Edgar Filing: LIFE TIME FITNESS INC - Form 4

LIFE TIME F	FITNESS INC											
Form 4	-											
May 08, 2006												
FORM 4 UNITED STATES SECURITIES AND EXCHANGE COMMISSION								т	OMB APPROVAL			
Washington, D.C. 20549							OMB Number:	3235-0287				
Check this			vv usi	inigion,	D.C. 200					January 31,		
if no longe	er STATEM	ENT OF C	CHAN	GES IN BENEFICIAL OW				NERSHIP OF	Expires:	2005		
subject to Section 16				SECURITIES					Estimated a burden hou			
Form 4 or									response 0.			
Form 5	Filed purs	uant to Sec	ction 16	(a) of the	Securiti	es Ex	chang	ge Act of 1934,				
obligation may conti				•	•	- ·		f 1935 or Sectio	n			
See Instru		30(h) of	the Inv	vestment	Company	y Act	of 19	40				
1(b).												
(Print or Type R	esponses)											
(Thin of Type it	esponses)											
1. Name and Address of Reporting Person [*] _2. Issuer Name and Ticker or Trading 5. Rel						5. Relationship of	Reporting Person(s) to					
HALPIN JAMES F Symbol				IME FITNESS INC [LTM]				Issuer				
								(Check all applicable)				
(Last)	(First) (M	iddle) 3.	Date of	Earliest Tra	nsaction			(Cheo	ck all applicable	e)		
() () () () () () () () () ()				Day/Year)				X_ Director 10% Owner Officer (give title Other (specify below) below)				
6442 CITY WEST PARKWAY 05/04/20												
				nendment, Date Original onth/Day/Year)				6. Individual or Joint/Group Filing(Check Applicable Line)				
		ГІ	neu(mont	n/Day/rear)				_X_ Form filed by	One Reporting Po	erson		
EDEN PRAI	RIE, MN 55344								More than One Re	eporting		
								Person				
(City)	(State) (Zip)	Table	I - Non-Do	erivative S	ecuri	ties Ac	quired, Disposed o	f, or Beneficial	lly Owned		
1.Title of	2. Transaction Date			3. 4. Securities			5. Amount of	6. Ownership				
Security	(Month/Day/Year)	Execution I	Date, if	TransactionAcquired (A) or				Beneficially	Form: Direct	Indirect Beneficial Ownership		
(Instr. 3)		any (Month/Day/Year)		CodeDisposed of (D)(Instr. 8)(Instr. 3, 4 and 5)					(D) or Indirect (I)			
		` ·	, ,				·	Following	(Instr. 4)	(Instr. 4)		
						(A)		Reported Transaction(s)				
						or		(Instr. 3 and 4)				
Common				Code V	Amount	(D)	Price	(, ,				
Common Stock	05/04/2006			А	528 <u>(1)</u>	А	<u>(2)</u>	4,607	D			
Common								40,000	Ι	By spouse		
Stock												

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

 Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
 (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	4. Transactio Code (Instr. 8)	of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3,		ate	7. Titl Amou Under Secur (Instr.	int of rlying	8. Price of Derivative Security (Instr. 5)	9. Nu Deriv Secur Bene Owne Follo Repo Trans (Instr
			Code V	4, and 5) (A) (D)	Date Exercisable	Expiration Date	Title	Amount or Number of Shares		

Edgar Filing: LIFE TIME FITNESS INC - Form 4

Reporting Owners

Reporting Owner Name / Address	Relationships						
	Director	10% Owner	Officer	Other			
HALPIN JAMES F 6442 CITY WEST PARKWAY EDEN PRAIRIE, MN 55344	Х						
Signatures							
/s/ Amy C. Seidel on behalf of Ja Halpin	05/08/2006						
**Signature of Reporting Person			Date				

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) Grant of restricted stock under the Issuer's 2004 Long-Term Incentive Plan.
- (2) Not applicable.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.