Form **990-PF** 

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

2018

Department of the Treasury Internal Revenue Service ► 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.

Open to Public inspection

For ca	enda	r year 2018 or ta	x year beginning				, and ending	,		
TTEE	CTV	יב טבאויים מ	RESEARCH CO	ים סר	די גל כור	TON		Α	Employer identification null 43-1475084	mber
		OMOOR DRIVE		IKFC	JKAI	ION	•	В	Telephone number (see ins	tructions)
		IS, MO 6313						<u></u>	(314) 997-60	79
								c	If exemption application is	pending, check here -
G Ch	eck al	I that apply	Initial return	7	Initia	al return of a form	ner public charity			. "
C. Oil	cen ai	, that apply	Final return		4	ended return	nor public originity	B	1 Foreign organizations, chec	ck here
			Address change	. [	Nam	ne change	1		2 Foreign organizations meet	
H Ch		pe of organization				exempt private f		1	here and attach computation	on
			nonexempt charitat			<u> </u>		Ε	If private foundation status under section 507(b)(1)(A)	
		t value of all assets a II, column (c), line 1				g method X C	ash Accrual		under section 307(b)(1)(A)	), Check here
(110 ► §						specify) nn (d) must be or	cach hacie	F	If the foundation is in a 60 under section 507(b)(1)(B)	
· · · · · ·		nalysis of Re		101,0	coran	iii (d) iiidat be oi	( casii basis )	<u> </u>	under section sor(b)(1)(b)	
110 3001 471	E:	xpenses (The	total of amounts in	- 1		Revenue and	(b) Net investme	nt	(c) Adjusted net	(d) Disbursements for charitable
		lumns (b), (c), a cessarily equal t			expe	nses per books	ıncome		income	purposes (cash basis only)
		lumn (a) (see inst	ructions))							(cash basis offly)
<b>,</b>	1		i, etc , received (attach schedule)	Ĺ	****	OF CARLON DUBLES OF SERVICE				
¥	2	Check ► X if the four	ndation is not required to attach S	Sch B	J'SHEL	reservation of	Data Parting	Tie Con		A COM TO THE STATE OF THE STATE
^	3	Interest on savings and ter	mporary cash investments			12.		12.	; 12.	
	4	Dividends and interest from	m securities			8,845.	8,84	15.	8,845.	Mark Selection and the selecti
•		Gross rents Net rental income		2.	-4-1600 vs	1. (Feb 5. 1.184) \$ 186. F. B. Speck. 1.4	es, a ram, transcript as a reserve	- 14.F	ENGLAGE CERC, SET NEGLEGISCHE CORE	
ø		or (loss)	le of courte not on line 10	(5)	rier.	-133.		なながら		
Ž		Net gain or (loss) from sal Gross sales price for		a 🖫	No.	-133. 			PROPERTY AND	
Revenue	7	assets on tine 6a Capital gain net inco	me (from Part IV, line 2)	<u>フ・ドゥ</u>	11/97 E		" 26 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0.		
<u> </u>	8	Net short term capita	•	K		135 (B) (B) (B) (B) (B)	2000年		0.	
	9	Income modifications	s '	S.	£3°00		家的多点。 新聞	上海的	P. Col. Sec. M. Jan. Sec.	1000年以外的1000年
	10 a	Gross sales less returns and allowances	•	3						
	ľ b	Less Cost of		2		******		2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
, 1	۰	goods sold Gross profit or (loss) (atta	ch schedule)	180	is " All" o	ACTORD TO A CONTROL SANS		100	Language sections and the control of the	
•	11	Other income (attach	schedule)	-			P. Salde L. Galler, Bree & Survey, Middle L. C.	A.265* A		
•							,			
	12	Total. Add lines 1 t				8,724.	8,85	<u> 7.</u>	8,857.	WAY WELL WAY TO THE STATE OF
	13	Other employee sala	cers, directors, trustees, e gries and wages	-		<u> </u>	· · ·			
	15	Pension plans, emple	-				,			
enses	16 a	Legal fees (attach so							· · · · · · · · · · · · · · · · · · ·	
Den	b	Accounting fees (atta	ach sch) See St	1		730.	7	13.		657.
Ĕ		Other professional fees (a	ttach sch)	Ļ						
ĕ	17	Interest.  Taxes (attach scheduleXse	senstral See Stm	2		241		1 4		217
Ę,	18   19	Depreciation (attach	RECEIVE		$\exists$	241.		24.		217.
<u> </u>		schedule) and deplet		<u>:                                    </u>	70	428.	42	28.		
	20	Occupancy	NOV-1 0 201	n	181					
Ž.	21 22	Travel, conference.	and Neligibles 1 8 201	ן פו	<b>RS-OS</b> (					<del></del>
	23		ch-schedule)		생					
r opedatile ញាប្បក្សពុម៉ាកែនិច្រាះive Exp		Ö Ls	eOStatement	13_		2,178.	21	8.		1,960.
	24	Total operating and expenses. Add lines				2 [77	77	12		
(a)	25	Contributions, gifts, grants		v		3,577. 4,000.	/ 4 (5)(10)	13.		2,834. 4,000.
o_v	26	Total expenses and		-		4,000.	Technical and the second second second	r17-1790	Proceed of the Action of the School Straight Straight	4,000.
		Add lines 24 and 25				7,577.	74	13.	0.	6,834.
2020	27	Subtract line 26 from		13						32.75 EAST \$2.78
ĕ	a	Excess of revenue o	ver expenses			1,147.				
	b	$\sim$	me (if negative, enter -0-)	(9) (c)	<b>经</b>		8,11		En 19,4% 25,4% 25,4% 25,6%	
	c	Adjusted net income	e (if negative, enter -0-)	) i	CK M	STECKTON ST	ではなる数で発生		8,857.	GATATATATATATATA

Page 2

<u> </u>	. 11	Dalamaa Chaata	Attached schedules and amounts in the description	Beginning of year	End o	of year
Par	t II	Balance Sheets	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			
•	2	Savings and tempor	ary cash investments	4,778.	5,118.	5,118.
	3	Accounts receivable	<b></b>			
	Ì	Less allowance for	doubtful accounts >			
	4	Pledges receivable				
		Less allowance for	doubtful accounts			
	5	Grants receivable		<b></b>		
	6	disqualified persons (attac	cers, directors, trustees, and other ch schedule) (see instructions)			
	7	Other notes and loans rec	`			
	_	Less allowance for		ļļ.		
Assets	8	Inventories for sale				<del></del>
As	9	Prepaid expenses ar	<del>-</del>			
		obligations (attach s	•	127 502	122 222	104 000
	I -	Investments — corporate	· ·	137,593.	138,828.	124,223.
	l '	: Investments — corporate	· ·			
	11	equipment basis.	· · · · · · · · · · · · · · · · · · ·			
	ı	Less, accumulated depreci (attach schedule)	<b></b>			
	. –	Investments – morto				
	13	Investments – other	,			
	14	Land, buildings, and	equipment basis8,019.			
		Less: accumulated deprec (attach schedule)		1,067.	639.	639.
			be See Statement 5) completed by all filers —	1.	1.	
	'0	see the instructions	Also, see page 1, item I)	143,439.	144,586.	129,980.
	17	Accounts payable an	nd accrued expenses			
<b>'</b>	18	Grants payable				
ţį	19	Deferred revenue				
iabilities	20	Loans from officers, direct	ors, trustees, & other disqualified persons			
Ë	21	Mortgages and other notes	• • • • • • • • • • • • • • • • • • • •			
	22	Other liabilities (desc	cribe)			
	23	Total liabilities (add	lines 17 through 22)	0.	0.	
ses		Foundations that fol	low SFAS 117, check here 24 through 26, and lines 30 and 31.			
anc	24	Unrestricted				
3al;	25	Temporarily restricte	d		· · · · · · · · · · · · · · · · · · ·	
P P	26	Permanently restricted	ed			
Net Assets or Fund Balance		Foundations that do and complete lines 2	not follow SFAS 117, check here >X 27 through 31.			
0.0	27	Capital stock, trust p	rincipal, or current funds	143,439.	144,586.	·
ets	28	Paid-in or capital surplus,	or land, bldg, and equipment fund			
155	29	Retained earnings, accumu	lated income, endowment, or other funds			
it /	30		und balances (see instructions)	143,439.	144,586.	
	31	(see instructions)	net assets/fund balances	143,439.	144,586.	
Part	:        7	Analysis of Chan	ges in Net Assets or Fund Balance	es		
1	Total end-c	net assets or fund ba of-year figure reported	alances at beginning of year – Part II, colu d on prior year's return)	mn (a), line 30 (must ag	ree with	143,439.
2	Enter	r amount from Part I,	line 27a		2	1,147.
3	Other	increases not included in lir	ne 2 (itemize)		3	
4	Add I	lines 1, 2, and 3			4	144,586.
		ises not included in line 2 (		<b></b>	5	
6	Total	net assets or fund ba	alances at end of year (line 4 minus line 5)	- Part II, column (b), lir	ne 30 <b>6</b>	144,586.

Pa		Losses for Tax on Investme				
		the kind(s) of property sold (for examparehouse, or common stock, 200 st		(b) How acquired P — Purchase D — Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
1	See Statement 6					
	b					
	<u>c                                      </u>		<del></del>		<del> </del>	
	<u>d</u>	<del></del>				
	e	(f) Depreciation allowed	(g) Cost or other ba	<u></u>	(h) Gain or	(loss)
	(e) Gross sales price	(or allowable)	plus expense of sa		((e) plus (f) m	
	<u>a</u>		<del></del>			
	<u> </u>		<del></del>		<del></del>	
	c d					
	<u></u>				<del></del>	
	<del></del>	g gain in column (h) and owned by the	e foundation on 12/31/69		(I) Gains (Col.	(h)
	(i) FMV as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any		gain minus col (k), b nan -0-) <b>or</b> Losses (fi	ut not less
	_ <del></del>				<del></del>	
- 1	<u> </u>					
	d					
	e					
2	Capital gain net income or (ne	et capital loss) $ - \begin{bmatrix} If \ gain, \ also \\ If \ (loss), \ en \end{bmatrix} $	enter in Part I, line 7 ter -0- in Part I, line 7	2		-133.
3	Net short-term capital gain or	(loss) as defined in sections 1222(5	i) and (6)			
	If gain, also enter in Part I, lin in Part I, line 8	e 8, column (c) See instructions If	(loss), enter -0-	. 3		-4.
Pai	t V Qualification Unde	r Section 4940(e) for Reduce	d Tax on Net Investm	ent Income	)	
(For	optional use by domestic private f	oundations subject to the section 4940	(a) tax on net investment inc	come.)	N/A	
lf se	ction 4940(d)(2) applies, leave t	this part blank				
		·			<b>-</b>	<b>.</b>
		ction 4942 tax on the distributable a	• •	ase period?	Yes	∐ No
1 1		fy under section 4940(e) Do not co each column for each year, see the in:	1	ontrios		
	(a)	(b)	(c)	entries	(d)	
	Base period years Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of noncharitable-use ass	sets	Distribution (col (b) divided	
	2017					
	2016				<del></del>	
	2015		<del> </del>			
	2014	<del>                                     </del>				
	2013	L			1	
2	Total of line 1, column (d).			2		
3	Average distribution ratio for the number of years the foundation	5-year base period – divide the total on has been in existence if less than	on line 2 by 5 0, or by the 5 years.	3		
4	Enter the net value of nonchar	ntable-use assets for 2018 from Par	t X, line 5	4		
5	Multiply line 4 by line 3			5		
6	Enter 1% of net investment inc	come (1% of Part I, line 27b)		6		
7	Add lines 5 and 6			7		<del></del>
8	Enter qualifying distributions fr	om Part XII, line 4		8		
	If line 8 is equal to or greater that Part VI instructions	n line 7, check the box in Part VI, line	1b, and complete that part u	ısıng a 1% tax ı	ate See the	

