EXTENDED TO NOVEMBER 15, 2019

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.

29491271015,02

	ror	calen	dar year 2018 or tax year beginning			, and end	ung		
	Na	me of	foundation		A Employer identification number				
	Į	JF.	E TIME FOUNDATION		03-0533192				
	No	mber a	nd street (or P O box number if mail is not delivered to st	reet address)		- 1	Room/suite	B Telephone number	
	2	290	2 CORPORATE PLACE		952-229-72	26			
	Ci	ty or to	own, state or province, country, and ZIP or fore	gn postal c	ode			C If exemption application is po	anding, check here
			NHASSEN, MN 55317						
	G	Check	all that apply: Initial return		Initial return of a f	ormer public ch	arity	D 1. Foreign organizations	s, check here
			Final return		Amended return			• -	
			Address change		Name change			Foreign organizations me check here and attach co	eting the 85% test, mputation
	Н	Check	type of organization: X Section 501(c)(3) exempt (private foundation		14	E If private foundation sta	tus was terminated
		Se	ction 4947(a)(1) nonexempt charitable trust	Other	taxable private found		<u> </u>	under section 507(b)(1)	(A), check here
. 1	I F	air ma	arket value of all assets at end of year J Acco	ounting me		X Accru	al	F If the foundation is in a	60-month termination
М			Part II, col. (c), line 16)	Other (s	pecify)			under section 507(b)(1)	(B), check here $lacktriangle$
,		<u> \$ </u>	1,586,981. (Part I,	column (d)	must be on cash basi	S.)			I 48 "
	Р	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may nonecessarily equal the amounts in column (a))		(a) Revenue and xpenses per books	(b) Net invenience		(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	_	1	Contributions, gifts, grants, etc., received		,800,945			N/A	(cash basis only)
3		,	Chock I if the foundation is not required to attach Sch		,,			1	
_	_	3	Interest on savings and temporary cash investments						
4		4	Dividends and interest from securities					RECEIV	יכח
/		5a	Gross rents A					TILUL!	
		Ь	Net rental income or (loss)	-					
	6	6a	Net gain or (loss) from sale of accets not on line 10					SEP 20	2019 15
	5	Б	Gross sales price for all assets on line 6a	_				m'	8
	~	7	Capital gain net income (from Part IV, line 2)	<u> </u>			0.	OCD I	IIT
	9 6	8	Net short-term capital gain					L OGDEN	<u> </u>
	>	9	Income modifications Gross sales less returns					<u> </u>	
	NOV 0 6 2019	1 .	and allowances						
			Gross profit or (loss)						
	SCAMPED		Other income		4,050.		0.		STATEMENT 1
	涩		Total. Add lines 1 through 11	1	,804,995.		0.		
	5	13	Compensation of officers, directors, trustees, etc		129,500.		0.		129,500.
	(C)	14	Other employee salaries and wages		282,277.		0.		276,263.
ח	00	15	Pension plans, employee benefits		69,552.		0.		69,552.
<u> </u>	9	្ឋ 16a	Legal fees STMT 2	2	15,173.		0.		15,173.
~		16a b	Accounting fees STMT	₃	15,500.		0.		15,500.
 •		< C	Other professional fees STMT 4	1	680.		0.		850.
		17 18 19 20 21	Interest	<u> </u>				·	
\geq	3	18	Taxes		2 602				
_	1	19	Depreciation and depletion		3,603.		0.		
4	į	20	Occupancy		45,629.		0.		44,859.
4	, <	21	Travel, conferences, and meetings	-	45,625.		<u> </u>		44,035.
114470CI	1	22	Printing and publications Other expenses STMT	、 ├─	232,040.		0.		202,588.
	j	23	Total operating and administrative	' ├─	232,040.				202,300.
N		5 24 5	Total operating and administrative expenses. Add lines 13 through 23		793,954.		0.		754,285.
23		25	Contributions, gifts, grants paid		269,192.				388,093.
4			Total expenses and disbursements.						
V V			Add lines 24 and 25	1	,063,146.		0.		1,142,378.
		27	Subtract line 26 from line 12:						
		a	Excess of revenue over expenses and disbursements		741,849.				
		b	Net investment income (if negative, enter -0-)		·		0.	/	
		1 0	Adjusted net income (if negative, enter -0-)					N/A	l

823501 12-11-18 LHA For Paperwork Reduction Act Notice, see instructions.

Form **990-PF** (2018)

Б	→ art	Bàlance Sheets Attached schedules and amounts in the description	Beginning of year	End of	<u> </u>
	ai t	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	765,843.	1,450, <u>991.</u>	1,450,991.
	2	Savings and temporary cash investments			
		Accounts receivable ► 6,800.			
		Less: allowance for doubtful accounts	28,350.	6,800.	6,800.
	4	Pledges receivable ► 109,241.			
	•	Less: allowance for doubtful accounts	132,610.	109,241.	109,241.
	5	Grants receivable		•	
	-	Receivables due from officers, directors, trustees, and other			
	"	disqualified persons			
	၂ ,	Other notes and loans receivable			
	l	Less: allowance for doubtful accounts			
			2,857.	14,273.	14,273.
Assets	_	Inventories for sale or use	2,037.	14,2/3	14,213.
ISS		Prepaid expenses and deferred charges		-	
_		Investments - U.S. and state government obligations			
	1	Investments - corporate stock			
		Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			,
	l	Investments - mortgage loans			_ .
	13	Investments - other			
	14	Land, buildings, and equipment basis ► 45,417. Less accumulated depreciation ► 39,741.	0.070		
			9,279.	5,676.	5,676.
	15	Other assets (describe			
	16	Total assets (to be completed by all filers - see the		4 506 004	4 505 004
		instructions. Also, see page 1, item I)	938,939.	1,586,981.	1,586,981.
	17	Accounts payable and accrued expenses	64,718.	89,812.	
	18	Grants payable	265,113.	146,212.	
ý	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
abi	21	Mortgages and other notes payable			
=	22	Other liabilities (describe)			
	23	Total liabilities (add lines 17 through 22)	329,831.	236,024.	
		Foundations that follow SFAS 117, check here			
		and complete lines 24 through 26, and lines 30 and 31.			
es	24	Unrestricted	182,221.	889,893.	
ances	25	Temporarily restricted	426,887.	461,064.	
		Permanently restricted			
or Fund Ba		Foundations that do not follow SFAS 117, check here	"		
ᆵ		and complete lines 27 through 31.			
	27	Capital stock, trust principal, or current funds			
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund		<u> </u>	
Assets	29	Retained earnings, accumulated income, endowment, or other funds			
Net/	30	Total net assets or fund balances	609,108.	1,350,957.	
Z					
	31	Total liabilities and net assets/fund balances	938,939.	1,586,981.	
Ξ					
P	art	Analysis of Changes in Net Assets of Fund ba	iai ices		
1	Tota	net assets or fund balances at beginning of year - Part II, column (a), line 3	30		
•		st agree with end-of-year figure reported on prior year's return)	1	609,108.	
2	•	amount from Part I, line 27a	2	741,849.	
		r increases not included in line 2 (itemize) DONATED SERV	ICES REVENUE	3	72,588.
_		lines 1, 2, and 3		4	1,423,545.
		eases not included in line 2 (itemize) DONATED SERVICE	ES EXPENSE	5	72,588.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co		6	1,350,957.
Ť	. 5.0	7	· //		Form 990-PF (2018)

