

Return of Private Foundation

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

OMB No 1545-0052

Department of the Treasury

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

2017

Inter	nal Reve	nue Service ► Go to www.irs.gov/Form990PF fo	r instructions and	the lates	st information	on. Oper	to Public Inspection	
_		ndar year 2017 or tax year beginning	, 201	7, and e		<u> </u>	, 20	
Na	me of fo	pundation			A Employe	or Identification numb	er	
		SPORT USA				81-0882234		
740	mber an	d street (or P O box number if mail is not delivered to street address)	Room	/suite	B Telephon	ne number (see instruc	tions)	
		NES WAY, STE 104-205				307-640-506	0	
Crt	y or tow	n, state or province, country, and ZIP or foreign postal code			C If exempt	tion application is peni	dıng, check here ▶ 🔲	0
		WY 83014						
G	Check		of a former public	chanty	D 1. Foreig	n organizations, check	here ►	
		☐ Final return ☐ Amended r			2. Foreigi	n organizations meetir		
		Address change Name char				here and attach comp foundation status was		
		type of organization: Section 501(c)(3) exempt p		.DYI	•	07(b)(1)(A), check here		
		on 4947(a)(1) nonexempt charitable trust						
1		narket value of all assets at J Accounting method	· 🗹 Cash 🗀 A	ccruai		ndation is in a 60-mon		
		f year (from Part II, col. (c), Other (specify)			under sec	ction 507(b)(1)(B), ched	ck here ►	
		5) ► \$ 54,804. (Part I, column (d) must be	on cash basis.)	ı		T	(d) Dishimon and	
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and expenses per		investment	(c) Adjusted net	(d) Disbursements for charitable	
		the amounts in column (a) (see instructions).)	books	in in	come	income	purposes (cash basis only)	3
_	1	Contributions, gifts, grants, etc., received (attach schedule)	45.000				 	Í
	2	Check ► ☐ If the foundation is not required to attach Sch. B	15,000.	 	······································		1	1
	3	Interest on savings and temporary cash investments	5.		5.		 	
	4	Dividends and interest from securities				<u> </u>		
	5a	Gross rents				R	ECEIVEDI	
	b	Net rental income or (loss)		·				(
Φ	6a	Net gain or (loss) from sale of assets not on line 10	573.			2	1/ 1 0 0040	၂ၓ
چ	b	Gross sales price for all assets on line 6a 67,138.				8 N]∨ 1 9 2018 	12
Revenue	7	Capital gain net income (from Part IV, line 2)			573.			RS-OSC
æ	8	Net short-term capital gain		Ī		00	DEN LIT	
	9	Income modifications					1 1, 01	
	10a	Gross sales less returns and allowances						
	b	Less: Cost of goods sold					1	
	С	Gross profit or (loss) (attach schedule)						_
	11	Other income (attach schedule)						
	12	Total. Add lines 1 through 11	15,578.		578.		1	
ģ	13	Compensation of officers, directors, trustees, etc	0.		0.		0.	
Se	14	Other employee salaries and wages					 	
e.	15	Pension plans, employee benefits					 	
Expenses	16a	Legal fees (attach schedule)	4.000				040	
Ve	1	Accounting fees (attach schedule) STMT 1 Other professional fees (attach schedule)	1,880.		940.		940.	
aţi	C 17						 	
str	18	Interest	0.		0.		0.	
ž	19	Depreciation (attach schedule) and depletion	U .		<u> </u>		i i	
톶	20	Occupancy				-	"	
Ă	21	Travel, conferences, and meetings					1	
5	22	Printing and publications	,					
e G	23	Other expenses (attach schedule) STMT 2	1,013.	-	173.		840.	
Ĕ	24	Total operating and administrative expenses.	.,					
<u>ē</u>		Add lines 13 through 23	2,893		1,113.		1,780.	
Operating and Administrati	25	Contributions, gifts, grants paid	2,710.			-	2,710.	
0	26	Total expenses and disbursements. Add lines 24 and 25	5,603.		1,113.		4,490.	
	27	Subtract line 26 from line 12:						
	а	Excess of revenue over expenses and disbursements	9,975.					
	ь	Net investment income (if negative, enter -0-)			0.			
	C	Adjusted net income (if negative, enter -0-)				N/A		

For Paperwork Reduction Act Notice, see instructions.