	990-PF (2018) LIFESTYLE HEALTH & RESEARCH CORPORATION 43-147			Pa	ige 4
	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see inst	ruction	<u>s)</u>		
1 :	Exempt operating foundations described in section 4940(d)(2), check here	_			
	Date of ruling or determination letter (attach copy of letter if necessary — see instructions)	1			
- (	Domestic foundations that meet the section 4940(e) requirements in Part V,			1	62.
	check here ► and enter 1% of Part I, line 27b	1			]
•	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)		<del></del>		
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)				0.
4	Add lines 1 and 2	+			62.
A	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only, others, enter -0-)	+			0.
=	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	+-			<u>62.</u>
2	Credits/Payments	+			02.
•	2018 estimated tax pmts and 2017 overpayment credited to 2018				
		İ			. ]
	Exempt foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source  The part of the foreign organizations — tax withheld at source — tax withheld a	İ			·
	Tax paid with application for extension of time to file (Form 8868)				ľ
	Backup withholding erroneously withheld  6d	_			
7	Total credits and payments Add lines 6a through 6d	<del> </del>			0.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here	<del> </del>			
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed See Statement 7	<del>                                     </del>		1	<u>62.</u>
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid				
_11_	Enter the amount of line 10 to be Credited to 2019 estimated tax  Refunded 11				
Par	t VII-A Statements Regarding Activities				
1 a	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?	ļ	1 a	Yes	No_X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes? See the instructions for the definition		1 b		X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities				
,	Did the foundation file Form 1120-POL for this year?		1 c		X
ì	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	ŀ		-+	
	(1) On the foundation ►\$ 0. (2) On foundation managers ►\$	0.			- 1
€	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on				1
	foundation managers   \$		_	.	
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	ļ	2		Χ
	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	Ì	3		<del>ا</del>
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	}		<del></del>	<u>X</u> _
• •		- }	4a		<u>X</u> _
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	ļ	4 b	_N/	
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		.	-	j
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either  • By language in the governing instrument, or				
	<ul> <li>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?</li> </ul>		6		<u> </u>
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	Х	
8 a	Enter the states to which the foundation reports or with which it is registered. See instructions	[		•	
	MO			l	.∤
t	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 <i>General Instruction G</i> ? If 'No,' attach explanation		8 b	X	 
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494 for calendar year 2018 or the tax year beginning in 2018? See the instructions for Part XIV If 'Yes,' complete Par	2()(5) t XIV	9		$\overline{\mathbf{x}}$
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses		10	7	
BAA		— For	rm <b>990-F</b>	PF (20	18)
			•	,	-,

Par	t VII-A	Statements Regarding Activities (continued)				
11	At any tir within the	me during the year, did the foundation, directly or indirectly, own a controlled entity e meaning of section 512(b)(13)? If 'Yes,' attach schedule See instructions		11	Yes	No X
12	Did the fo advisory	undation make a distribution to a donor advised fund over which the foundation or a disqualified privileges? If 'Yes,' attach statement. See instructions	d person had	12		Х
13	Did the fo	oundation comply with the public inspection requirements for its annual returns and exer	mption application	n <sup>2</sup> 13	Х	
	Website a	address N/A				
14				<u>314) _997</u>	<u>-607</u>	19
				<u>-3518</u>		<del>-</del>
15		1947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — check i		4/14 1	•	
		r the amount of tax-exempt interest received or accrued during the year	▶ 15	<u> </u>	Yes	N/A No
16		ne during calendar year 2018, did the foundation have an interest in or a signature or other auth curities, or other financial account in a foreign country?	nority over a	16	res	X
		nstructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes,' name of the foreign country				
Par	t VII-B	Statements Regarding Activities for Which Form 4720 May Be Requir	ed			
		4720 if any item is checked in the 'Yes' column, unless an exception applies.			Yes	No
1 a	-	e year, did the foundation (either directly or indirectly)		,		,
	(1) Enga	ge in the sale or exchange, or leasing of property with a disqualified person?	∐Yes X	No		,
		w money from, lend money to, or otherwise extend credit to (or accept it from) a alified person?	Yes X	No		`
	(3) Furns	sh goods, services, or facilities to (or accept them from) a disqualified person?		No		
	(4) Pay o	compensation to, or pay or reimburse the expenses of, a disqualified person?	Yes X	No -		
	(5) Trans for th	sfer any income or assets to a disqualified person (or make any of either available e benefit or use of a disqualified person)?	Yes	No	ŧ	,
	founda	e to pay money or property to a government official? (Exception. Check 'No' if the ation agreed to make a grant to or to employ the official for a period after termination vernment service, if terminating within 90 days)	Yes X	No		
b		swer is 'Yes' to 1a(1)–(6), did <b>any</b> of the acts fail to qualify under the exceptions describins section 53 4941(d)-3 or in a current notice regarding disaster assistance? See instruc	ped in ctions	1 b	N.	/A
	Organizat	tions relying on a current notice regarding disaster assistance, check here	•	]		1
c	Did the fo that were	oundation engage in a prior year in any of the acts described in 1a, other than excepted not corrected before the first day of the tax year beginning in 2018?	acts,	1 c		X
2	Taxes on private op	failure to distribute income (section 4942) (does not apply for years the foundation was perating foundation defined in section 4942(j)(3) or 4942(j)(5)).	a			~
а	and 6e, P	d of tax year 2018, did the foundation have any undistributed income (lines 6d lart XIII) for tax year(s) beginning before 2018?	Yes	No		
	If 'Yes,' lis	st the years > 20 , 20 , 20 , 20				Ì
b	(relating t	any years listed in 2a for which the foundation is <b>not</b> applying the provisions of section to incorrect valuation of assets) to the year's undistributed income? (If applying section a listed, answer 'No' and attach statement — see instructions )		2 b		
^		visions of section 4942(a)(2) are being applied to <b>any</b> of the years listed in 2a, list the ye	ears here	20	IN	/A
·		, 20 , 20 , 20		•		
2 ~						. •
	enterprise	nundation hold more than a 2% direct or indirect interest in any business at any time during the year?		No	-	
b	If 'Yes,' don't don't don't	id it have excess business holdings in 2018 as a result of (1) any purchase by the foundation of the f	ation proved		,	
	by the Co	mmissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest	, or			
	determine	ose of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, or the foundation had excess business holdings in 2018)	10	3 ь	N	/A
	Did the fo	undation invest during the year any amount in a manner that would jeopardize its purposes?		4a		Х
b	Did the fo	undation make any investment in a prior year (but after December 31, 1969) that could its charitable purpose that had not been removed from jeopardy before the first day of				
		ear beginning in 2018?		4 b		Х
BAA				Form 99	D-PF (	2018)

Form 990-PF (2018) LIFESTYLE HEALTH Part VII-B   Statements Regarding Activit				75084	F	Page (
5 a During the year, did the foundation pay or incur a		il 4/20 May De Neu	dired (continued)		Yes	No
(1) Carry on propaganda, or otherwise attem	•	on (section 4945(e))?	Yes	No No	,	-,
(2) Influence the outcome of any specific put on, directly or indirectly, any voter registr.	olic election (see section ation drive?	n 4955), or to carry	☐ Yes X	No .	-	
(3) Provide a grant to an individual for travel,	, study, or other similar	purposes?	Yes	No ·		•
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? See instructions	n a charitable, etc , organ s	ization described	Yes	] No		, -
(5) Provide for any purpose other than religion educational purposes, or for the prevention			Yes X	] No		'
b If any answer is 'Yes' to 5a(1)—(5), did any or described in Regulations section 53 4945 or in a See instructions	f the transactions fail to current notice regarding o	o qualify under the exce disaster assistance?	ptions		b N	A
Organizations relying on a current notice rega	arding disaster assistan	ce, check here	<b>-</b>		<del>] "</del>	<u> </u>
c If the answer is 'Yes' to question 5a(4), does tax because it maintained expenditure responsif 'Yes,' attach the statement required by Reg	sibility for the grant?		N/A Yes	No		
<ul> <li>6 a Did the foundation, during the year, receive a on a personal benefit contract?</li> <li>b Did the foundation, during the year, pay prem</li> </ul>				No	<u>.</u>	<u>x</u>
If 'Yes' to 6b, file Form 8870				<u>,                                      </u>		
7a At any time during the tax year, was the found b if 'Yes,' did the foundation receive any proces				No N/A 7		
8 Is the foundation subject to the section 4960 tax of	•		ration	.,	1-	
or excess parachute payment(s) during the ye	ear <sup>9</sup>		Yes X	No	_	<u> </u>
Part VIII Information About Officers, D and Contractors	irectors, Trustees,	Foundation Mana	gers, Highly Paid	Employe	es,	
1 List all officers, directors, trustees, and found	dation managers and ti	heir compensation. See	instructions.			_
(a) Name and address	(b) Title, and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expe	nse acc allowai	
Linda M. Repa-Eschen 803 Woodmoor Drive St. Louis, MO 63132 3518	President 0	0.	0.			0.
Michael F. Avioli 144 West Lockwood Ave #100 St. Louis, MO 63119	Vice Presiden O	0.	0.			0.
Dexter W. Schraer 47 Marshall PLace Webster Groves, MO 63119	Secretary 0	0.	0.			0.
Thomas M. Eschen 46 Hill Drive	Director 0	0.	0.			0.
St. Louis, MO 63122  2 Compensation of five highest-paid employees (of	ther than those included	I on line 1 — see instructio	l ns). If none_enter 'NONE	<u> </u>		
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expe	nse acc allowar	
None						
					_	

Form 990-PF (2018) LIFESTYLE HEALTH & RESEARCH CORPORATION	ON 43-147	75084 Page <b>7</b>
Part VIII Information About Officers, Directors, Trustees, Foun and Contractors (continued)		
3 Five highest-paid independent contractors for professional services. See in	nstructions. If none, enter 'NONE.'	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
None		<del></del>
Total number of others receiving over \$50,000 for professional services	•	0
Part IX-A Summary of Direct Charitable Activities		
Fait IN-A Sulfillary of Direct Charlable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistic organizations and other beneficiaries served, conferences convened, research papers produced, etc.	al information such as the number of	Expenses
		· · · · · · · · · · · · · · · · · · ·
1 <u>N/A</u>	· <del>-</del> <del>-</del>	
2		
3		
4		
Part IX-B   Summary of Program-Related Investments (see Instruction		
Describe the two largest program-related investments made by the foundation during the	e tax year on lines 1 and 2	Amount
1 <u>N/A</u>		
	·	
2		
All other program-related investments. See instructions		
	ļ	
·		

Form 990-PF (2018)

Total. Add lines 1 through 3

BAA

see instructions.)	Foreign for	indations,
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes, a Average monthly fair market value of securities.	1-1	122 010
b Average of monthly cash balances	1 a	132,818.
·	1 b	4,948.
c Fair market value of all other assets (see instructions)	1 c	855.
d Total (add lines 1a, b, and c)	1 d	138,621.
e Reduction claimed for blockage or other factors reported on lines 1a and		
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3	138,621.
4 Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	2,079.
5 Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	136,542.
6 Minimum investment return. Enter 5% of line 5	6	6,827.
Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operand certain foreign organizations, check here ☐ and do not complete this part		dations
1 Minimum investment return from Part X, line 6	1	6,827.
2a Tax on investment income for 2018 from Part VI, line 5 2a 2a	52.	
b Income tax for 2018 (This does not include the tax from Part VI)  2b		
c Add lines 2a and 2b	2 c	162.
3 Distributable amount before adjustments Subtract line 2c from line 1	3	6,665.
4 Recoveries of amounts treated as qualifying distributions	4	
5 Add lines 3 and 4	5	6,665.
6 Deduction from distributable amount (see instructions)	6	
7 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1	7	6,665.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
a Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1 a	6,834.
b Program-related investments — total from Part IX-B	1 b	<del></del>
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3 a	
<b>b</b> Cash distribution test (attach the required schedule)	3 b	
4 Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	6,834.
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	6,834.
Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the qualifies for the section 4940(e) reduction of tax in those years	foundation	

BAA

Part XIII Undistributed Income (see instructions)

,	(a) Corpus	(b) Years prior to 2017	(c) 2017	<b>(d)</b> 2018
1 Distributable amount for 2018 from Part XI, line 7				6.665
2 Undistributed income, if any, as of the end of 2018				6,665.
a Enter amount for 2017 only			3,740.	
b Total for prior years 20, 20, 20		0.		
3 Excess distributions carryover, if any, to 2018				
<b>a</b> From 2013 <b>b</b> From 2014	_			
c From 2015	_			
d From 2016	1			
e From 2017	1			
f Total of lines 3a through e	0.			
4 Qualifying distributions for 2018 from Part	<u> </u>			
XII, line 4. ► \$ 6,834.	<u> </u>			
a Applied to 2017, but not more than line 2a			3,740.	
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)		0.		
c Treated as distributions out of corpus				
(Election required — see instructions)  d Applied to 2018 distributable amount	0.			2 004
e Remaining amount distributed out of corpus	0.			3,094.
5 Excess distributions carryover applied to 2018	0.	<del> </del>		0.
(If an amount appears in column (d), the	<u> </u>			<u> </u>
same amount must be shown in column (a))				
6 Enter the net total of each column as	ĺ	<u>.</u>		,
indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
<b>b</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.		
<b>d</b> 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 instructions			0.	
f Undistributed income for 2018 Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2019.				2 571
7 Amounts treated as distributions out of				3,571.
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 (see instructions)	0.			
9 Excess distributions carryover to 2019. Subtract lines 7 and 8 from line 6a	0.			•
10 Analysis of line 9				, .
a Excess from 2014	1 0 04 44	, , , , ,	٠.	
<b>b</b> Excess from 2015				- 1
c Excess from 2016				
d Excess from 2017				. \
e Excess from 2018	L			

Form 990-PF (2018) LIFESTYLE HEALTH				43-1475084	Page <b>10</b>
Part XIV   Private Operating Foundar					N/A
1 a If the foundation has received a ruling or determined is effective for 2018, enter the date of the	ruling		-	<b>&gt;</b> [	¬
<b>b</b> Check box to indicate whether the founda		rating foundation de		4942(j)(3) or [	4942(J)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years		(e) Total
investment return from Part X for each year listed	(a) 2018	<b>(b)</b> 2017	(c) 2016	(d) 2015	
<b>b</b> 85% of line 2a		·			
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon					
a 'Assets' alternative test — enter					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c 'Support' alternative test – enter					····
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					
Part XV Supplementary Information	(Complete this	part only if the f	oundation had	5,000 or more	in
assets at any time during th		tructions.)			
Information Regarding Foundation Manage a List any managers of the foundation who have close of any tax year (but only if they have None	contributed more that	an 2% of the total cor nan \$5,000) (See s	ntributions received by section 507(d)(2))	the foundation befo	re the
None					
<b>b</b> List any managers of the foundation who own a partnership or other entity) of which the None	10% or more of the s foundation has a 10	tock of a corporation % or greater interes	(or an equally large p st	portion of the owners	hip of
2 Information Regarding Contribution, Grant, G	ift Loan Scholarchi	n etc Programs:			
Check here ► ☐ If the foundation only ma requests for funds If the foundation makes 2a, b, c, and d See instructions	kes contributions to p	reselected charitable	organizations and do ganizations under ot	es not accept unsolu her conditions, com	cited plete items
a The name, address, and telephone number or	email address of the	person to whom app	lications should be ac	Idressed	
See Statement 8					
<b>b</b> The form in which applications should be s	submitted and inform	nation and materials	s they should include	9	
See Statement for Line 2a					
c Any submission deadlines					
See Statement for Line 2a					
d Any restrictions or limitations on awards, s	uch as by geograph	ical areas, charitabl	le fields, kinds of ins	stitutions, or other f	actors
See Statement for Line 2a					

Page 11

3 Grants and Contributions Paid During the Ye	ar or Annual for Ful	Da		
3 Grants and Contributions Paid During the 16	ear or Approved for Fut	ure Paymen	<u> </u>	
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	!
a Paid during the year				<del></del>
See Statement 9	į			
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Total			► 3a	4,000.
				4,000.
<b>b</b> Approved for future payment				
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Total				<del></del>
I Oldi			► 3b	

ran XVI	-A Analysis of Income-Producing	Activities				
Enter gross	s amounts unless otherwise indicated	Unrelate	ed business income	Excluded	by section 512, 513, or 514	(e)
	•	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion	<b>(d)</b> Amount	Related or exempt function income (See instructions)
-	ram service revenue	Code		code		(See instructions )
a b		-		<del> </del> -		
		<del> </del>		<del> </del> -		
ď	<del></del>	<del> </del>		ļ	<u> </u>	<del></del>
e		<del> </del>		+		
,		l		<del> </del>		
a Fees	and contracts from government agencies	<del> </del>		+		
-	bership dues and assessments	ļ		+		
_	st on savings and temporary cash investments	<u> </u>		1.4		12.
	ends and interest from securities	-		14		
. –	ental income or (loss) from real estate			14		8,845.
	financed property	<u> </u>		+		
	lebt-financed property		<del></del>			<del> </del>
	ntal income or (loss) from personal property	<u> </u>		<del>}</del>		
	r investment income			<del> </del>	··	
	r (loss) from sales of assets other than inventory					-133.
	ncome or (loss) from special events	-		_		-133.
	s profit or (loss) from sales of inventory			+		
	r revenue			<del> </del>		V - 2 - 1
• • •		<del></del>		<del> </del> -		
	urn of capital	<del> </del>		<del> </del>		
b		-		-		
ç					. —	
d		-		<del> </del>		
e		] ·		ļ		
12 Cubto	Atal Add columne (b) (d) and (u)	м .				0 704
	otal Add columns (b), (d), and (e)	ч (			12	8,724.
13 Total	. Add line 12, columns (b), (d), and (e)				13	8,724. 8,724.
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	ons )	ishment of Evemn	at Purne		
13 Total (See works Part XVI	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions to verify calculations	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
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13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.
13 Total (See works Part XVI Line No.	Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculations. Relationship of Activities to the	ons ) Accompl	<del></del>	<u>-</u>	oses	8,724.

Form **990-PF** (2018)

Part X	VII Information Re	egarding Tra	Insfers to and Transa					Pa	ige 1.
	. Exempt Organ	izations			····		<del>-</del>	Yes	No
1 Did	the organization direct	ly or indirectly of	engage in any of the follow ection 501(c)(3) organization	ing with an	y other organizati	on		163	110
rela	ating to political organiz	ations?	ection 501(c)(5) organization	is) or in se	CHOH 527,				,
<b>a</b> Tra	nsfers from the reportin	ng foundation to	a noncharitable exempt o	rganization	of				
(1)	Cash						1 a (1)		X
(2)	Other assets						1 a (2)		Х
<b>b</b> Oth	er transactions								
(1)	Sales of assets to a no	oncharitable exe	empt organization				1 b (1)		X
` '			able exempt organization				1 b (2)		Х
<b>\-</b> /	Rental of facilities, equ		er assets				1 b (3)		X
	Reimbursement arrang						1 b (4)		X
	Loans or loan guarante		an or fundramen collectation				1 b (5)		X
• •			nip or fundraising solicitatio sts, other assets, or paid ei				1 b (6)		X
C Sile	aring or racinties, equipi	nent, manng n	sts, other assets, or paid e	ripioyees			1 c		Х
any	transaction or sharing	arrangement, s	complete the following sch the reporting foundation If the show in column (d) the valu of noncharitable exempt organization	e of the go	ods, other assets,	or services receiv	ed		
(a) Line no	(b) Amount myorved	(C) Name	or noncharitable exempt organizati	UN	(a) Description of trail	nsfers, transactions, and	a snaring arrar	gement	<u>s</u>
N/A							<del>-</del>		
			······································			•			
			······································			· ·			
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	<u> </u>					<del></del>	-		
	<del></del>	<del> </del>					<del>.</del>		
		<u> </u>							
desc	ne foundation directly or in cribed in section 501(c) es,' complete the follow	(other than sec	d with, or related to, one or m ction 501(c)(3)) or in sectio	iore tax-exei n 527?	mpt organizations		Yes	X	No
	(a) Name of organizat	tion	(b) Type of organiz	ation	(c	) Description of re	lationship		
N/A						_			
	<sub>F</sub> .								
			<del></del>						
							<del>-</del>		
						<del></del>			
Sign	orer penalties of perjury, I decla frect, and complete Declaration	n of preparer (other	ined this return, including accompar than taxpayer) is based on all inform	iying schedules nation of which	s and statements, and to preparer has any know	o the best of my knowled ledge			
Here	/ and roll	Ruca-1	-/-				May the II this return preparer	with the	е
1	Signature of officer or trustee	11110	Sidont Date	19_	President Title		See ւր <u>str</u> լ	ictions –	_
	Print/Type preparer's na	ame	Preparti's signature	1	Date		X   PTIN	Yes	No
D-:-I			1 Manually 6	uhn	10/20/	Check if	1	0.50	
Paid	Thomas M. Bu		Thomas M. Bu	sken-	1.0/69/19	self employed	P00043	859	
Prepare			ACLEOD, LLP		· · ·	Firm's EIN ► 83~2	762086	_	
Use Onl		<u>11430 Grav</u> St. Louis,				Phone no (314	1) 040 5	7501	
BAA		JC. LOUIS,	MO 63126			riione iio (314	1) 842-7		2010
<b>5</b> 00							Form <b>990</b>	1-Pt (2	(8۱ U±

2018	Federal Work	sheets	Page 1				
Client 3	LIFESTYLE HEALTH & RESEA	TYLE HEALTH & RESEARCH CORPORATION					
10/29/19			07 51PM				
Late Payment Penalty (	Form 990-PF)						
Tax due 6 month(s) late x Late payment penal		===	162. x .030 5.				
Interest on Late Filing (	Form 990-PF)						
Tax due Late filing penalt Total amount subje	y ct to interest	162. 0. 162.					
5/15/19 - 6/30/19 Amount subject to Rate factor Interest	(46 days @ 6%) interest	162.00 _x .007589679	1.23				
7/01/19 - 9/30/19 Compounded amount Rate factor Interest	(92 days @ 5%)	163.23 x012681615	2.07				
10/01/19 - 11/15/19 Compounded amount Rate factor Interest	9 (46 days @ 5%)	165.30 x006320831	1.04				
Total Interest on 1	Late Filing (rounded)	- -	4.				

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12/31/18		20	118 Fe	dera	l Boo	k Dep	2018 Federal Book Depreciation Schedule	ion S	chedu	<u>e</u>				Page
Client 3			LIFEST	LYLE	1EALT!	1 & RES	LIFESTYLE HEALTH & RESEARCH CORPORATION	CORPO	RATION					43-1475084
10/29/19 No. Description	Date Acquired.	Date Sold	Cost/ Basis	Bus Pct	Cur 179 Bonus	Special Depr Allow.	Prior 179/ Bonus/ Sp. Depr.	Prior Dec Bal Deor.	Salvage /Basis Reductn	Depr Basis	Prior Deor	Method	di G	
Form 990/990-PF  Machinery and Equipment														
1 COMFUTER & PRINTER 2 COMPUTER	6/03/10	,	4,308							4,308	4,308	200DB HY 200DB HY	7 5 11	11520
Total Machinery and Equipment			8,019	ı	0	0	0	0	0	8,019	6,951			
Total Depreciation		ı II	8,019	• 11		0	0	0		8,019	6,951			428
Grand Total Depreciation		IJ	8,019	II	0	0	0	0	0	8,019	6,951			428
												•		

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2018	Federal Statements	Page 1		
Client 3 L	FESTYLE HEALTH & RESEARCH CORPORATION	43-1475084		
10/29/19		07 51PM		
Statement 1 Form 990-PF, Part I, Line 16b Accounting Fees				
	(a) (b) Net (c) Expenses Investment Adjusted <u>per Books Income</u> <u>Net Income</u>	(d) Charitable <u>Purposes</u>		
ACCOUNTING FEES	Total $\frac{\$}{\$}$ $\frac{730.}{\$}$ $\frac{\$}{\$}$ $\frac{73.}{\$}$ $\frac{\$}{\$}$ $\frac{0.}{\$}$	\$ 657. \$ 657.		
Statement 2 Form 990-PF, Part I, Line 18 Taxes				
	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income	(d) Charitable <u>Purposes</u>		
Taxes and Licenses	$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	\$ 175. 42. \$ 217.		
Statement 3 Form 990-PF, Part I, Line 23 Other Expenses				
INVESTMENT FEE RETURN OF CAPITAL	(a)       (b)       Net       (c)         Expenses       Investment       Adjusted         per Books       Income       Net Income         \$ 2,158.       \$ 216.         20.       2.         Total       \$ 2,178.       \$ 218.       \$ 0.	(d) Charitable Purposes \$ 1,942.		
Statement 4 Form 990-PF, Part II, Line 14 Land, Buildings, and Equipm	ent			
Category	Accum. Book Basis Deprec. Value	Fair Market Value		
Machinery and Equipment Improvements	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	639. 639.		

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2018

## **Federal Statements**

Page 2

Client 3

## LIFESTYLE HEALTH & RESEARCH CORPORATION

43-1475084

10/29/19

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Statement 5 Form 990-PF, Part II, Line 15 Other Assets

Rounding

 $\begin{array}{c|c} & \underline{Book\ Value} & \underline{Fair\ Market} \\ & \underline{Value} \\ \\ Total & \underline{\$} & \underline{1.} \\ & \underline{\$} & \underline{0.} \end{array}$ 

Statement 6
Form 990-PF, Part IV, Line 1
Capital Gains and Losses for Tax on Investment Income

<u>Item</u> 1 2 3 4 5 6 7 8 9	(a) Description  4 THE OAKMARK FUND INV CL  1 OAKMARK INTL FD CL INV  11 JPMRGN LGCP GRTH FD I  3 OPPEN INTL GROWTH FD Y  3 CARILLON EGL SML CP GRTH FD I  997 PGIM SHT TRM CORP BD Z  41 PGIM SHT TRM CORP BD Z  19 PGIM SHT TRM CORP BD Z  9 PGIM SHT TRM CORP BD Z  652 PIONEER STRAT INCO CL Y	(b) How Acquired Purchased Purchased Purchased Purchased Purchased Purchased Purchased Purchased Purchased Purchased Purchased	(c) Date Acquired 3/14/2017 3/14/2017 3/14/2017 3/14/2017 3/14/2017 3/14/2017 1/03/2018 3/16/2018 3/14/2017	(d) Date Sold 3/16/2018 3/16/2018 3/16/2018 3/16/2018 6/14/2018 6/14/2018 6/14/2018 6/14/2018 6/14/2018
11	3 CARILLON EGL SML CP GRTH FD I	Purchased	3/14/2017	6/14/2018
12	507 L SAYLES BOND FD I CL	Purchased	3/14/2017	6/14/2018
13	2 THE OAKMARK FUND INV CL	Purchased	3/14/2017	10/01/2018
14	11 TCW TOTAL RETURN BOND I	Purchased	3/14/2017	10/01/2018
15	11 OPPEN INTL GROWTH FD Y	Purchased	6/14/2018	10/01/2018
16	15 PIONEER STRAT INCO CL Y 9 JPMRGN LGCP GRTH FD I 25 CULLEN HIGH DIV EOTY I	Purchased	3/14/2017	10/01/2018
17		Purchased	3/14/2017	10/01/2018
18		Purchased	3/14/2017	10/01/2018
19	2 CARILLON EGL SML CP GRTH FD I	Purchased	3/14/2017	10/01/2018
20	21 L SAYLES BOND FD I CL	Purchased	3/14/2017	10/01/2018
21	2 TMPLTN GLBL BD FD ADV CL	Purchased	3/14/2017	10/01/2018

	(e)	(f)	(g)	(h)	(i)	(j)	(k)	(1)
	Gross	Deprec.	Cost	Gain	FMV	Adj. Bas.	Excess	Gain
Item	Sales	Allowed	Basis	(Loss)	12/31/69	12/31/69	(i) - (j)	(Loss)
1 -	349.		303.	46.				\$ 46.
2	29.		24.	5.				5.
3	463.		386.	77.				77.
4	134.		109.	25.				25.
5	199.		178.	21.				21.
6	10,728.		10,977.	-249.				-249.
7	441.		452.	-11.				-11.
8	204.		208.	-4.				-4.
9	97.		97.	0.				0.
10	6,820.		6,906.	-86.				-86.
11	208.		178.	30.				30.
12	6,845.		6,992.	-147.				-147.
13	179.		152.	27.				27.
14	105.		108.	-3.				-3.
15	49.		49.	0.				Ö.
16	156.		159.	-3.				-3.
17	423.		316.	107.				107.
18	470.		455.	15.				15.
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2018

## **Federal Statements**

Page 3

Client 3

## LIFESTYLE HEALTH & RESEARCH CORPORATION

43-1475084

10/29/19

07 51PM

Statement 6 (continued) Form 990-PF, Part IV, Line 1 Capital Gains and Losses for Tax on Investment Income

Item	(e) Gross Sales	(f) Deprec. <u>Allowed</u>	(g) Cost <u>Basis</u>	(h) Gain (Loss)	(i) FMV <u>12/31/69</u>	(j) Adj. Bas. <u>12/31/69</u>	(k) Excess _(i)-(j)	(1) Gain (Loss)
19 20	142. 285.		118. 290.	24. -5				\$ 24.
21	23.		25.	-5. -2.				-5. -2.
							Total	\$ -133.

Statement 7 Form 990-PF, Part VI, Penalty and Interest **Balance Due** 

Tax Due Late Payment Penalty Late Interest

\$ 162. 5. 4. Total \$ 171.

Statement 8 Form 990-PF, Part XV, Line 2a-d **Application Submission Information** 

Name of Grant Program:

Name:

LIFESTYLE & HEALTH RESEARCH CORPORATION

Care Of: Street Address:

C/O LINDA REPA-ESCHEN 803 WOODMOOR DRIVE ST LOUIS, MO 63131 314-997-6079

City, State, Zip Code:

Telephone: E-Mail Address:

Form and Content:

ABSTRACT OR SUMMARY OF PROJECT, SUMMARY OF GOALS AND OR SPECIFIC AIMS PROPOSED PROJECT PERIOD AND SUMMARY OF

OUTCOMES MEASURES TO EVALUATE ACHEIVEMENT OF AIMS/GOALS.

BUDGET

Submission Deadlines:

NONE

Restrictions on Awards:

NOT TO EXCEED \$9,000, RESTRICTED TO NOT-FOR PROFIT ENTITIES

2018	Federal Sta	tements		Page 4
Client 3 LIFES	TYLE HEALTH & RESI	EARCH CORP	ORATION	43-1475084
0/29/19  Statement 9			<u> </u>	07 51PN
Form 990-PF, Part XV, Line 3a Recipient Paid During the Year				
Name and Address	Donee <u>Relationship</u>	Found- ation Status	Purpose of Grant	 Amount
The Cancer Support Community 1058 Old Des Peres Road St. Louis MO 63131	None	501c3	The Cancer Support Community is a non-profit organization dedicated to providing emotional support, education and hope for people affected by cancer.	\$ 1,500
Polycystic Kidney Disease Foun 9221 Ward Parkway, Suite 400 Kansas City MO 64114	None	501c3	The Polycystic Kidney Foundation is the only organization, worldwide devoted to the mission of promoting research to find a cure for the disease and improve the care and treatment for those affected.	2,500
			Total	\$ 4,000