1,128,396.

1,142,378.

6

0.

7 Add lines 5 and 6

See the Part VI instructions.

6 Enter 1% of net investment income (1% of Part I, line 27b)

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.

8 Enter qualifying distributions from Part XII, line 4

	990-PF (2018) LIFE TIME FOUNDATION	03-05			Page 4	
	rt VI Excise Tax Based on Investment Income (Section 4940)		4948 - see	instruc	tions	<u>s)</u>
1a	Exempt operating foundations described in section 4940(d)(2), check here and ent	ter "N/A" on line 1.				1
	Date of ruling or determination letter: (attach copy of letter if nece					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here	X and enter 1%	1			0.
	of Part I, line 27b					1
С	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations, enter 4% of	of Part I, line 12, col. (b).				
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only; other	ers, enter -0-)	2			0.
	Add lines 1 and 2		3			0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only; oth	ers, enter -0-)	4			0.
	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	,	5			0.
	Credits/Payments:					
	2018 estimated tax payments and 2017 overpayment credited to 2018	6a C	.			
	Exempt foreign organizations - tax withheld at source					
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld	<u> </u>				
	•		7			<u> </u>
	Total credits and payments. Add lines 6a through 6d Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attact	had	8			0.
		nou .	9			0.
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed		10			
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	المدروا	<u> </u>			
	Enter the amount of line 10 to be: Credited to 2019 estimated tax To VII-A Statements Regarding Activities	Refunded	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legisla	tion or did it participate or interv			Yes	No
12	-	mon or the it participate of littery	3116 111	1a		X
	any political campaign?	and Con the inetrications for the di	faton		\rightarrow	X
D	Did it spend more than \$100 during the year (either directly or indirectly) for political purpose		minion	1b	\dashv	
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of	any materials published of				.
	distributed by the foundation in connection with the activities.					x
	Did the foundation file Form 1120-POL for this year?			1c	\rightarrow	
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the y					.
	(1) On the foundation. > \$ 0 . (2) On foundation managers.	· · · · · · · · · · · · · · · · · · ·	<u>. </u>		}	.
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditu	ire tax imposed on foundation				
	managers. ▶ \$ 0 .					
2	Has the foundation engaged in any activities that have not previously been reported to the IRS	57		2		<u> </u>
	If "Yes," attach a detailed description of the activities.				1	
3	Has the foundation made any changes, not previously reported to the IRS, in its governing ins	strument, articles of incorporation	ı, or			لي
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	•	/-	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?		N/A	4b		7.
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?			5		X
	If "Yes," attach the statement required by General Instruction T					
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied eith	er:				
	By language in the governing instrument, or					<u> </u>
	By state legislation that effectively amends the governing instrument so that no mandatory	directions that conflict with the s	ate law	. <u> </u>		
	remain in the governing instrument?			6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," comple	ete Part II, col. (c), and Part XV		7	Х	
8a	Enter the states to which the foundation reports or with which it is registered. See instruction	s. > SEE STAT	EMENT 6	_		l
				_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Atte	orney General (or designate)				
	of each state as required by General Instruction G? If "No," attach explanation			86	Х	
9	Is the foundation claiming status as a private operating foundation within the meaning of sect	aon 4942(j)(3) or 4942(j)(5) for c	alendar			J 2
	year 2018 or the tax year beginning in 2018? See the instructions for Part XIV. If "Yes," compl			9		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule			10		X
				Form 990)-PF	(2018)

