		D RETURN - SI				•		
Fam <b>990-T</b>	Exempt Org	anization Bus (and proxy tax und	sine	ss Income T	ax Return	OMB No 1545-0687		
	· -	0040						
<b>∀</b>	For calendar year 2018 or other ta	<u>~  2018   </u>						
Department of the Treasury Internal Revenue Service	► Go to w  Do not enter SSN nur	Open to Public Inspection for 501(c)(3) Organizations Only						
A Check box if address changed	Name of organization	Employer identification number (Employees' trust, see instructions)						
<del></del>	Print LIFECENTER	94-3253342						
B Exempt under section  X 501(C)(3)	or Number, street, and r	Unrelated business activity code						
408(e) 220(e)		(See instructions)						
408A 530(a)	City or town, state or province, country, and ZIP or foreign postal code							
529(a)	BELLEVUE, WA 98006							
C Book value of all assets at end of year		umber (See instructions )	▶					
<del></del>	G Check organization		poration	501(c) trust	401(a) tr	rust Other trust		
	organization's unrelated trades	or businesses 🕨			he only (or first) unre			
trade or business here		•			complete Parts I-V. If			
	lank space at the end of the pre	vious sentence, complete Pa	arts I an	d II, complete a Schedule	M for each additional	trade or		
business, then complete	the corporation a subsidiary in	on offiliated group or a person	at aubo	durry controlled group?		TVoc No		
	the corporation a subsidiary in and identifying number of the pa		กเรยมร	idiai y controlleu group?	▶ ∟	Yes No		
	► KEVIN O'CON			Telepho	ne number > 42	25-201-6563		
	d Trade or Business I			(A) Income	(B) Expenses	(C) Net		
1a Gross receipts or sale	es		Τ		<del></del>			
b Less returns and allow	wances	c Balance	10					
2 Cost of goods sold (S	Schedule A, line 7)		2			, [		
3 Gross profit. Subtract	line 2 from line 1c	(01	3					
4a Capital gain net incom	ne (attach Schedule D)	$\mathcal{A}$	4a					
<b>b</b> Net gain (loss) (Form	4797, Part II, line 17) (attach F	orm 4797)	4b					
<ul> <li>Capital loss deduction</li> </ul>			4c					
· · · ·	5 Income (loss) from a partnership or an S corporation (attach statement)					DI CEWED		
6 Rent income (Schedule C)			7			RECEIVED		
7 Unrelated debt-financed income (Schedule E)					- 101	<u>                                   </u>		
8 Interest, annuities, royalties, and rents from a controlled organization (Schedule F)			9		- <u>  18</u>	SEP 2 8 2020   C		
9 Investment income of a section 501(c)(7), (9), or (17) organization (Schedule G)				<del></del>	<u> </u>	<u> </u>		
•	10 Exploited exempt activity income (Schedule I)				<del>-   -</del>	OGDEN, UT		
11 Advertising income (S	•		11		<u>-</u>	30000		
•	12 Other income (See instructions; attach schedule) 13 Total. Combine lines 3 through 12							
	ns Not Taken Elsewh	ere (See instructions fo	13 or limita	0 • l	<del></del>			
	contributions, deductions m				ncome)			
14 Compensation of offi	icers, directors, and trustees (S	chedule K)				14		
15 Salaries and wages					<b>j.</b> _	15		
16 Repairs and mainten	ance				ļ-	16		
,	Interest (attach schedule) (see instructions)							
•								
20 Charitable contribution 21 Depreciation (attach)	•	ion rules)		21	<u> </u>	20		
•	•	nere on return		22a		22b		
•	· · · · · · · · · · · · · · · · · · ·							
·								
, ,								
27 Excess readership co	27							
28 Other deductions (att	28							
29 Total deductions. Ad	29 0.							
30 Unrelated business to	· · · · ·							
823701 01-09-19 LHA Fo	r Paperwork Reduction Act No	tice see instructions				Form <b>990-T</b> (2018)		

Form 990-1			94-325	3342	F		
Part I							
33	Total of unrelated business taxable income computed from all unrelated trades or businesses (si	ee instructions)		33			
34	Amounts paid for disallowed fringes			34			
35	Deduction for net operating loss arising in tax years beginning before January 1, 2018 (see instr	uctions)		35			
36	Total of unrelated business taxable income before specific deduction. Subtract line 35 from the s	sum of					
	lines 33 and 34		36				
37	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)	Specific deduction (Generally \$1,000, but see line 37 instructions for exceptions)					
38	Unrelated business taxable income. Subtract line 37 from line 36. If line 37 is greater than line	36,					
	enter the smaller of zero or line 36			38			
Part I	V Tax Computation						
39	Organizations Taxable as Corporations. Multiply line 38 by 21% (0 21)		•	39			
40	Trusts Taxable at Trust Rates. See instructions for tax computation. Income tax on the amount on line 38 from:				`		
	Tax rate schedule or Schedule D (Form 1041)		<b>&gt;</b>	40			
41	Proxy tax. See instructions .		<b>&gt;</b>	41			
42	Alternative minimum tax (trusts only)			42			
43	Tax on Noncompliant Facility Income. See instructions			43			
44	Total. Add lines 41, 42, and 43 to line 39 or 40, whichever applies			44			
Part V							
45 a	Foreign tax credit (corporations attach Form 1118; trusts attach Form 1116)	45a					
	Other credits (see instructions)	45b					
	General business credit Attach Form 3800	45c					
d	Credit for prior year minimum tax (attach Form 8801 or 8827)	45d					
	Total credits Add lines 45a through 45d			45e			
46	Subtract line 45e from line 44		1	46			
	Other taxes. Check if from; Form 4255 Form 8611 Form 8697 Form 86	366 Dother (e	ttach schedule)	47			
	Total tax. Add lines 46 and 47 (see instructions)		·	48			
49	2018 net 965 tax liability paid from Form 965-A or Form 965-B, Part II, column (k), line 2			49			
	Payments: A 2017 overpayment credited to 2018	50a					
	2018 estimated tax payments	50b					
	Tax deposited with Form 8868		1,126.				
	Foreign organizations; Tax paid or withheld at source (see instructions)	50d					
	Backup withholding (see instructions)	50e					
	Credit for small employer health insurance premiums (attach Form 8941)	50f					
	Other credits, adjustments, and payments: Form 2439						
A	Form 4136 X Other 105. Total	50g	105.				
51		ATEMENT		51	11,23		
52	Estimated tax penalty (see instructions). Check if Form 2220 is attached		İ	52			
	Tax due. If line 51 is less than the total of lines 48, 49, and 52, enter amount owed		<b>▶</b> 1	53			
	Overpayment. If line 51 is larger than the total of lines 48, 49, and 52, enter amount overpaid			54	11,23		
	Enter the amount of line 54 you want; Credited to 2019 estimated tax	O. Befi	inded	55	11,23		
Part V		<u> </u>		<u> </u>			
	At any time during the 2018 calendar year, did the organization have an interest in or a signature				Yes		
,	over a financial account (bank, securities, or other) in a foreign country? If "Yes," the organization						
	FinCEN Form 114, Report of Foreign Bank and Financial Accounts. If "Yes," enter the name of the	-		`			
	here						
57	During the tax year, did the organization receive a distribution from, or was it the grantor of, or tr	ansferor to a fore	inn trust?		<del>         -</del>		
31	If "Yes," see instructions for other forms the organization may have to file.	unoioror 10, a 1016	ign nuot		<del>-  </del>		
58	Enter the amount of tax-exempt interest received or accrued during the tax year						
- 30	Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and sta	atements, and to the b	est of my knowled	ge and belie	of, it is true,		
Sign	correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which prepare	r has any knowledge	,				
lere	1/23/20 ▶ PRESIDE	רואב יינאב	1130	•	scuss this return wi		
HERE	Signature of officer , Date Title	מאד דייי			nown below (see		
				-T	W 169		
	Print/Type preparer's name Preparer's signature Da		Check if	PTIN			
Paid	COLLEGE PARTERS PARTERS		self- employed	D0.	1051220		
Prepa		2/14/20			L251320		
Use O	nly Firm's name ► MOSS ADAMS LLP		Firm's EIN	91-	<u>-0189318</u>		
	2707 COLBY AVENUE, SUITE 801		_, .	۰- ۰-	- 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0		
	Firm's address ► EVERETT, WA 98201		Phone no. 4		<u> 59-7227</u>		
3711 01-	09-19			F	orm 990-T (2		

## FOOTNOTES

STATEMENT 1

FORM 990-T, PAGE 2, PART III, LINE 34 IS BEING AMENDED TO REMOVE THE ORIGINALLY REPORTED AMOUNT DUE TO THE REPEAL OF SECTION 512(A)(7) THROUGH THE FURTHER CONSOLIDATED APPROPRIATIONS ACT, 2020. THIS ADJUSTMENT REDUCES THE UNRELATED BUSINESS TAXABLE INCOME AS ORIGINALLY FILED FROM \$53,483 TO \$0 WHICH CREATES A REFUND DUE IN THE AMOUNT OF \$11,231.

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FORM 990-T	OTHER CREDITS AND PAYMENTS	STATEMENT 2
DESCRIPTION		AMOUNT
TAX PAID ON ORIGINALLY	FILED RETURN	105.
TOTAL INCLUDED ON FORM	990-T, PAGE 2, PART V, LINE 50G	105.