2015. . . . .				
<b>e</b> Excess from 2016. . . . .				

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

1a	If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2016, enter the date of the ruling.				►	2015-06-19		
b	Check box to indicate whether the organization is a private operating foundation described in section				<input checked="" type="checkbox"/>	4942(j)(3) or	<input type="checkbox"/>	4942(j)(5)
2a	Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed.							
b	85% of line 2a.							
c	Qualifying distributions from Part XII, line 4 for each year listed.							
d	Amounts included in line 2c not used directly for active conduct of exempt activities.							
e	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.							
3	Complete 3a, b, or c for the alternative test relied upon							
a	"Assets" alternative test—enter							
(1)	Value of all assets.							0
(2)	Value of assets qualifying under section 4942(j)(3)(B)(i)							0
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed.							
c	"Support" alternative test—enter							
(1)	Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties).							0
(2)	Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III).							0
(3)	Largest amount of support from an exempt organization							0
(4)	Gross investment income							0

**Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year—see instructions.)****1 Information Regarding Foundation Managers:**

- a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000) (See section 507(d)(2))
- b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

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

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

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

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

- c Any submission deadlines

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

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

Recipient Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
<i>a Paid during the year</i> See Additional Data Table				
<b>Total</b> . . . . .			► 3a	9,536
<i>b Approved for future payment</i>				
<b>Total</b> . . . . .			► 3b	0

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (See instructions )
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	
<b>1 Program service revenue</b>					
a <u>STUDY INCOME</u>					262,679
b _____					
c _____					
d _____					
e _____					
f _____					
<b>g Fees and contracts from government agencies</b>					
<b>2 Membership dues and assessments.</b>					
<b>3 Interest on savings and temporary cash investments</b>					
<b>4 Dividends and interest from securities.</b>				14	40,672
<b>5 Net rental income or (loss) from real estate</b>					
a <b>Debt-financed property.</b>					
b <b>Not debt-financed property.</b>					
<b>6 Net rental income or (loss) from personal property</b>					
<b>7 Other investment income.</b>					
<b>8 Gain or (loss) from sales of assets other than inventory</b>				18	7,116
<b>9 Net income or (loss) from special events</b>					
<b>10 Gross profit or (loss) from sales of inventory</b>					
<b>11 Other revenue a _____</b>					
b _____					
c _____					
d _____					
e _____					
<b>12 Subtotal Add columns (b), (d), and (e).</b>		0		47,788	262,679
<b>13 Total. Add line 12, columns (b), (d), and (e).</b>					310,467
(See worksheet in line 12 instructions to verify calculations.)					

**Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes**



## Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, (e) other allowances
SANFORD NEUMAN	PRESIDENT 5 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
ROBERT MAY	VICE PRESIDENT 5 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
SUSAN FEIGENBAUM PHD	SECRETARY 5 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
JAY S PEPOSE MD PHD	MEDICAL DIRECTOR 5 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
MARILYN SPIRT	EXECUTIVE DIRECTOR (TERM 4/2016) 35 00	18,466	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
MARY APRIL	DIR COMMUNITY OUTREACH/DEV (EFF 8/16) 40 00	24,269	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
THOMAS F GEORGE PHD	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
BARBARA B GOODMAN	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
JOHN GUCKES	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
DONNA HIBLER	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
EICHEL JOHNSON	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
KENNETH KRANZBERG	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
MARK LOMBARDI PHD	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
MAURICE QUIROGA	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				
GREGG D SCHELLER	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				

## Form 990PF Part VIII Line 1 - List all officers, directors, trustees, foundation managers and their compensation

(a) Name and address	Title, and average hours per week (b) devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	Expense account, (e) other allowances
LIZ SCHMITZ	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017	TRUSTEE 1 00	0	0	0
HERBERT C SMITH	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017	TRUSTEE 1 00	0	0	0
SUSAN STITH	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017	TRUSTEE 1 00	0	0	0
DONALD M SUGGS DDS	TRUSTEE 1 00	0	0	0
1815 CLARKSON RD STE 140 CHESTERFIELD, MO 63017				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
CELEBRATE JESUS OF HAITI 903 SILVER FOX DR INNSBROOK, MO 63390	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	250
JOHNS HOPKINS UNIVERSITY SCHOOL OF MEDICINE 600 N WOLFE ST BALTIMORE, MD 21287	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	1,000
RESPONDER RESCUE 3711 MEXICO RD ST CHARLES, MO 63303	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	200
ST LOUIS GUNS N HOSES BOXING ASSOCIATION 2340 MILLPARK DRIVE ST LOUIS, MO 63043	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	105
ST LOUIS POLICE FOUNDATION 9761 CLAYTON ROAD ST LOUIS, MO 63124	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	173
<b>Total . . . . .</b>				9,536
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<b>a Paid during the year</b>				
FOUNDATION FIGHTING BLINDNESS INC  7168 COLUMBIA GATEWAY DRIVE NO 100 COLUMBIA, MD 21046	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	1,000
STARKLOFF DISABILITY INSTITUTE 133 S 11TH ST ST LOUIS, MO 63102	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	100
UCLA SCHOOL OF MEDICINE 100 STEIN PLAZA LOS ANGELES, CA 90024	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	1,000
UNIVERSITY OF MISSOURI - ST LOUIS ONE UNIVERSITY BLVD ST LOUIS, MO 63121	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	1,375
WASHINGTON UNIVERSITY 1 BROOKINGS DRIVE ST LOUIS, MO 63130	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	3,333
<b>Total . . . . .</b>				9,536
<b>3a</b>				

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

Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a Paid during the year</i>				
WASHINGTON UNIVERSITY SCHOOL OF MEDICINE 660 S EUCLID AVE ST LOUIS, MO 63110	NONE	501(C)(3) PUBLIC CHA	VISION PROGRAMMING	1,000
<b>Total . . . . .</b>			►	9,536
<b>3a</b>				

## TY 2016 Accounting Fees Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

Category	Amount	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ACCOUNTING FEES	9,400	0	5,269	4,131

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

## **TY 2016 Depreciation Schedule**

**Name:** LIFELONG VISION FOUNDATION

**EIN:** 43-1911559

Description of Property	Date Acquired	Cost or Other Basis	Prior Years' Depreciation	Computation Method	Rate / Life (# of years)	Current Year's Depreciation Expense	Net Investment Income	Adjusted Net Income	Cost of Goods Sold Not Included
FURNITURE & FIXTURES	2007-10-31	696	696	SL	5 000000000000	0	0	0	
COMPUTER EQUIPMENT	2007-07-27	58,797	58,797	SL	5 000000000000	0	0	0	
COMPUTER EQUIPMENT	2008-01-25	5,421	5,421	SL	5 000000000000	0	0	0	
COMPUTER EQUIPMENT	2010-03-18	8,517	8,517	SL	5 000000000000	0	0	0	
COMPUTER EQUIPMENT	2011-06-30	7,185	6,683	SL	5 000000000000	502	0	502	
OFFICE FURNITURE	2013-09-20	593	224	SL	5 000000000000	119	0	119	

## TY 2016 Investments - Other Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

<b>Category/ Item</b>	<b>Listed at Cost or FMV</b>	<b>Book Value</b>	<b>End of Year Fair Market Value</b>
ENTERPRISE - MUTUAL FUNDS	AT COST	1,005,451	1,005,451

## TY 2016 Legal Fees Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
LEGAL FEES	199	0	112	87

## TY 2016 Other Expenses Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

## Other Expenses Schedule

Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
ADVERTISING	11,143	0	6,246	4,897
OFFICE SUPPLIES	6,233	0	3,494	2,739
POSTAGE & DELIVERY	657	0	368	288
MEDICAL STUDIES	81,559	0	81,559	0
MISCELLANEOUS	6,916	0	3,879	3,040
INSURANCE	5,448	0	3,054	2,394
LICENSES AND PERMITS	1,005	0	563	442
ESTL REIMBURSEMENT PROGRAM	30,240	0	30,240	0

## TY 2016 Other Income Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

## Other Income Schedule

Description	Revenue And Expenses Per Books	Net Investment Income	Adjusted Net Income
STUDY INCOME	262,679		262,679

## TY 2016 Other Increases Schedule

**Name:** LIFELONG VISION FOUNDATION

**EIN:** 43-1911559

Description	Amount
UNREALIZED GAIN	47,032

## TY 2016 Other Liabilities Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

<b>Description</b>	<b>Beginning of Year - Book Value</b>	<b>End of Year - Book Value</b>
DUE TO PEPOSE VISION INSTITUTE & AFFILIATES	18,444	5,107

## TY 2016 Other Professional Fees Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
PROFESSIONAL FEES	12,435	0	6,970	5,465
INVESTMENT FEES	7,500	7,500	0	0

## TY 2016 Taxes Schedule

**Name:** LIFELONG VISION FOUNDATION**EIN:** 43-1911559

<b>Category</b>	<b>Amount</b>	<b>Net Investment Income</b>	<b>Adjusted Net Income</b>	<b>Disbursements for Charitable Purposes</b>
TAXES	575	0	322	253