1. Arrany time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(0)(13)? If "Yes," affacts checklids. See instructions 2. Did the foundation make a destribution to a door advised fund over which the foundation or a disqualified person had advisory privileges? If "Yes," affacts statement. See instructions 3. Did the foundation comply with the public impaction in requirements for its annual returns and sexemption application? 1. The books are in care of NATE MOSIN Telephone in Department of the control of the complex of the public impaction in requirements for its annual returns and sexemption application? 1. The books are in care of NATE MOSIN Telephone in Department of the control of the public interest received or accord during the year 20.0 C. CORPORTE PLACE, CHANHASSEN, MN Telephone in Department 25.3.3.7 15. Section 497(9)(1) nonexample charable trusts thing form 990-Pr in lieu of Form 1041 - check here and natire than amount of trave-emptine enter exceeped or accord during the year. 15. N/A Yes 16. All you time during calendary year 2016, do the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign ocusity? 16. All you time during calendary year 2016, do the foundation have an interest in or a signature or other authority over a bank, securities, or other financials account in a foreign ocusity? 16. All your financial calendary year 2016, do the foundation have an interest in or a signature or other authority over a bank, security 15. N/A Yes No Yes	Pa	art VII-A Statements Regarding Activities (continued)			
section 512(b) (13)? If Yes, attach schedule, See instructions 10 dit he foundation make a detribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If Yes, attach statement. See instructions 10 dit he foundation comply with the public inspection requirements for its annual returns and exemption application? Website address > HTTP: //WWW.ITFOUNDATION.ORG 11 The books are in care of NATE MOBIN Teliphone no. > 952-229-7228 To book a reason of NATE MOBIN Teliphone no. > 952-229-7228 Teliphone no. > 952-229-728 Teliphone no. > 952-229-7228 Teliphone no. > 952-229-728 Teliphone no. > 952-229-728 T				Yes	No
section 512(b) (13)? If Yes, attach schedule, See instructions 10 dit he foundation make a detribution to a donor advised fund over which the foundation or a disqualified person had advisory privileges? If Yes, attach statement. See instructions 10 dit he foundation comply with the public inspection requirements for its annual returns and exemption application? Website address > HTTP: //WWW.ITFOUNDATION.ORG 11 The books are in care of NATE MOBIN Teliphone no. > 952-229-7228 To book a reason of NATE MOBIN Teliphone no. > 952-229-7228 Teliphone no. > 952-229-728 Teliphone no. > 952-229-7228 Teliphone no. > 952-229-728 Teliphone no. > 952-229-728 T	11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			
12	••		11		x
It 'Yes,' attach statement. See instructions 12	4.0		 '''		
13 X	12	· · · · · · · · · · · · · · · · · · ·	1		₩.
Website address ► HTTP: //WWW.LTFOUNDATION.ORG 14 The books are in care of ► NATE MOEN Located at P ≥ 20 20 CORPORATE PLACE, CHANHASSEN, MN 70 20 20 20 CORPORATE PLACE, CHANHASSEN, MN 15 Section 4947(a)(1) nonexempt charatable trusts filing from 990 PF in like of Form 1041 - check here and eather the amount of tax-event prilesest received or accrued during the year 16 Al any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required FILE Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (oftent directly or indirectly); (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept th from)			-	v	
14 The books are in care of ▶ NATE MOEN Located at ▶ 29.02 CORPORATE DIACE, CHANHASSEN, MN 2P-4 ▶ 55.317 15 Section 4947(a)(1) nonexempt charatable trusts filing Form 990-PF in lieu of Form 1941 - check here and enter the amount of tax-esempt interest received or accrued during the year A securities, or other financial account in a foreign country? See the instructions for exceptions and filing regular events for FinCEN Form 1141. If 'Yes,' enter the name of the foreign country. Foreign country. File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly); (1) Engage in the sale or exchange, or beasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation (or, or pay or remibines the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person? (6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if trimmaling 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 53.494 (1(-)) or in a current notice regarding disaster assistance. See instructions Organizations religion on a current notice regarding disaster assistance? See instructions Organizations religion on a current notice regarding disaster assistance? See instructions Organizations religion on a current notice regarding disaster assistance? 2 Taxes on failure to distribute income (section 4942 (a)(2) (as each of 4942 (a)(2) (relating to incorrect valuation of assets)	13		13	Λ	l
Located at P 2902 CORPORATE PLACE, CHANHASSIN, MN Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in two of Form 1041 - check here and enter the amount of tax-exempt interest recoved or accrued during the year 16		Website address HTTP://www.LTFOUNDATION.ORG	^ =		
15 Section 4947(a)(1) nonexempt charitable triust filing Form 990-PF in lieu of Form 1041 - check here and enter the amount of tax-exempt interest received on accrued during the year. 8 At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? 9 See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 Dump the year, did the foundation (either directly or indirectly): (1) Engage in the Sale or exclange, or leasing of toperty with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnsh poods, services, or facilities to (or accept them from) a disqualified person? (4) Pey compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any incine or assists to a disqualified person or make any of either available for the benefit or use of a disqualified person? (6) Agree to pay money or property to a powerment official? (Exception. Check 'No' if the foundation argaed on make a grant to or to employ the official for a period after termination of government service, it forms day any to the exployer distribution of the day are in the size of the s	14			<u> </u>	
And enter the amount of tax-exempt interest received or accrued during the year A ray time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country? See the instructions for exceptions and filing requirements for finCEN Form 114. If "Yes," enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or remburse 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 (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the benefit or use of a disqualified person (or make any of either available for the person of the order of the person of the common of the person of the common of the person of the person of the person of the termination of government service, it terminating within 90 days.) b if any answer is "Yes" to 1(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations section 4942(a)(a) and a section 4942(a)(a)		Located at ► 2902 CORPORATE PLACE, CHANHASSEN, MN ZIP+4 ►55	317		
At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country. See the instructions for exceptions and filting requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country. Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a Dump the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or lessing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception, Check 'No" if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.) b If any answer is "se' to 141,164,6, did any of the acts fails to qualify under the exceptions described in Regulations section 53,494.1(6):3 or in a current notice regarding disaster assistance? See instructions Organizations relying on a current notice regarding disaster assistance, check here Oith the foundation engage in a prior year in any of the acts discribed in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2018? 1b Are there any years listed in 2s for which the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2018? 1c If Yes, "list the years" before 2018, did the foundation have any undistrib	15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - check here			\cdot
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country." ► Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies. 1a During the year, did the foundation (either directly or indirectly); (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburs 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) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person) (or make any of either available for the benefit or use of a disqualified person)? (6) Agree to pay money or property to a government official? (Exception. Check *No" if the foundation agreed to make a prant to or to employ the official for a period after termination of government service, if terminating within 90 dispose.) 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 (6)-3 or in a current notice regarding dissater assistance? See instructions Organizations relying on a current notice regarding dissater assistance? See instructions Organizations relying on a current notice regarding dissater assistance, check here before the first day of the tax year beginning in 2018? 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(a)(2) (relating foundation defined in section 4942(a)		and enter the amount of tax-exempt interest received or accrued during the year	N		
See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	16	At any time during calendar year 2018, did the foundation have an interest in or a signature or other authority over a bank,		Yes	No
Foreign country Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required		securities, or other financial account in a foreign country?	16		X
File Form 4720 if any item is checked in the "Yee" column, unless an exception applies. 1 a During the year, did the foundation (either directly or indirectly): (1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? (4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? (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 or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of either available for the benefit or use of a disqualified person or make any of the acception disaster assistance, check here 1		See the instructions for exceptions and filing requirements for FinCEN Form 114. If "Yes," enter the name of the			
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3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? b If "Yes," did it have excess business holdings in 2018 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine if the foundation had excess business holdings in 2018.) 4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? 4b 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 2018?		,			
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Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)	Form 990-PF (2018) LIFE TIME FOUNDATION			03-05331	92	Page 6
1) Carry on propagands, or otherwise attempt to influence tagsistation (see section 4945(e))? (2) Influence the outcome of any specific public election (see section 4935), or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, charitable, scenarici, literary, or educational purposes, or for the prevention of crailly to children or animals? (6) Provide for any purpose other than religious, charitable, scenarici, literary, or educational purposes, or for the prevention of crailly to children or animals? (6) If any any serve in Yes' to 54(1)-56, dut any or the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance, richeck here (a) If any any expert symp on a current notice regarding disaster assistance, richeck here (b) If an animal expenditure symp on a current notice regarding disaster assistance, richeck here (c) If an animal expenditure symposity of propriets and the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (a) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (a) If "es' to 56, lis Form 870. (b) If "es' to 56, lis Form 870. (c) Expenses of the foundation receive any proceeds or have any ret income attributable to the transaction? (b) If "es' to 56, lis Form 870. (c) Expenses of the foundation receive any proceeds or have any ret income attributable to the transaction? (a) Name and address of each employees guidence than \$5,000.00 in returnation or received proceeds or have any return or return to the pay of the pay	Part VII-B Statements Regarding Activities for Which F	orm 4720 May Be Re	equired (continu	ued)	12.2	
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a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If Yes to 6b, file form 8870. 7a At any time during the fax year, was the foundation a party to a prohibited tax sheller transaction? 8 Is the foundation subject to the section 4980 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation (In not paid, emter-0-) (a) Name and address (a) Name and address (b) Title, and average hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (In not paid, emter-0-) (d) Commensation (In not paid, emter-0-) (d) Commensation (In not paid, emter-0-) 2 Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE" (e) Expense address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (d) Commensation (In not paid, emter-0-) 2 (c) Compensation (In not paid, emter-0-) 2 (c) Compensation (In not paid, emter-0-) 3 (d) Commensation (In not paid, emter-0-) 4 (e) Expense (c) Compensation (In not paid, emter-0-) 4 (e) Expense (c) Compensation (In not paid, emter-0-) 4 (e) Expense (c) Compensation (In not paid, emter-0-) 4 (f) Commensation (In not paid, emter-0-) 5 (g) Name and address of each employee paid more than \$50,000 (b) Title, and average hours part employee (c) Compensation (In not paid, emter-0-) 4 (g) Name and address of each employee paid more than \$50,000 (b) Title, and average hours part employee (c) Compensation (In not paid, emter-0-) (c) Compensation (In not paid, emter-0-) (d) Commensation (In not paid, emter-0-) (d) Commensation (In not paid, emter-0-) (e) Compensation (In not paid, emter-0-) (e) Compensat		nav nremijims on				
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If "Yes" to 6b, file Form 8870. 7a At any time during the lax year, was the foundation a party to a prohibited tax shelter transaction? 8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year? Part VIII information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors 1 List all officers, directors, trustees, and foundation managers and their compensation. (a) Name and address (a) Name and address (b) Title, and average hours per week devoted hours per week devoted in position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 VALERIA LA ROSA - 2902 CORPORATE PLACE, CHANHASSEN, MN 55317 40.00 75, 660. 15, 288. 2, 100. (b) Title, and average hours per week devoted by the provided to position of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense hours per week devoted by position of the highest-paid employees paid more than \$50,000 (b) Title, and average hours per week devoted by position of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (c) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (d) Compensation of five highest-paid employees (other than those included on line 1). If none, enter "NONE." (e) Expense (c) Compensation of the highest-paid employees (other than those included on line 1). If none, enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average (c) Compensation of the highest-paid employees (other than those included on line 1). If non	•	ersonal benefit contract?			6b	Х
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Total number of other employees paid over \$50,000 ▶ 0	PLACE, CHANNASSEN, MN 3331/	40.00	24,021.	3,013.	- *	•••
Total number of other employees paid over \$50,000 ▶ 0						
	Total number of other employees paid over \$50,000				L	0

