Form **990-PF** Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 15, 2018

Return of Private Foundation

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

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

Go to www irs gov/Form990PF for instructions and the latest information

A Employer destrictation number O.3 - 0.53.3192	Fo	r cale	ndar year 2017 or tax year beginning		, and ending	_	
Template muture is not 0 to number there is not opposed stated activated	N	ame (of foundation		-	A Employer identification	number
290.2 CORPORATE PLACE	_	_	C3m.			03-0533192	
City of lower, state or genome, country, and 20 per force peoples code CHANIASSEN, MN 55317 6 Cresk all that apply				address)	Room/suite		
CHANHASSEN, MN 55317 6 Check all that apply Install return of a former public chanty Install return of a f	_	290	2 CORPORATE PLACE			952-229-72	26
Control all that apply Install return Amended retur		-		ostal code		C If exemption application is p	ending check here
Address change Address change			······································	Initial return of a fo	rmer public charity	D 1 Foreign organization:	s, check here
H Check type of organization X Section 50/(c)(3) severing private foundation V E Section 40/(a)(1) Description of the stability private foundation V E Formate foundation status was terminated under section 50/(b)(1)(6), check here V C C C C C C C C C			Final return	<u></u>		2	
Section 4947(a)/) nonexempt characterister Other taxable private bundation Cash Accrual Interference	_					check here and attach co	emputation
Accounting method Gash X Accounting method Gash	H				0 Y	E If private foundation sta	itus was terminated
Section Continue	L					under section 507(b)(1))(A), check here 🕨 🔲
Part	&		•	-	X Accrual	F If the foundation is in a	
Part	20					under section 507(b)(1)	(B), check here X
1 Contributions, gifts, grants, cureaved 1,554,307. N/A					<u> </u>		T (4)
2 Check ▶ ☐ Internation correspond to strict Size 8 2 Check ▶ ☐ Internation correspond to strict Size 8 3 case in resolution 1		art	(The total of amounts in columns (b), (c) and (d) may not				for charitable purposes
2 Check Description and originate stands in a size originate stand in the stand income of the stands in the s	5	1	Contributions, gifts, grants, etc., received	1,554,307.	· · · · · · · · · · · · · · · · · · ·	N/A	
A		2	,				
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	Ω	3	Interest on savings and temporary cash investments				
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	Щ	4	Dividends and interest from securities				
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	\leq	5	a Gross rents				
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	₹		Net rental income or (loss)				
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	ပ္က					RE	CEIVED
8 Net short-term capital gain 9 Income modifications 102 and administrative expenses Add lines 23 through 23 1,296,633. 10 Depreciation and disbursements Add lines 24 from line 26 from line 27 from line 27 from line 26 from line 27 from li	y	Ž į	assets on line 6a	ļ			
1	,	7	Capital gain net income (from Part IV line 2)		0		
10a Gross statist less returns 10a and allowances 10a and allowanc	1	8	Net short-term capital gain			ISI SEP	
108 and allowances		1	Gross sales less returns			11 - 2	
1 1 1 1 1 1 1 1 1 1		Ι.	and allowances			The state of the s	
11 Other income 12 Total Add lines 1 through 11 13 Compensation of officers directors trustees etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 172,511. 18a Legal fees 18a Lagal fees 19a L				,		· · · · · · · · · · · · · · · · · · ·	*- ··
12 Total Add lines 1 through 11 1,554,307. 0.			' '				
13 Compensation of officers directors trustees etc 143,077. 0. 130,362. 140 Other employee salaries and wages 15 Pension plans, employee benefits 72,511. 0. 72,512. 0. 72,51	_	1		1 554 307		<u> </u>	
14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees STMT 1 1 1 1 1 1 1 1 1	<u> </u>	1					130 362
15 Pension plans, employee benefits 16 Legal fees STMT 1 17 18 18 18 18 18 18	بخر	1					
16a Legal fees	a/K	1	· · ·		<u>-</u> _		
b Accounting fees STMT 2	ું 🗪	1					
C Other professional fees STMT 3 2,320. 0. 2,290. 17 Interest	55	ומי					
17 Interest 18 Taxes 19 Depreciation and depletion 3 , 729 .		ž (•				
18 Taxes 19 Depreciation and depletion 3 729 0 0 0 0 0 0 0 0 0	ہے	ᆈ	·				
Travel, conferences, and meetings 39,350. 0. 45,628.	71	18					
Travel, conferences, and meetings 39,350. 0. 45,628.	त्र इ	19	Depreciation and depletion	3,729.	0		
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A) 4	20	Occupancy				
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A	٦ ٩	21	Travel, conferences, and meetings	39,350.	0		45,628.
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A	۲ أ	22	Printing and publications				
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A	5	23	Other expenses STMT 4	645,626.	0 .	,	660,064.
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A)	24	Total operating and administrative				
25 Contributions, gifts, grants paid 26 Total expenses and disbursements Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) C Adjusted net income (if negative enter -0-) N/A	_	De	expenses Add lines 13 through 23		0	•	
Add lines 24 and 25 27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	∌ '	25	Contributions, gifts, grants paid	1,122,540.			1,045,756.
27 Subtract line 26 from line 12 a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	2_	26	•		_		
a Excess of revenue over expenses and disbursements b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A		+		2,319,173.	0	•	2,246,631.
b Net investment income (if negative, enter -0-) c Adjusted net income (if negative enter -0-) N/A	()			176A 066		1	
C Adjusted net income (if negative enter -0-)	_		·	04,800.	^		· · · · · · · · · · · · · · · · · · ·
	י	1		-	<u> </u>		
				L con instructions		I IV/A	Form QQN_DF (2017)

F01	m 99	00-PF (2017) LIFE TIME FOUNDATION		03-0	0533192 Page 2
Б	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
	ar i	column should be for end of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
_	1	Cash - non-interest-bearing	1,478,584.	765,843.	765,843.
	2	Savings and temporary cash investments			
	3	Accounts receivable ► 28,350.			
		Less allowance for doubtful accounts	3,976.	28,350.	28,350.
	4	Pledges receivable ► 132,610.			
		Less allowance for doubtful accounts	133,283.	132,610.	132,610.
	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			
Ŋ	8	Inventories for sale or use	14,336.	2,857.	2,857.
Assets	ı	Prepaid expenses and deferred charges			
As		Investments - U S and state government obligations			
	ı	Investments - corporate stock			
	ı	Investments - corporate bonds			
		Investments land buildings and equipment basis			
	•	Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
			<u> </u>		·
		Land, buildings, and equipment basis 45,417. Less accumulated depreciation 36,138.	13,009.	9,279.	9,279.
	15	Other assets (describe	• • • • • • •		
		Total assets (to be completed by all filers - see the			
	•	instructions. Also, see page 1, item I)	1,643,188.	938,939.	938,939.
	17	Accounts payable and accrued expenses	59,248.	42,335.	
	18	Grants payable	188,329.	265,113.	
,	40	Deferred revenue	• = =	- , =	
Liabilities	20	Loans from officers directors trustees and other disqualified persons	-		
ğ	21	Mortgages and other notes payable			
Ę	22	Other liabilities (describe > OTHER ACCRUED EXPE)	21,637.	22,383.	
			==,		
	23	Total liabilities (add lines 17 through 22)	269,214.	329,831.	
	-23	Foundations that follow SFAS 117, check here		525,031.	
		and complete lines 24 through 26, and lines 30 and 31			
S	24		1,154,324	182,221.	
JC.	25	Unrestricted Temporarily restricted	1,154,324.	426,887.	
ala	26	Permanently restricted	223,000.	,0071	
Net Assets or Fund Ba	້	Foundations that do not follow SFAS 117, check here			
5		and complete lines 27 through 31			
5	27	Capital stock, trust principal, or current funds			ı
ets	28	Paid-in or capital surplus, or land, bldg, and equipment fund			
SS (29	Retained earnings, accumulated income, endowment, or other funds			
et 7	30	Total net assets or fund balances	1,373,974.	609,108.	
ž	٦٠	I OLGI HEL GSSELS UI IUIIU DAIGHEES	1,3,3,7,14	005,1001	
	31	Total liabilities and net assets/fund balances	1,643,188.	938,939.	
P	art	Analysis of Changes in Net Assets or Fund Bal	ances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line 3	0		-
		st agree with end-of-year figure reported on prior year's return)		[1]	1,373,974.
					564 066