Cat No 11289X

Form **990-PF** (2017)

		Attached schedules and amounts in the description column	Beginning of year	End	End of year		
Part II		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions)	(a) Book Value (b) Book Value	(c) Fair Market Value		
	1	Cash—non-interest-bearing		14,83	1. 14,831.		
	2	Savings and temporary cash investments	44,829.	39,97	39,973.		
	3	Accounts receivable ▶					
		Less: allowance for doubtful accounts ▶					
	4	Pledges receivable ▶					
		Pledges receivable ► Less allowance for doubtful accounts ►					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other			-		
		disqualified persons (attach schedule) (see instructions)		····			
	7	Other notes and loans receivable (attach schedule) ▶					
		Less. allowance for doubtful accounts ▶					
ţ	8	Inventories for sale or use					
Assets	9	Prepaid expenses and deferred charges					
Ä	10a	Investments—US and state government obligations (attach schedule)					
	b	Investments—corporate stock (attach schedule)					
	С	Investments—corporate bonds (attach schedule)					
	11	Investments—land, buildings, and equipment. basis ▶	<u> </u>		4		
		Less. accumulated depreciation (attach schedule) ▶					
	12	Investments—mortgage loans					
	13	Investments—other (attach schedule)					
	14	Land, buildings, and equipment. basis ▶			4		
		Less: accumulated depreciation (attach schedule) ▶					
	15	Other assets (describe ►					
	16	Total assets (to be completed by all filers—see the					
	- 	instructions. Also, see page 1, item l)	44,829.	54,80	4. 54,804.		
	17	Accounts payable and accrued expenses			-		
ŝ	18	Grants payable					
≝	19	Deferred revenue		·	-		
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons					
=======================================	21	Mortgages and other notes payable (attach schedule)		· · · · · · · · · · · · · · · · · · ·	{		
	22	Other liabilities (describe Total liabilities (add lines 17 through 22)					
	23		0.		<u>o.</u>		
S		Foundations that follow SFAS 117, check here Dand complete lines 24 through 26, and lines 30 and 31.					
ၓၟ	24	Unrestricted					
룔	25	Temporarily restricted			-		
ã	26	Permanently restricted			-		
und Balances	20	Foundations that do not follow SFAS 117, check here ▶ ✓			-		
교		and complete lines 27 through 31.					
ō	27	Capital stock, trust principal, or current funds	0.	(o.		
ţ	28	Paid-in or capital surplus, or land, bldg., and equipment fund	0.		0.		
ŝ	29	Retained earnings, accumulated income, endowment, or other funds	44,829.	54,80			
Ą	30	Total net assets or fund balances (see instructions)	44,829.	54,80			
Net Assets or	31	Total liabilities and net assets/fund balances (see					
Z		instructions)	44.829.	54,80	4.		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances			,		
	Tota	I net assets or fund balances at beginning of year-Part II, colu					
	end-	of-year figure reported on prior year's return)		· · <u>1</u>	44,829.		
2	Ente	r amount from Part I, line 27a		2	9,975.		
3	Othe	er increases not included in line 2 (itemize) ▶		3	0.		
4	Add	lines 1, 2, and 3		4	54,804.		
5	Decr	reases not included in line 2 (itemize) ▶	**************************************	5	0.		
6	Tota	reases not included in line 2 (itemize) I net assets or fund balances at end of year (line 4 minus line 5)—	Part II, column (b), line 30) 6	54.804		

Part	Capital Gains and	d Losses for Tax on Investin	ient income	1		
		nd(s) of property sold (for example, real e use, or common stock, 200 shs MLC Co		(b) How acquired P-Purchase D-Donation	(c) Date ac (mo , day	
1a	PUBLICLY TRADED SECU	RITIES				
<u>b</u>						
<u>c</u>						
<u>d</u> e						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		other basis inse of sale		(h) Gain or (loss) ((e) plus (f) minus (g))
<u>a</u>						
<u> </u>						
_						· · · · · · · · · · · · · · · · · · ·
e	67,138.			66,565.		573
	Complete only for assets sho	owing gain in column (h) and owned	by the foundation	on 12/31/69.		Gains (Col (h) gain minus
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69		s of col (i) (j), if any		k), but not less than -0-) or Losses (from col (h))
a						
<u> </u>	· - · - · · · · · · · · · · · · · · · ·					
<u>c</u>						
<u>d</u> _ e						573.
2	Capital gain net income o		also enter in Pa . enter -0- in Pa		2	
3	Net short-term capital da	in or (loss) as defined in sections	•			573.
J	If gain, also enter in Part	I, line 8, column (c). See instru	ctions If (loss)	, enter -0- ın)	3	N/A
Part		der Section 4940(e) for Redu				
Was t	s," the foundation doesn't	section 4942 tax on the distribution section 4942 tax on the distribution 4940(e). Do	not complete t	hıs part.		
1	<u></u>	ount in each column for each ye	ar; see the instru	uctions before ma	aking any e	
Cale	(a) Base penod years endar year (or tax year beginning in	(b) Adjusted qualifying distribution	s Net value o	(c) f nonchantable-use as	ssets	(d) Distribution ratio (col (b) divided by col (c))
	2016		2,436.		,024.	.0553334
	2015		0.	46	5,344.	0.
	2014		N/A			
	2013 2012					
2 3	Total of line 1, column (d)			. 2	.055333
3	the number of years the f	oundation has been in existence	if less than 5 ye	ears	. 3	.027667
4	Enter the net value of nor	ncharitable-use assets for 2017 f	rom Part X, line	5	. 4	38,907.
5	Multiply line 4 by line 3				. 5	1,076.
6	Enter 1% of net investme	nt income (1% of Part I, line 27b)		. 6	0.
7	Add lines 5 and 6				. 7	1,076.
8		ons from Part XII, line 4... ater than line 7, check the box in				4,490. sing a 1% tax rate. See the

Part \		nstru	ction	1S)		
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ and enter "N/A" on line 1 Date of ruling or determination letter. (attach copy of letter if necessary—see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		0.			
	here ▶ 🗸 and enter 1% of Part I, line 27b					
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of Part I, line 12, col. (b).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; others, enter -0-)		0.			
3	Add lines 1 and 2		0.			
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)		0.			
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0		0.			
6	Credits/Payments:					
а	2017 estimated tax payments and 2016 overpayment credited to 2017 6a 6a					
b	Exempt foreign organizations—tax withheld at source 6b					
С	Tax paid with application for extension of time to file (Form 8868) . 6c		1			
d	Backup withholding erroneously withheld 6d					
7	Total credits and payments Add lines 6a through 6d		0.			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached		0.			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		0.			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid > 10					
11	Enter the amount of line 10 to be: Credited to 2018 estimated tax ▶ Refunded ▶ 11					
	/II-A Statements Regarding Activities		,,			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	Yes	No ✓		
þ	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition	1b		—		
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities.					
С	Did the foundation file Form 1120-POL for this year?	1c		7		
	· · · · · · · · · · · · · · · · · ·					
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0.					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2				
_	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_		
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		<u> </u>		
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b				
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		✓		
•	If "Yes," attach the statement required by General Instruction T.			 7		
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:					
	 By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that 					
	conflict with the state law remain in the governing instrument?	6	✓			
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	1			
	Enter the states to which the foundation reports or with which it is registered. See instructions					
þ.	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General					
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	-			
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
J	4942(j)(5) for calendar year 2017 or the tax year beginning in 2017? See the instructions for Part XIV. If "Yes," complete Part XIV	9				
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
. •	names and addresses	10	1			
-		m 99		(2017)		

Part	VII-A Statements 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		1
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		1
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	✓	
	Website address ► N/A	7 640	E060	
14	THO DOURG GIVE IT GOLD OF PROPERTY OF THE PROP	7-640- 9259		
4=	Located at ► 31915 RANCHO CALIFORNIA RD, STE 200-201, TEMECULA, CA ZIP+4 ►			▶ [/
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 —check here and enter the amount of tax-exempt interest received or accrued during the year		•	- <u>√</u> 5.
46	At any time during calendar year 2017, did the foundation have an interest in or a signature or other authority		Yes	No.
16	over a bank, securities, or other financial account in a foreign country?	16		✓
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of			_
	the foreign country ▶ _{N/A}			
Part	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
, ar	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year, did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a			
	disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	}		
	(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)?		į	
	(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.)			
b	If any answer is "Yes" to 1a(1)–(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance? See instructions	1b		
	Organizations relying on a current notice regarding disaster assistance, check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
•	were not corrected before the first day of the tax year beginning in 2017?	1c		✓
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?			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
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.)	2b		
_	all years listed, answer "No" and attach statement—see instructions.)	20		
С	► 20 , 20 , 20 , 20			
32	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise			
Oa	at any time during the year?			
L	If "Yes," did it have excess business holdings in 2017 as a result of (1) any purchase by the foundation or			
D	disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the			
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of			
	the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the			
	foundation had excess business holdings in 2017.)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		1
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		1

orm 99	^{0-PF (2017)} LIFE'S A SPORT, USA							81-08	82234	F	Page 6
Part	VII-B Statements Regarding Activities	for W	hich Form	4720	May Be R	equire	d (conti	nued)			
5a	During the year, did the foundation pay or incur a									Yes	No
	(1) Carry on propaganda, or otherwise attempt to						☐ Yes	✓ No			
	(2) Influence the outcome of any specific public	c election	on (see secti	on 495	5); or to ca	arry on,					
	directly or indirectly, any voter registration dr	ive?					☐ Yes	✓ No			
	(3) Provide a grant to an individual for travel, stu-	dy, or c	ther similar i	ourpose	es?		☐ Yes	✓ No			
	(4) Provide a grant to an organization other than	n a chai	rıtable, etc., ı	organiz	ation desci	ribed in	١				
	section 4945(d)(4)(A)? See instructions						☐ Yes	✓ No			
	(5) Provide for any purpose other than religious,	, charita	able, scientifi	c, litera	ary, or educ	ational			1 1		
	purposes, or for the prevention of cruelty to c	children	or animals?				☐Yes	✓ No	·		
b	If any answer is "Yes" to 5a(1)-(5), did any of the	transa	ctions fail to	qualify	under the	excepti	ons desci	ribed in	L		
	Regulations section 53 4945 or in a current notice	regardır	ng disaster as	ssistanc	e? See inst	ruction	s	· N/A			
	Organizations relying on a current notice regardii	ng disa	ster assistan	ce, che	ck here .			▶ 🗆			
C	If the answer is "Yes" to question 5a(4), does to										
	because it maintained expenditure responsibility	for the	grant?				☐ Yes	☐ No			
	If "Yes," attach the statement required by Regula	ations s	ection 53.49	45–5(d)	١.		_		- { [
6a	Did the foundation, during the year, receive any					emiums	;		! !		
	on a personal benefit contract?						☐ Yes	✓ No	1 1		
ь	Did the foundation, during the year, pay premium	ns. dire	ctly or indired	ctlv. on	a personal	benefi	t contract	? .	6b	_	\
_	If "Yes" to 6b, file Form 8870.	,	,								-
7a	At any time during the tax year, was the foundation a	a party t	o a prohibited	tax she	elter transac	tion?	☐ Yes	✓ No			
	If "Yes," did the foundation receive any proceeds						ransactio	n? .N/	A 76		
_	VIII Information About Officers, Direct	tors, T	rustees, Fo	ounda	tion Mana	agers,	Highly I	Paid E	mploy	ees,	
	and Contractors	•	•			•	•				
1	List all officers, directors, trustees, and found	ation n	nanagers an	d their	compens	ation. S	See instr	uctions			
			, and average		mpensation		Contribution		(e) Expe	nse acc	count,
	(a) Name and address		rs per week ed to position		not paid, ter -0-)		oyee benefit erred compe			allowan	
AUL	GIARRUSSO							Ċ			
465 N	PINES WAY, STE 104-205	TRUST	EE 0.00		0.			0.			0.
	N, WY 83014										
RAC	GIARRUSSO					_					
		TRUST	EE 1.00		0.			0.			0.
	N, WY 83014			-	_						
2	Compensation of five highest-paid employee "NONE."	s (oth	er than thos	se incli	uded on li	ne 1—	see instr	uctions	s). If no	one, o	enter
			(b) Tella and a	vorace			(d) Contrib	utions to		•	
	a) Name and address of each employee paid more than \$50,00	00	(b) Title, and a hours per v devoted to po	veek	(c) Comper	nsation	employee plans and compen	deferred	(e) Exper other a	nse aco allowan	count, ices
IONE		-									
ONE											
										-	
	••••••										
							 				