Form 990-PF (2018) LIFE TIME FOUNDATION		0533192 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundar Paid Employees, and Contractors (continued)	tion 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		
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis number of organizations and other beneficiaries served, conferences convened, research papers produced.	tical information such as the luced, etc.	Expenses
1 SEE STATEMENT A		
		407,000.
2 SEE STATEMENT A		
3		24,000.
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	lines 1 and 2.	Amount
1N/A		
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	>	0.
		Form 990-PF (2018)

Part	Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, s	ee instructions)
1 Fa	r market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Av	erage monthly fair market value of securities	1a	0.
b Av	erage of monthly cash balances	1b	947,221.
c Fa	r market value of all other assets	10	
d To	tal (add lines 1a, b, and c)	1d	947,221.
e Re	duction claimed for blockage or other factors reported on lines 1a and		
10	(attach detailed explanation) 1e 0.		
2 Ac	quisition indebtedness applicable to line 1 assets	2	0.
3 Su	btract line 2 from line 1d	3	947,221.
4 Ca	sh deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	14,208.
	t value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	933,013.
6 Mi	nimum investment return. Enter 5% of line 5	6	46,651.
Part	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and	id certain	
	foreign organizations, check here 🕨 🔃 and do not complete this part.)		
1 M	nimum investment return from Part X, line 6	1	46,651.
2a Ta	x on investment income for 2018 from Part VI, line 5		
b In	come tax for 2018. (This does not include the tax from Part VI.)	 	
c Ad	d lines 2a and 2b	2c	0.
3 Di	stributable amount before adjustments. Subtract line 2c from line 1	3	46,651.
4 Re	coveries of amounts treated as qualifying distributions	4	0.
5 Ac	d lines 3 and 4	5	46,651.
6 De	duction from distributable amount (see instructions)	6	0.
7 Di	stributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	46,651.
Parl	Qualifying Distributions (see instructions)		
1 Ar	nounts paid (including administrative expenses) to accomplish charitable, etc., purposes.	F	
-	penses, contributions, gifts, etc total from Part I, column (d), line 26	1a	1,142,378.
	ogram-related investments - total from Part IX-B	1b	0.
	nounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
	nounts set aside for specific charitable projects that satisfy the:	-	
	itability test (prior IRS approval required)	3a	
	sh distribution test (attach the required schedule)	3b	
	alifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4	1,142,378.
	undations that qualify under section 4940(e) for the reduced rate of tax on net investment		•
	come. Enter 1% of Part I, line 27b	5	0.
	ljusted qualifying distributions. Subtract line 5 from line 4	6	1,142,378.
	ite: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of		
,,,,	4940(e) reduction of tax in those years.		•