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	1,373,974.
2	Enter amount from Part I, line 27a	2	<764,866.>
3	Other increases not included in line 2 (itemize) DONATED SERVICES REVENUE	3	52,918.
4	Add lines 1, 2, and 3	4	662,026.
5	Decreases not included in line 2 (itemize) ► DONATED SERVICES EXPENSE	5	52,918.
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	609,108.

(a) List and describe the kind(s) of property sold (for example, real estate, 2-story brick warehouse, or common stock, 200 shs MLC Co.) (b) How acquired (mo , day, yr.) (c) Date acquired (mo , day, yr.) (d) Date sold (mo , day, yr.) (e) MoNE (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (e) Gross sales price (f) Depreciation allowed (or allowable) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (re) plus (f) minus (g)) (g) Cost or other basis (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g)) (g) Cost or other basis (re) plus (f) minus (g)) (g) Cost or other basis (re) plus (f) minus (g)) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (g) Cost or other basis (h) Gain or loss (loss) (re) plus (f) minus (g) (re) plus (f) minus (E TIME FOUNDATIO		Income	-	0.3	3-053	3192	Page :
the NONE (e) Gross sales price (f) Depreciation allowed (g) Cast or other basis (h) Gains or (fest) (e) Gross sales price (f) Depreciation allowed (g) Cast or other basis (fi) plas (f) minus (g)) (g) Cast or other basis (h) Gains (Cot (ft) gain minus (of), but or 12/31/69 (g) Gains (Cot (ft) gain minus (of), but or 12/31/69 (g) Excess of cot (f) (g) Excess of cot (f) (g) Gains (Cot (ft) gain minus (of), but or 12/31/69 (g) Excess of cot (f) (g) Excess of cot (f) (g) Excess of cot (f) (g) Gains (Cot (ft) gain minus (of), but or (ass fiail-12-) or (of), but or ((a) List and describe	the kind(s) of property sold (for exa	ımple, real esta		(b) How acquired P - Purchase D - Donation				
to c c c c c c c c c c c c c c c c c c c		· · · · · · · · · · · · · · · · · · ·			D Donation				
(e) Gross sales price (f) Depreciation allowed (or allowable) (f) Depreciation allowed (or allowable) (f) Depreciation allowed (f) Depreciation al		NE	-						
(e) Gross sales price (f) Deprecation allowed (g) Cost or other basis (h) Sam or (loss) (e) plus (f) minus (gil) b Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69 (f) FMV as of 12/31/69 (f) Adjusted basis (g) Excess of col (g) (g) List special gain or (loss) (h) Sam or (loss) (ii) Gains (Col (n) gain minus (iii) FMV as of 12/31/69 (g) FMV as of 12/31/69 (g) Adjusted basis (g) Excess of col (g) (g) List special gain or (loss) (g) Excess of col (g) (g) List special gain or (loss) (g) Excess of col (g) (g) List special gain or (loss) (g) Expecial gain gain gain gain gain gain gain gain	С								
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(i) FMV as of 12/31/69 (ii) Adjusted basis as of 12/31/69 over col (i), if any over col (ii), if any over col (ii), if any over col (iii), and over col (iiii), and over col (iiii), and over col (iiii), and over col (iiii), and over col (iiiii), and over col (iiiiiii), and over col (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	е		i -						
a so of 12/31/69 Capital gain net income or (net capital loss) If gain, also enter in Part I, line 7 Line 7 Line 7 Line 3, column (c) Line 3, column (c) Line 4, column (d) Line 4, column (d) Line 4, column (d) Line 6, column (a) Line 7, column (a) Line 8, co	Complete only for assets showing	ig gain in column (h) and owned by	the foundation	on 12/31/69					
Capital gain net income or (net capital loss) (If gain, also enter in Part I, line 7 If (doss), enter -0 - in Part I, line 7 If (doss), enter -0 - in Part I, line 7 If (doss), enter -0 - in Part I, line 7 If (doss), enter -0 - in Part I, line 7 If (doss), enter -0 - in Part I, line 7 If (doss), 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 1 section 4940(d)(2) applies, leave this part blank Vast the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes, the foundation doesn't quality under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries Base period years Base period years Calendary lear for dax year beginning in) Adjusted qualifying distributions 2016 1,673,013. 1,536,526. 1,088828 2015 1,886,952. 1,886,952. 1,886,952. 1,886,952. 1,886,541. 1,0163,087. 2012 361,930. 746,152. 775580 2013 654,678. 1,063,087. 615827 2012 361,930. 746,152. 4880,880. Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4880,880. Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 If line 8 is equal to or greater than line 7, check the box in Part VI, line 10, and complete that part using a 1% tax rate	(i) FMV as of 12/31/69								
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 If (loss), enter -0 - in Part I, line 7 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 or net investment income For optional use by domestic private foundations subject to the section 4940(a) tax or net investment income For optional use by domestic private foundations subject to the section 4940(a) tax or in the distributable amount of any year in the base period? Yes: the foundation liable for the section 4940 (a) to not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries Calendar year (of tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets (co) (iii) divided by col (ci) Calendar year (of tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (co) (iii) divided by col (ci) Calendar year (of tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (co) (iii) divided by col (ci) Col (iii) divided by col (ci) Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 All 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	a								
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 if (loss), enter -0 in Part I, line 7 if (loss), enter -0 in Part I, line 7 if (loss), enter -0 in Part I, line 7 if (loss), enter -0 in Part I, line 7 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 8 if (loss), enter -0 in Part I, line 7 in Part I in Par	<u>b</u>		 				_	-	
Calendary part (b) Adjusted qualifying distributions progress to 1, 286, 673. 2		_	 						
Capital gain net income or (net capital loss)			 					<u></u>	
Net short-term capital gain or (loss) as defined in sections 1222(5) and (6) If gain, also enter in Part I, line 8, column (c) If gain, also enter 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) section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes, "the foundation doesn't qualify under section 4940(e) Do not complete this part There the appropriate amount in each column for each year, see the instructions before making any entries (a) (b) (col (b) divided by col (c) Distribution ratio (col (b) divided by col (c) Distribution ratio (col (b) divided by col (c) Distribution ratio (col (b) divided by col (c) Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the standard for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Enter the net value of noncharitable-use assets for 2017 from Part XI, line 4 Enter qualifying distributions from Part XII, line 4 Enter qua	<u> </u>	(If any pales enter	r in Dort Lline	7	7				
If gan, also enter in Part I, line 8, column (c) 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) Is section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes X No Yes The foundation doesn't qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries (b) Rase period years Calendar year (or tax year beginning in) Adjusted qualifying distributions (col (b) divided by col (c)) 2016 1,673,013. 1,536,526. 2015 1,886,952. 1,886,952. 1,886,541. 1,016386 2014 1,245,692. 1,886,952. 1,886,541. 1,016386 2013 654,678. 1,063,087. 615827 2012 361,930. 746,152. 485062 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 All line 8 be and 6 Fine true this part I, line 4 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	2 Capital gain net income or (net ca	pital loss) If (loss), enter -6	or in Part I, line O- in Part I, line	7	} 2				
It floss), enter-0- mPart 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) Is exciton 4940(d)(2) applies, leave this part blank Vas the foundation idobes it qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries (a) (b) Calendar year for tax year beginning in) Adjusted qualifying distributions Adjusted qualifying distributions Net value of noncharitable-use assets 2016 1, 673, 013. 1, 536, 526. 1, 088282 2015 1, 886, 952. 1, 886, 952. 1, 856, 541. 1, 016380 2014 1, 245, 692. 1, 606, 142. 775580 2013 654, 678. 1, 063, 087. 615827 2012 361, 930. 746, 152. 485062 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Add lines 5 and 6 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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			nd (6)		7				
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) I section 4940(f)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? Yes X No Yes, The foundation doesn't qualify under section 4940(e). Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries. (a) Base period years Calendar year (or tax year beginning in) Adjusted qualifying distributions Period Qualifying distributions (1) Period Qualifying (1		column (c)) ₃				
Section 4940(d)(2) applies, leave this part blank Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?	Part V Qualification U	nder Section 4940(e) for	Reduced	Tax on Net	nvestment Inc	come			
Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? —Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries. ———————————————————————————————————	For optional use by domestic private	foundations subject to the section	4940(a) tax on	net investment ind	come)				
Vas the foundation liable for the section 4942 tax on the distributable amount of any year in the base period? —Yes, the foundation doesn't qualify under section 4940(e). Do not complete this part. Enter the appropriate amount in each column for each year, see the instructions before making any entries. ———————————————————————————————————	f section 4940(d)(2) annies leave th	nis nart hlank							
Yes, the foundation doesn't qualify under section 4940(e) Do not complete this part Enter the appropriate amount in each column for each year, see the instructions before making any entries Calendar year (or lax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets (col. (b) divided by col. (c))		·							
Rater the appropriate amount in each column for each year, see the instructions before making any entries (a) (b) (column (d) (colum				•	od?			Yes !	X No
Calendar year (or tax year beginning in) Adjusted qualifying distributions Net value of noncharitable-use assets Col (b) divided by col (c)					itries				
Adjusted qualifying distributions Net value of noncharitable-use assets Color (b) divided by color (c)		 	- Instructions ber	ore making any en				(d)	
2016 1,673,013. 1,536,526. 1.088828 2015 1,886,952. 1,856,541. 1.016380 2014 1,245,692. 1,606,142. .775580 2013 654,678. 1,063,087. .615827 2012 361,930. 746,152. .485062 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 880,880. Multiply line 4 by line 3 5 701,476. Enter 1% of net investment income (1% of Part I, line 27b) 6 0. Add lines 5 and 6 7 701,476. Enter qualifying distributions from Part XII, line 4 8 2,246,631. 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	Base periód years	Advioted avalitions du	stributions	Net value of no		ts (Distrib	ution ratio	(c))
2015 1,886,952. 1,856,541. 1.016380 2014 1,245,692. 1,606,142. .775580 2013 654,678. 1,063,087. .615827 2012 361,930. 746,152. .485062 Total of line 1, column (d) 2 3.981677 Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years 3 .796335 Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 4 880,880. Multiply line 4 by line 3 5 701,476. Enter 1% of net investment income (1% of Part I, line 27b) 6 0. Add lines 5 and 6 7 701,476. Enter qualifying distributions from Part XII, line 4 8 2,246,631. 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		 	3,013.		1,536,52		(=)		
2013 654,678. 1,063,087615827 2012 361,930. 746,152485062 Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 50, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Add lines 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	2015	1,88	6,952.		1,856,54	1.		1.01	6380
Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	2014								
Total of line 1, column (d) Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	2013				1,063,08	7.			
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	2012	36	1,930.		746,15	2.		.48	5062
Average distribution ratio for the 5-year base period - divide the total on line 2 by 5 0, or by the number of years the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	Total of line 1 column (d)							3.98	1677
the foundation has been in existence if less than 5 years Enter the net value of noncharitable-use assets for 2017 from Part X, line 5 Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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		5-year base period - divide the total	on line 2 by 5 (), or by the numbe	er of vears				
Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	_	•		-,,	/	3		.79	6335
Multiply line 4 by line 3 Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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	Finter the net value of noncharitab	le-use assets for 2017 from Part X	line 5			4		880.	880.
Enter 1% of net investment income (1% of Part I, line 27b) Add lines 5 and 6 Enter qualifying distributions from Part XII, line 4 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		,							
Add lines 5 and 6 7 701,476. Enter qualifying distributions from Part XII, line 4 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	Multiply line 4 by line 3					5		701,	476.
Enter qualifying distributions from Part XII, line 4 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	Enter 1% of net investment incom	e (1% of Part I, line 27b)				6			0.
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	Add lines 5 and 6					7		701,	476.
	B Enter qualifying distributions from	n Part XII, line 4				8		2,246,	631.
		line 7, check the box in Part VI, line	e 1b, and comp	lete that part using	g a 1% tax rate	- 			-

<u>mii 990-</u> Pr	(2017) LIFE TIME FOUNDATION	03-	-0533	<u> 192</u>		age 4
Part VI	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4	948 -	see in	struct	ions	
1a Exemp	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)		<u></u>			
	tic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1				0.
	I, line 27b					
c All other	r domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b)					
2 Tax un	der section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	2				0.
	es 1 and 2	3				0.
4 Subtitle	A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	4				0.
	sed on investment income Subtract line 4 from line 3. If zero or less, enter -0-	5				0.
	Payments					
	stimated tax payments and 2016 overpayment credited to 2017 6a 0					
	foreign organizations - tax withheld at source 6b 0	1				
	d with application for extension of time to file (Form 8868) 6c 0	1				- }
	withholding erroneously withheld 6d 0					
•	redits and payments. Add lines 6a through 6d	7	1			0.
	ny penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8	1			0.
			1			0.
	e If the total of lines 5 and 8 is more than line 7, enter amount owed	9	1			••
•	yment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				—
	ne amount of line 10 to be Credited to 2018 estimated tax Refunded Statements Regarding Activities	11	<u> </u>			
	-			·	Yes	No
_	the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in			163	X
	itical campaign?			1a	\rightarrow	
	pend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the defi	nition		1b		<u> </u>
If the a	nswer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or					
	ited by the foundation in connection with the activities				\rightarrow	
c Did the	foundation file Form 1120-POL for this year?		1	1 <u>c</u>		X
	ne amount (if any) of tax on political expenditures (section 4955) imposed during the year		:	1 1		
	the foundation \blacktriangleright \$ (2) On foundation managers \blacktriangleright \$ 0	_				
e Enter t	ne reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			1 1		
manag	ers ▶ \$0 .			L		
Has the	foundation engaged in any activities that have not previously been reported to the IRS?			2		<u>X</u>
If "Yes,	attach a detailed description of the activities					
Has the	foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or	i			
	or other similar instruments? If "Yes," attach a conformed copy of the changes		j	3		X
				40		X
	Toundation have unrelated dusiness gross income of \$1,000 or filter during the year?			4a		
b If "Yes.	foundation have unrelated business gross income of \$1,000 or more during the year? Thas it filed a tax return on Form 990-T for this year?	1	I/A			
- ,	has it filed a tax return on Form 990-T for this year?	1	I/A	4b	\dashv	<u>x</u>
Was th	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year?	ľ	I/A			X
Was th	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T	ľ	I/A	4b		X
Was th If "Yes, Are the	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? Tattach the statement required by <i>General Instruction T</i> requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either	1	1/A	4b		X
Was th If "Yes, Are the By la	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? Tattach the statement required by <i>General Instruction T</i> requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or		1/A	4b		X
Was the If "Yes," Are the By la By st	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or attemption at the legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the states.		N/A	4b 5	Y	X
Was the lif "Yes, Are the By la By st	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat in the governing instrument?		N/A	4b 5	X	X
Was th If "Yes, Are the By la By st remain	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or attemption at the legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the states.		I/A	4b 5	X X	<u>x</u>
Was the If "Yes, Are the By la By st remain Did the	Thas it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat in the governing instrument? foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	e law		4b 5	$\overline{}$	<u>x</u>
Was the If "Yes, Are the By la By stremain Did the	has it filed a tax return on Form 990-T for this year? ere a liquidation, termination, dissolution, or substantial contraction during the year? attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stat in the governing instrument?	e law		4b 5	$\overline{}$	<u>х</u>
Was the If "Yes, So Are the By la By st remain Did the	Thas it filed a tax return on Form 990-T for this year? Bere a liquidation, termination, dissolution, or substantial contraction during the year? Beat attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stain the governing instrument? If it is in the governing instrument? If it is it is registered. See instructions If it is stated to which the foundation reports or with which it is registered. See instructions.	e law		4b 5	$\overline{}$	<u>x</u>
Was the If "Yes, and Are the By la By st remain Did the Bla Enter the Bl	Thas it filed a tax return on Form 990-T for this year? Bere a liquidation, termination, dissolution, or substantial contraction during the year? Beat attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state in the governing instrument? If it is in the governing instrument? If it is it is it is registered. See instructions In the state of the state of the foundation reports or with which it is registered. See instructions In the Attorney General (or designate).	e law		4b 5 6 7	Х	X
Was the If "Yes, and Are the By la By st remain or Did the Ba Enter the b If the a	Thas it filed a tax return on Form 990-T for this year? Bere a liquidation, termination, dissolution, or substantial contraction during the year? Beat attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the stain the governing instrument? If it is in the governing instrument? If it is it is registered. See instructions If it is stated to which the foundation reports or with which it is registered. See instructions.	e law		4b 5 6 7	$\overline{}$	<u>x</u>
Was the If "Yes, Are the By la By st remain 7 Did the Ba Enter the b If the a of each	Thas it filed a tax return on Form 990-T for this year? Bere a liquidation, termination, dissolution, or substantial contraction during the year? Beat attach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state in the governing instrument? If it is in the governing instrument? If it is it is it is registered. See instructions In the state of the state of the foundation reports or with which it is registered. See instructions In the Attorney General (or designate).	e law		4b 5 5 6 7 7	Х	
Was the If "Yes, Are the By la By st remain 7 Did the Ba Enter the b If the a of each 9 Is the f	Thas it filed a tax return on Form 990-T for this year? Pere a liquidation, termination, dissolution, or substantial contraction during the year? Tattach the statement required by General Instruction T requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either inguage in the governing instrument, or ate legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the station the governing instrument? Toundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV are states to which the foundation reports or with which it is registered. See instructions. SEE STATE This is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate) state as required by General Instruction G? If "No," attach explanation.	e law		4b 5 5 6 7 7	Х	x

	Ctatements regarding Activities (continued)			
			Yes	No
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule See instructions	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," attach statement. See instructions	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address HTTP://WWW.LFOUNDATION.ORG			
14	The books are in care of ► NATE MOEN Telephone no ► 952-22		226	
	Located at ► 2902 CORPORATE PLACE, CHANHASSEN, MN ZIP+4 ►55	317		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here).	/3▶	•
16	and enter the amount of tax-exempt interest received or accrued during the year At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority over a bank,	IN	/A Yes	No
10	securities, or other financial account in a foreign country?	16	163	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the	16		
	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? Yes X No	İ		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person? Yes $\overline{\mathbf{X}}$ No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? X Yes No			
	(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)? Yes X No			
	(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.)	i		
h	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations		}	
	section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		Х
	Organizations relying on a current notice regarding disaster assistance, check here	,,,		
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			
	before the first day of the tax year beginning in 2017?	1c		Х
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	At the end of tax year 2017, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning			
	before 2017? Yes X No	i I		ï
	If "Yes," list the years			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			i
21	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time		- 1	
Va	during the year?		1	
b	If "Yes," did it have excess business holdings in 2017 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			j
	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 2017) N/A	3b		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
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 2017?	4b		Х
	For	m 990	-PF (2017)

NUTRITION PROJECT MANAGER

MARKETING SPECIALIST

59,075.

54,080.

40.00

40.00

Form 990-PF (2017)

11,397.

8,517.

0.

0.

MEGAN STINCHFIELD

MADELINE AUGUSTIN -

PLACE, CHANHASSEN, MN 55317

PLACE, CHANHASSEN, MN 55317

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

2902 CORPORATE

2902 CORPORATE

Form 990-PF (2017) LIFE TIME FOUNDATION	03-0)533192 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat Paid Employees, and Contractors (continued)	ion 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		
	_	
	-	
	7	
Total number of others receiving over \$50,000 for professional services		▶ 0
Part IX-A Summary of Direct Charitable Activities	_	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic number of organizations and other beneficiaries served, conferences convened, research papers produced.	cal information such as the iced, etc	Expenses
1 SEE ATTACHMENT 3		
		513,246.
2 SEE ATTACHMENT 3		
		00 406
		28,486.
3		
· · · · · · · · · · · · · · · · · · ·		
4		
	·	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	nes 1 and 2	Amount
1N/A		
2		
All other program-related investments. See instructions		
3		

0. Form **990-PF** (2017)

 \blacktriangleright

Total Add lines 1 through 3

Page 8

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	894,294.
С	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	894,294.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0.	i I	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	894,294.
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	13,414.
5	Net value of noncharitable-use assets Subtract line 4 from line 3 Enter here and on Part V, line 4	5	880,880.
6	Minimum investment return Enter 5% of line 5	6	44,044.
P	art XI Distributable Amount (see instructions) (Section 4942(I)(3) and (I)(5) private operating foundations are	d certain	
_	foreign organizations, check here 🕨 🔲 and do not complete this part)		
1	Minimum investment return from Part X, line 6	1	44,044.
2a	Tax on investment income for 2017 from Part VI, line 5]]	
b	Income tax for 2017 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	44,044.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	44,044.
6	Deduction from distributable amount (see instructions)	6	0.
7_	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1.	7	44,044.
P	art 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	2,246,631.
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		
а	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	2,246,631.
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	5	0.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	2,246,631.
	Note. The amount on line 6 will be used in Part V. column (b) in subsequent years when calculating whether the foundation of	malifies for	the section

Form **990-PF** (2017)

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
1 Distributable amount for 2017 from Part XI,				4.4 0.4.4
line 7				44,044.
2 Undistributed income if any as of the end of 2017				
a Enter amount for 2016 only			0.	
b Total for prior years		0.		
3 Excess distributions carryover, if any, to 2017		<u> </u>	<u>-</u>	
a From 2012 285,604.				
b From 2013 601,529.				
c From 2014 1,165,385.				
d From 2015 1,794,560.				
e From 2016 1,596,187.				
	5,443,265.			
f Total of lines 3a through e	3,443,203.			
4 Qualifying distributions for 2017 from				
Part XII, line 4 ► \$ 2,246,631.				
a Applied to 2016, 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 2017 distributable amount		·····		44,044.
e Remaining amount distributed out of corpus	2,202,587.			
5 Excess distributions carryover applied to 2017 (If an amount appears in column (d) the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as				
indicated below a Corpus Add lines 3f 4c and 4e Subtract line 5	7,645,852.			
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 2016. Subtract line				
4a from line 2a Taxable amount - see instr			0,	
f Undistributed income for 2017 Subtract				
lines 4d and 5 from line 1. This amount must		•		
be distributed in 2018				0.
7 Amounts treated as distributions out of	<u>. </u>			
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	122,985.			
8 Excess distributions carryover from 2012				
not applied on line 5 or line 7	162,619.			,
9 Excess distributions carryover to 2018	/			
Subtract lines 7 and 8 from line 6a	7,360,248.			
10 Analysis of line 9	.,550,2101			
a Excess from 2013 601,529.				
b Excess from 2014 1,165,385.				
c Excess from 2015 1,794,560.		-		
d Excess from 2016 1,596,187.				
e Excess from 2017 2, 202, 587.				
ELAUGOS HUILI ZUIT ZU				

Fart XIV Private Operating Poundations (see instructions and Part VIA question 9) N/A	Form 990-PF (2017) LIFE TIM	IE FOUNDATI	ON			533192 Page
boundation, and the ruling is effective for 2017, either the date of the ruling 1 Once to both or date whether the foundation is a grant or uniform and the ruling is a control of the property of the proper				A, question 9)	N/A	
a Classic box to midcate whether the foundation as greate poperating boundation described in section 4942(i)(3) or 4942(i)(5) or 12 a first for the sect of the adjusted me manument from Part I to the maintain middle for the maintain middle for the maintain middle for the maintain middle for the form Part X for each year lasted 10 this of the 2s of the	-					
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c Any submission deadlines	SEE STATEMENT 8					
	b The form in which applications should be	submitted and informat	ion and materials they sho	ould 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		·		.	
	d Any restrictions or limitations on awards,	such as by geographica	l areas, charitable fields, i	unds of institutions, or	other factors	

rail VII-V Whalfold of Hickling-Lindrich Activities	Part XVI-A	Analysis of Income	e-Producing Activitie
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Enter gross amounts unless otherwise indicated	Unrelat	ed business income	Exclu	ided by section 512 513, or 514	(e)
Enter gross amounts unless otherwise moleated	(a)	(b)	(c) Exclu-	(d)	Related or exempt
1 Program service revenue	(a) Business code	Amount	sion	Amount	function income
•	Code		<u> </u>	-	
a			 		
b					
c		 	-		
d			-		
e			ļ		
1			<u> </u>		
g Fees and contracts from government agencies			<u> </u>		
2 Membership dues and assessments			<u> </u>		
3 Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate			<u> </u>		
a Debt-financed property					
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	-		1		
than inventory					
•			 		
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			 		
11 Other revenue					
a			 		
b					
c			-		
c d e					
c d e 12 Subtotal Add columns (b), (d), and (e)		0.		0.	
c d e		0.		0.	0.
c d e 12 Subtotal Add columns (b), (d), and (e)		0.		•	
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e)	o the Acco		empt	13	
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to		emplishment of Exe		13Purposes	0.
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incompared to the second seco	ne is reported	emplishment of Exe		13Purposes	0.
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to	ne is reported	emplishment of Exe		13Purposes	0.
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c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incompared to the second seco	ne is reported	emplishment of Exe		13Purposes	0.
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incompared to the second seco	ne is reported	emplishment of Exe		13Purposes	0.
c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incompared to the second seco	ne is reported	emplishment of Exe		13Purposes	0.
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c d e 12 Subtotal Add columns (b), (d), and (e) 13 Total Add line 12, columns (b), (d), and (e) (See worksheet in line 13 instructions to verify calculations) Part XVI-B Relationship of Activities to Line No Explain below how each activity for which incompared to the second seco	ne is reported	emplishment of Exe		13Purposes	0.

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Part XVII Information Regarding Transfers to and Transactions and Relationships With Noncharitable					
	Exempt Organization	ns			
1	Did the organization directly or indirectly eng	age in any of the following w	th any other organization described in section 501(c)		Ye
					_

					r					
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c)							Yes	No		
	•	han section 501(c)(3) organ	•		· · ·					
а		rs from the reporting founda	ition to a noncharital	ole exempt org	ganization of					
	(1) Ca							1a(1)		X
		ner assets						1a(2)		X
b		ransactions								
		les of assets to a noncharital	· -					1b(1)		X
		rchases of assets from a nor		rganization				1b(2)		X
	٠,	ntal of facilities, equipment,	or other assets					1b(3)		X
	• •	imbursement arrangements						1b(4)		X
	(5) Lo	ans or loan guarantees						1b(5)		X
	(6) Per	rformance of services or me	mbership or fundrais	sing solicitatio	ns			1b(6)		X
C	Sharing	of facilities, equipment, ma	ılıng lısts, other asse	ts, or paid em	ployees			1c		X
d	If the ar	nswer to any of the above is	"Yes," complete the f	ollowing sche	dule Column (b) should alw	rays show the fair n	narket value of the goods, ot	her ass	ets,	
	or servi	ices given by the reporting fo	oundation. If the four	idation receive	ed less than fair market value	in any transaction	or sharing arrangement, sho	w in		
	column	(d) the value of the goods,	other assets, or serv	ices received						
(a) L	ine no	(b) Amount involved	(c) Name of		exempt organization	(d) Description	of transfers transactions, and sha	aring arra	ingemen	its
				N/A						
		. <u>.</u>					<u>-</u>			
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						i i				
	\neg									
2 a	Is the fo	nundation directly or indirect	ly affiliated with or r	elated to one	or more tax-exempt organiza	ations described				
		on 501(c) (other than section	•		or more tax exempt organize	attend decombed		7 Yes	X	No
h		complete the following sche		0.011 0.21						
	11 100,	(a) Name of org			(b) Type of organization		c) Description of relationshi	0		
		N/A			(-,):	· · · · · · · · · · · · · · · · · · ·	<u>-, </u>	<u> </u>		
										
										-
	Unc	der penalties of perjury I declare the	nat I have examined this	return including	accompanying schedules and stat	tements and to the bes	t of my knowledge	150		
Sig	an and	behalf is true correct and com	plete Declaration of prep	pare tother than	taxpayer) is based on all information	on of which preparer ha	s any knowledge return	with the	prepare	er
Нè	re	TAITAILA	2000	\mathscr{U}	-19/12a 12009	Want	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Yes	See ins	No
		ignature of officer or trustee		-	Date	Title	· C A BENDO :	_ 103		110
		Print/Type preparer's na	me	Preparer's si		Date	Check If PTIN			
			· · · · ·	· ·	-	1	self- employed			
Pa	id	CHRIS MESK	TMEN	Chies	Machinen	8/28/2018	P01	314	196	
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		Firm's address ► 50	SOUTH SI	אַייָם כיייו	PRET					
							Phone no 612-39	7 _ 4	000	
		1 111.	MINNEAPOLIS, MN 55402				Phone no 612-39	, -4	200	

Schedule B

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2017

Name of the organization	Employer identification number			
L	IFE TIME FOUNDATION	03-0533192		
Organization type (check of				
Filers of.	Section			
Form 990 or 990-EZ				
	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 charitable trust treated as a private foundation			
	501(c)(3) taxable private foundation			
Check if your organization is covered by the General Rule or a Special Rule . Note Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions General Rule X For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions				
Special Rules				
For an organization described in section 501(c)(3) 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), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000, or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals Complete Parts I, II, and III				
For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990 EZ that received from any one contributor, during the year, contributions exclusively for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose. Don't complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions totaling \$5,000 or more during the year.				
Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), ut it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990 EZ or on its Form 990-PF, Part I, line 2, to ertify that it doesn't meet the filing requirements of Schedule B (Form 990, 990 EZ, or 990 PF)				

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) (2017)

Employer identification number

LIFE TIME FOUNDATION

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	LIFE TIME FITNESS, INC. 2902 CORPORATE PLACE CHANHASSEN, MN 55317	\$392,186.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	LIFE TIME FITNESS, INC. 2902 CORPORATE PLACE CHANHASSEN, MN 55317	\$ 77,982.	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	BAHRAM AKRADI 4300 OAK ROAD MINNETRISTA, MN 55331	\$ <u>88,707.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	MINNESOTA TIMBERWOLVES 600 HENNEPIN AVENUE, SUITE 300 MINNEAPOLIS, MN 55403	\$4,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	US BANK 800 NICOLLET MALL MINNEAPOLIS, MN 55402	\$8,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	AGRA CULTURE KITCHEN 3717 W 50TH ST MINNEAPOLIS, MN 55410	\$\$	Person Payroll Windows (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	space is needed	_
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7	MICHAEL & BRITTANY REGER FAMILY FOUNDATION 328 BARRY AVENUE SOUTH, SUITE 310 WAYZATA, MN 55391	\$ 35,995.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	MINNESOTA TIMBERWOLVES 600 HENNEPIN AVENUE, SUITE 300 MINNEAPOLIS, MN 55403	\$8,000.	Person Payroll Woncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	PATT CAVANAUGH 520 FERNDALE ROAD WEST WAYZATA, MN 55391	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
10	STAR FOUNDATION 9980 DEERBROOK DRIVE CHANHASSEN, MN 55317	\$5,000.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	THOMAS BERGMANN 3782 WOODLAND COVE PKWY MINNETRISTA, MN 55331	\$11,397 .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	TED BIGOS 560 HARRINGTON ROAD WAYZATA, MN 55391	\$ 29,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

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
13	CAMBRIA COMPANY LLC 11000 WEST 78TH STREET, SUITE 220 EDEN PRAIRIE, MN 55344	s104,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14	MICHAEL & BERIT FRANCIS 2905 FOX ST. ORONO, MN 55356	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
15	HOLMES CSM FAMILY FOUNDATION 500 WASHINGTON AVE S. STE 3000 MINNEAPOLIS, MN 55415	\$ <u>29,000.</u>	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
16	JAMES SPOLAR 5033 DUNKIRK PLACE NORTH PLYMOUTH, MN 55446	\$ 6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	WHITELY FAMILY GIVING FUND C/O FIDELITY 2657 WOODBRIDGE RD WAYZATA, MN 55391	\$15,000 .	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
18	ELOISE AND CARL POHLAD FAMILY FUND 60 SOUTH SIXTH STREET, SUITE 3900 MINNEAPOLIS, MN 55402	\$ 4 0,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

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
<u>19</u>	BAHRAM AKRADI 4300 OAK ROAD MINNETRISTA, MN 55331	\$ <u>12,900.</u>	Person Payroll Noncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	CHANCES FOR CHILDREN 1421 SOUTH GRANDVIEW DRIVE TEMPE, AZ 85281	\$25,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
21	LEONARD GREEN & PARTNERS LP 11111 SANTA MONICA BOULEVARD, STE 2000 LOS ANGELES, CA 90025	\$ 25,000.	Person X Payroll
(a)	(b)	(c)	(d)
No 22	Name, address, and ZIP + 4 THE JAY & ROSE PHILLIPS FAMILY FOUNDATION OF MN 615 FIRST AVENUE NE, SUITE 330 MINNEAPOLIS, MN 55413	* 25,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	INTELLEX FORENSICS 80 S 8TH STREET, IDS CENTER SUITE 900 MINNEAPOLIS, MN 55402	s17,976.	Person Payroll Oncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	STEVE & MARY LINDHOLM 5625 CHRISTMAS LAKE POINT EXCELSIOR, MN 55331	s16,000.	Person X Payroll

Employer identification number

	LIFE	TIME	FOUND	ATION
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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
25	MARTY & ANNE DAVIS 26310 BIRCH BLUFF ROAD EXCELSIOR, MN 55331	\$14,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	JACOB TRIMBLE 11257 OAK RIDGE CIRCLE NORTH CHAMPLIN, MN 55316	\$13,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
27	HOSSEIN & KAZIM MUMTAZ ALIABADI 12 MERILANE AVENUE EDINA, MN 55436	\$11,990.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	DANHAKL FAMILY FOUNDATION 11111 SANTA MONICA BOULEVARD, STE 2000 LOS ANGELES, CA 90025	\$11,990.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29	JEFFREY ZWIEFEL 1051 WEST 82ND STREET CHASKA, MN 55318	\$ <u>11,200.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
30	CORY SVIHLA 80 SOUTH 8TH STREET, IDS CENTER - SUITE 900 MINNEAPOLIS, MN 55402	\$10,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

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
31	TECHNOGYM 700 US HIGHWAY 46 EAST FAIRFIELD, NJ 07004	\$	Person Payroll Moncash X (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
32	DANHAKL REVOCABLE FAMILY TRUST 17717 CALLE DE PALERMO PACIFIC PALISADES, CA 90272	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
33	GALASHAN FAMILY CHARITABLE FUND 100 FEDERAL STREET BOSTON, MA 02110	\$ <u>10,000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
34	NAZEE AND JOSEPH MOINIAN FOUNDATION 3 COLUMBUS CIRCLE, 23RD FLOOR NEW YORK, NY 10019	s 10,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
35	KEITH & LAURIE SCHLEETER 6600 IROQUOIS TRAIL EDINA, MN 55439	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
36	STEPHEN ROWLAND 15709 EXCELSIOR BOULEVARD MINNETONKA, MN 55345	s9,900.	Person X Payroll

Employer identification number

LIFE TIME FOUNDATION

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
37	PETER & KRISTIN TAUNTON 2411 GALPIN COURT, SUITE 110 CHANHASSEN, MN 55317	\$9,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
38	MICHAEL BURGESS 4200 PARK LANE MINNEAPOLIS, MN 55407	\$7,799.	Person X Payroll
(a) <u>N</u> o.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
39	HARRY SCHLEETER 1585 MEDINA ROAD LONG LAKE, MN 55356	\$7,000.	Person X Payroll
(a)	(b)	(c) Total contributions	(d) Type of contribution
	Name, address, and ZIP + 4 JCOSLET & JROSNER COMMUNITY PROPERTY TRUST 301 COMMERCE STREET, SUITE 3150 FORT WORTH, TX 76102	\$ 5,995.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
41	CLOVERFIELDS FOUNDATION 50 SOUTH SIXTH STREET, SUITE 1500 MINNEAPOLIS, MN 55402	\$ 6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
42	TRAVEL ONE 8009 34TH AVENUE SOUTH, SUITE 1500 MINNEAPOLIS, MN 55425	\$6,000 .	Person Payroll Noncash X (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

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
43	ARTHUR COPPOLA 401 WILSHIRE BOULEVARD, SUITE 700 SANTA MONICA, CA 90401	\$ 5,995.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
44	ERIC STEPHENS 80 SOUTH 8TH STREET, IDS CENTER - SUITE 900 MINNEAPOLIS, MN 55402	\$5,500.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
45	RICK BORN 294 EAST GROVE LANE, SUITE 100 WAYZATA, MN 55391	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
46	BRIDGEWATER BANK 3800 AMERICAN BOULEVARD WEST, SUITE 100 BLOOMINGTON, MN 55431	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
47	NAZIE EFTEKHARI 7201 WEST 78TH STREET MINNEAPOLIS, MN 55439	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
48	SHANNON EVENSTAD 2520 CEDAR RIDGE ROAD WAYZATA, MN 55391	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part I if additional	I space is needed	
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
49	CATHERINE FRAZIER 23412 NORTH 21ST WAY PHOENIX, AZ 85024	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
50	TIMOTHY LUNDGREN 1060 SYMPHONY LANE CHASKA, MN 55318	\$5,000.	Person X Payroll
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
51	BOB LUX 201 SOUTH 11TH STREET, UNIT 2520 MINNEAPOLIS, MN 55403	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
52	SHYAN O'SHAUGHNESSY 5504 SCHAEFER ROAD EDINA, MN 55436	\$9,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
53	TPG GLOBAL LLC 301 COMMERCE STREET, SUITE 330 FORT WORTH, TX 77002	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) No	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
54	JAMES VASSALLUZZO 2200 CHERRY PALM ROAD BOCA RATON, FL 33432	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

	TIME FOUNDATION			-0333192
Part II	Noncash Property (see instructions) Use duplicate copies of Part II if a	dditic	onal space is needed	
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions.)	(d) Date received
	PARKING SPACES, SPA PRODUCTS, AND MISCELLANEOUS GOODS			
2				
		\$.	77,982.	VARIOUS
(a) No. from Part I	(b) Description of noncash property given		(c) FMV (or estimate) (See instructions)	(d) Date received
	APPETIZERS, DINNER, AND DESSERT			
6				
		\$ _	20,050.	
(a)			(c)	
No. from	(b) Description of noncash property given		FMV (or estimate)	(d) Date received
Part I			(See instructions)	Bate received
	TICKETS TO ALL-STAR GAME, LODGING, AND AIRFARE		<u></u>	
8				
		\$	8,000.	VARIOUS
(a)			(c)	
No. from	(b) Description of noncash property given		FMV (or estimate)	(d) Date received
Part I			(See instructions)	50.0 1000.100
1.0	TWO WOODWAY TREADMILLS, ONE PRECOR ELIPTICAL, TWO BOTTLES			
<u>19</u>	OF JOSEPH PHELPS INSIGNIA RED WINE, FOUR C			
		\$_	12,900.	VARIOUS
(a)				
No.	(b)		(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given		(See instructions)	Date received
Parti	PENTHOUSE RENTAL AND DEEP-SEA FISHING CHARTER			
23				
		\$_	17,976.	<u>VARIOUS</u>
(a)				
No.	(b)		(c) FMV (or estimate)	(d)
from Part I	Description of noncash property given		(See instructions.)	Date received
Faiti	ARTIS SYNCHRO MACHINE			
31				
			10 -00	
		\$_	10,500.	VARIOUS

Employer identification number

LIFE TIME FOUNDATION

art II	Noncash Property (see instructions) Use duplicate copies of Par		-0533192
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
	FLIGHT VOUCHERS		
42			
		\$6,000.	VARIOUS
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		s	
(a) No from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
- $ $		s	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
			
(a) No rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
(a) No rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_			

identification	

LIFE '	TIME FOUNDATION			03-0533192				
Part III	Exclusively religious, charitable, etc., cont the year from any one contributor. Complete	ributions to organizations described	in section 501(c)(7), (8), or	(10) that total more than \$1,000 for				
	completing Part III, enter the total of exclusively religious	s, charitable etc., contributions of \$1,000 or	less for the year (Enter this into onc	e) ► \$				
	Use duplicate copies of Part III if addition	al space is needed	 _					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
	(e) Transfer of gift							
1	Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
i								
1								
(a) No from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I								
		(e) Transfer of gif	t					
	Transferee's name, addr <u>ess, a</u>	nd 7ID + 4	Polationship of tra	nsferor to transferee				
•	rransieree's name, address, a	III ZIP + 4	nelationship of tra	risteror to transferee				
(=) No		<u> </u>						
(a) No from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I								
		(e) Transfer of git	t					
	Turnetourele manne addresse o	ad 71D + 4	Relationship of transferor to transferee					
	Transferee's name, address, a	nd ZIP + 4	Helationship of tra	isteror to transferee				
7-3 51-		<u> </u>						
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Desc	cription of how gift is held				
Part I								
1		(e) Transfer of gif	t					
	<u> </u>	- 4.7ID . 4	Dalahamat (4)					
	Transferee's name, address, a	na ZIP + 4	Helationship of tra	nsferor to transferee				

Life Time Foundation Grants and Contributions Paid During the Year Part XV, Line 3a

		Tax Status of the		
Name	Address	Recipient	Purpose of Grant	Amount
Gigi's Playhouse	4740 Park Glen Road, St Louis Park, MN 55416	PC	Misc Non Cash Donation	3,940
Houston ISD Foundation	4400 West 18th Street, Houston, TX 77092	GOV	Feed Houston - School Nutrition	62,301
Roseville City School District	400 Derek Place Suite D, Roseville, CA 95678	COV	Employee Hardship Assistance	47,952
Austin Independent School System	1111 West 6th Street, Suite D-300. Austin, TX 78703	900	School Nutrition	221,000
Boulder Valley School District RE-2	6500 East Arapahoe Road, PO Box 9011, Boulder, CO 90301	000	School Nutrition	51 758
Brewster Central Schools	30 Farm to Market Road Brewster, NY, 10509	000	School Nutrition	20 000
Chagrin Falls Exempted Village Schools	400 East Washington Street, Chagrin Falls, OH 44022	600	School Nutrition	4,412
Chef Ann Foundation	5445 Conestoga Court #150, Boulder CO 80301	PC	School Nutrition	602,351
Minneapolis Public Schools	812 Plymouth Ave Minneapolis, MN 55411	000	School Nutrition	1,500
MPS Culinary & Nutrition Services	812 Plymouth Ave Minneapolis, MN 55411	000	School Nutrition	206
Norwood City School District	2132 Williams Avenue, Norwood, OH 45212	000	School Nutrition	336
		:		
lotal				1.045.756

Life Time Foundation Grants and Contributions Approved for Future Payment Part XV, Line 3b

Name	Address	Foundation Status of the Recipient	Amount
Austin Independent School System	1111 W 6th Street, Austin, TX 78703	000	30,250
Boulder Valley School District	6500 E Arapahoe Road PO Box 9011, Boulder, CO 80301	600	51,570
Chef Ann Foundation	4810 Riverbend Road, Boulder, CO 80301	PC	151,793
Roseville City School District	400 Derek Place, Suite D, Roseville, CA 95678	000	31,500
Total			265,113

Life Time Foundation

2017 Summary of Direct Charitable Activities

Part IX-A, Line 1

Life Time Foundation's mission is to help children live healthy, happy lives. Our grants allow school district partners to eliminate highly processed, unhealthy foods from school meals. This is achieved by removing trans fats & hydrogenated oils, high-fructose corn syrup, hormones & antibiotics, processed & artificial sweeteners, artificial colors & flavors, artificial preservatives & bleached flour.

The base of our work is to provide nutrition counsel and financial grants to school districts with the goal of creating complete and sustainable nutrition alignment, in the best interest of all children. We provide grants to subsidize improved ingredients through procurement, grants for capital equipment to provide from-scratch cooking, grants for professional development and marketing to increase school lunch participation. We provided \$1,236,000 in grants in 2017.

Of this \$1,236,000 in grants delivered, \$75,100 was invested to support the LunchBox org, a best-in-class online tool for school nutrition professionals.

Of this \$1,236,600 in grants delivered, we spent an estimated \$256,800 on our nutrition education program, Hooray4Healthy org (Nutrition Literacy), for elementary students, taught by certified team members and provided online as a free resource for teachers and educators.

Separately, Life Time Foundation launched a new emergency program FEED HOUSTON, supporting the Houston Independent School District Foundation in providing breakfast, lunch and dinner meals to those in need in the greater Houston community while schools were closed during the aftermath of Hurricane Harvey In 2017, the FEED HOUSTON program provided a grant of \$62,300 to the Houston Independent School District Foundation All funds were raised and distributed within 60 days after the disaster

Part IX-A, Line 2

Separately, Life Time Foundation launched a new employee grant assistant program in 2017 LIFE TIME LIFTS is a restricted fund administered by the Life Time Foundation to provide emergency assistance to Team Members who experience unexpected financial hardship circumstances that arise outside of their control In 2017, the LIFE TIME LIFTS employee assistance program provided Life Time, Inc. employees a total of \$28,486 in emergency assistance grants

FORM 990-PF	LEGAL	FEES	S	STATEMENT 1		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
LEGAL FEES	4,358.	0.		4,358.		
TO FM 990-PF, PG 1, LN 16A	4,358.	0.		4,358.		
FORM 990-PF ACCOUNTING FEES STATE						
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
ACCOUNTING FEES	14,500.	0.		14,500.		
TO FORM 990-PF, PG 1, LN 16B	14,500.	0.		14,500.		
_						
FORM 990-PF C	THER PROFES	SIONAL FEES	S	TATEMENT 3		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
TEMPORARY HELP CONTRACTS OTHER PROFESSIONAL FEES	1,480.	0.		1,450.		
TO FORM 990-PF, PG 1, LN 16C	2,320.	0.		2,290.		

FORM 990-PF	OTHER E	XPENSES	S	STATEMENT 4		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES		
CREDIT CARD FEES	9,367.	0.		9,560.		
BANK FEES	4,727.	0.		4,936.		
ANNUAL FILING FEES	6,266.	0.		6,266.		
IT SUPPORT	12,763.	0.		13,035.		
PRESS RELEASE	1,225.	0.		1,225.		
SUPPLIES	9,858.	0.		9,968.		
POSTAGE & SHIPPING	677.	0.		515.		
MARKETING	72,283.	0.		73,577.		
FUNDRAISING	231,262.	0.		238,936.		
AUDIO/VIDEO	7,499.	0.		14,199.		
BAD DEBTS	2,431.	0.		0.		
APPRECIATION GIFTS	1,982.	0.		2,561.		
LIFE TIME LIFTS	28,486.	0.		28,486.		
NUTRITION LITERACY	256,800.	0.		256,800.		
TO FORM 990-PF, PG 1, LN 23	645,626.	0.		660,064.		

FORM 990-PF OTHER LIABILITIES		STATEMENT 5
DESCRIPTION	BOY AMOUNT	EOY AMOUNT
OTHER ACCRUED EXPENSES	21,637.	22,383.
TOTAL TO FORM 990-PF, PART II, LINE 22	21,637.	22,383.

FORM 990-PF	LIST OF	STATES	RECEIVING	COPY C	F RETURN	STATEMENT 6

STATES

 $\verb"AL,CA,CO,CT,FL,GA,IN,IA,KS,MA,MD,MI,MN,NC,NE,NJ,NY,NV,TN,OK,VA,AK,OH,IL,PAWA$

FORM 990-PF PART VIII - LIST TRUSTEES AND	OF OFFICERS, D		STAT	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN-	EMPLOYEE BEN PLAN CONTRIB	EXPENSE
BAHRAM AKRADI 2902 CORPORATE PLACE CHANHASSEN, MN 55317	CHAIR, PRESIDE	NT, AND DIRE		0.
JASON THUNSTROM 2902 CORPORATE PLACE CHANHASSEN, MN 55317	VICE CHAIR AND 1.00	TREASURER 0.	0.	0.
JAMES SPOLAR 2902 CORPORATE PLACE CHANHASSEN, MN 55317	SECRETARY AND 1	DIRECTOR 0.	0.	0.
BARBARA KOCH 2902 CORPORATE PLACE CHANHASSEN, MN 55317	EXECUTIVE DIREG	CTOR 143,077.	0.	24,638.
EMILY AKRADI 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
TAMI KOZIKOWSKI 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
LINDSAY POHLAD 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
BRITTANY REGER 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
AARON SWITZ 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
PATRICIA WEBBER 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.

LIFE TIME FOUNDATION			03-0533192		
DR. MERRITT BEH 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.	
CORY SVIHLA 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.	
TOTALS INCLUDED ON 990-PF, PAGE 6	, PART VIII	143,077.	0.	24,638.	

FORM 990-PF

GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 8

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

LIFE TIME FOUNDATION 2902 CORPORATE PLACE CHANHASSEN, MN 55317

TELEPHONE NUMBER

952-229-7226

FORM AND CONTENT OF APPLICATIONS

APPLICATIONS ARE AVAILABLE ONLINE AT: HTTP://WWW.LTFOUNDATION.ORG/FOR-SCHOOLS/

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS