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Form 990-PF Department of the Treasury

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052

Form **990-PF** (2011)

Internal Revenue Service For calendar year 2011 or tax year beginning , and ending Name of foundation A Employer identification number LIFT A LIFE FOUNDATION, INC. C/O CORNERSTONE FAMILY OFFICE 61-1359337 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 300 5885 LANDERBROOK DR. 502-290-3218 City or town, state, and ZIP code C If exemption application is pending, check here MAYFIELD HEIGHTS, OH G Check all that apply: Initial return Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, 2, check here and attach computation X Name change X Address change H Check type of organization: X Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 27,677,472. (Part I, column (d) must be on cash basis) **▶**\$ Part I Analysis of Revenue and Expenses (a) Revenue and (d) Disbursements (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 12,541,288 1 Contributions, gifts, grants, etc., received N/A 2 Check Title foundation is not required to attach Sch B Interest on savings and temporary cash investments 334,936 333,523 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 137,130 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 2,392,940. 137,130 7 Capital gain net income (from Part IV, line-2) Net short-term-capital gain [-S 10a Gross sales less returns and allowances b Less Cost of goods sold 8 ارن c Gross profit or (loss) 11 Other income Total, Add lines 1-through 11 470,653 13,013,354 65,000 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages SCANNED MAY 15 Pension plans, employee benefits 16a Legal fees 0. **b** Accounting fees STMT 16,525 0. STMT 3 87,787. 87,787 c Other professional fees 0. 17 Interest STMT 4 3,428 3,428 0. 18 Taxes 19 Depreciation and depletion Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 8,027 267 23 Other expenses 0. 24 Total operating and administrative 180,767. 91,482 expenses. Add lines 13 through 23 0. 4,181,191. 25 Contributions, gifts, grants paid 4,181,191 26 Total expenses and disbursements. 4,361,958 91,482 4,181,191. Add lines 24 and 25 27 Subtract line 26 from line 12: 8,651,396 8 Excess of revenue over expenses and disbursements 379,171 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LIFT A LIFE FOUNDATION, INC.

C/O CORNERSTONE FAMILY OFFICE

Form 990-PF (2011)

61-1359337 Beginning of year Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only End of year (b) Book Value (c) Fair Market Value (a) Book Value 12,260,979. 9,655,144. 12,260,979. 1 Cash - non-interest-bearing 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 7 Other notes and loans receivable Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - U.S. and state government obligations b Investments - corporate stock c Investments - corporate bonds 11 Investments - land, buildings, and equipment basis Less accumulated depreciation 12 Investments - mortgage loans 14,946,312. 8,900,751. 15,416,493. STMT 6 13 Investments - other 14 Land, buildings, and equipment basis Less accumulated depreciation 15 Other assets (describe ▶ 27,207,291. 18,555,895. 27,677,472. 16 Total assets (to be completed by all filers) 17 Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable 22 Other liabilities (describe 23 Total liabilities (add lines 17 through 22) 0. Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31. 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 0. 28 Paid-in or capital surplus, or land, bldg., and equipment fund 27,207,291 18,555,895. 29 Retained earnings, accumulated income, endowment, or other funds 18,555,895. 27,207,291 30 Total net assets or fund balances 31 Total liabilities and net assets/fund balances 18,555,895. 27,207,291 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) <u> 18,555,895.</u> 2 Enter amount from Part I, line 27a 8,651,396. 3 Other increases not included in line 2 (itemize) ,207,291. 4 Add lines 1, 2, and 3 5 Decreases not included in line 2 (itemize) 27,207,291. 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

Form **990-PF** (2011)

Page 3

Part IV Capital Gains and	Losses for Tax on Ir	vestment	Income					<u> </u>	<u> </u>
	the kind(s) of property sold (e.guse; or common stock, 200 sh			(b) H	low acqui Purchas Donation	red (d	Date a	acquired ay, yr.)	(d) Date sold (mo., day, yr.)
1a MELLON									
b MELLON									
<u>c</u>									<u> </u>
_d									
<u>e</u>	(A) Decreasing allowed	4.20		Н			41.0		
(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss) s (f) minus ((g)
a 661,317.			643,00						<u> 18,316.</u>
b 1,731,623.			1,612,80	9.					118,814.
C				-					
d									
e Complete only for assets showing ga	in in column (h) and owned by	the foundation	on 12/31/60	\dashv		(I) C	Paras (C	ol (h) sous	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)	\dashv		col. (I	k), but n	ol. (h) gain not less thar (from col. (n -0-) or
				\dashv					10 216
<u>a</u>				\dashv					18,316. 118,814.
b c				\dashv					
d				\dashv					
e									
	∫ If gain, also enter			J		<u> </u>			125 120
2 Capital gain net income or (net capital	loss) { If (loss), enter -0	- in Part I, line	7	<i></i>	2				137,130.
3 Net short-term capital gain or (loss) a: If gain, also enter in Part I, line 8, colu If (loss), enter -0- in Part I, line 8		nd (6):		}	,			N/A	
Part V Qualification Und	er Section 4940(e) for	Reduced	Tax on Net	Inve	estme	nt Inco	me	N/A	
(For optional use by domestic private fou	ndations subject to the section	4940(a) tax on	net investment in	come.	.)				
	·				,				
If section 4940(d)(2) applies, leave this p	art blank.								
Was the foundation liable for the section				ıod?					Yes X No
If "Yes," the foundation does not qualify u 1 Enter the appropriate amount in each				!S					
(a)	(b)	1	maning any onato	(c)					(d)
Base periód years Calendar year (or tax year beginning ir		tributions	Net value of nor		table-use	assets		Distrib (col. (b) div	oùtión ratio vided by col. (c))
2010		8,945.		13	.178	560.		(.143335
2009		6,505.				194.			.254702
2008		6,000.		4	685	590.			.259519
2007	1,10	7,374.		3	042	755.			.363938
2006	75	9,067.		2	371	801.			.320038
2 Total of line 1, column (d)							2		1.341532
3 Average distribution ratio for the 5-ye	•	on line 2 by 5,	or by the number	of yea	ars				
the foundation has been in existence	f less than 5 years						3		.268306
4 Enter the net value of noncharitable-u	se assets for 2011 from Part X,	line 5					4	_ 1	8,344,738.
6 Markinka kan Abar kan O							_		4 000 000
5 Multiply line 4 by line 3							5_		<u>4,922,003.</u>
6 Enter 1% of net investment income (1	% of Part I, line 27b)						6		3,792.
7 Add lines 5 and 6							7		4,925,795.
8 Enter qualifying distributions from Pa	rt XII, line 4						8		4,181,191.
If line 8 is equal to or greater than line See the Part VI instructions.	7, check the box in Part VI, line	e 1b, and comp	plete that part using	g a 19	% tax rate				

orm	LIFT A LIFE FOUNDATION, INC. 1990-PF (2011) C/O CORNERSTONE FAMILY OFFICE 61-13	359337		Page 4
Pa	rt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instru	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)			
ь	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		7.5	83.
-	of Part I, line 27b		<u>. , , , , , , , , , , , , , , , , , , ,</u>	
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
	Add lines 1 and 2		7 5	83.
	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		<u>, , </u>	0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		7 5	83.
	Credits/Payments:		<u>, , , ,</u>	05.
	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 2,400.			
	Exempt foreign organizations - tax withheld at source			
	Tax paid with application for extension of time to file (Form 8868) 6c 5,183.			
	Backup withholding erroneously withheld 6d			
	Total credits and payments. Add lines 6a through 6d		7 5	83.
	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8		<i>,,,</i>	05.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			0.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			<u> </u>
	Enter the amount of line 10 to be: Credited to 2012 estimated tax			
	rt VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	any political campaign?	1a		X
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
·	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10		
	distributed by the foundation in connection with the activities.			
	Did the foundation file Form 1120-POL for this year?	,		x
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10		<u> </u>
u	(1) On the foundation. \$			-
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
e	managers. > \$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			x
_	If "Yes," attach a detailed description of the activities	2		^
2	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? If "Yes," attach a conformed copy of the changes	3	х	
A o	•		Α_	v
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year? N/A	4a 4b	-	X
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		x
J	If "Yes," attach the statement required by General Instruction T.	3		
e	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			
v	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			
			v	ļ
7	remain in the governing instrument?	6	X	
'	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
0.	If "Yes," complete Part II, col. (c), and Part XV.			
oa	Enter the states to which the foundation reports or with which it is registered (see instructions)	— I		
	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)	-		
0		0.	x	
Λ	of each state as required by General Instruction G? If "No," attach explanation	_ 8b	^	
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	^	Ì	
	year 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9	L	X

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses

	LIFT A LIFE FOUNDATION, INC.			
Forn	1990-PF (2011) C/O CORNERSTONE FAMILY OFFICE 61-135	9337		Page 5
Pa	art 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		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address ► WWW.LIFTALIFEFOUNDATION.ORG			
14	The books are in care of ► ASHLEY NOVAK BUTLER Telephone no. ► 502-2	90-3	218	
	Located at ▶3920 BROOKFIELD AVE, LOUISVILLE, KY ZIP+4 ▶4			
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	N	/A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
	securities, or other financial account in a foreign country?	16		X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign			
	country			
Pa	art 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
18	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes 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)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
t	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)?	16		X
	Organizations relying on a current notice regarding disaster assistance check here			
(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 2011?	10		X
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)):			
á	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2011? Yes X No			
	If "Yes," list the years >			
ı	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect		i	
	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.) N/A	2b		
(If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
38	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
1	olf "Yes," did it have excess business holdings in 2011 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 2011.) N/A	3b		
4:	a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	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 2011?	4b		_x
		rm 990	-PF	

Form 990-PF (2011) C/O CORNERSTONE FAMILY O			<u>61-13593</u>	37 Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:				
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Ye	es 🗶 No	
(2) Influence the outcome of any specific public election (see section 4955); of	or to carry on, directly or indire	ectly,		
any voter registration drive?		Y6	s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes	?	Y6	es X No	
(4) Provide a grant to an organization other than a charitable, etc., organizatio	n described in section			
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or f		ŀ	
the prevention of cruelty to children or animals?			es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify uni	der the exceptions described i			
section 53.4945 or in a current notice regarding disaster assistance (see instru	•	•	N/A	5b
Organizations relying on a current notice regarding disaster assistance check h	•			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined		
expenditure responsibility for the grant?		[/A □ Ye	s No	
If "Yes," attach the statement required by Regulations section 53 494				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to				
a personal benefit contract?	pu) p. cc		es X No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	nersonal benefit contract?			6b X
If "Yes" to 6b, file Form 8870.	ordenar benefit contract:		-	21
7a At any time during the tax year, was the foundation a party to a prohibited tax s	chalter transaction?	□ v _e	es X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribu			<u> </u>	7b
Information About Officers Directors Truct		nagers Highly		70
Part VIII Paid Employees, and Contractors	ees, i oundation ma	mayers, mym	,	
1 List all officers, directors, trustees, foundation managers and their	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	(e) Expense account, other allowances
DAVID C. NOVAK	DIRECTOR & PR		Compensation	allowalicos
13006 OSAGE ROAD N.	DIRECTOR & FR	ESIDENI		
ANCHORAGE, KY 40223	0.00	0.	0.	0.
	DIRECTOR, VP, S			<u>.</u>
13006 OSAGE ROAD N.	DIRECTOR, VP, S	ECKEI, IKE	AS	
ANCHORAGE, KY 40223	0 00	0.	0.	
	0.00 DIRECTOR	<u> </u>	U •	0.
	DIRECTOR			
43612 SOLHEIM CUP TERRACE	0 00	ا م	_	
ASHBURN, VA 20147	0.00 DIRECTOR	0.	0.	0.
ASHLEY NOVAK BUTLER	DIRECTOR			
3920 BROOKFIELD AVE	40.00	65 000	•	
LOUISVILLE, KY 40207 2 Compensation of five highest-paid employees (other than those inc	40.00	65,000.	0.	0.
2 Compensation of tive highest-paid employees (other than those inc	(b) Title, and average	enter "NONE."	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	account, other
	devoted to position	-	compensation	allowances
NONE	-			
	4			
	1			1
	1			
	1			

LIFT A LIFE FOUNDATION, INC.

0

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

LIFT A LIFE FOUNDATION, INC. C/O CORNERSTONE FAMILY OFFICE

Company Control Contro	(1 12	-0227
Form 990-PF (2011) C/O CORNERSTONE FAMILY OFFICE	61-135	59337 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	on Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "	NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	1	
		
	1	
—	<u> </u>	
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		<u>▶</u>] 0
		_
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical number of organizations and other beneficiaries served, conferences convened, research papers product.	al information such as the	Expenses
	jeu, etc.	<u>-</u>
1 N/A		
2		
3		
4		
Det IV D.O.		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lin	les I and 2.	Amount
1 N/A		
2		
All other program-related investments. See instructions.		
3		

Total. Add lines 1 through 3

Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4

Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

Form 990-PF (2011) C/O CORNERSTONE FAMILY OFFICE 61-1359337 Page 8 Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.) Part X 1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes: Average monthly fair market value of securities 12,405,861. 1a 6,218,238. b Average of monthly cash balances 1b c Fair market value of all other assets 1c 18,624,099. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) 0. Acquisition indebtedness applicable to line 1 assets 2 18,624,099. 3 Subtract line 2 from line 1d 3 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 279,361 4 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 18,344,738. 5 Minimum investment return. Enter 5% of line 5 917,237 Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain Part XI foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 917,237. 1 Tax on investment income for 2011 from Part VI, line 5 7,583. Income tax for 2011. (This does not include the tax from Part VI.) Add lines 2a and 2b 2c 7,583. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 909,654. Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 909,654. 5 Deduction from distributable amount (see instructions) 6 0. 909,654. Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) 1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 4,181,191. 1a Program-related investments - total from Part IX-B b 1b 2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 Amounts set aside for specific charitable projects that satisfy the: Suitability test (prior IRS approval required) 3a **b** Cash distribution test (attach the required schedule) 3b

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

Form 990-PF (2011)

181

4,181,191.

4

5

6

4

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions Subtract line 5 from line 4

4940(e) reduction of tax in those years.

Form 990-PF (2011)

Part XIII Undistributed Income (see instructions)

				
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		100/3 μποι το 2010	2010	2011
line 7				909,654.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2011:				-
a From 2006 641,343.				
b From 2007 958, 288.				
c From 2008 983,041.				
d From 2009 1,501,095.				
e From 2010 1,232,095.				
f Total of lines 3a through e	5,315,862.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 4,181,191.				
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior				
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount				909,654.
e Remaining amount distributed out of corpus	3,271,537.		_	
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a).) 6 Enter the net total of each column as				
indicated below:	0 505 300			
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,587,399.			
b Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract		·		
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2006				
not applied on line 5 or line 7	641,343.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	7,946,056.			
10 Analysis of line 9:				
a Excess from 2007 958, 288.				
b Excess from 2008 983,041.				
c Excess from 2009 1,501,095.				
d Excess from 2010 1,232,095.				
e Excess from 2011 3, 271, 537.				
				Form 000 DE (2011)

LIFT A LIFE FOUNDATION, INC.

Form 990-PF (2011) C/O CORNERSTONE FAMILY OFFICE 61-1359337 Page 10 Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2011, enter the date of the ruling b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or 4942(1)(5) Tax year Prior 3 years 2 a Enter the lesser of the adjusted net (a) 2011 (c) 2009 (d) 2008 (e) Total (b) 2010 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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) 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) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) SEE STATEMENT 7 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. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here \(\sum \text{\fixed} \sum \text{\fixed} \) 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 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:

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

c Any submission deadlines:

61-1359337

Page 11

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation Purpose of grant or show any relationship to Amount any foundation manager or substantial contributor contribution status of Name and address (home or business) recipient a Paid during the year BOB RUSSELL MINISTRIES GENERAL PUBLIC P.O. BOX 43933 LOUISVILLE, KY 40253 650,000. DARE TO CARE FOOD BANK PUBLIC GENERAL 5803 FERN VALLEY ROAD LOUISVILLE, KY 40228 250,000. FOLDS OF HONOR FOUNDATION PUBLIC GENERAL 5800 N PATRIOT DRIVE OWASSO, OK 74055 600,000. JDRF GENERAL PUBLIC 1450 CENTREPARK BLVD, #210 WEST PALM BEACH, FL 33401 37,250, LOST TREE CHAPEL PUBLIC GENERAL 11149 TURTLE BEACH ROAD NORTH PALM BEACH FL 33408 15,000. SEE CONTINUATION SHEET(S) Total ▶ 3a 4 181 191 b Approved for future payment NONE Total **▶** 3b

Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2011)

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
a	- "				
b			-		
	_	<u> </u>	-		
·			 		
d	<u> </u>		-		
e	_				
			-		
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities			14	334,936.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			L		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
than inventory			18	137,130.	
			10	13/,130.	
9 Net income or (loss) from special events	_				
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
e			<u> </u>		<u></u>
12 Subtotal. Add columns (b), (d), and (e)		0.		472,066.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	472,066.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
1: No. Fundamental superior and section to the section of the					
Explain below how each activity for which income the foundation's exempt purposes (other than be	ie is reported v providina fu	IN COIUMII (8) OI PARI XVI-A	CONTIL	outed importantly to the accom	iplishment of
the foundation's exempt purposes (other than b	y providing id	ilus ioi sucii purposes j.			
N/A					
					
		 			
				- ·	
				<u> </u>	
				<u></u>	
				-	
		-			
	-		_		
	•		-		
		_			
		_			
123621					Form 990-PF (2011)

LIFT A LIFE FOUNDATION, INC. Form 990-PF (2011) C/O CORNERSTONE FAMILY OFFICE 61-1359337 Part XVII 'Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of Yes No the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash Х 1a(1) (2) Other assets X 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization X 1b(2) (3) Rental of facilities, equipment, or other assets X 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 15(5) X (6) Performance of services or membership or fundraising solicitations X 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees X 10 If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in

colum	nn (d) the value of the goods,	other assets, or services received.	•		
(a) Line no	(b) Amount involved	(c) Name of noncharitable	e exempt organization	(d) Description of transf	ers, transactions, and sharing arrangements
		N/A			
	_				
	_				
			· "		
	-				
					
					
				<u> </u>	
in sec		er than section 501(c)(3)) or in sec nedule.			Yes X No
	N/A		(-)	(0)	
		<u>, </u>			
					-
Sign Here		that I have examined this return, including implete. Declaration of preparer (other that the state of the sta			
	Print/Type preparer's n	ame Preparer's s	sigpature	Date Check	ıf PTIN
2a Is the foundain section 50 b If "Yes," com Sign Here Signat Paid Preparer Use Only	CORNERSTON OFFICE, LI	1 1 -	Stosko (Pd	5-9-12 self- er	P00152568
	er Firm's name ► COF	ENERSTONE FAMILY	OFFICE, LLC	Fırm's	SEIN ► 34-1965417
	1	NARCH CENTRE #3			0.00 440-460-0460

Schedule E (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.

OMB No 1545-0047

2011

Employer identification number

LIFT A LIFE FOUNDATION, INC. C/O CORNERSTONE FAMILY OFFICE 61-1359337 Organization type (check one): Filers of: Section: Form 990 or 990-EZ ____ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization Form 990-PF X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charatable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions. **General Rule** For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II Special Rules For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II. — For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use exclusively for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year. ▶ \$ 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 Part I, line 2 of its Form 990-PF, to

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

Name of organization

LIFT A LIFE FOUNDATION, INC.

C/O CORNERSTONE FAMILY OFFICE

Employer identification number

61-1359337

Part I (Contributors	(see instructions)	Use duplicate copies of	Part I if additional	space is needed.
----------	--------------	--------------------	-------------------------	----------------------	------------------

(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DAVID C. & WENDY L. NOVAK 13006 OSAGE ROAD N. ANCHORAGE, KY 40223	\$ <u>1,200,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	DAVID C. & WENDY L. NOVAK 13006 OSAGE ROAD N. ANCHORAGE, KY 40223	\$ <u>2,220,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	DAVID C. & WENDY L. NOVAK 13006 OSAGE ROAD N. ANCHORAGE, KY 40223	\$ <u>521,288.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	DAVID C. & WENDY L. NOVAK 13006 OSAGE ROAD N. ANCHORAGE, KY 40223	\$ <u>8,600,000</u> .	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
:		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II if there is a noncash contribution.)

Name of organization

LIFT A LIFE FOUNDATION, INC. C/O CORNERSTONE FAMILY OFFICE

Employer identification number

61-1359337

Part II	Noncash Property (see instructions) Use duplicate copies of Part I	I if additional space is needed.	
(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
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Schedule-B (Form 990, 990-EZ, or 990-PF) (2011) Page 4 Name of organization **Employer identification number** LIFT A LIFE FOUNDATION, INC. C/O CORNERSTONE FAMILY OFFICE

Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations that total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once)

\$\Bigsir \frac{1-1359337}{\text{Enter this information once}} \Bigsir \frac{5}{\text{Enter this information once}} \Bigsir \Bigsir \frac{5}{\text{Enter this information once}} \Bigsir \fra Use duplicate copies of Part III if additional space is needed (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from Part I (b) Purpose of gift (c) Use of gift (d) Description of how gift is held

(e) Transfer of gift

Transferee's name, address, and ZIP + 4

Relationship of transferor to transferee

FORM 99.0-PF DIVIDENT	S AND	INTER	EST FROM	SECUI	RITIES	STATEMENT	1
SOURCE		GROSS	AMOUNT		ITAL GAINS IVIDENDS	COLUMN (A))
MELLON	•		334,936.		0.	334,93	36.
TOTAL TO FM 990-PF, PART I, I	.n 4		334,936.		0.	334,93	36.
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
LEGAL AND PROFESSIONAL FEES	1	6,525.	-	0.	· -1		0.
TO FORM 990-PF, PG 1, LN 16B	1	6,525.		0.			0.
FORM 990-PF C	THER	PROFES	SIONAL F	EES		STATEMENT	3
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM		
MANAGEMENT FEES TO ADVISER	8	7,787.	87	,787.			0.
TO FORM 990-PF, PG 1, LN 16C =	8	7,787.	87	,787.			0.
FORM 990-PF		TAX	ES		·	STATEMENT	4
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-	(C) ADJUSTED NET INCOM	(D) CHARITAE E PURPOSE	
FEDERAL TAXES PAID ANNUAL FILING FEE		3,278. 150.	3	,278. 150.			0.
TO FORM 990-PF, PG 1, LN 18		3,428.	3	,428.			0.

FORM 990-PF	OTHER	EXPENSES			STATEMENT	5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVI MENT INC		(C) ADJUSTED NET INCOM		
BANK CHARGES INSURANCE OFFICE SUPPLIES PAYROLL EXPENSES	267 448 1,234 6,078	3 .	267. 0. 0. 0.			0.
TO FORM 990-PF, PG 1, LN 23	8,027	·	267.			0.
FORM 990-PF	OTHER IN	IVESTMENTS			STATEMENT	6
DESCRIPTION	V	ALUATION METHOD	вос	OK VALUE	FAIR MARKE VALUE	ET
EQUITIES & FIXED INCOME	_	COST	14	1,946,312.	15,416,4	93.
TOTAL TO FORM 990-PF, PART I	I, LINE 13		14	1,946,312.	15,416,4	193.
FORM 990-PF	PART XV -		FD C		STATEMENT	7

NAME OF MANAGER

DAVID C. NOVAK WENDY L. NOVAK

IN PG 1 01/06/12 16:05 ADMIN

GAIN/LOSS PROFILE REPORT FROM 01/01/11 TO 12/31/11

CORE

ACCOUNT#: 10260345960 DAVID C. AND WENDY L. NOVAK FDN-IMA
TAX ID: 61-1359337 ACC TYPE: 73 CAPACITY: 4 ACCNT 2 ADM: 751 MGR: 764

QUALIFICATION CRITERIA FOR REPORTING

REPORTING FOR ACCOUNT: 10260345960 (ID: 233) DAVID C AND WENDY L. NOVAK FDN-IMA MINOR ASSSET CLASSES EXCLUDED:

SUMMARY WILL BE SORTED BY DATE OF ENTRY

GAIN/LOSS SCHEDULE

GAIN (LOSS)	954.85 1130.89 11197.76 7530.61 143.65 -478.05 -858.63 5579.56 -2805.77 5651.77	-1809.2 -3295.1 -1009.8 -1300.7 -1300.7 -1831.7 -1831.7 -100.0	640.01 1525.84 8519.80 5987.71 -1428.63 -5238.32
PURCHASE COST	9619.10 20017.00 53650.50 43777.20 49618.20 13305.00 54429.80 25219.85 25219.85 25219.85	1647.00 8214.00 5603.38 54710.00 5321.00 TOTAL	3215.22 7653.28 42699.71 12370 55 7773.00 28501.00
NET PROCEEDS	10573.95 21147.89 64848.26 51307.81 51307.81 12826.95 12826.95 12826.95 33571.17 30799.41 26613.25 116109.77 58054.89	9/26/11 29837.73 3 9/26/11 14918.86 1 0/27/11 24593.53 2 0/27/11 40989.21 4 0/27/11 40989.21 4 NET CTF ST GAIN/LOSS CAPITAL GAIN DISTRIBUTIONS MISC. ST GAIN/LOSS ST CAPITAL LOSS CARRYOVER	ST GAIN/LOSS 3/11 3855.23 3/11 9179.12 3/11 51219.51 3/11 18358.26 8/11 23262.68 8/11 12688.74
DATE SOLD/RCD	1/18/11 1/18/11 4/29/11 5/13/11 5/13/11 5/13/11 6/02/11 7/21/11 8/16/11	9/26/11 29837. 9/26/11 14918. 10/27/11 24593. 10/27/11 40989. 10/27/11 40989. 10/27/11 GAIN/LO CAPITAL GAIN/LOSS ST CAPITAL LOSS CA	NET ST GA 1/13/11 1/13/11 1/13/11 1/13/11 1/18/11 1/18/11
DATE ACQUIRED	10/18/10 10/26/10 10/26/10 10/26/10 2/08/11 2/23/11 4/19/11 10/26/10 5/13/11 2/15/11 6/10/11	10/26/10 2/08/11 11/03/10 2/08/11 2/23/11	5/21/08 5/21/08 5/21/08 6/01/09 5/18/05 5/18/05
SHARES/PAR DESCRIPTION	500.00000 INTEL CORP 1000.00000 WALT DISNEY CO/THE 2000.00000 LOWE'S COMPANIES INC 2000.00000 LOWE'S COMPANIES INC 500.00000 LOWE'S COMPANIES INC 500.00000 LOWE'S COMPANIES INC 500.00000 WAL MART STORES INC 500.00000 EQ T CORP 400.00000 CONOCOPHILLIPS 1000.00000 ISHARES BARCLAYS TIPS BOND FD 500.00000 ISHARES BARCLAYS TIPS BOND FD	1000.00000 TIME WARNER INC 500.00000 TIME WARNER INC 300.00000 3M CO 500.00000 3M CO 500.00000 3M CO	42.00000 LABORATORY CORP AMER HLDGS 100.00000 LABORATORY CORP AMER HLDGS 558.00000 LABORATORY CORP AMER HLDGS 200.00000 LABORATORY CORP AMER HLDGS 300.00000 INTEL CORP 1100.00000 INTEL CORP 600.00000 INTEL CORP
DATE	1/21/11 1/21/11 5/04/11 5/18/11 5/18/11 5/18/11 6/07/11 8/19/11 8/24/11	9/29/11 9/29/11 11/01/11 11/01/11 11/01/11	1/19/11 1/19/11 1/19/11 1/19/11 1/21/11 1/21/11

N PG 2 01/06/12 16:05							10		טי			9 4		2506.53			GAIN	(FOSS)	1 1 1 1	-980.4	-838.8	5766 9	434.2	239.2	3066	3824.1	18833.9	5701.1	4454.8	2718.5	4702.42	229.4	422.3	-84.6	-306.	-111.	1.600.	1931	3448.	348	-13018.1	16222.8	8314.6	7153	5446.	364.7	502.9	6754.30	
ADMIN 01			, ,	4 (٠ ،	סע	ז ע	1004.	٦,	9 (7./800	23/25 7 7/55	2976 9	12344.75			PURCHASE	COST	1 1 1 1 1 1	38979.95	8438.75	40748.95	7318.45	7513.45	0400	4013.	1963.	5914.	9679.	0108.	88631.67	3990.	7348.20	1430.15	5174.86	1878.45	2030./2	3216.82	5742.24	2781.	0008	3697.	19946 36	0.0400	7949.	11973.0	9	2197.02	V
/11		11 (1	1147.00	٠,٠	# r	`.	٦.	7.67.7	י פ	۰	7425.0	4851 2	4851 2	14851.28			NET	PROCEEDS	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	999.	99.	15.	52		2011	7838	0797.	1616.	4134.	2826.	556IU./3	4219.	70.	45.	9	. 6	9 T.	. 8	90.	3129.	6869	9919.	ν. Σ	7106	2502.	29837	67.	8951.32	N F Q
TO 12/31	GR: 764		9 7	7.18	7.10	אלי.	7.0	7.0	87.	200	20,	200	000	2/09/11			DATE	$\overline{\mathbf{c}}$	1 1 1 1 1 1	/15	₹	7	7 :	3/16/11	ής,	3 (! ~	.7	5/13/11	7	6/02/11	, 0	Ö	9	\sim	\circ	٠,			2	/05/	/16/	• •	1/32/	62/	/26/1	/26/1	9/26/11	1/07/
FROM 01/01/11	ADM: 751	II II	00/#1/7	5/21/08	2/27/08	5/21/08	5/21/08	6/10/9	6/10/9	60/T0/9	60/10/9	6/10/9	6/11/09	6/22/09	SCHEDUL	!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!!	DATE	ACQUIRED] 1 1 1 1 1	14/	21/0	21/0	27/0	03/0	07.00	0 / 7 / 0	0/60	14/0	9	0/1	7,017	20	2/27/0	2/26/0	2/26/	2/28/	/71/7	12/23/08	2/23/	2/24/	2/19/0	2/31/0	11/30/05	2 0	, n	2/14/0	1/0	5/21/09	
GAIN/LOSS PROFILE RE	#: 10260345960 DAVID C. AND WENDY L. NOVAK FDN-I: 61-1359337 ACC TYPE: 73 CAPACITY: 4 ACCNT:		1000.00000 INTE	36.00000 INTE	64.00000 INTE	100.00000 INTE	100.00000 INTE	100.00000 INTE	1100.00000 INTEL CORP	100.00000 VISA INC-CLASS A	100.00000 VISA INC-CLASS A	200.00000 VISA INC-CLASS A	200.00000 VISA INC-CLASS A	200.00000	GAIN/LOSS	1 1 1 t t t		SHARES/PAR		1000.00000 DOW	200,00000 DOW CHEMICAL CO	3000 00000 AMERICAN EAGLE OUTFITTERS INC	500.00000 AMERICAN EAGLE OUTFITTERS INC	500.00000 AMERICAN EAGLE OUTFITTERS INC	500.00000 AMERICAN EAGLE OUTFITTERS	200	100	7 1	250	500.00000 LOWE'S COMPANIES INC	17	2159.01200 EURO FAC GROWIN FD SH BEN 97 61400 EURO DAC GROWTH FD SH BEN	179,75000 EURO PAC GROWTH FD SH BEN	31.12400 EURO PAC GROWTH FD SH BEN	112.61900 EURO PAC GROWTH FD SH BEN	40.88000 EURO PAC GROWTH FD SH BEN	50.46400 EURO PAC GROWTH FD SH BEN	182.19100 EURO PAC GROWIH FU SH	212 59700 EURO PAC GROWTH FD SH BEN	72,39500 EURO PAC GROWTH FD SH BEN	3945.00000 UNILEVER PLC ADR	600.000	1500.00000 CONOCOPHIL	200.00000 SPDR GOLD	100.00000 SPDR GOLD IRUS	1000 00000 TIME WARNER	200.00000 TIME WARNER	300.00000 TIME	500.00000 TIME WARNER
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CON	GAIN/LOSS	GAIN/LOSS PROFILE REPORT FROM 01/01/11 TO 12/31/11	1/11 TO 12/31	./11	01/	01/06/12 16:05
ACCOUNT#:	ACCOUNT#: 10260345960 DAVID C. AND WENDY L. NOVAK FITTAX ID: 61-1359337 ACC TYPE: 73 CAPACITY: 4 ACCOUNT	N-IMA 2 ADM	MGR: 764	0 10 10 10 10 10 10 11 11 11 11 11		01 61 51 51 55 56 67 68 68 68 68 68 68 68 68 68 68 68 68 68
9/29/11	9/29/11 500.00000 TIME WARNER INC	ER INC 6/01/09) 	li	tı	11102.87
	500.00000 TIME WARNER INC	9/21/09		14918.86	4726.88	10191.98
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_	100.00000 3M CO			8197.84	7900.55	297.29
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NO PENDING ITEMS QUALIFIED

SHARES/PAR DESCRIPTION

DATE

GAIN (LOSS)

NET PROCEEDS

THEORETICAL SALE DATE

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient show any relationship to Foundation Purpose of grant or any foundation manager or substantial contributor contribution Amount status of Name and address (home or business) recipient MARYHURST PUBLIC GENERAL 1015 DORSEY LANE LOUISVILLE KY 40223 75,000. THE CABBAGE PATCH PUBLIC GENERAL 1413 S. 6TH STREET LOUISVILLE, KY 40208 100,000. THE NICKLAUS CHILDREN'S HEALTH CARE PUBLIC GENERAL FOUNDATION 11770 US HIGHWAY ONE, SUITE 303 NORTH PALM BEACH, FL 33408 2,000, THE SPEED ART MUSEUM PUBLIC GENERAL 2035 SOUTH 3RD STREET LOUISVILLE, KY 40208 1,000. WORLD FOOD PROGRAM USA PUBLIC GENERAL 1819 L STREET NW, 900 WASHINGTON, DC 20036 750,000. CENTER POINT CHURCH PUBLIC GENERAL 152 N LOCUST HILL DR LEXINGTON KY 40509 120,000. CHILDREN'S AID SOCIETY PUBLIC GENERAL 105 EAST 22ND ST NEW YORK, NY 10010 5,000. CINCINNATI CHRISTIAN UNIVERSITY PUBLIC GENERAL 2700 GLENWAY AVENUE CINCINNATI OH 45204 100,000, HARLEM VILLAGE ACADEMICS PUBLIC GENERAL 2351 1ST AVENUE NEW YORK, NY 10035 10,000. J. WOOD PLATT CADDIE SCHOLARSHIP PUBLIC GENERAL P.O. BOX 808 SOUTHEASTERN PA 19399 1,000. Total from continuation sheets 2 628 941.

Part XV **Supplementary Information** Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, Recipient Purpose of grant or contribution Foundation show any relationship to Amount any foundation manager status of Name and address (home or business) or substantial contributor recipient LOUISVILLE WATERFRONT DEVELOPMENT PUBLIC GENERAL 129 EAST RIVER ROAD LOUISVILLE KY 40202 10,000. MASTERS TOURNAMENT FOUNDATION PUBLIC. GENERAL P.O. BOX 2444 AUGUSTA, GA 30903 100,000. METRO UNITED WAY PUBLIC GENERAL P.O. BOX 4488 LOUISVILLE, KY 40204 522.741. NEIGHBORHOOD HOUSE PUBLIC GENERAL 201 NORTH 25TH ST LOUISVILLE, KY 40212 50,000. NEW DAY CHRISTIAN CHURCH PUBLIC GENERAL 20212 PEACHLAND BLVD PORT CHARLOTTE, FL 33954 365,200. NEW MOMS INC PUBLIC GENERAL 2825 WEST MCLEAN AVE CHICAGO, IL 60647 352,000. VANDERBILT UNIVERSITY PUBLIC GENERAL 2301 VANDERBILT PLACE NASHVILLE TN 37240 25,000. WORLD VISION PUBLIC GENERAL P.O. BOX 9716 FEDERAL WAY, WA 98063 10,000. YMCA SAFE PLACE SERVICES PUBLIC GENERAL 2400 CRITTENDEN DRIVE LOUISVILLE, KY 40217 30,000. Total from continuation sheets

Form 8868

(Rev January 2012)

Department of the Treasury

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

File a separate application for each return.

OMB No 1545-1709

Internal Revenue Service If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form) Do not complete Partil unless you have already been granted an automatic 3-month extension on a previously filed Form 8868 Electronic filing (e-file). You can electronically file Form 8868 if you need a 3-month automatic extension of time to file (6 months for a corporation required to file Form 990-T), or an additional (not automatic) 3-month extension of time. You can electronically file Form 8868 to request an extension of time to file any of the forms listed in Part I or Part II with the exception of Form 8870. Information Return for Transfers Associated With Certain Personal Benefit Contracts, which 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/efile and click on e-file for Chanties & Nonprofits Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed) A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box and complete All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns Enter filer's identifying number, see instructions Name of exempt organization or other filer, see instructions Employer identification number (EIN) or Type or print LIFT A LIFE FOUNDATION, INC. 61-1359337 File by the Number, street, and room or suite no If a P O box, see instructions Social security number (SSN) due date for C/O CORNERSTONE FAMILY OFFICE,5885 LANDERBROOK DR.STE 300 filing your return See City, town or post office, state, and ZIP code For a foreign address, see instructions MAYFIELD HEIGHTS, OH 44124 Enter the Return code for the return that this application is for (file a separate application for each return) **Application Application** Return Return Is For Code Code Is For Form 990-T (corporation) Form 990 01 07 Form 990-BL Form 1041-A 08 02 Form 4720 09 Form 990-EZ 01 Form 5227 Form 990-PF 04 10 Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069 11 Form 8870 12 Form 990-T (trust other than above) 06 • The books are in the care of ▶ CORNERSTONE FAMILY OFFICE, LLC Telephone No ► 440.460.0460 **FAX No** ▶ 440.460.0420 • If the organization does not have an office or place of business in the United States, check this box If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is a list with the names and EINs of all members the extension is for I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time , 20 12 , to file the exempt organization return for the organization named above. The extension is until AUGUST 15 for the organization's return for calendar year 20 11 or tax year beginning ___ , 20 , and ending If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period 3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions 7,583.00 3a \$ b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit 7,583.00 3b|\$ c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for

payment instructions.