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2017	(c) 2017	(d) 2018
1 Distributable amount for 2018 from Part XI,	•			
line 7				46,651.
2 Undistributed income, if any, as of the end of 2018	:			
a Enter amount for 2017 only		<u>-</u> . <u></u>	0.	
b Total for prior years:		0.		
Evenes distributions correspond if any to 2018:		0.	-	
a From 2013 601, 529.				
4 4 5 5 6 6 7				
c From 2015 1,794,560.				
d From 2016 1,596,187.				
e From 2017 2,202,587.	7,360,248.			
f Total of lines 3a through e	7,300,240.			
4 Qualifying distributions for 2018 from				
Part XII, line 4: ► \$ 1,142,378.			0.	
a Applied to 2017, but not more than line 2a	·			
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	0			
(Election required - see instructions)	0.			46,651.
d Applied to 2018 distributable amount	1 005 707			40,031.
e Remaining amount distributed out of corpus	1,095,727.			0.
5 Excess distributions carryover applied to 2018 (If an amount appears in column (d), the same amount must be shown in column (a))	<u> </u>			
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	8,455,975.			
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 2017. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2018. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2019				0.
7 Amounts treated as distributions out of	-		-	
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2013				
not applied on line 5 or line 7	601,529.			
9 Excess distributions carryover to 2019.				
Subtract lines 7 and 8 from line 6a	7,854,446.			
10 Analysis of line 9:				
a Excess from 2014 b Excess from 2015 1,165,385. 1,794,560.				
c Excess from 2016 1,596,187.				
d Excess from 2017 2, 202, 587.				
e Excess from 2018 1,095,727.				
823581 12-11-18				Form 990-PF (2018)

Form 990-PF (2018) LIFE T3	ME FOUNDAT	ION		03-053	33192 Page 16
Part XIV Private Operating F	N/A				
1 a If the foundation has received a ruling	or determination letter th	at it is a private operating			
foundation, and the ruling is effective fo	or 2018, enter the date of	f the ruling	▶		
b Check box to indicate whether the foun	d <u>ation is a private operat</u>	ing foundation described		4942(j)(3) or 49	42(<u>J)(</u> 5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		
income from Part I or the minimum	(a) 2018	(b) 2017	(c) 2016	(d) 2015	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
e Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of					
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon:					
 a "Assots" 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		<u> </u>	· · · · · · · · · · · · · · · · · · ·		
2/3 of minimum investment return					
shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest,					
dividends, rents, payments on					
securities loans (section			İ		
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	1 (0 - 1	- 4 - 4 4 4	if the afternal of the se	h = d &E 000 or mor	- :
Part XV Supplementary Info			it the foundation	nad \$5,000 or mor	e in assets
at any time during	the year-see inst	ructions.)			
1 Information Regarding Foundation	-				
a List any managers of the foundation w			itributions received by the	e toundation before the close	ot any tax
year (but only if they have contributed	more than \$5,000). (See	section 507(d)(2).)			
NONE					
b List any managers of the foundation w			(or an equally large porti	on of the ownership of a par	tnership or
other entity) of which the foundation h	as a 10% or greater inter	est.			
NONE			-		
2 Information Regarding Contribut	tion, Grant, Gift, Loar	n, Scholarship, etc., P	rograms:		
Check here 🕨 🔲 if the foundation					sts for funds If
the foundation makes gifts, grants, etc.	, to individuals or organi	zations under other cond	itions, complete items 2a,	, b, c, and d.	
a The name, address, and telephone nun	ber or email address of	the person to whom appl	ications should be addres	sed;	
SEE STATEMENT 8					
b The form in which applications should	be submitted and inform	ation and materials they	should include:		
c Any submission deadlines:					<u></u>
d Any restrictions or limitations on aware	ds, such as by geographi	cal areas, charitable fields	s, kınds of institutions, or	other factors:	
•					

Form 990-PF (2018)

Part XV . Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to Foundation Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year CHEF ANN FOUNDATION NONE PC SCHOOL NUTRITION 5455 CONESTOGA COURT #150 BOULDER, CO 80301 180,319. NONE PC SCHOOL NUTRITION NAPA VALLEY EDUCATION FOUNDATION 2425 JEFFERSON STREET SUITE 103 BOULDER, CO 80301 15,000. ROSEVILLE CITY SCHOOL DISTRICT NONE GOV SCHOOL NUTRITION 400 DEREK PLACE, SUITE D ROSEVILLE, CA 95678 34,278. SCHOOL NUTRITION NOVATO UNIFIED SCHOOL DISTRICT NONE GOV 1320 LYNWOOD DRIVE 26,676. NOVATO, CA 94945 NONE GOV SCHOOL NUTRITION BOULDER VALLEY SCHOOL DISTRICT 6500 EAST ARAPAHOE ROAD BOULDER, CO 80301 51,570. SEE CONTINUATION SHEET(S) 388,093. ▶ 3a Total **b** Approved for future payment CHEF ANN FOUNDATION NONE РC CCHOOL NUTRITION 5455 CONESTOGA COURT #150 34,835. BOULDER, CO 80301 GOV SCHOOL NUTRITION ROSEVILLE CITY SCHOOL DISTRICT NONE 400 DEREK PLACE, SUITE D ROSEVILLE, CA 95678 11,378. SCHOOL NUTRITION GOV NORWOOD CITY SCHOOLS NONE 2132 WILLIAMS AVENUE 50,000. NORWOOD, OH 45212 SEE CONTINUATION SHEET(S) ► <u>3b</u> 146,213.

