Form .990-PF Department of the Treasury Internal Revenue Service EXTENDED TO NOVEMBER 16, 2020 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.

Fo	r cale	ndar year 2019 or tax year beginning	• •	, and ending			
N	ame o	of foundation		<u> </u>	A Employer identification	number	
	THE	NU SKIN FORCE FOR GOOD	FOUNDATION		87-0577244		
N		and street (or P O box number if mall is not delivered to street a	iddress)	Room/suite	B Telephone number		
-		WEST CENTER STREET			(801)345-6	000	
		town, state or province, country, and ZIP or foreign p IVO , UT 84601	ostal code		C If exemption application is pe	ending, check here	
G	Checl	k all that apply: Initial return	Initial return of a fo	ormer public charity	D 1. Foreign organizations	, check here	
		Final return	Amended return		2 Foreign organizations mo	oting the 95% test	
_		Address change	Name change		2 Foreign organizations me check here and attach co.	mputation	
H		k type of organization: X Section 501(c)(3) ex		114	E If private foundation sta		
ᆂ		ection 4947(a)(1) nonexempt charitable trust	Other taxable private founda		under section 507(b)(1)	• •	
		parket value of all assets at end of year J Account	ng method: X Cash ther (specify)	Accrual	F If the foundation is in a		
	(110111 ►\$	Part II, col. (c), line 16) 0 4 , 507 , 023 . (Part I, colur		us.)	under section 507(b)(1)	(B), CRECK DEFE	
_	art		(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements	
_ L	*1	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a))	expenses per books	income	income	for charitable purposes (cash basis only)	
ひる	1	Contributions, gifts, grants, etc., received	2,251,639.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	. ~ · N/A * * * * * * * * * *	,指揮的影響。以後中	
	2	Check If the foundation is not required to attach Sch. B	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	1 -1/4 / " " + 34 / 46	一种"是一种"。在文學是中的學位	至此時間的時間的	
	3	Interest on savings and temporary cash investments	69,080.	69,080.		STATEMENT 41	
	4	Dividends and interest from securities				步對時間的影響的對於	
	5a	Gross rents .				民國國際鐵鐵鐵線	
	t	Net rental income or (loss)	The state of the state of	the state of the sections		是然和意味的特殊	
_	a 6a	Net gain or (loss) from sale of assets not on line 10		1 12 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		學的特殊的學的權利的學	
707	ᇍ	Gross sales price for all assets on line 6a	the part of the tra	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		企業都是自然的關係	
	<u>8</u> 7	Capital gain net income (from Part IV, line 2)	10000000000000000000000000000000000000	0.	广东 255平台的建筑	公都特別是其代學的	
.~	8	Net short-term capital gain	八本 多洲人民時都完成	17年19月1日 1981年 11日本			
>	9	Income modifications Gross sales tess returns	[44] 新型水 [4] (A) [4]	等一年五十二十十五十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十二十	Take a second of the second	对外国际中国的	
SCANNED NOV	10a	and allowances	Secretary Space 1	tegen på det grante de Light dage til år kapa g	等的。	V	
2		Less Cost of goods sold	1 k 21 7 1 1 k 21	· 建水油管 《 · · · · · · · · · · · · · · · · · ·	1 - 2 - 1 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -	(1995年1月1日) 1995年1月1日 (1995年1月)	
5		Gross profit or (loss) Other income		Secure of the second has seen		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	
Ž	12	Total. Add lines 1 through 11	2,320,719.	69,080.		中国 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Ž –	13	Compensation of officers, directors, trustees, etc	0.	0,		0.	
3	14	Other employee salaries and wages					
Ď	15	Pension plans, employee benefits		RECEIVED			
		Legal fees		VED			
	ells	Accounting fees	47	10	<u> </u>		
	Š c	Other professional fees	30	NUV & 7)2020	Ö		
		Interest			(3)		
	17 18	Taxes STMT 2	555⊙	GDEN UTO		0.	
	19	Depreciation and depletion .		<u> </u>	<u> </u>	14 18年18年18日 18月1日	
	[20	Occupancy					
	ĕ 21	Travel, conferences, and meetings			ļ <u>-</u>		
	티 22	Printing and publications	000 555	4 020			
	g 23	Other expenses STMT 3	203,755.	4,239.		0.	
	[24	Total operating and administrative	204 210	4 220			
	ğ	expenses Add lines 13 through 23	204,310. 1,661,209.	4,239.	18 5000 11 12 12 12 13 15 15 16 16 16 16 16 16 16 16 16 16 16 16 16	1,661,209.	
	25	Contributions, gifts, grants paid	1,001,409.	The state of the state of the	Branch Wall To Car St. W.	1,001,209.	
	40	Total expenses and disbursements. Add lines 24 and 25	1,865,519.	4,239.	1	1,661,209.	
_	27	Subtract line 26 from line 12:	1,000,019	A THE TOTAL PROPERTY OF THE PARTY OF THE PA	taka salahisa musan bera	to be a substitute of the subs	
	1	Excess of revenue over expenses and disbursements	455,200.	· 是一个人工程是有不是可能能会		A STATE OF THE STA	
		Net investment income (If negative, enter -0-)	學和歌歌和知為鄉於	64,841.	IN THE PROPERTY OF THE PARTY OF		
		Adjusted net income (If negative, enter -0-)	TATE COMPANIA	中国中国国际的	N/A		
-	_						

<u>F0</u>	rm 99	0-PF (2019) THE NO SKIN FORCE FOR G		8/-	05//244 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description	Beginning of year	End o	
Ľ		column should be for end-of year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
•	1	Cash - non-interest-bearing		-1.	-1.
	2	Savings and temporary cash investments	4,046,475.	4,501,676.	4,507,024.
		Accounts receivable	2	17 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	三年 とは 大学 は 大
	•	Less' allowance for doubtful accounts			17 - 17 - 17 - 17 - 17 - 17 - 17 - 17 -
	١,	Pledges receivable			· · · · · · · · · · · · · · · · · · ·
	4		<u> </u>	· · · · · · · · · · · · · · · · · · ·	(2) " (1) " " " " " (1) (1) (1)
		Less: allowance for doubtful accounts			
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other			
		disqualified persons			
	7	Other notes and loans receivable	the way the state of	, the second of the second	THE POLICE THE PROPERTY OF THE PARTY OF THE
	l	Less: allowance for doubtful accounts			
	R	Inventories for sale or use			
Assets	١	Prepaid expenses and deferred charges	· - · · · -		
ŞŞ	19	, .			
_	100	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment basis	, ,	. 3	
		Less accumulated depreciation			
	12	Investments - mortgage loans			
	13	Investments - other			
	ı	Land, buildings, and equipment: basis	· · · · · · · · · · · · · · · · · · ·	1113, - 17 12 12 1	1 43 com 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	14	· · · · · · · · · · · · · · · · · · ·		12.32. ()	13.3
	١	Less accumulated depreciation			
	1	Other assets (describe)			
	16	Total assets (to be completed by all filers - see the			
		instructions. Also, see page 1, item I)	4,046,475.	4,501,675.	<u>4,50</u> 7,023.
	17	Accounts payable and accrued expenses			1.30分裂,大致连续的。
	18	Grants payable			1. 19 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
"	19	Deferred revenue			(大學)
Liabilities	1	Loans from officers, directors, trustees, and other disqualified persons			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
藚	21	Mortgages and other notes payable			1. 124 124 121
<u>e</u> .		to the contract of the contrac			15. 40. 1 J. 2. 1
	22	Other liabilities (describe)			
	l				
_	23	Total liabilities (add lines 17 through 22)	0.	0.	1年1月在江北北京
	1	Foundations that follow FASB ASC 958, check here			1986 P. C.
S	l	and complete lines 24, 25, 29, and 30.			In Justine There in 936
ဦ	24	Net assets without donor restrictions			美国新疆山东岛 "李原始 "
퍨	25	Net assets with donor restrictions			首次各种的社会方法的
Net Assets or Fund Balances	Ì	Foundations that do not follow FASB ASC 958, check here			Sandian Sandra Breit Lore Con Control
Ę	l	and complete lines 26 through 30			
Ę	00	· · · · · · · · · · · · · · · · · · ·	4,046,475.	4,501,675.	
ō	26	Capital stock, trust principal, or current funds			And both a service and design and a
et e	27	Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	Maria Cara Cara Cara Cara Cara Cara Cara
ASS	28	Retained earnings, accumulated income, endowment, or other funds	0.	0.	表例继续台灣學門前少
et	29	Total net assets or fund balances	4,046,475.	4,501,675.	医检查性 化二甲基酚 电影
Z		,			医葡萄腺子宫外毒素或毒素
	30	Total liabilities and net assets/fund balances	4,046,475.	4,501,675.	《海州中洋州南部)
	art	Analysis of Changes in Net Assets or Fund B	alances	<u></u>	
	arı	III Analysis of Officinges in Net Assets of Fund De	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	29		
		t agree with end-of-year figure reported on prior year's return)			4 046 475
				1	4,046,475. 455,200.
		amount from Part I, line 27a		2	
		increases not included in line 2 (itemize)			0.
		ines 1, 2, and 3	·	4	4,501,675.
		eases not included in line 2 (itemize)		5	0.
6	Total	net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 29	6	4,501,675.
					Form 990-PF (2019)

		SKIN FORCE FORCE FOR SEASON IN			TIO	N		8	7-057	7244	Page 3
(a) List and describe	the kind(s	of property sold (for exal or common stock, 200 shs	mple, real esta		(b) -	low at - Purc - Don	cquired chase ation	(c) Date a	acquired ay, yr.)	(d) Dat (mo., d	e sold ay, yr.)
1a											
b NO	NE				-						
d d					<u> </u>						
<u>e</u>					-				.		
(e) Gross sales price	(f)	Depreciation allowed (or allowable)		st or other basis expense of sale					ain or (loss s (f) minus		
a											
b											
d d				· · · · · · · · · · · · · · · · · · ·							
<u>u</u>			-			-				·	
Complete only for assets showing	g gain in	column (h) and owned by	the foundation	on 12/31/69.	\neg		(1)	Gains (C	ol. (h) gain	minus	
(i) FMV as of 12/31/69		(j) Adjusted basis as of 12/31/69		cess of col. (i) col. (j), if any				(k), but r	not less tha (from col. (п -0-) ог	
a											
<u>b</u>											
C											
e			 								
		C If some place and a	Doubline		7						
2 Capital gain net income or (net ca	pital loss)	If gain, also enter If (loss), enter -0			}[2					
3 Net short-term capital gain or (los	s) as defi	•									
If gain, also enter in Part I, line 8,			(-).		}						
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder S	action 4940/a) for	Peduced	Tay on Not	1000	3	ont Inco	ma			
L							CITC IIICO	1116			
(For optional use by domestic private	lounualie	ons subject to the section a	1940(a) tax on	net investment in	come.	.)					
If section 4940(d)(2) applies, leave th	ns part bl	ank.									
Was the foundation liable for the sect	tion 4942	tax on the distributable am	nount of any ve	ear in the base per	rod?					Yes	X No
If "Yes," the foundation doesn't qualif											
1 Enter the appropriate amount in e	ach colur	nn for each year; see the ir	istructions bef	ore making any e	ntries.						
(a) Base period years		(b)	tributiono	Not value of pe	(c)		una annaha		Distril	(d) bution ratio	
Calendar year (or tax year beginning	ng in)	Adjusted qualifying dis		Net value of no				 	(col. (b) di	vided by col.	
2018 2017			1,197. 5,605.				8,633 2,967				75031 77145
2016			1,462.				$\frac{2,507}{5,457}$		*		$\frac{77145}{34294}$
2015			6,023.	-			0,679				92309
2014			1,439.				9,048				04565
			-								
2 Total of line 1, column (d)		1						2	_	3.0	83344
3 Average distribution ratio for the S			on line 2 by 5.0	0, or by the numb	er of y	ears				_	
the foundation has been in exister	nce if less	than 5 years						3		.6	<u> 16669</u>
4 Enter the net value of noncharitab	le-use as:	sets for 2019 from Part X,	line 5					4		3,295	,456.
5 Multiply line 4 by line 3								5		2,032	.206.
	/ 40/ - 4	Deat Res 0753								_,,,,,	
6 Enter 1% of net investment incom	ie (1% Of	Part I, line 270)						6			648.
7 Add lines 5 and 6								7		2,032	,854.
8 Enter qualifying distributions from	-							8		1,661	,209.
If line 8 is equal to or greater than See the Part VI instructions.	line 7, cł	neck the box in Part VI, line	tb, and comp	olete that part usir	ig a 19	% tax	rate.				
923521 12-17-19										Form 990 -	PF (2010

Part VI Excise Tax Based on Investment Income (Section			ee instru		Page 4		
) -10 - 3	ee iiisti u	CHOITS	<u>''</u>		
1a Exempt operating foundations described in section 4040(d)(2), check here				, ,			
 Date of ruling or determination letter: (attach copy of lette b Duriestic foundations that meet the section 4940(e) requirements in Part V, check he 	┞┯┼	<u> </u>	1,29				
of Part I, line 27b	ere and enter 1%	, '+		1,4	, , ,		
e All other domestic foundations enter 2% of line 27b Exempt foreign organizations, ci	oter 49/ of Port I lies 40 col /b)	ľ ' 'l		,'	•		
	, , , ,	2			0.		
 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations o Add lines 1 and 2 	omy, others, enter 0-)			1,29	_		
	only others onter ()	3 4	· · ·	1,4	0.		
 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter - 		5	· · · · · · · · · · · · · · · · · · ·	1 20	97 .		
6 Credits/Payments:	0-	-	γ', ,	<u> </u>	, , ,		
a 2019 estimated tax payments and 2018 overpayment credited to 2019	6a O.	[1 2	<i>'</i>	17		
b Exempt foreign organizations - tax withheld at source	6b 0.	37	1. 3		`.`.		
c Tax paid with application for extension of time to file (Form 8868)	6c 0.		1	; <u>.</u> .	, , `,		
d Backup withholding erroneously withheld	6d 0.	[7.		
7 Total credits and payments. Add lines 6a through 6d		7	<u></u>		0.		
8 Enter any penalty for underpayment of estimated tax. Check here X if Form 2220	hadnette ai	8			$\frac{0.}{21.}$		
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed) is attached	9		1,3			
10 Overpayment. If line 7 is more than the total of lines 5 and 8, onter the amount over	noid	10					
11 Enter the amount of line 10 to be: Credited to 2020 estimated tax	Refunded	11					
Part VII-A Statements Regarding Activities		<u>, ,, , , , , , , , , , , , , , , , , ,</u>					
1a During the tax year, did the foundation attempt to influence any national, state, or loc	al legislation or did it participate or intervene	ın		Yes	No		
any political campaign?			1a		X		
b Did it spend more than \$100 during the year (either directly or indirectly) for political	purposes? See the instructions for the defin	ition	1b		X		
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and c	•						
distributed by the foundation in connection with the activities.				1	·		
c Did the foundation file Form 1120-POL for this year?			1c		X		
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur							
(1) On the foundation. \$ (2) On foundation ma	anagers. ► \$ 0.						
e Enter the reimbursement (if any) paid by the foundation during the year for political e		•	l	1	:		
managers. ► \$ 0 •			, ,	, ,	a _t t s		
2 Has the foundation engaged in any activities that have not previously been reported to	o the IRS?		2		X		
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 gove	rning instrument, articles of incorporation, c	r	į		`		
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change	es		3		X		
4a Did the foundation have unrelated business gross income of \$1,000 or more during t	he year?		4a		X		
b if "Yes," has it filed a tax return on Form 990-T for this year?		N	'A 4b				
5 Was there a liquidation, termination, dissolution, or substantial contraction during the	e year?		_ 5		X		
If "Yes," attach the statement required by General Instruction T.							
6 Are the requirements of section 508(e) (relating to sections 1941 through 4915) patric	ofied either:						
 By language in the governing instrument, or 			1		,		
 By state legiclation that effectively amends the governing instrument so that no ma 	indatory directions that conflict with the state	: law					
remain in the governing instrument?			6	X			
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			
			į,				
8a Enter the states to which the foundation reports or with which it is registered. See ins	structions. >			1::1	;;		
UT			<u> </u>		54,		
	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)						
of each state as required by General Instruction G? If "No," attach explanation			<u>8b</u>	X			
9 Is the foundation claiming status as a private operating foundation within the meaning	*** *	ndar	1.3				
year 2019 or the tax year beginning in 2019? See the instructions for Part XIV. If "Yes			9	<u> </u>	X L		
10 Did any persons become substantial contributors during the tax year? it "Yes," attech.	schedule listing their names and addresses		10	ليل	X		
			Form 99	W-PF	(2019)		

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Part VII-B Statements Regarding Activities for Which Fo	orm 4/20 May Be Re	equirea _{(contini}	ued)	Weel No.
5a During the year, did the foundation pay or incur any amount to:				Yes No
(1) Carry on propaganda, or otherwise attempt to influence legislation (section		• •	s X No	A 3 - N
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire			
any voter registration drive?			s X No	
(3) Provide a grant to an individual for travel, study, or other similar purposes?	·	Y€	s X No	
(4) Provide a grant to an organization other than a charitable, etc., organization	described in section		TOP .	
4945(d)(4)(A)? See instructions			s X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo		(TE)	
the prevention of cruelty to children or animals?			s X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		n Regulations	,,, L	
section 53.4945 or in a current notice regarding disaster assistance? See instru	·	•	N/A	5b
Organizations relying on a current notice regarding disaster assistance, check h	* * *			
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from			<u></u>	77 1 1 1
expenditure responsibility for the grant?	1/	/A Ye		
If "Yes," attach the statement required by Regulations section 53.4945-5(d).				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on	<u> </u>	□ ₩	
a personal benefit contract?		Ye	es 🗶 No	
b Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?		├	6b X
If "Yes" to 6b, file Form 8870.		П.,	(V).	
7a At any time during the tax year, was the foundation a party to a prohibited tax st		Yt	s X No	
b If "Yes," did the foundation receive any proceeds or have any net income attribut		•	N/A	7b
8 Is the foundation subject to the section 4960 tax on payment(s) of more than \$	1,000,000 in remuneration or	 ,,	[22]	活性的シー
excess parachute payment(s) during the year? Part VIII Information About Officers, Directors, Truste	on Foundation Man	Y	s X No	
Paid Employees, and Contractors	es, roungation war	agers, nigniy		
List all officers, directors, trustees, and foundation managers and the	eir compensation.			
<u> </u>		(c) Compensation	(d) Contributions to	(e) Expense
(a) Name and address	(b) Title, and average hours per week devoted	(If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
	to position	enter-U-)	compensation	allowalices
SEE STATEMENT 4		٥.	0.	0.
DDD DIMIDMINI 4		· ·	<u> </u>	
				
				
			1	
· · · · · · · · · · · · · · · · · · ·				1
2 Compensation of five highest-paid employees (other than those incl	uded on line 1) If none	I enter "NONE "	<u> </u>	<u> </u>
- Compensation of the highest-paid employees (other than those incl	(b) Title, and average	AUNE.	(d) Contributions to	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expense account, other
MONE	devoted to position	-	compensation	allowances
NONE				ŧ
				
	<u> </u>		 	
		ļ		
		L	<u> </u>	
Total number of other employees paid over \$50,000			<u>_</u>	0
			Form	990-PF (2019)

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter "NC	NE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	·	
		
Tatal number of others recovered over \$50,000 for explanation	-	• 0
Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities	<u>, , , , , , , , , , , , , , , , , , , </u>	▶ 0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical	nformation such as the	
number of organizations and other beneficiaries served, conferences convened, research papers produced	etc.	Expenses
1 N/A		-
	·	
2		
3		
	·····	
4	····	
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on lines	1 and 2	Amount
1 N/A	T dire C.	rindin
2		
All other program-related investments. See instructions.		
3		
	<u> </u>	
Table Add Parad Marrish O		
Total, Add lines 1 through 3	•	0.

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Part X Minimum Investment Return (All domestic foundations must complete the	is part. Foreign foundations, see instructions.)	age o
1 Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a Average monthly fair market value of securities	1a 2,447,0	00.
b Average of monthly cash balances	1a 2,447,0 1b 898,6	41.
c Fair market value of all other assets	10	
d Total (add lines 1a, b, and c)	1d 3,345,6	41.
e Reduction claimed for blockage or other factors reported on lines 1a and	1.5	
1c (attach detailed explanation)	0.	
2 Acquisition indebtedness applicable to line 1 assets	2	0.
3 Subtract line 2 from line 1d	3 3,345,6	41.
4 Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4 50,1	
5 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5 3,295,4	56.
6 Minimum Investment return Enter 5% of line 5	6 164,7	
Part XI Distributable Amount (see instructions) (Section 4942(i)(3) and (i)(5) private op		
foreign organizations, check here and do not complete this part.)		
1 Minimum investment return from Part X, line 6	1 164,7	73.
2a Tax on investment income for 2019 from Part VI, line 5	1,297.	
b Income tax for 2019. (This does not include the tax from Part VI.)	- 2	
c Add lines 2a and 2b	2c 1,2	97.
3 Distributable amount before adjustments. Subtract line 2c from line 1	3 163,4	76.
4 Recoveries of amounts treated as qualifying distributions	4	0.
5 Add lines 3 and 4	5 163,4	76.
6 Deduction from distributable amount (see instructions)	6	0.
7 Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7 163,4	76.
Part XII Qualifying Distributions (see instructions)		
1 Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:	1, 2	
a Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a 1,661,2	09.
b Program-related investments - total from Part IX-B	1b	0.
2 Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3 Amounts set aside for specific charitable projects that satisfy the.		
a Suitability test (prior IRS approval required)	3a	
b Cash distribution test (attach the required schedule)	3b	
4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8; and Part XIII, line 4	4 1,661,2	09.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		
income. Enter 1% of Part I, line 27b	5	0.
6 Adjusted qualifying distributions Subtract line 5 from line 4	6 1,661,2	09.
Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wh	hether the foundation qualifies for the section	
4940(e) reduction of tax in those years.	•	

Form **990-PF** (2019)

Page 9

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2018	(c) 2018	(d) 2019
1 Distributable amount for 2019 from Part XI,		129 100	37 27 11	
line 7		· · · · · · · · · · · · · · · · · · ·	4'	163,476.
2 Undistributed income, if any, as of the end of 2019		و الرياج ا	•	
a Enter amount for 2018 only		` ,	0.	10 1 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
ь Total for prior years:		0.		[李扬][20]
3 Excess distributions carryover, if any, to 2019:				19 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1
a From 2014 2, 166, 027.				[1] [1] [1] [1]
b From 2015 2,001,655.		. "		
c From 2016 1,963,353.			, ,	Service State Miles
d From 2017 1,941,846.			,	
e From 2018 2,400,343.	. ,	·		Acres 1 Jan 19 1 1
f Total of lines 3a through e	10,473,224.	,	· ,	1 10 C 11 1 1 1
4 Qualifying distributions for 2019 from				
Part XII, line 4: ► \$ 1,661,209.			0	
a Applied to 2018, but not more than line 2a		· · ·	0.	
b Applied to undistributed income of prior		0.		
years (Election required - see instructions)		,	(The state of the state of
c Treated as distributions out of corpus (Election required - see instructions)	0.		(第三人称)	
d Applied to 2019 distributable amount		l ,	, , , , , , , , , , , , , , , , , , ,	163,476.
e Remaining amount distributed out of corpus	1,497,733.	· ·		F :
5 Excess distributions carryover applied to 2019 (If an amount appears in column (d), the same amount	•		100 May 1 9	
(If an amount appears in column (d), the same amount must be shown in column (a))	0.		3,773,773,774	0.
6 Enter the net total of each column as indicated below:	11 070 057			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	11,970,957.	1		3
b Prior years' undistributed income Subtract		0.	医上颌骨 人名西克	學所得的主義物
line 4b from line 2b c Enter the amount of prior years'		,	24,	
undistributed income for which a notice of				[1] [1] [1] [1] [1] [1] [1] [1] [1] [1]
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		重点的问题的
d Subtract line 6c from line 6b. Taxable	, , , , , ,		Part Comment	Salar Contract
amount - see instructions		0.	2,000	300,000 10 10 10
e Undistributed income for 2018 Subtract line				
4a from line 2a. Taxable amount - see instr.		The state of the s	0.	But the said of the bearing
f Undistributed income for 2019. Subtract		建建筑的 和企业的		
lines 4d and 5 from line 1. This amount must	19.14. 第音說 20.14			0.
be distributed in 2020 7 Amounts treated as distributions out of	***		18/45/2016 (18/45) 11 15 15 15 15 15 15 15 15 15 15 15 15	数10.27A以2744日3.00
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election		"你是我们是是		
may be required - see instructions)	0.	F1 强调是14 "发温器"(新疆,高强烈的
8 Excess distributions carryover from 2014		计学选择设置 心静脉	"我是她还有这些的	· 海湾的国家海滨等1875
not applied on line 5 or line 7	2,166,027.	[14] [14] [14] [14] [14]	智慧指翻的代理是否可	"在这个时间和影响。"
9 Excess distributions carryover to 2020				新作品的
Subtract lines 7 and 8 from line 6a	9,804,930.	The resident to the working	与"你是你是我的的"为"你的"。	Williams Williams
10 Analysis of line 9:	[25] 张思文文的 [25]	这种是一种产品的		
a Excess from 2015 2,001,655.				
b Excess from 2016 c Excess from 2017 1,963,353. 1,941,846.				
c Excess from 2017 d Excess from 2018 2,400,343.				
e Excess from 2019 1,497,733.				
0 ENGOGRAPHICA 10 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	2 23 m 1 24 1 1 1 4	1 44 - 1 Carter - 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	distributions was his said of said	The tenter of the substitute of the factors

923581 12-17-19

Form **990-PF** (2019)

Form 990-PF (2019) THE NU	SKIN FORCE	FOR GOOD FO	UNDATION	87-057	7244 Page 10
Part XIV Private Operating I	oundations (see in	structions and Part VI	I-A, question 9)	N/A	
1 a If the foundation has received a ruling	or determination letter tha	t it is a private operating			
foundation, and the ruling is effective f		-	. ▶ ∟		
b Check box to indicate whether the four		ng foundation described		4942(j)(3) or 494	2(1)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		/
income from Part I or the minimum	(a) 2019	(b) 2018	(c) 2017	(d) 2016	(e) Total
investment return from Part X for			}		
each year listed			<u> </u>		
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4, for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of]	
exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the					
alternative test relied upon: a "Assets" alternative test - enter.					
(1) Value of all assets			1		
(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				1	
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		<u> </u>	-		
(4) Gross investment income Part XV Supplementary Info	rmation (Comple	te this part only	if the foundation	had \$5,000 or more	in accote
at any time during			ii tile loulidation	mad wo,ood or more	in assets
1 Information Regarding Foundati					
a List any managers of the foundation w	=	than 20/ of the total con-	inhutiana rasawad bu th	a foundation hafars the alone	of any toy
year (but only if they have contributed			undutions received by th	e toutidation detore the close	ui ally lax
NONE					
b List any managers of the foundation w	ha awa 10% or mare of th	on stank of a corporation	(or no naughy large port	ion of the awarrable of a nor	teorobio er
other entity) of which the foundation h	as a 10% or greater intere	ie stock of a corporation st.	(or an equally large port	ion of the ownership of a par	mership or
NONE	and the following control of the first of th	•••			
	tion Crant Cift Lann	Cabalayahia ata D			
2 Information Regarding Contribution Check here ► X if the foundation					ata fan frank 16
the foundation makes gifts, grants, etc					sts for funds. If
				· · · · · · · · · · · · · · · · · · ·	
a The name, address, and telephone nun	iver or email address of th	ie person to whom appli	cauons snould be addres	SSEU"	
b The form in which applications should	be submitted and informa	ition and materials they s	hould include:		
c Any submission deadlines:					
		·.			
d Any restrictions or limitations on awar	ds, such as by geographic	al areas, charitable fields	, kınds of ınstitutions, or	other factors:	

Form 990-PF (2019)

≥ 3b

Total

Part XVI-A	Analysis	of Income-	Producing	Activities

Enter gross amounts unless otherwise indicated.	Unrelated	business income	Excluded	oy section 512, 513, or 514	(e)
Enter gross amounts amoss other was more action.	(a) Business	(b)	(C) Exclu- sion	(d)	Related or exempt
1 Program service revenue;	code	Amount	code	Amount	function income
a	_				
b			+-+		
c		 			
Q	-		 		
e			 		
g Fees and contracts from government agencies			 -		
Prees and contracts from government agencies Membership dues and assessments		· · ·	+		
3 Interest on savings and temporary cash		<u>-</u>	+		
investments			14	69,080.	
4 Dividends and interest from securities			+	03,0001	
5 Net rental income or (loss) from real estate.	· ·	, ,	1	and the second of the second	多种类 计图 经外销额
a Debt-financed property			 	······································	
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income			1		
8 Gain or (loss) from sales of assets other			1-1-		
than inventory					
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:	1			·	
a	_				
b	_		<u> </u>	<u> </u>	
C					
d	_				
e	_	· · · · · · · · · · · · · · · · · · ·			
12 Subtotal. Add columns (b), (d), and (e)) ·	0.	<u>. </u>	69,080.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	69,080.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Accom	iplishment of Ex	empt Pu	ırposes	
Line No. Explain below how each activity for which in	come is reported in	column (e) of Part XVI-	A contribute	d importantly to the accom	plishment of
▼ the foundation's exempt purposes (other than the foundation) is exempt purposes.				,	
	_				
				····	
		· · · · · · · · · · · · · · · · · · ·			
					
		<u> </u>			
		 			
					
					·
			-		
923821 12-17-19					Form 990-PF (2019)

Form 990-PF (2		U SKIN FORCE FO	R GOOD FOUNDA	TION	87-0577244	Page 13
Part XVII		egarding Transfers to a	ind Transactions and	d Relationships	With Noncharitable	
	Exempt Organ	izations				
1 Did the or	ganization directly or indir	rectly engage in any of the following	ng with any other organization	n described in section 50)1(c) Ye	s No
(other tha	n section 501(c)(3) organ	nizations) or in section 527, relating	g to political organizations?		: 1 14	, , ,
a Transfers	from the reporting founda	ation to a noncharitable exempt or	ganization of:			^ '
(1) Cash		·	•		1a(1)	Х
(2) Other	**		,		1a(2)	Х
b Other tran			• •			
	of assets to a noncharital	hie exempt organization			1b(1)	X
		ncharitable exempt organization			1b(2)	X
, ,	al of facilities, equipment,	· =			1b(3)	X
	bursement arrangements					x
• •	=				1b(4)	$\frac{x}{x}$
• •	s or loan guarantees	and another or frankring and addition			1b(5)	X
• •		embership or fundraising solicitation			1b(6)	$\frac{x}{x}$
-		illing lists, other assets, or paid en	• •	our chaut the four marks	t value of the goods, other goods	
					et value of the goods, other assets,	
		oundation. If the foundation receiv		in any transaction or si	laring arrangement, snow in	
		other assets, or services received.		1 (4) = 1 = 1		
(a) Line no	(b) Amount involved	(c) Name of noncharitabl	e exempt organization	(0) Description of tra	nsfers, transactions, and sharing arrangen	nents
		N/A				
		·		 		
						
		<u> </u>				
		<u> </u>		<u> </u>		
		ļ	 			
		İ .				
		I				
2a Is the four	ndation directly or indirect	tly affiliated with, or related to, on	e or more tax-exempt organiz	ations described		
	•	on 501(c)(3)) or in section 527?	. •		Yes [X No
	omplete the following sch					
3 11 1331 31	(a) Name of org		(b) Type of organization	(c) D	escription of relationship	
	N/A		1	······································	· · · · · · · · · · · · · · · · · · ·	
	2.7_2.2					
			 			
			 	· · · · · · · · · · · · · · · · · · ·		
Under	penalties of perlury. I declare t	that I have examined this return, including	a accompanying schedules and sta	itements, and to the best of n	ny knowledge	
		mptete Declaration of preparer (other than				es this parer
Here	KYLE R Kimba	all.	11/13/202	CONTROLL	shown below? See	e instr
					JER X Yes	No
	nature of officer or trustee	· · · · · · · · · · · · · · · · · · ·	Date	Title Che	eck If PTIN	
	Print/Type preparer's na	ame Preparer's	Signature	Date Che	└	
Paid	V adalaba	Canlo Ka		III II II II Sell	- employed	
	1 Will En	1000		11/11/08	P0050178	
Preparer	Firm's name > STE	:VENSON SMITH\CP	A'S(LLC	Fir	m's EIN \triangleright 20-0079323	,
Use Only	<u> </u>	<u> </u>	7			
		255 NORTH EDGEWO	OD DR #375			_
	l PR	ROVO, UT 84604		Ph	none no. 801-234-420	
					Form 990-P	'F (2019)

Part XV Supplementary Information 3 Grants and Contributions Paid During the Ye	ear (Continuation)			
Recipient		Foundation	Purpose of grant or	
Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	status of recipient	Purpose of grant or contribution	Amount
CHILDREN WITH CANCER CHRISTMAS FUND		501(C)(3)	HUMANITARIAN	20,000
BMRF		501(C)(3)	MEDICAL RESEARCH	104,627
DUCATE THE CHILDREN		FOREIGN CHARITY	HUMANITARIAN	15,000
TTC		FORBIGN CHARITY	HUMANITARIAN	36,500
FEED THE CHILDREN		501(C)(3)	EDUCATION	60,000
HEART HOME FOUNDATION		501(C)(3)	EDUCATION	10,000
INTERNATIONAL RESCUE COMMITTEE		501(C)(3)	HUMANITARIAN	10,000
KOOLEN-DEVRIES FOUNDATION		501(C)(3)	HUMANITARIAN	12,500
LDS PHILANTHROPIES		501(C)(3)	HUMANITARIAN	29,000
LIBERTAS INSTITUTE		501(C)(3)	HUMANITARIAN	10,000
Total from continuation sheets				1,605,369

3 Grants and Contributions Paid During the Y				
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	
LIFEWORKS FOR KIDS		501(C)(3)	HUMANITARIAN	5,00
				,
OPERATION BLESSING INTERNATIONA;		501(C)(3)	HUMANITARIAN	
				10,00
ORPHANAGE SUPPORT SERVICES		E01 (C) (3)	WWW.NTWNDIN	
DRGANIZATION		501(C)(3)	HUMANITARIAN	20,00
PEACE HOUSE		501(C)(3)	HUMANITARIAN	25,00
PROVO SCHOOL DISTRICT		501(C)(3)	EDUCATION	
				12,00
RACHEL COVEY FOUNDATION	:	501(C)(3)	EDUCATION	
				8,00
RED CROSS		501(C)(3)	HUMANITARIAN	25,00
SAPI		501(C)(3)	EDUCATION	246.50
				717,53
BEACOLOGY		501(C)(3)	ENVIRONMENTAL	
			PRESERVATION	259,21
PHANKSGIVING POINT INSTITUTE		501(C)(3)	HUMANITARIAN	20,00

3 Grants and Contributions Paid During the Ye		,		ļ <u> </u>
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
riny tim's foundation for kids		501(C)(3)	HUMANITARIAN	
				6,00
UNITED WAY OF UTAH		501(C)(3)	HUMANITARIAN	40,00
UVU FOUNDATION		501(C)(3)	EDUCATION	30,00
WELLS OF HOPE		FOREIGN CHARITY	HUMANITARIAN	95,00
WORLD VISION		501(C)(3)	HUMANITARIAN	25,00

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

2019

Name of the organization

Employer identification number

	THE NU SKIN FORCE FOR GOOD FOUNDATION	87-0577244							
Organization type (ch	neck one).								
Filers of:	Section:								
Form 990 or 990-EZ	501(c)() (enter number) organization	501(c)() (enter number) organization							
	4947(a)(1) nonexempt charitable trust not treated as a private foundation								
	527 political organization								
Form 990-PF	X 501(c)(3) exempt private foundation								
	4947(a)(1) nonexempt charitable trust treated as a private foundation								
	501(c)(3) taxable private foundation								
	ation is covered by the General Rule or a Special Rule. 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru	le. See instructions.							
	ization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling many one contributor. Complete Parts I and II. See instructions for determining a contributor								
Special Rules									
sections 509 any one cont	ization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support (a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount 90-EZ, line 1. Complete Parts I and II.	or 16b, and that received from							
year, total co	ization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from intributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or edurated for children or animals. Complete Parts I, II, and III.	•							
year, contrib is checked, e purpose Do	nization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from utions exclusively for religious, charitable, etc., purposes, but no such contributions totaled menter here the total contributions that were received during the year for an exclusively religioun't complete any of the parts unless the General Rule applies to this organization because it aritable, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000. If this box s, charitable, etc ,							
but it must answer "N	tion that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Filo" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Fineet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	•							

Name of organization

Employer identification number

THE NU SKIN FORCE FOR GOOD FOUNDATION

87-0577244

Part I	Contributors (see instructions). Use duplicate copies of Part I if additional	space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	DEAN NGUYEN 75 WEST CENTER PROVO, UT 84601	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	NU SKIN ENTERPRISES 75 WEST CENTER PROVO, UT 84601	\$1,097,709.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
3	MATT DORNY 75 WEST CENTER PROVO, UT 84601	\$15,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
4	JARED KEISEL 75 WEST CENTER PROVO, UT 84601	\$5,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
5	PHUONG THAI LEE 75 WEST CENTER PROVO, UT 84601	\$35,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
6	DORRIS POSTELTZ 75 WEST CENTER PROVO, UT 84601	\$5,000.	Person X Payroll Noncash (Complete Part II for noncash contributions)

Schedule	B (Form 990, 990·EZ, or 990·PF) (2019)		Page 2
	rganization		Employer identification number
THE N	U SKIN FORCE FOR GOOD FOUNDATION		87-0577244
Part I	Contributors (see instructions) Use duplicate copies of Part I if add	itional space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contribution	(d) Type of contribution
7	BILL AND JULIE TOTH 75 WEST CENTER PROVO, UT 84601	\$53,4	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributio	(d) ns Type of contribution
			Person Payroll Complete Part II for noncash contributions.)

Employer identification number

THE NU SKIN FORCE FOR GOOD FOUNDATION

87-0577244

	SKIN FORCE FOR GOOD FOUNDATION Ioncash Property (see instructions) Use duplicate copies of Part		-0577244
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_ _		 \$	_
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
_		*	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _		 \$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
		*	
(a) No. rom rart I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (See instructions.)	(d) Date received
_ _		 \$	

Name of or	rganization		Employer identification number
THE N	J SKIN FORCE FOR GOOD FO	UNDATION	87-0577244
Part III	from any one contributor. Complete columns (a)	through (e) and the following line entri- charitable, etc., contributions of \$1,000 or le	rction 501(c)(7), (8), or (10) that total more than \$1,000 for the year try. For organizations less for the year (Enter this into once.) \$
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
		(e) Transfer of gift	t .
	Transferee's name, address, ar	nd 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	t
	Transferee's name, address, ar	nd 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	<u> </u>
-	Transferee's name, address, ar	nd 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
		(1) Transfer of 100	
	Transferee's name, address, ar	(e) Transfer of gift	Relationship of transferor to transferee

FORM 990-PF I	NTEREST	ON	SAVINGS	AND I	CEMI	PORARY	CASH	IN	VESTMENTS	ST.	ATEMENT 1
SOURCE					(A) EVEN		NET	IN	(B) VESTMENT COME		(C) ADJUSTED ET INCOME
INTEREST			-		6.9	9,080.	_		69,080.	_	
TOTAL TO PART	I, LINE	3	=		69	9,080.			69,080.		
FORM 990-PF					IXAT	ES .		··		ST	ATEMENT 2
DESCRIPTION				(A) PENSES R BOOK		(I NET II MENT I			(C) ADJUSTED NET INCOM		(D) CHARITABL PURPOSES
FEDERAL TAX				55	55.			0.			0
TO FORM 990-PF	F, PG 1,	LN	18	55	55.			0.			0
FORM 990-PF				OTHER	R EX	KPENSE:	3		<u> </u>	ST	ATEMENT 3
DESCRIPTION				(A) PENSES R BOOK	-	(I NET II MENT I			(C) ADJUSTED NET INCOM		(D) CHARITABL PURPOSES
BANK AND WIRE GALA EXPENSES	FEES			4,23 199,51			4,23	9. 0.			0
TO FORM 990-PF	, PG 1,	LN	23	203,75	55.		4,23	9.			0

FORM 990-PF PART VIII - LIS TRUSTEES AND	T OF OFFICERS, DI	EMENT 4		
NAME AND ADDRESS	TITLE AND AVRG HRS/WK			
B. G. HUNT 75 W. CENTER STREET PROVO, UT 846014432	VICE PRESIDENT 0.00		0.	0.
BLAINE KNIGHT 75 W. CENTER STREET PROVO, UT 846014432	VICE PRESIDENT 0.00	0.	0.	0.
KYLE KIMBALL 75 W. CENTER STREET PROVO, UT 846014432	VICE PRESIDENT 0.00	0.	0.	0.
MATTHEW DORNY 75 W. CENTER STREET PROVO, UT 846014432	TRUSTEE 0.00	0.	0.	0.
MARK LAWRENCE 75 W. CENTER STREET PROVO, UT 846014432	TRUSTEE 0.00	0.	0.	0.
STEVEN LUND 75 W. CENTER STREET PROVO, UT 846014432	TRUSTEE 0.00	0.	0.	0.
BLAKE RONEY 75 W. CENTER STREET PROVO, UT 846014432	TRUSTEE 0.00	0.	0.	0.
SANIDE TILLOTSON 75 W. CENTER STREET PROVO, UT 84601	TRUSTEE 0.00	0.	0.	0.
RUTH TODD 75 W. CENTER STREET PROVO, UT 84601	TRUSTEE 0.00	0.	0.	0.
RITCH WOOD 75 W. CENTER STREET PROVO, UT 84601	TRUSTEE 0.00	0.	0.	0.

THE NU SKIN FORCE FOR GOOD FOUR	NDATION		87-05	577244
RYAN NAPIERSKI 75 W. CENTER STREET PROVO, UT 84601	TRUSTEE 0.00	0.	0.	0.
HEATHER CRUZ 75 W. CENTER STREET PROVO, UT 84601	OFFICER 0.00	0.	0.	0.
JENNIFER LENTINE 75 W. CENTER STREET PROVO, UT 84601	OFFICER 0.00	0.	0.	0.
BREA PETERSEN 75 W. CENTER STREET PROVO, UT 84601	OFFICER 0.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF, PAGE	E 6, PART VIII	0.	0.	0.