				i							
			l		L		1				

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

Form **990-PF** (2017)

	t VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emand Contractors (continued)	ployees,
3	Five highest-paid independent contractors for professional services. See instructions. If none, enter "NONE	"
	(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NON		
Tota	I number of others receiving over \$50,000 for professional services	0
Pa	t IX-A Summary of Direct Charitable Activities	
Li	at the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of ganizations and other beneficianes served, conferences convened, research papers produced, etc.	Expenses
1	N/A	
2		
3		
4		
	t IX-B Summary of Program-Related Investments (see instructions)	
D	scribe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1	N/A	
2		
_	other program-related investments. See instructions	
3		
Tota	I. Add lines 1 through 3	
	mr. com moor an original in the first transfer and transf	

Part	Minimum Investment Return (All domestic foundations must complete this part. Fore	ign foundat	ions,
	see instructions.)		
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	39,500
C	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	39,500
e	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	0
3	Subtract line 2 from line 1d	3	39,500
4	Cash deemed held for charitable activities. Enter 11/2% of line 3 (for greater amount, see		
	instructions)	4	593
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	38,907
6	Minimum investment return. Enter 5% of line 5	6	1,945
Part 2		oundations	;
1	Minimum investment return from Part X, line 6	1	1,945
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.) 2b		
c	Add lines 2a and 2b	2c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,945.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,945.
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	1,945
	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	4,490.
þ	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	
	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	4,490
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income.	_	
_	Enter 1% of Part I, line 27b. See instructions	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	4,490.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating qualifies for the section 4940(e) reduction of tax in those years.	g whether th	ne foundation

Part	VIII Undistributed Income (see instruction	ns)			<u> </u>
1	Distributable amount for 2017 from Part XI,	(a) Corpus	(b) Years prior to 2016	(c) 2016	(d) 2017
_	line 7				1,945
2	Undistributed income, if any, as of the end of 2017.		ļ		
а	Enter amount for 2016 only			2,162	
b	Total for prior years: 20,20,20		0.		
3	Excess distributions carryover, if any, to 2017:				
а	From 2012				
b	From 2013				
С	From 2014				
d	From 2015 0.				
e	From 2016 0.				
f	Total of lines 3a through e	0.			
4	Qualifying distributions for 2017 from Part XII,	<u></u>			
	line 4: ▶ \$ 4,490				
а	Applied to 2016, but not more than line 2a .		ļ	2,162.	
b					
	(Election required—see instructions)		0.		
c	Treated as distributions out of corpus (Election				
•	required—see instructions)	0.			
d	Applied to 2017 distributable amount	U,			1 045
_	• • •				1,945
е 5	Remaining amount distributed out of corpus Excess distributions carryover applied to 2017	383.			
3	(If an amount appears in column (d), the same	0.			0
	amount must be shown in column (a).)				
6	Enter the net total of each column as				
6	indicated below:				
	•		1		
a	Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	383.			
b	Prior years' undistributed income. Subtract				
	line 4b from line 2b		0.		
С	Enter the amount of prior years' undistributed				
	income for which a notice of deficiency has				
	been issued, or on which the section 4942(a)				
	tax has been previously assessed		0.		
d	Subtract line 6c from line 6b. Taxable				
	amount-see instructions		0.		
е	Undistributed income for 2016. Subtract line				
	4a from line 2a. Taxable amount-see				
	instructions			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 corpus				
	to satisfy requirements imposed by section	J	j		
	170(b)(1)(F) or 4942(g)(3) (Election may be				
	required—see instructions)	0.			
8	Excess distributions carryover from 2012 not				
	applied on line 5 or line 7 (see instructions) .	o. l			
9	Excess distributions carryover to 2018.				
•	Subtract lines 7 and 8 from line 6a	383.	1		
10	Analysis of line 9:	383.			
-	· .	ļ			
	Excess from 2013	1			
þ	Excess from 2014 N/A	ł			
C	Excess from 2015	-			
d	Excess from 2016	}			
_ е	Excess from 2017				

Form 99	0-PF (2017) LIFE'S A SPORT, US	A			81-0882	2234 Page #0
Part			ctions and Part	VII-A, question 9) N/A	
1a	If the foundation has received a ruling					
	foundation, and the ruling is effective fo	r 2017, enter the da	ate of the ruling .			
b	Check box to indicate whether the four	ndation is a private	operating foundat	ion described in se	ection 🗌 4942(j)((3) of 4942(j)(5)
2a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		(e) Total
	income from Part I or the minimum investment return from Part X for	(a) 2017	(b) 2016	(c) 2015	(d) 2014	(0) 1041
	each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part XII,					
	line 4 for each year listed					
d	Amounts included in line 2c not used directly					
	for active conduct of exempt activities			/		
е	Qualifying distributions made directly					
	for active conduct of exempt activities.		\ \ \			
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
	alternative test relied upon:			X		
а	"Assets" alternative test-enter:					
	(1) Value of all assets					
	(2) Value of assets qualifying under					
	section 4942(j)(3)(B)(i)					
b	"Endowment" alternative test—enter 2/3 of minimum investment return shown in					
	Part X, line 6 for each year listed					
C	"Support" alternative test-enter:					
	(1) Total support other than gross					
	investment income (interest,					\setminus
	dividends, rents, payments on secunties loans (section	/	1			
	512(a)(5)), or royalties)					
	(2) Support from general public					
	and 5 or more exempt organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
	(4) Gross investment income	/				<u> </u>
Part				he foundation h	ad \$5,000 or mo	ore in assets at
	any time during the year-		1s.)			
1	Information Regarding Foundation			/ . f 15 - 1 - 1 - 1 1		h tha farmalation
а	List any managers of the foundation					by the foundation
	before the close of any tax year (but o	mily it triey have co	ominorea more th	an 40,000). (366 S	60.1011 307 (U)(Z).)	
PAUL	E. GIARRUSSO	h 100/		le of a power anation	lor on oqually lo	rea parties of the
D	List any managers of the foundation ownership of a partnership or other el					ige portion of the
	ownership of a partitership of other en	inty) or writer the	iouridation nas a	1070 or greater into	51650.	
NONE	Information Describe Contain Alex	Grant Citt I	n Cabalanahin a	to Programs:		
2	Information Regarding Contribution					dana mat accomb
	Check here ► ✓ If the foundation					
	unsolicited requests for funds. If the f complete items 2a, b, c, and d. See in		gins, grants, etc.,	to individuais or o	rganizations under	other conditions,
			dross of the person	n to whom applies	tions should be as	dressed:
а	The name, address, and telephone nu	imber or email add	uress of the persor	п со многи арриса	nons snould be at	,u, 0000U.
	The form in which applications should	l be submitted an	d information and	materials they sho	uld include:	
b	The form in which applications should	ne annimited and	u miomianon and i	materiais triey SNO	uiu irioluuc	
	Any submission deadlines:					
·	7.1.7 Cabillicolott addutted.					
	Any restrictions or limitations on av	vards, such as b	y geographical ar	eas, charitable fie	elds, kinds of inst	titutions, or other
	factors:					

Supplementary Information (continued)

Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or status of **Amount** any foundation manager or substantial contributor contribution recipient Name and address (home or business) a Paid during the year Teton Youth & Family Services 307-733-6440 510 S Cache Jackson, WY 83001 www.tyfs.org NONE PUBLIC SUPPORT FOSTER YOUTH 500. Rancho Damacitas Children & Family Services CA P.O. Box 890326 Temecula, CA 92589 NONE PUBLIC SUPPORT OF YOUTH MOTHERS 400. Great Oak Athletic Leadership Society G.O.A.L.S. PUBLIC SUPPORT OF YOUTH ATHLETICS 1,500. 32555 Deer Hollow Way, Temecula, CA 951-294-6450 NONE Wonders of Wildlife 417-225-1110 PUBLIC SUPPORT OF WILDLIFE 100. NONE 500 W Sunshine St, Springfield, MO 65807 **Catholic Relief Service** NONE PUBLIC SUPPORT OF ORGANIZATION 60. 228 W. Lexington St., Baltimore, MD 21201-3443 Michael J Fox Foundation 212-509-0995 PUBLIC PARKINSON'S RESEARCH 100. NONE PO Box 5014 Hagerstown, MD 21201-3443 The Leukemla Lymphoma 888-557-7177 NONE PUBLIC LEUKEMIA RESEARCH 50. Rye Brook, NY Ils.org За 2,710. Approved for future payment **3b**

	r ord	ass amounts unless otherwise indicated.	Unrelated bu	siness income	Excluded by section	on 512, 513, or 514	
	, git	as amounts unless otherwise indicated.	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	(e) Related or exempt function income (See instructions)
1	Pro	gram service revenue:					
	a						
	b						
	C						
	đ						
	e			·			
	Ť						<u> </u>
	-	Fees and contracts from government agencies				·	
2	Ме	mbership dues and assessments					
3		rest on savings and temporary cash investments			14	5.	
4		dends and interest from securities					
5	Net	rental income or (loss) from real estate:					
		Debt-financed property					
		Not debt-financed property					·
6		rental income or (loss) from personal property					
7	Oth	er investment income					·
8	Gai	n or (loss) from sales of assets other than inventory			18	573.	
9	Net	income or (loss) from special events					
10	Gro	ss profit or (loss) from sales of inventory .					
11	Oth	er revenue: a					
	b						
	C						
	d						
	_						
	е		l .				
12	e Sub	total. Add columns (b), (d), and (e)		0.		578.	0.
						578.	
13	Tot						
13 See	Tot wor	al. Add line 12, columns (b), (d), and (e)	s.)				
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation (I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
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13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	578.
13 See Par Line	Tot wor t X t No	al. Add line 12, columns (b), (d), and (e) ksheet in line 13 instructions to verify calculation /I-B Relationship of Activities to the A	s.) ccomplishm	ent of Exemp	Purposes	13	nportantly to the tions.)

Form 99	0-PF (2		A SPORT, USA					0882234		ige 13
Part	XVII		n Regarding Tra	nsfers to and Transaction	ns and Re	lationship	s With Noncl	naritabl	е Ехе	mpt
1	ın s			engage in any of the followin 501(c)(3) organizations) or					Yes	No
а	-		oorting foundation t	o a noncharitable exempt org	ganization o	f:				
		Cash	-					1a(1)		1
	(2) C	Other assets .						1a(2)	<u> </u>	✓.,
b		r transactions:							<u> </u>	لــــا
				empt organization				1b(1)	-	1
				table exempt organization .				1b(2)		1
	• •		• •	er assets				1b(3) 1b(4)	_	✓
			•					1b(5)		7
				hip or fundraising solicitation				1b(6)		1
С				ists, other assets, or paid em				1c		1
	If the	answer to any	of the above is "Ye	es," complete the following s	chedule. Co	olumn (b) st	nould always s	now the	fair m	arket
	value	e of the goods, o	ther assets, or serv	ices given by the reporting for	oundation. I	f the founda	ition received le	ess than	fair m	narket
	value	in any transaction		gement, show in column (d) the						
(a) Line	no	(b) Amount involved	(c) Name of nonc	charitable exempt organization	(d) Descript	tion of transfers	, transactions, and	sharing an	angem	ents
				N/A						
							··			
	\dashv									
	+									
								-		
							<u></u>			
					ļ					
	-									
					,					
	desc	ribed in section 5		ffiliated with, or related to, o ection 501(c)(3)) or in section					s 🗹	 No
		(a) Name of organ	<u>~</u>	(b) Type of organization		(0	:) Description of rel	ationship		
		N/A								
	,			<u> </u>						
Sign	corre	er penalties of perjust, ect, and complete Deal	aration of preparer (other the	ned this return, including accompanying shan taxpayer) is based on all information	schedules and stored of which prepare	tatements, and t er has any know	ledge May ti	ne IRS disci	uss this	retum
Here		nature of officer or trus	stee /	Date Title					∐Yes	
Paid	1	Print/Type preparer		Preparer's signature		Date	Check r			
Prep:		Firm's name ▶					Firm's EIN ▶			
use (Only Firm's name Firm's address F						Phone no			

Schedule B

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

Department of the Treasury Internal Revenue Service Name of the organization

Schedule of Contributors

▶ Attach to Form 990, Form 990-EZ, or Form 990-PF. ▶ Go to www.irs.gov/Form990 for the latest information. OMB No 1545-0047

Employer Identification number

LIFE'S A SPORT USA 81-0882234 Organization type (check one): Filers of: Section: Form 990 or 990-EZ 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation ☐ 527 political organization 501(c)(3) exempt private foundation Form 990-PF 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** 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 331/3% 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

Schedule B (Form 990, 990-EZ, or 990-PF) (2017)	Page 2
Name of organization	Employer identification number
LIFE'S A SPORT USA	81-0882234

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			
	PAUL E. GIARRUSSO 3465 N PINES WAY, STE 104-205 WILSON, WY 83014	\$ 15,000.	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
:		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution			
		\$	Person			

Name of organization LIFE'S A SPORT USA Employer identification number

81-0882234

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

Page 4 Schedule B (Form 990, 990-EZ, or 990-PF) (2017) **Employer identification number** Name of organization LIFE'S A SPORT USA 81-0882234 Exclusively religious, charitable, etc., contributions to organizations described in section 501(c)(7), (8), or (10) that total more than \$1,000 for the year from any one contributor. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) Use duplicate copies of Part III if additional space is needed. (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. from (c) Use of gift (d) Description of how gift is held (b) Purpose of gift (e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee (a) No. (b) Purpose of gift (c) Use of gift (d) Description of how gift is held from Part I (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4 (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held (e) Transfer of gift Relationship of transferor to transferee Transferee's name, address, and ZIP + 4

LIFE'S A SPORT, USA	2017	·		81-0882234
FORM 990-PF	ORM 990-PF ACCOUNTING FEES			STATEMENT 1
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITBLE PURPOSES
ACCOUNTING FEES .	1,880.	940.		940.
TO FORM 990-PF, PG 1, LN 16B	1,880.	940.		940.
FORM 990-PF	OTHER EXPENSES		STATEMENT 2	
DESCRIPTION	(A) EXPENSES PER BOOKS	. (B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITBLE PURPOSES
Interactive Broker Fees	121.	121.		0.
Telephone & Internet	590.	30.	•	560.

302. 22. 280.

840.

1,013. 173.

Postal Service & Postage

TO FORM 990-PF, PG 1, LN 23