Total

Part XV Supplementary Information		_		
3 · Grants and Contributions Paid During the	(ear (Continuation)			
. Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	status of recipient	contribution	Amount
USTIN INDEPENDENT SCHOOL DISTRICT	NONE	gov	SCHOOL NUTRITION	
111 WEST 6TH STREET				
USTIN, TX 78703				30,25
EMPE ELEMENTARY	NONE	GOV	SCHOOL NUTRITION	
205 SOUTH RURAL ROAD	NONE	307	BEROOM NUTRITION	
EMPE, AZ 85282				50,00
<u> </u>				
				:
•				
		_		
			-	
	-			
			•]
-				
Total from continuation sheets				80,2

LIFE TIME FOUNDATION

Supplementary Information Part XV 3 · Grants and Contributions Approved for Future Payment (Continuation) If recipient is an individual, Recipient Foundation status of recipient Purpose of grant or contribution show any relationship to any foundation manager or substantial contributor Amount Name and address (home or business) NONE GOV SCHOOL NUTRITION FRIDLEY PUBLIC SCHOOLS 6000 WEST MOORE LAKE DRIVE 50,000. FRIDLEY, MN 55432 50,000. Total from continuation sheets

[Part]XVI-A Analysis of Income-Producing Activities

nter gross amounts unless otherwise indicated.	Unrelat	ed business income		ded by section 512, 513, or 514	(e)
•	(a) Business code	(b) Amount	(C) Exclu- sion code	(d) Amount	Related or exempt function income
1 Program service revenue:	Code		1000		
a	-		++		
b	•		 		
	-		1 1		
d	-		†		-
f	·				
g Fees and contracts from government agencies	-				
2 Membership dues and assessments		-			
Interest on savings and temporary cash					
investments					
4 Dividends and interest from securities					
5 Net rental income or (loss) from real estate:					
a Debt-financed property					
b Not debt-financed property					
6 Net rental income or (loss) from personal	- [
property		- <u>.</u>			
7 Other investment income			$oxed{oxed}$		
B Gain or (loss) from sales of assets other					
than inventory			\bot		
9 Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory			\bot		
1 Other revenue:				4 050	
a BRACELET SALES	-		01	4,050.	
b	-		+-+		
c			+		
d	-	<u></u> .,	+		
e	-	0.		4,050.	0.
2 Subtotal. Add columns (b), (d), and (e)		0.		13	
3 Total. Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.)				18 <u>—</u>	
	to the Asse		omnt.	Durnaga	· · · · · · · · · · · · · · · · · · ·
Relationship of Activities	to the Acct	implishment of Ex	empt	Purposes	
Line No. Explain below how each activity for which inc	ome is reported	ın column (e) of Part XVI-A	A contrib	uted importantly to the accom	plishment of
the foundation's exempt purposes (other than	n by providing fu	nds for such purposes).			
				· ··	
					·
				<u> </u>	
					
				·	

		<u> </u>			
		<u></u>		·	
		······································			
					
23621 12-11-18					Form 990-PF (2018

Form 990	-PF (2018) LIFE	TIME FOU	NDATION				03-053	3192	Pa	age 13
Part >		egarding Tra		nd Transactions ar	nd Relation	ships Wit				<u> </u>
1 Did	the organization directly or indi		ny of the followin	o with any other organization	on described in s	ection 501(c)	1	1. ,	Yes	No
	er than section 501(c)(3) organ	-	=	-	,,, 0000,,000 ,,, 0	000000000000	•	' '		
,	isfers from the reporting found	•	-							•
	Cash			•				1a(1)		Х
	Other assets							1a(2)		Х
b Othe	er transactions:							٠.	,	
(1)	Sales of assets to a noncharita	ble exempt organi	zation					1b(1)		Х
(2)	Purchases of assets from a no				1b(2)	I	Х			
(3)	Rental of facilities, equipment,	or other assets						1b(3)		Х
(4)	Reimbursement arrangements							1b(4)		Х
(5)	Loans or loan guarantees							15(5)		Х
(6)	Performance of services or me	mbership or fundi	raising solicitatio	ns				1b(6)		Х
c Sha	ring of facilities, equipment, ma	iling lists, other as	ssets, or paid em	ployees				1c		X
	e answer to any of the above is								ets,	
	ervices given by the reporting f			ed less than fair market valu	e in any transact	tion or sharin	g arrangement, sl	now in		
colu	mn (d) the value of the goods,									
(a) Line no	(b) Amount involved	(c) Name		e exempt organization	(d) Descrip	otion of transfer	s, transactions, and s	haring arri	engemer	nts
	<u> </u>		N/A							
										
	 	 	<u> </u>							
	 	 -			- 					
				<u></u>	 					
						· · · · · · · · · · · · · · · · · · ·				
	 			 ,						
										
					1					
2a ls th	e foundation directly or indirec	tly affiliated with (or related to, one	or more tax-exempt organi	zations describei	 d	··			
	ection 501(c) (other than sectio	,	•	or more tan energe or gam.		-		Yes	X	No
	es," complete the following sch									,
	(a) Name of org			(b) Type of organization		(c) Descr	ption of relations	hip		
	N/A									
					ł					
	Under penalties of perjury, I declare t						Ma	y the IRS o	discuss t	his
Sign	and belief, ristue, correct, and com	Ipiete Declaration of	preparen (omerman 7	A LA LA LA	ION OF WHICH prepar	a nas any knov	retu	urn with the	e prepare	er
Here	simula	Suor		7115/20101	PEN	waive	DY action [X Yes	;	No
	Signature of officer or trustee			Date	Title					
	Print/Type preparer's na	ıme	Preparer's si	gnature	Date	Check	if PTIN			

Preparer's signature Date Check self- employed 9/5/19 P01673858 Firm's name ▶ DELOITTE TAX LLP Firm's EIN ▶ 86-1065772 Firm's address ▶ 50 SOUTH SIXTH STREET MINNEAPOLIS, MN 55402 Phone no 612-397-4000

Form **990-PF** (2018)

Paid

Preparer

Use Only

CHRISTINA GAST

DESCRIPTION	FORM 990-PF	OTHER	INCOME		STATEMENT 1
TOTAL TO FORM 990-PF, PART I, LINE 11	DESCRIPTION		REVENUE	NET INVEST-	(C) ADJUSTED NET INCOME
DESCRIPTION	BRACELET SALES		4,050.	0.	
(A) (B) (C) (D)	TOTAL TO FORM 990-PF, PART I,	LINE 11 =	4,050.	0.	
DESCRIPTION EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO LEGAL FEES 15,173. 0. 15, TO FM 990-PF, PG 1, LN 16A 15,173. 0. 15, TO FM 990-PF ACCOUNTING FEES STATEMENT ADJUSTED CHARIT. PER BOOKS MENT INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO ACCOUNTING FEES 15,500. 0. 15, TO FORM 990-PF, PG 1, LN 16B 15,500. 0. 15, FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (C) (D) 15, (D) CHARIT. PURPO FORM 990-PF	LEGA	L FEES	-	STATEMENT 2	
TO FM 990-PF, PG 1, LN 16A 15,173. 0. 15, FORM 990-PF ACCOUNTING FEES STATEMENT (A) (B) (C) (D) ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO ACCOUNTING FEES 15,500. 0. 15, TO FORM 990-PF, PG 1, LN 16B 15,500. 0. 15, FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO TEMPORARY HELP CONTRACTS 390. 0. OTHER PROFESSIONAL FEES 290. 0.	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
FORM 990-PF ACCOUNTING FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME ACCOUNTING FEES 15,500. 0. 15, TO FORM 990-PF, PG 1, LN 16B 15,500. OTHER PROFESSIONAL FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT. (B) (C) (D) ACCOUNTING FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME PURPO TEMPORARY HELP CONTRACTS 390. OTHER PROFESSIONAL FEES 290. OTHER PROFESSIONAL FEES	LEGAL FEES	15,173	0	•	15,173.
FORM 990-PF ACCOUNTING FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT NET INCOME PURPO ACCOUNTING FEES 15,500. 0. 15, TO FORM 990-PF, PG 1, LN 16B 15,500. OTHER PROFESSIONAL FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT (B) (C) (D) ACCOUNTING FEES STATEMENT (A) EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME PURPO TEMPORARY HELP CONTRACTS 390. OTHER PROFESSIONAL FEES 290. OTHER PROFESSIONAL FEES	TO FM 990-PF, PG 1, LN 16A	15,173	0	•	15,173.
ACCOUNTING FEES 15,500. 0. 15, TO FORM 990-PF, PG 1, LN 16B 15,500. 0. 15, FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO TEMPORARY HELP CONTRACTS 390. 0. OTHER PROFESSIONAL FEES 290. 0.		(A) EXPENSES	(B) NET INVEST-	ADJUSTED	(D) CHARITABLE
TO FORM 990-PF, PG 1, LN 16B 15,500. 0. 15, FORM 990-PF OTHER PROFESSIONAL FEES STATEMENT (A) (B) (C) (D) EXPENSES NET INVEST- ADJUSTED CHARIT. PER BOOKS MENT INCOME NET INCOME PURPO TEMPORARY HELP CONTRACTS 390. 0. OTHER PROFESSIONAL FEES 290. 0.				_	15,500.
DESCRIPTION (A) EXPENSES NET INVEST- ADJUSTED CHARIT PER BOOKS MENT INCOME PURPO TEMPORARY HELP CONTRACTS OTHER PROFESSIONAL FEES (B) (C) CHARIT OTHER PROFESSIONAL (B) (C) ADJUSTED CHARIT OTHER PROFESSIONAL OTHER PROFESSIONAL (B) (C) OTHER PROFESSIONAL OTHER PROFESSIONAL (D) OTHER PROFESSIONAL OTHER PROFES	-			•	15,500.
DESCRIPTION PER BOOKS MENT INCOME TEMPORARY HELP CONTRACTS OTHER PROFESSIONAL FEES DESCRIPTION PER BOOKS MENT INCOME NET INVEST- NET	FORM 990-PF C	THER PROFE	SSIONAL FEES		STATEMENT 4
OTHER PROFESSIONAL FEES 290. 0.	DESCRIPTION	EXPENSES	NET INVEST-	ADJUSTED	CHARITABLE
TO FORM 990-DE DG 1 IN 16C 680 0					560. 290.
TO FORM 330-FF, FG I, DN IOC 000.	TO FORM 990-PF, PG 1, LN 16C	680	0.	•	850.

FORM 990-PF	OTHER EXPENSES		STATEMENT 5	
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
CREDIT CARD FEES	3,936.	0.		3,936.
BANK FEES	2,920.	0.		2,959.
ANNUAL FILING FEES	5,741.	0.		5,741.
IT SUPPORT	23,082.	0.		22,950.
SUPPLIES	996.	0.		987.
POSTAGE & SHIPPING	1,913.	0.		1,630.
MARKETING	65,307.	0.		35,520.
FUNDRAISING	55,441.	0.		67,906.
BAD DEBTS	10,973.	0.		0.
APPRECIATION GIFTS	2,141.	Ů.		2,141.
LIFE TIME LIFTS	24,000.	0.		24,000.
NUTRITION LITERACY	19,000.	0.		19,000.
LOGO ITEMS	14,970.	0.		14,198.
COST OF GOODS SOLD	1,620.	0.		1,620.
TO FORM 990-PF, PG 1, LN 23	232,040.	0.		202,588.

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

STATES

AL, CA, CO, CT, FL, GA, IN, IA, KS, MD, MI, MN, NC, NE, NJ, NY, NV, TN, OK, VA, AK, OH, IL, PA, WAUT, GA, TX, MO, AZ

	LIST OF OFFICERS, DAND FOUNDATION MANAGE		STATI	EMENT 7
NAME AND ADDRESS	TITLE AND AVRG HRS/WK	COMPEN- SATION	EMPLOYEE BEN PLAN CONTRIB	
BAHRAM AKRADI 2902 CORPORATE PLACE CHANHASSEN, MN 55317	CHAIR, PRES, AI 1.00	ND DIRECTOR 0.	0.	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 Ó.	0.	0.
BARBARA KOCH 2902 CORPORATE PLACE CHANHASSEN, MN 55317	EXECUTIVE DIRE	CTOR 129,500.	5,032.	2,100.
EMILY AKRADI 2902 CORPORATE PLACE CHANHASSEN, MN 55317	DIRECTOR 0.50	0.	0.	0.
TAMT 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	129,500.	5,032.	2,100.

03-0533192

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 FITNESS FOUNDATION 2902 CORPORATE PLACE CHANHASSEN, MN 55317

TELEPHONE NUMBER

952-229-7226

FORM AND CONTENT OF APPLICATIONS

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

ANY SUBMISSION DEADLINES

N/A

RESTRICTIONS AND LIMITATIONS ON AWARDS

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

Employer identification number Name of the organization 03-0533192 LIFE TIME FOUNDATION

Organization type (check one)					
Filers of:	Section:				
Form 990 or 990-EZ	501(c)() (enter number) organization				
	4947(a)(1) nonexempt charitable trust not treated as a private foundation				
	527 political organization				
Form 990-PF	X 5U1(c)(3) exempt private foundation				
	4947(a)(1) nonexempt charitable trust treated as a private foundation				
	501(c)(3) taxable private foundation				
• •	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule See instructions				
General Rule					
_ ,	n filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or 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 (entering "N/A" in column (b) instead of the contributor name and address), 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.					
but it must answer "No" on	nat isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990, 990-EZ, or 990-PF), 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 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) (2018)

Employer identification number

LIFE TIME FOUNDATION

Partil	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	\$ <u>799,697.</u>	Person X Payroli
(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	\$ 95,662.	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
3	BAHRAM AKRADI 4300 OAK ROAD MINNETRISTA, MN 55331	\$ <u>164,926.</u>	Person X Payroll
(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	\$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
5	MICHAEL & BRITTANY REGER FAMILY FOUNDATION 426 FERNDALE ROAD SOUTH \ WAYZATA, MN 55391	\$ 24,500.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	JAMES SPOLAR 5033 DUNKIRK PLACE NORTH PLYMOUTH, MN 55446	\$ 6,126.	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
7	POHLAD FAMILY FUND 60 SOUTH SIXTH STREET, SUITE 3900 MINNEAPOLIS, MN 55402	\$ <u>15,000.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8	STEPHEN ROWLAND 15709 EXCELSIOR BOULEVARD MINNETONKA, MN 55345	\$5,203.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
9	JCOSLET & JROSNER COMMUNITY PROPERTY TRUST 301 COMMERCE STREET, SUITE 3150 FORT WORTH, TX 76102	s12,000.	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
10	ARTHUR COPPOLA 401 WILSHIRE BOULEVARD, SUITE 700 SANTA MONICA, CA 90401	\$5,155.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
11	NAZIE EFTEKHARI 7201 WEST 78TH STREET MINNEAPOLIS, MN 55439	\$ <u>29,300.</u>	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
12	MICHAEL & BRITTANY REGER 426 FERNDALE ROAD SOUTH WAYZATA, MN 55391	\$	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

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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
13	TOM & ANGIE WICKA 4904 MERILANE AVENUE EDINA, MN 55436	\$\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
14_	FRAYDUN FOUNDATION, INC. 18 EAST 50TH STREET, 10TH FLOOR NEW YORK, NY 10022	\$50,000.	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
15	ROE FOUNDATION, INC. 46 WESTCHESTER AVENUE POUND RIDGE, NY 10576	\$50,000.	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
16	O'SHAUGHNESSY HOLDING COMPANY, LLC. 6423 CITY WEST PARKWAY EDEN PRAIRIE, MN 55344	\$50,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
17	DAVID E. & JACQUELINE S. SIMON CHARITABLE FOUNDATION PO BOX 78394 INDIANAPOLIS, IN 46278	\$ <u>20,000.</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
18	JONATHAN & SHERYL SOKOLOFF 201 BARODA DRIVE LOS ANGELES, CA 90077	\$10,000.	Person X Payroll

Employer identification number

LIFE TIME FOUNDATION

Parti 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
19	FIFTH GENERATION, INC. 625 WEST DIVISION, UNIT 1402 CHICAGO, IL 60610	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
20	MR. AND MRS. DAVID A. LANDAU 9 COLONIAL ROAD WHITE PLAINS, NY 10605	\$9,800.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(ત) Type of contribution
21	MARTY AND ANNE DAVIS 26310 BIRCH BLUFF ROAD SHOREWOOD, MN 55331	\$ <u>50,257.</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
22	JACOB TRIMBLE 11257 OAK RIDGE CIRCLE NORTH CHAMPLIN, MN 55316	\$ 6,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
23	HOSSEIN & KAZIM MUMTAZ ALIABADI 12 MERILANE AVENUE EDINA, MN 55436	\$9,800.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
24	DANHAKL FAMILY FOUNDATION 11111 SANTA MONICA BOULEVARD, STE 2000 LOS ANGELOS, CA 90025	\$98,000.	Person X Payroll

Employer identification number

LIFE TIME FOUNDATION

Pattl	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	THOMAS BERGMANN 3782 WOODLAND COVE PARKWAY MINNETRISTA, MN 55331	\$6,200.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
26	JASON THUNSTROM 3964 HOLASEK PATH CHASKA, MN 55318	\$6,409.	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	JOHN DANHAKL 17717 CALLE DE PALERMO PACIFIC PALISADES, CA 90272	\$5,260.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
28	GALASHAN FAMILY CHARITABLE FUND 100 FEDERAL STREET BOSTON, MA 02110	\$ 9,800.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
29	NAZEE AND JOSEPH MOINIAN FOUNDATION 3 COLUMBUS CIRCLE, 23RD FLOOR NEW YORK, NY 10019	s10,000.	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
30	MIDWAY FOUNDATION 800 TOWN & COUNTRY BLVD, STE 200 HOUSTON, TX 77024	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Employer identification number

LIFE TIME FOUNDATION

Part II	Noncash Property (see instructions). Use duplicate copies of Part II if	additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_	PARKING SPACES, SPA PRODUCTS, AND MISCELLANEOUS GOODS	•	
		-	
		\$ 95,662.	VARIOUS
(a)	/I->	(c)	(d)
No. from	(b) Description of noncash property given	FMV (or estimate) (See instructions)	Date received
Part I		(coo mendonano)	
		-	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions.)	 :
		-	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate) (See instructions)	(d) Date received
Part I		(Occ matacions)	
		-	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
		-	
		\$	
(a)		(c)	
No. from	(b) Description of noncash property given	FMV (or estimate)	(d) Date received
Part I		(See instructions)	
		[
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	rganization	···	Employer identification number		
LIFE :	FIME FOUNDATION		03-0533192		
Part III		through (e) and the following line entry F charitable, etc., contributions of \$1,000 or less	n 501(c)(7), (8), or (10) that total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift (c) Use of gift		t (d) Description of how gift is held		
ļ	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
-	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
<u>.</u>					
	(e) Transfer of gift				
	Transferee's name, address, an	Relationship of transferor to transferee			
(a) No.					
from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(a) Transfer of gift			
	(e) Transfer of gift				
}	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee		