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SCANNEL MAR 11 2010

Return of Private Foundation
or Section 4947(a)(1) Nonexempt Charitable Trust
Treated as a Private Foundation
or may be able to use a copy of the return to satisfy state rec

OMB No 1545-0052 2008

Int	emal R	Revenue Service Note: The foundation may be			e report	ing requirements_	
F	or ca	lendar year 2008, or tax year beginning	12/		ding		11/30,2009
G	Che	eck all that apply Initial return	Final return	Amended return	A	ddress change	Name change
		Name of foundation	Name of foundation A Employer identification number				
,	Jse th	he IRS					
	lab	oel. TIM AND LIBBY BROWN FOU	NDATION			46-0	73`2753
	Other	rwise, Number and street (or P O box number if	· · · · · · · · · · · · · · · · · · ·	address) Room/si	uite	B Telephone number (see	
	pr	int					
		ype. 1727 TREMONT PLACE				(303	3) 308-8238
		City or town, state, and 7IP code		Į.	<del>-  </del> ,	C If exemption applicat	ion is
ь	nstru	ctions.				pending, check here	<b>▶</b>
					- ['	D 1 Foreign organizati	
_		DENVER, CO 80202-4006	-1/2)			2 Foreign organizati 85% test, check hi	
H		eck type of organization. X Section 501(				computation	▶ ∟ .
1		Section 4947(a)(1) nonexempt charitable trust	Other taxable pri		—— ·	E If private foundation	status was terminated
ı	_		÷	ash x Accrual		under section 507(b)	(1)(A), check here . P
			ther (specify)				n a 60-month termination
_		12/3231	column (d) must be on	casn basis )		under section 507(b)	(1)(B), check here
L	art	Analysis of Revenue and Expenses (The	(a) Revenue and	(b) Net investment	(c)	Adjusted net	(d) Disbursements for charitable
		total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in	expenses per	income	(0)	income	purposes
		column (a) (see page 11 of the instructions) )	books				(cash basis only)
	1	Contributions, gifts, grants, etc., received (attach schedule) .	190,000.				
	2	Check In the foundation is not required to attach Sch. B.					
	3	Interest on savings and temporary cash investments					
	4	Dividends and interest from securities					
	5a	Gross rents	· · · · · · · · · · · · · · · · · · ·				
	ţ	Net rental income or (loss)					
a)	1	Net gain or (loss) from sale of assets not on line 10					
Ž		Gross sales price for all			1		
Revenue	7	assets on line 6a  Capital gain net income (from Part IV, line 2)			<del> </del>		
జ		· ' · '			ļ		
	8	Net short-term capital gain					
	9 10 a	Gross sales less returns					
	١.	and allowances · · · ·					
	i	Less Cost of goods sold .					
	l	Gross profit or (loss) (attach schedule)			1	· · · · · · · · · · · · · · · · · · ·	
	11	Other income (attach schedule)	100.000	<del></del>	<u> </u>		
_		Total. Add lines 1 through 11	190,000.		-		
	13	Compensation of officers, directors, trustees, etc					
Ş	14	Other employee salaries and wages					
nse.	15	Pension plans, employee benefits			<del> </del>		<del>.</del>
Expenses		Legal fees (attach schedule)					
	ı	Accounting fees (attach schedule)			ļ		
<b>Administrative</b>	С	Other professional fees (attach schedule)			<del> </del>		
rat	17	Interest			<u> </u>		
ist	18	Taxes (attach schedule) (see page 14 of the instructions)			<u> </u>		
Ę	19	Depreciation (attach schedule) and depletion.			ļ		
ğ	20	OccupandECEIVED					
Ď	21	Travel, conferences, and meetings					
and	22	The transport of the state of t			<u> </u>		
ing	23	Other expenses (attach schedule)					
rat	24	Total operating and administrative expenses.					
Operating		Add IIQGDEN 20T			<u> </u>		
0	25	Contributions, gifts, grants paid	182,150.				182,150.
	26	Total expenses and disbursements Add lines 24 and 25	182,150.				182,150.
_	27	Subtract line 26 from line 12					
		Excess of revenue over expenses and disbursements	7,850.				
	l	Net investment income (if negative, enter -0-)	,	-0-			· · · · · · · · · · · · · · · · · · ·
	l	Adjusted net income (if negative, enter -0-)		· · · · · · · · · · · · · · · · · · ·		-0-	····-
_							

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. JSA 8E1410 1 000

Form 990-PF (2008)

L	An ill Analysis of Changes in Net Assets or Fund Balances		
	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return)	1	4,479
2	Enter amount from Part I, line 27a	2	7,850
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	12,329
5	Decreases not included in line 2 (itemize) ▶	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	12,329

8E1420 1 000

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Part IV Capital Gains	s and Losses for Tax on Inv	estment Income			·
	d describe the kind(s) of property sold ( brick warehouse, or common stock, 200	<del>-</del>	(b) How acquired P-Purchase	(c) Date acquired (mo, day, yr)	(d) Date sold (mo , day, yr )
1a	THE WEIGHOUSE, OF COMMISSION, 200	313 MEO 00 )	D-Donation	( , day, y. /	
b	-		_	-	<del></del>
c	***		<del> </del> -	-	
d		<u> </u>			<del></del>
e			<del> </del>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo	
	<u> </u>	· · · · · · · · · · · · · · · · · · ·	<del> </del>	(-)   ( )	
 b			<u> </u>		
С					
d					
-				···-	
Complete only for assets s	i howing gain in column (h) and owr	and by the foundation on 12/21/60			
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	Gains (Col. (h) g (k), but not less t Losses (from co	than -0-) <b>or</b>
	23 01 12/01/03	Over cor (j); ii arry			
<u>a</u>					
<u>b</u>					
C	_	-,,,		<del></del>	
<u>d</u>					
е	7 16	nom plan antaria Dari Lima 7			
2 Capital gain net income or		gain, also enter in Part I, line 7			
	<b>ξ</b> π	(loss), enter -0- in Part I, line 7	2		
<ol><li>Net short-term capital gair</li></ol>	n or (loss) as defined in sections 12	22(5) and (6)			
If gain, also enter in Part I	, line 8, column (c) (see pages 13	and 17 of the instructions)	l i		
	line 8		3		
	nder Section 4940(e) for Redu		<del></del>		·
				\	• • •
(For optional use by domesti	c private foundations subject to the	e section 4940(a) tax on net investi	ment inco	ome)	
15 40 40 (1) (0)					
If section 4940(d)(2) applies,	leave this part blank.				
					- —
	the section 4942 tax on the distrib		ase perio	<sup>d?</sup> L	Yes X No
	not qualify under section 4940(e)	· · · · · · · · · · · · · · · · · · ·			
	ount in each column for each year	see page 18 of the instructions be	efore mak		
(a) Base penod years	(b)	(c)	İ	(d) Distribution ra	etio
Calendar year (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	
2007	127,900.	29,993.			4.264328
2006	89,500.	16,236.			5.512441
2005	36,400.	5,364.			6.785981
2004	33,600.	10,059.	<del></del>		3.340292
2003	14,500.	26,004.		-	0.557607
	11,500.	20,004.			0.23/60/
2 Total of line 1, column (d)			2	^	0 460540
3 Average distribution ratio	)	the total on line 2 by 5 or by the		2	0.460649
_	• •				
number of years the four	dation has been in existence if less	man o years	3		4.092130
4. Enter the actual and	and a state of the	Ded Viles 5			
4 Enter the net value of nor	ncharitable-use assets for 2008 fro	m Part X, line 5	4		10,193.
5 Multiply line 4 by line 3			5		41,711.
6 Enter 1% of net investme	nt income (1% of Part I, line 27b)		6		
7 Add lines 5 and 6			7		41,711.
8 Enter qualifying distribution	ons from Part XII, line 4		8		182,150
If line 8 is equal to or g	ons from Part XII, line 4 reater than line 7, check the box	in Part VI, line 1b, and complet	e that pa	art using a 1%	tax rate See
the Part VI instructions on	page 18	•	•	<b>5</b>	-

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

Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their

8a Enter the states to which the foundation reports or with which it is registered (see page 19 of the

instructions) ► CO,

. | 10 | X Form **990-PF** (2008)

Х

8b

names and addresses

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Page 5

11 12 13 3-82	Х	X X
12		
13		<u>x</u>
13		<u>x</u>
3-82		L
3-82		
	38	
• • •	▶	
1	Yes	No
		-110
1		
1 b	N/	A
1 c	N/	<u> </u>
2b	N/	<u>A</u>
	1	
3ь	พ/	A
4a	/	X
4b		х
	1b 1c	1b N/ 1c N/ 3b N/ 4a

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, Part VII-B. Statements Regarding Activities for V	Vhich Form 4720 May Be Required (continued)		
Es. During the year did the foundation new or insur any amount to		 $\neg \neg$	

Pạ	rt VN-B. Statements Regarding Activities f	or Which Form 4	720 May Be Requ	iired (continued)		
5 a	During the year did the foundation pay or incur any amou	unt to				-
	(1) Carry on propaganda, or otherwise attempt to influe	nce legislation (section	4945(e))?	Yes X N	o	
	(2) Influence the outcome of any specific public election	n (see section 4955), c	or to carry on,			
	directly or indirectly, any voter registration drive?			Yes X N	o	
	(3) Provide a grant to an individual for travel, study, or of				o	
	(4) Provide a grant to an organization other than a char			. — —		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)?	-		Yes X N		
	(5) Provide for any purpose other than religious, charital	· • •	,	• —		
	educational purposes, or for the prevention of cruelty	•		Yes X N		
h	If any answer is "Yes" to 5a(1)-(5), did any of the transact			- — —		
b	Regulations section 53 4945 or in a current notice regard	• •	•		5b	N/A
	-	-		'.	35	14/11
	Organizations relying on a current notice regarding disas					
C	If the answer is "Yes" to question 5a(4), does the found	•		A Yes N		
	because it maintained expenditure responsibility for the g			A res N	•	
	If "Yes," attach the statement required by Regulations sec					
6 a	Did the foundation, during the year, receive any funds,	•				
	on a personal benefit contract?			Yes X N	0	
b	Did the foundation, during the year, pay premiums, direct	ctly or indirectly, on a p	personal benefit contra	ct <sup>?</sup>	6b	X
	If you answered "Yes" to 6b, also file Form 8870					
	At any time during the tax year, was the foundation a pa	•	•			
	If yes, did the foundation receive any proceeds or have					N/A
Pa	Information About Officers, Directors and Contractors	s, Trustees, Foun	dation Managers,	Highly Paid Empl	oyees,	
1	List all officers, directors, trustees, foundation m	nanagers and their	compensation (see	page 22 of the instr	uctions).	
	(a) Name and address	(b) Title, and average	(c) Compensation	(d) Contributions to	(e) Expens	
	(1)	hours per week devoted to position	(If not paid, enter -0-)	employee benefit plans and deferred compensation	other all	owances
SEE	STATEMENT 1		NONE	NONE	N	ONE
		İ				
		,				
	Compensation of five highest-paid employees (ot If none, enter "NONE."	her than those inc	luded on line 1 - se	e page 23 of the ins	tructions).	
		(b) Title, and average		(d) Contributions to	(-) F	
(a	) Name and address of each employee paid more than \$50,000	hours per week	(c) Compensation	employee benefit plans and deferred	(e) Expens other all	
		devoted to position		compensation		
ΝZ	<b></b>	•				
			****			
	· · · · · · · · · · · · · · · · · · ·					
	I number of other employees hald over \$50,000					

.... ► NONE
Form 990-PF (2008)

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Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Emploannd Contractors (continued)	yees,	
3 Five highest-paid independent contractors for professional services (see page 23 of the instructions). If none,	enter "NC	DNE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	ľ	pensation
N/A		
<u>N/A</u>		
Total number of others receiving over \$50,000 for professional services	▶	NONE
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficianes served, conferences convened, research papers produced, etc.	Ехрє	enses
1_ <u>N/A</u>		
2		
<b>4</b>		
3		
·		
4		
·		
Part IX-B Summary of Program-Related Investments (see page 23 of the instructions)		-
Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Am	ount
1 NONE		
2		
All other program-related investments See page 24 of the instructions		
3 NONE		
<b>7</b> (1.441)		_
Total. Add lines 1 through 3	L	

Рa	rt X	Minimum Investment Return (All domestic foundations must complete this part. Foreig see page 24 of the instructions.)	gn foundat	ions,
1	Fair n	narket value of assets not used (or held for use) directly in carrying out charitable, etc,		<del> </del>
	purpo	ses.		
а	Avera	ge monthly fair market value of securities	1a	NONE
b	Avera	ge of monthly cash balances	1 b	10,348.
С	Fair n	narket value of all other assets (see page 24 of the instructions)	1c	NONE
d		(add lines 1a, b, and c)	1 d	10,348.
е	Redu	ction claimed for blockage or other factors reported on lines 1a and		
	1c (at	tach detailed explanation)		
2	Acqui	sition indebtedness applicable to line 1 assets	2	NONE
3	Subtr	act line 2 from line 1d	3	10,348.
4	Cash	deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
			4	155.
5	Net v	alue of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	10,193.
6		num investment return. Enter 5% of line 5	6	510.
Pa	rt XI	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) priva	te operating	
		foundations and certain foreign organizations check here > and do not complete this p		
1	Mınım	um investment return from Part X, line 6	1	510.
2 a		n investment income for 2008 from Part VI, line 5		<u> </u>
b	Incom	ne tax for 2008 (This does not include the tax from Part VI) 2b		
С	Add II	nes 2a and 2b	2c	NONE
3	Distrit	outable amount before adjustments. Subtract line 2c from line 1	3	510.
4		veries of amounts treated as qualifying distributions	4	
5		nes 3 and 4	5	510.
6		ction from distributable amount (see page 25 of the instructions)	6	
7	Distri	butable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
		·	7	510.
				3201
Pa	rt XII	Qualifying Distributions (see page 25 of the instructions)		
1	Amo	unts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а		enses, contributions, gifts, etc - total from Part I, column (d), line 26	1a	182,150.
b	Prog	ram-related investments - total from Part IX-B	1b	NONE
2	Amo	unts paid to acquire assets used (or held for use) directly in carrying out charitable, etc,		
		oses	2	NONE
3	Amo	unts set aside for specific charitable projects that satisfy the		
a	Suita	ibility test (prior IRS approval required)	3a	NONE
b		n distribution test (attach the required schedule)	3b	NONE
4		fying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	182,150.
5		adations that qualify under section 4940(e) for the reduced rate of tax on net investment income		
		r 1% of Part I, line 27b (see page 26 of the instructions)	5	
6		sted qualifying distributions. Subtract line 5 from line 4	6	182,150.
-		: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating w		
		qualifies for the section 4940(e) reduction of tax in those years		•

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Forn	n 990-PF (2008)			46-0	732753	Page 10
, Pa	rt XIV , Private Oper	rating Foundations	(see page 27 of the	instructions and Pa	rt VII-A, question 9)	NOT APPLICABLE
1 a	If the foundation has	received a ruling or d	etermination letter tha	it it is a private oper	ating	
	foundation, and the ruling	g is effective for 2008, e	nter the date of the ruling		. ▶	
þ	Check box to indicate wh	ether the foundation is a	private operating found		4942(	j)(3) or 4942(j)(5)
•		Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2008	(b) 2007	(c) 2006	(d) 2005	(e) Total
	I or the minimum investment		(-,	(-/	(-, - : : :	· · · · · · · · · · · · · · · · · · ·
	return from Part X for each					
	year listed					<del> </del>
þ	85% of line 2a					
С	Qualifying distributions from Part					
	XII, line 4 for each year listed .					
a	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					
а	"Assets" alternative test - enter					
	(1) Value of all assets (2) Value of assets qualifying			<u> </u>		
	under section					
b	4942(j)(3)(B)(i)					
D	enter 2/3 of minimum invest-					
	ment return shown in Part X,					
	line 6 for each year listed			<del></del>		
С	"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)			j		
	(3) Largest amount of sup-					
	port from an exempt					
	organization (4) Gross investment income					
Pa		ary Information (C	omplete this part of	only if the foundation	on had \$5.000 or mo	ore in assets at any
		the year - see page			, , , , , , , , , , , , , , , , , , ,	,
1	Information Regarding			<del>- · · · · · · · · · · · · · · · · · · ·</del>		
а	List any managers of	the foundation who h	ave contributed more	e than 2% of the tota	I contributions receiv	ed by the foundation
	before the close of any					
	NONE					
_		the foundation who	100/ or more of	the steel of a serv	aration (ar an armall	
D	List any managers of ownership of a partner					r large portion of the
	ownership of a partilet	omporouner enacy) Of	willon the roundation	inasa iu/o ui yiealei	miterest	
	** /=					
2	N/A Information Regarding	a Contribution Grant	Gift Loan Scholarek	nin etc. Programs:	<del> · · · · · · · · · · · · · · · · · </del>	
-				•		
	Check here ► X If the	ne toundation only r	makes contributions	to preselected chari	table organizations a	and does not accept
	unsolicited requests forganizations under other				28 of the instruction	ons) to individuals or
				<del></del>		<del></del>
а	The name, address, a	na telephone number	ot the person to whor	n applications should b	e addressed	
b The form in which applications should be submitted and information and materials they should include						
				·		
	Any submission deadlii	nes <sup>.</sup>			<u> </u>	
	Any restrictions or lii	mitations on awards	such as hy googra	inhical areas charite	hle fields kinds of	institutions or other
u	factors	imations on awaits,	Such as by geogra	ipinicai aleas, Ullafila	DIE HEIUS, KIHUS UI	manunons, or other

Part XV Supplementary Information (co 3 Grants and Contributions Paid Durin	ng the Year or Appro	oved for F	uture Payment	
3 Grants and Contributions Paid Durin Recipient Name and address (home or business)	If recipient is an individual, show any relationship to	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				
SEE STATEMENT 2				
		1		
			,	
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		Ì		
		İ		
			Í	
				`
	}			
			İ	
				}
	ļ			
Total				182,150.
b Approved for future payment				2027230.
1	ļ			
		}		
T	l	l	<u> </u>	
Total			▶ 3h	Ī

Part X\	/I-A Analysis of Income-Produ	icing Acti	vities			
Enter gros	ss amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e) Related or exempt
1 Progra	am service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exempt function income (See page 28 of the instructions)
a	an service revenue	<del></del>		<del> </del>		, , , , , , , , , , , , , , , , , , , ,
				<del> </del>		
_		<del></del>				
e _				<del> </del>		
f _						· · · · · ·
-	es and contracts from government agencies					
	ership dues and assessments					·
	t on savings and temporary cash investments					
	nds and interest from securities	-				
	ntal income or (loss) from real estate					
	ebt-financed property			<del></del>		
	ot debt-financed property					
	tal income or (loss) from personal property					
	investment income			1		····
	(loss) from sales of assets other than inventory			+		<u>.</u>
	come or (loss) from special events					
	profit or (loss) from sales of inventory		·			
11 Other	revenue a				<u> </u>	
b _				-		
c _						
d _						
е _						
12 Subtot	al Add columns (b), (d), and (e)			L		
13 Total.	Add line 12, columns (b), (d), and (e)				13	
	sheet in line 13 instructions on page 28					
Part XV	I-B Relationship of Activities	to the Ac	complishment of Ex	empt Purp	oses	
Line No.	Explain below how each activity					
_	the accomplishment of the fo	oundation's	exempt purposes (of	ther than t	by providing funds for	such purposes) (See
	page 28 of the instructions.)					
	-					
				_		······································
,					<u></u>	
					<u> </u>	
						· · · · · · · · · · · · · · · · · · ·
			NOT APPLICABLE	₹		<del></del>
				<u> </u>		
			<u>-</u>			
				<del></del>	· · · · · · · · · · · · · · · · · · ·	
					<del></del>	
						<del></del>
			<del>n</del>			
-						<del>-</del>
			<del></del>	<del></del>		
					·	
	<del></del>	•			·	<del>-</del>
		<del> </del>				
	<u> </u>				<del>.</del>	
	1					

Form 990-PF (2008)

Preparer's identifying number

(See Signature on page 30 of the

instructions)

Title

EIN ▶

Check if

self-employed ▶

Date

Date

Sign Here

Paid Preparer's Use Only

Signature of officer or trustee

Firm's name (or yours if

self-employed), address,

Preparer's signature

and ZIP code

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury
Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, and 990-PF.

OMB No 1545-0047

Name of the organization		Employer identification number
TIM AND LIBBY BROWN	FOUNDATION	
		46-0732753
Organization type (check one	<b>)</b> :	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust <b>not</b> treated as a private for	ındatıon
	527 political organization	
Form 990-PF	x 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	501(c)(3) taxable private foundation	
	covered by the <b>General Rule</b> or a <b>Special Rule</b> . ( <b>Note.</b> Only a section 501(c) for both the General Rule and a Special Rule See instructions)	(7), (8), or (10)
	ing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or one contributor. Complete Parts I and II	more (in money or
Special Rules		
under sections 509(	o(3) organization filing Form 990, or Form 990-EZ, that met the 331/3 % suppa)(1)/170(b)(1)(A)(vi), and received from any one contributor, during the year or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount II	ear, a contribution of the
during the year, agg	(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that receive regate contributions or bequests of more than \$1,000 for use exclusively for educational purposes, or the prevention of cruelty to children or animals.	r religious, charitable,
during the year, son not aggregate to mo the year for an exclu applies to this organ	o(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that receive the contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, fore than \$1,000. (If this box is checked, enter here the total contributions the sively religious, charitable, etc., purpose. Do not complete any of the parts in ization because it received nonexclusively religious, charitable, etc., contributions.	but these contributions did lat were received during unless the <b>General Rule</b> butions of \$5,000 or more
990-EZ, or 990-PF), but they n	e not covered by the General Rule and/or the Special Rules do not file Schools answer "No" on Part IV, line 2 of their Form 990, or check the box in their Form 990-PF, to certify that they do not meet the filing requirements o	he heading of their

<ul> <li>Schedule B (Form 990, 990-EZ, or 990-PF) (200</li> </ul>	Schedule B	(Forta 99)	J, 990-EZ,	or 990-PF)	(2008
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Page	_ of		of Part I
Employer identific	ation	number	

Name of o	rganization TIM AND LIBBY BROWN FOUNDATION		Employer identification number
		<del></del>	46-0732753
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
_1_	THE ANSCHUTZ FOUNDATION  1727 TREMONT PLACE  DENVER, CO 80202	\$190,000. 	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroli Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		_ _ \$	Person Payroll Noncash  (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		- - - -	Person Payroll Noncash (Complete Part II if there is a noncash contribution )

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
ALZHEIMERS DISEASE AND RELATED 455 SHERMAN STREET 500 DENVER, CO 80203	NONE 509(A)(1)	GENERAL SUPPORT	5,000.
AMERICAN ASSOCIATION OF PETROLEUM PO BOX 979 TULSA, OK 74101	NONE 509 (A) (1)	GENERAL SUPPORT	2,500.
AMERICAN CAMPING ASSOCIATION 5000 STATE ROAD 67 NORTH MARTINSVILLE, IN 46151	NONE 509(A)(1)	GENERAL SUPPORT	15,000.
AMYOTROPHIC LATERAL SCLEROSIS ASSOCA LS 1201 E COLFAX AVENUE SUITE 202 DENVER, CO 80218	NONE 509(A)(1)	GENERAL SUPPORT	2,500.
ASPEN VALLEY SKI SNOWBOARD CLUB INC PO BOX C 3 ASPEN, CO 81612	NONE 509(A)(1)	GENERAL SUPPORT	2,500.
BAROMEDICAL RESEARCH INSTITUTE 17 CARRIAGE LANE NEW ORLEANS, LA 70114	NONE 509(A)(1)	GENERAL SUPPORT	5,000.
BENEVOLENT HEALTHCARE FOUNDATION 9055 EAST MINERAL CIRCLE CENTENNIAL, CO 80112	NONE 509(A)(1)	GENERAL SUPPORT	1,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

RECIPIENT NAME AND ADDRESS	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
CHILDRENS HOSPITAL FOUNDATION 1245 E COLFAX AVE SUITE 400 DENVER, CO 80218	NONE 509(A)(1)	GENERAL SUPPORT	10,000.
COLORADO CHILDRENS CAMPAIGN INC 1580 LINCOLN STREET SUITE 420 DENVER, CO 80203	NONE 509(A)(1)	GENERAL SUPPORT	5,000.
COLORADO FOURTEENERS INITIATIVE 607 10TH STREET SUITE 306 GOLDEN, CO 80401	NONE 509 (A) (1)	GENERAL SUPPORT	5,000.
COLORADO NONPROFIT DEVELOPMENT 1510 N HIGH ST 2ND FLOOR DENVER, CO 80218	NONE 509(A)(1)	GENERAL SUPPORT	2,500.
COLORADO STATE UNIVERSITY FOUNDATION 410 UNIVERSITY SERVICES CENT FORT COLLINS, CO 80523	NONE 509(A)(1)	GENERAL SUPPORT	5,000.
DENVER BOTANIC GARDEN INC 909 YORK STREET DENVER, CO 80206	NONE 509(A)(1)	GENERAL SUPPORT	2,250.
DENVER DOWN SYNDROME CLINIC 700 POTOMAC STREET SUITE A AURORA, CO 80111	NONE 509(A)(1)	GENERAL SUPPORT	2,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

			·
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
DENVER DUMB FRIENDS LEAGUE 2080 S QUEBEC STREET DENVER, CO 80231	NONE 509(A)(1)	GENERAL SUPPORT	5,000.
DENVER PARKS AND RECREATION FOUNDATION 715 SOUTH FRANKLIN STREET DENVER, CO 80209	NONE 509(A)(1)	GENERAL SUPPORT	1,500.
DENVER ZOOLOGICAL FOUNDATION 2300 STEELE STREET DENVER, CO 80205	509(A)(1)	GENERAL SUPPORT	2,500.
FOOD BANK OF THE ROCKIES 10700 EAST 45TH AVENUE DENVER, CO 80239	509(A)(1)	GENERAL SUPPORT	500.
FRANCISCAN FRIENDS OF THE POOR 1101 W 7TH AVENUE DENVER, CO 80204	509(A)(1)	GENERAL SUPPORT	1,000.
GRALAND COUNTRY DAY SCHOOL 30 BIRCH STREET DENVER, CO 80220	509(A)(1)	GENERAL SUPPORT	5,000.
INDEPENDENCE INSTITUTE 13952 DENVER WEST PKWY STE 400 GOLDEN, CO 80401	509(A)(1)	GENERAL SUPPORT	5,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PECTUTENT NAME AND SPEC	0		· HILLONG
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
JUDIS HOUSE 1741 GAYLORD STREET DENVER, CO 80206	509(A)(1)	GENERAL SUPPORT	5,000.
KEMPE FDN FOR THE PREV & TRIMI OF CHILD AB & NEGL 13123 E 16TH AVENUE B390 AURORA, CO 80045	509(A)(1)	GENERAL SUPPORT	10,000.
KENT DENVER SCHOOL 4000 EAST QUINCY AVENUE ENGLEWOOD, CO 80110	509(A)(1)	GENERAL SUPPORT	5,000.
MILE HIGH UNITED WAY INC 2505 18TH STREET DENVER, CO 80211	509(A)(1)	GENERAL SUPPORT	2,500.
MORRY'S CAMP INC 900 DOBBS FERRY ROAD WHITE PLAINS, NY 10607	509(A)(1)	GENERAL SUPPORT	5,000.
NATIONAL REPERTORY ORCHESTRA INC PO BOX 6336 BRECKENRIDGE, CO 80424	509(A)(1)	GENERAL SUPPORT	3,000.
OUTWARD BOUND INC 901 JACKSON STREET GOLDEN, CO 80401	509(A)(1)	GENERAL SUPPORT	10,000.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		•
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURPOSE OF GRANT OR CONTRIBUTION	AMOUNT
PRINCETON PROSPECT FOUNDATION 48 PROSPECT AVENUE PRINCETON, NJ 8540	509(A)(1)	GENERAL SUPPORT	5,000.
PROVIDENCE NETWORK 801 LOGAN STREET DENVER, CO 80203	509(A)(1)	GENERAL SUPPORT	10,000.
RECORDING FOR THE BLIND & DYSLEXIC INC 1355 S COLORADO BLVD STE C 406 DENVER, CO 80222	509(A)(1)	GENERAL SUPPORT	1,000.
SOCIETY OF WOMEN ENGINEERS PO BOX 260692 DENVER, CO 80226	509(A)(1)	GENERAL SUPPORT	1,000.
SOS OUTREACH PO BOX 2020 AVON, CO 81620	509(A)(1)	GENERAL SUPPORT	15,000.
SPORTSWOMEN OF COLORADO INC 100 SOUTH MADISON STREET, 3B DENVER, CO 80209	509(A)(1)	GENERAL SUPPORT	4,900.
SWIFT EAGLE CHARITABLE FOUNDATION PO BOX 1977 AVON, CO 81620	509(A)(1)	GENERAL SUPPORT	2,500.

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

PURPOSE OF GRANT OR CONTRIBUTION  AMOUNT	GENERAL SUPPORT 5,000.	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT	GENERAL SUPPORT
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	509(A)(1)	S09(A)(1)	509(A)(1)	509(A)(1)	509(A)(1)
RECIPIENT NAME AND ADDRESS	TRUSTEES OF PRINCETON UNIVERSITY 330 ALEXANDER PRINCETON, NJ 8544	UNITED STATES CONFERENCE OF CATHOLIC BISHOPS 2301 LAWRENCE STREET DENVER, CO 80205	VAIL MOUNTAIN RESCUE GROUP PO BOX 1597 VAIL, CO 81658	WESTERN STOCK SHOW ASSOCIATION 4655 HUMBOLDT ST DENVER, CO 80216	WOMENS FOUNDATION OF COLORADO 1901 E ASBURY AVE DENVER, CO 80208

182,150.

STATEMENT 7

# **Application for Change in Accounting Method**

OMB No 1545-0152

Department of the Treasury Internal Revenue Service				
Name of filer (name of parent corporation if a consolidated group) (see instructions)	Identification number (see	nstructions)		
TIM & LIBBY BROWN FOUNDATION	46-0732753			
TIME BIDDI BROWN TOOKBITTON	Principal business activity co	de number (see instruction	s)	
F/K/A BROWN FAMILY FOUNDATION	813000			
Number, street, and room or suite no. If a P.O. box, see the instructions	Tax year of change begins (MWI	DDYYYY12/01/2008	<u> </u>	
1727 TREMONT PLACE	Tax year of change ends (MM/DE	MYYY)11/30/2009	,	
City or town, state, and ZIP code	Name of contact person (see	instructions)		
DENVER, CO 80202-4006	M. LAVOY ROBISO	ON		
Name of applicant(s) (If different than filer) and identification number(s) (see instructions)		Contact person's telepho	one nun	nber
		303-308-8238	J	
If the applicant is a member of a consolidated group, check this box				
If Form 2848, Power of Attorney and Declaration of Representative, is attached,				
Check the box to indicate the applicant.	Check the appropriate		e type	
Individual Cooperative (Sec 1381) Corporation Partnership Controlled foreign corporation (Sec 957) S Corporation Insurance Co (Sec 816(a))	of accounting method (see instructions)  Depreciation or A	I change being requ	uested	I.
	Financial Institution		JUANU	,3 ()
1979 9979 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		1115		
	X Other (specify) ► OVERALL ACCR	TIXI METHOD		
corporation (Sec 448(d)(2))  X Exempt organization Enter Code section ► 501(c)(3)	OVERALL ACCR	OAL MEINOD		
Caution: The applicant must provide the requested information to be eligible for apapplicant may be required to provide information specific to the accounting method	od change such as an att	ached statement. Th	e appi	lıcant
must provide all information relevant to the requested accounting method change	even if not specifically re	quested by the Form	· —	
Part I Information For Automatic Change Request  1 Enter the requested designated accounting method change number fr			Yes	No
Method Changes (see instructions) Enter only one method change r instructions If the requested change is not included in that list, check "Other,"  ▶ (a) Change No 30 (b) Other Description ▶  2 Is the accounting method change being requested one for which the set of the control of the change of	" and provide a description of sections of sections."	on lion 4.02 of Rev		
Proc 2002-9 (or its successor) do not apply?	• • • • • • • • • • • • • • • • • • • •			X
3 Is the tax year of change the final tax year of a trade or business for w	hich the taxpaver woul	d be required to		l
take the entire amount of the section 481(a) adjustment into account in comp				X
If "Yes," the applicant is not eligible to make the change under automatic cha				<del></del>
Note: Complete Part II below and then Part IV, and also Schedules A through E of				
Part II Information For All Requests	and to the (in applicable)		Yes	No
4a Does the applicant (or any present or former consolidated group in whi	ich the applicant was a	member during	163	110
the applicable tax year(s)) have any Federal income tax return(s) under examin			<del> </del>	X
If you answered "No," go to line 5	mation (occurrent actions)		<u></u>	<del> </del>
<b>b</b> Is the method of accounting the applicant is requesting to change an iss	sue (with respect to eit	her the applicant		
or any present or former consolidated group in which the applicant wa				
year(s)) either (i) under consideration or (ii) placed in suspense (see instruction		ic applicable tax		
Signature (see instruction		<del> </del>	ـــــــ	L
Under penalties of perjury, I declare that I have examined this application, including acco knowledge and belief, the application contains all the relevant facts relating to the application (other than applicant) is based on all information of which preparer has any knowledge	mpanying schedules and st n, and it is true, correct, and	atements, and to the d complete Declaration	best of pre	of my parer
) \ Filey	Preparer (other th	an filer/applicant)		
My Voy Library 11-13-69 Signature and date				
Significate and date	Signature of individual prepar	ring the application and (	ıate	
M. LAVOY ROBISON, EXECUTIVE DIRECTOR  Name and title (print or type)	Name of individual preparing t	ne application (print or ty	 'pe)	
		~		
	Name of firm prepar	ing the application		

Form	3115 (Rev. 12-2003)  Information For All Requests (continued)		Page 2
		162	NO
4 c	Is the method of accounting the applicant is requesting to change an issue pending (with respect to either the		
	applicant or any present or former consolidated group in which the applicant was a member during the applicable		
	tax year(s)) for any tax year under examination (see instructions)?	<b> </b>	<b> </b>
d	is the request to change the method of accounting being filed under the procedures requiring that the operating		
	division director consent to the filing of the request (see instructions)?		
_	If "Yes," attach the consent statement from the director Is the request to change the method of accounting being filed under the 90-day or 120-day window period?		ĺ
е	If "Yes," check the box for the applicable window period and attach the required statement (see instructions)		<u> </u>
	90 day 120 day		
τ	If you answered "Yes," to line 4a, enter the name and telephone number of the examining agent and the tax		
	year(s) under examination Name ▶ Tax year(s) ▶	[ ]	ı
~	Has a copy of this Form 3115 been provided to the examining agent identified on line 4f?		ı
_	Does the applicant (or any present or former consolidated group in which the applicant was a member during	├─┤	
э а	the applicable tax year(s)) have any Federal income tax return(s) before Appeals and/or a Federal court?		X
	If "Yes," enter the name of the (check the box) Appeals officer and/or counsel for the government,		
	and the tax year(s) before Appeals and/or a Federal court  Name ► Tax year(s) ►  Tax year(s) ►		
b	Has a copy of this Form 3115 been provided to the Appeals officer and/or counsel for the government identified on line 5a?		N/A
_	Is the method of accounting the applicant is requesting to change an issue under consideration by Appeals		
٠	and/or a Federal court (for either the applicant or any present or former consolidated group in which the applicant		
	was a member for the tax year(s) the applicant was a member)?	1 1	х
	If "Yes," attach an explanation.		
c	If the applicant answered "Yes" to line 4a and/or 5a with respect to any present or former consolidated group,		
6	provide each parent corporation's (a) name, (b) identification number, (c) address, and (d) tax year(s) during which		
	the applicant was a member that is under examination, before an Appeals office, and/or before a Federal court	i 1	
7	If the applicant is an entity (including a limited liability company) treated as a partnership or S corporation for		
	Federal income tax purposes, is it requesting a change from a method of accounting that is an issue under		
	consideration in an examination, before Appeals, or before a Federal court, with respect to a Federal income tax return of a partner, member or shareholder of that entity?		N/Z
	If "Yes," the applicant is <b>not</b> eligible to make the change	$\vdash$	
8	Is the applicant making a change to which audit protection does not apply (see instructions)?		х
	Has the applicant, its predecessor, or a related party requested or made (under either an automatic change		
за	procedure or a procedure requiring advance consent) a change in accounting method within the past 5 years		
			х
h	(including the year of the requested change)?  If "Yes," attach a description of each change and the year of change for each separate trade or business and		
b			
_	whether consent was obtained  If any application was withdrawn, not perfected, or denied, or if a Consent Agreement was sent to the taxpayer		1
C	but was not signed and returned to the IRS, or if the change was not made or not made in the requested year		i
	·		
10-	of change, include an explanation		
iva	Does the applicant, its predecessor, or a related party currently have pending any request (including any	1 1	х
h	concurrently filed request) for a private letter ruling, change in accounting method, or technical advice?  If "Yes," for each request attach a statement providing the name(s) of the taxpayer, identification number(s), the		
D			
	type of request (private letter ruling, change in accounting method, or technical advice), and the specific issue(s)		
	in the request(s)	l ,	
11	Is the applicant requesting to change its overall method of accounting?	X	<del></del> -
	If "Yes," check the appropriate boxes below to indicate the applicant's present and proposed methods of accounting Also, complete Schedule A on page 4 of the form		
	Present method: X Cash Accrual Hybrid (attach description)		Į
	Proposed method: Cash X Accrual Hybrid (attach description)		
12	If the applicant is <b>not</b> changing its overall method of accounting, attach a detailed and complete description		
-	for each of the following		
а	The item(s) being changed	)	
	The applicant's present method for the item(s) being changed		
	The applicant's proposed method for the item(s) being changed		
	The applicant's present overall method of accounting (cash, accrual, or hybrid)		ł
JSA	Form 3115	1	12-20031
8×904	6 1 000	11164	2003

	115 (Rev. 12-2003)	,	Page 3
Part	Information For All Requests (continued)	Yes	No
13	Attach a detailed and complete description of the applicant's trade(s) or business(es), and the principal business activity code for each If the applicant has more than one trade or business as defined in Regulations section 1 446-1(d), describe whether each trade or business is accounted for separately, the goods and services provided by each trade or business and any other types of activities engaged in that generate gross income, the overall method of accounting for each trade or business, and which trade or business is requesting to change its accounting method as part of this application or a separate application		
14	Will the proposed method of accounting be used for the applicant's books and records and financial statements? For insurance companies, see the instructions	Х	
15 a	Has the applicant engaged, or will it engage, in a transaction to which section 381(a) applies (e.g., a reorganization, merger, or liquidation) during the proposed tax year of change determined without regard to any potential closing of the year under section 381(b)(1)?		x
b	If "Yes," for the items of income and expense that are the subject of this application, attach a statement identifying the methods of accounting used by the parties to the section 381(a) transaction immediately before the date of distribution or transfer and the method(s) that would be required by section 381(c)(4) or (c)(5) absent consent to the change(s) requested in this application		
16	Does the applicant request a conference of right with the IRS National Office if the IRS proposes an adverse response?		х
17	If the applicant is changing to or from the cash method or changing its method of accounting under sections 263A, 448, 460, or 471, enter the gross receipts of the 3 tax years preceding the year of change		
	1st preceding year ended mo 11 yr 2008 2nd preceding year ended mo 11 yr 2007 2nd preceding year ended mo 11 yr 2006		
Part	\$ 90,000 \s 120,000 \s 45,000 \\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Yes	No
18	Is the applicant's requested change described in any revenue procedure, revenue ruling, notice, regulation, or		
10	other published guidance as an automatic change request?		ĺ
	If "Yes," attach an explanation describing why the applicant is submitting its request under advance consent		
	request procedures		
19	Attach a full explanation of the legal basis supporting the proposed method for the item being changed. Include		ł
	a detailed and complete description of the facts that explains how the law specifically applies to the applicant's		
	situation and that demonstrates that the applicant is authorized to use the proposed method include all authority		
	(statutes, regulations, published rulings, court cases, etc.) supporting the proposed method. The applicant should		
20	Include a discussion of any authorities that may be contrary to its use of the proposed method		
20 21	Attach a copy of all documents related to the proposed change (see instructions)		
22	Attach a statement of the applicant's reasons for the proposed change  If the applicant is a member of a consolidated group for the year of change, do all other members of the		
~~	consolidated group use the proposed method of accounting for the item being changed?		
	If "No," attach an explanation		
23 a	Enter the amount of user fee attached to this application (see instructions) > \$		
b	If the applicant qualifies for a reduced user fee, attach the necessary information or certification required by Rev Proc 2003-1 (or its successor) (see instructions)		
Part	Section 481(a) Adjustment	Yes	No
24	Do the procedures for the accounting method change being requested require the use of the cut-off method? If "Yes," do not complete lines 25, 26, and 27 below		Х
25	Enter the section 481(a) adjustment Indicate whether the adjustment is an increase (+) or a decrease (-) in		
	income   \$ NONE  Attach a summary of the computation and an explanation of the		
	methodology used to determine the section 481(a) adjustment. If it is based on more than one component, show		
	the computation for each component. If more than one applicant is applying for the method change on the same application, attach a list of the name, identification number, principal business activity code (see instructions),		
	and the amount of the section 481(a) adjustment attributable to each applicant		
26	If the section 481(a) adjustment is an increase to income of less than \$25,000, does the applicant elect to take		ļ
40	the entire amount of the adjustment into account in the year of change?		Х
27	Is any part of the section 481(a) adjustment attributable to transactions between members of an affiliated		
	group, a consolidated group, a controlled group, or other related parties?		Х
	If "Yes," attach an explanation		<u> </u>

Form 3115 (Rev 12-2003)	Form	3195	(Rev	12-2003)
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Page 4

Schedu	ıle A - Change	in Overall	Method of	Accounting	(If Schedule	A applies,	Part 1	below m	iust be	e complete	ed)
Part I	Change in Ov	erall Metho	d (see instru	ictions)							

1 Enter the following amounts as of the close of the tax year preceding the year of change If none, state "None" Also, attach a statement providing a breakdown of the amounts entered on lines 1a through 1g

		Amount
а	Income accrued but not received	NONE
	Income received or reported before it was earned. Attach a description of the income and the legal	
	basis for the proposed method	NONE
С	Expenses accrued but not paid	
d	Prepaid expenses previously deducted	NONE
е	Supplies on hand previously deducted and/or not previously reported	NONE
f	Inventory on hand previously deducted and/or not previously reported. Complete Schedule D, Part II	NONE
g	Other amounts (specify) ▶	NONE
h	Net section 481(a) adjustment (Combine lines 1a-1g)	NONE

2 Is the applicant also requesting the recurring item exception under section 461(h)(3)? . . . . . . . . . . . . . . . . . . X Yes No

Attach copies of the profit and loss statement (Schedule F (Form 1040) for farmers) and the balance sheet, if applicable, as of the close of the tax year preceding the year of change. On a separate sheet, state the accounting method used when preparing the balance sheet. If books of account are not kept, attach a copy of the business schedules submitted with the Federal income tax return or other return (e.g., tax-exempt organization returns) for that period. If the amounts in Part I, lines 1a through 1g, do not agree with those shown on both the profit and loss statement and the balance sheet, explain the differences on a separate sheet.

### Part II Change to the Cash Method For Advance Consent Request (see instructions) N/A

Applicants requesting a change to the cash method must attach the following information

- 1 A description of inventory items (items whose production, purchase, or sale is an income-producing factor) and materials and supplies used in carrying out the business
- 2 An explanation as to whether the applicant is required to use the accrual method under any section of the Code or regulations

#### Schedule B - Change in Reporting Advance Payments (see instructions)

N/A

- 1 If the applicant is requesting to defer advance payment for services under Rev. Proc. 71-21, 1971-2 CB 549, attach the following information.
- a Sample copies of all service agreements used by the applicant that are subject to the requested change in accounting method Indicate the particular parts of the service agreement that require the taxpayer to perform services
- b If any parts or materials are provided, explain whether the obligation to provide parts or materials is incidental (of minor or secondary importance) to an agreement providing for the performance of personal services
- c If the change relates to contingent service contracts, explain how the contracts relate to merchandise that is sold, leased, installed, or constructed by the applicant and whether the applicant offers to sell, lease, install, or construct without the service agreement
- d A description of the method the applicant will use to determine the amount of income earned each year on service contracts and why that method clearly reflects income earned and related expenses in each year
- e An explanation of how the method the applicant will use to determine the amount of gross receipts each year will be no less than the amount included in gross receipts for purposes of its books and records. See section 3.11 of Rev. Proc. 71-21.
- 2 If the applicant is requesting a deferral of advance payments for goods under Regulations section 1 451-5, attach the following information
  - a Sample copies of all agreements for goods or items requiring advance payments used by the applicant that are subject to the requested change in accounting method. Indicate the particular parts of the agreement that require the applicant to provide goods or items.
  - b A statement providing that the entire advance payment is for goods or items. If not entirely for goods or items, a statement that an amount equal to 95% of the total contract price is properly allocable to the obligation to provide activities described in Regulations section 1 451-5(a)(1)(i) or (ii) (including services as an integral part of those activities)
- c An explanation of how the method the applicant will use to determine the amount of gross receipts each year will be no less than the amount included in gross receipts for purposes of its books and records. See Regulations section 1.451-5(b)(1)

Form 3115 (Rev 12-2003)

Schedule C - Changes Within the LIFO Inventory Method (see instructions)

#### Part I General LIFO Information

Complete this section if the requested change involves changes within the LIFO inventory method. Also, attach a copy of all Forms 970, Application To Use LIFO Inventory Method, filed to adopt or expand the use of the LIFO method.

- Attach a description of the applicant's present and proposed LIFO methods and submethods for each of the following items
- a Valuing inventory (e.g., unit method or dollar-value method)
- **b** Pooling (e.g., by line or type or class of goods, natural business unit, multiple pools, raw material content, simplified dollar-value method, inventory price index computation (IPIC) pools, etc.)
- c Pricing dollar-value pools (e.g., double-extension, index, link-chain, link-chain index, IPIC method, etc.)
- **d** Determining the current year cost of goods in the ending inventory (e.g., most recent purchases, earliest acquisitions during the year, average cost of purchases during the year, etc.)
- If any present method or submethod used by the applicant is not the same as indicated on Form(s) 970 filed to adopt or expand the use of the method, attach an explanation
- 3 If the proposed change is not requested for all the LIFO inventory, specify the inventory to which the change is and is not applicable
- 4 If the proposed change is not requested for all of the LIFO pools, specify the LIFO pool(s) to which the change is applicable
- Attach a statement addressing whether the applicant values any of its LIFO inventory on a method other than cost. For example, if the applicant values some of its LIFO inventory at retail and the remainder at cost, the applicant should identify which inventory items are valued under each method.
- 6 If changing to the IPIC method, attach a completed Form 970 and a statement indicating the indexes, tables, and categories the applicant proposes to use

#### Part II Change in Pooling Inventories

N/A

N/A

- If the applicant is proposing to change its pooling method or the number of pools, attach a description of the contents of, and state the base year for, each dollar-value pool the applicant presently uses and proposes to use
- If the applicant is proposing to use natural business unit (NBU) pools or requesting to change the number of NBU pools, attach the following information (to the extent not already provided) in sufficient detail to show that each proposed NBU was determined under Regulations section 1 472-8(b)(1) and (2).
- a A description of the types of products produced by the applicant. If possible, attach a brochure
- b A description of the types of processes and raw materials used to produce the products in each proposed pool
- If all of the products to be included in the proposed NBU pool(s) are not produced at one facility, the applicant should explain the reasons for the separate facilities, indicate the location of each facility, and provide a description of the products each facility produces
- d A description of the natural business divisions adopted by the taxpayer. State whether separate cost centers are maintained and if separate profit and loss statements are prepared.
- e A statement addressing whether the applicant has inventories of items purchased and held for resale that are not further processed by the applicant, including whether such items, if any, will be included in any proposed NBU pool
- f A statement addressing whether all items including raw materials, goods-in-process, and finished goods entering into the entire inventory investment for each proposed NBU pool are presently valued under the LIFO method. Describe any items that are not presently valued under the LIFO method that are to be included in each proposed pool
- g A statement addressing whether, within the proposed NBU pool(s), there are items both sold to unrelated parties and transferred to a different unit of the applicant to be used as a component part of another product prior to final processing
- If the applicant is engaged in manufacturing and is proposing to use the multiple pooling method or raw material content pools, attach information to show that each proposed pool will consist of a group of items that are substantially similar. See Regulations section 1.472-8(b)(3)
- 4 If the applicant is engaged in the wholesaling or retailing of goods and is requesting to change the number of pools used, attach information to show that each of the proposed pools is based on customary business classifications of the applicant's trade or business. See Regulations section 1 472-8(c)

Form 3115 (Rev 12-2003)

	3115 (Rev. 12-2003)			Page <b>6</b>
	edule D - Change in the Treatment of Long-Term Contracts Under Section tion 263A Assets (see instructions)	1 460, Invento	ries, or Other	N/A
Par	Change in Reporting Income From Long-Term Contracts (Also comple	ete Part III on	pages 7 and 8	)
1	To the extent not already provided, attach a description of the applicant's present and prop	posed methods	for reporting incom	me and expenses
	from long-term contracts. If the applicant is a construction contractor, include a detailed descrip	tion of its consti	uction activities _	
2 a	Are the applicant's contracts long-term contracts as defined in section 460(f)(1) (see			YesNo
	If "Yes," do all the contracts qualify for the exception under section 460(e) (see instru			Yes No
	If line 2b is "No," attach an explanation	,		
С	If line 2b is "Yes," is the applicant requesting to use the percentage-of-completion	method using	cost-to-cost	
	under Regulations section 1 460-4(b)?			Yes No
d	If line 2c is "No," is the applicant requesting to use the exempt-contract percentage			
	under Regulations section 1 460-4(c)(2)?			Yes No
	If line 2d is "Yes," explain what cost comparison the applicant will use to determine a			
	If line 2d is "No," explain what method the applicant is using and the authority for its use			
3 a	Does the applicant have long-term manufacturing contracts as defined in section 460	(f)(2)?	[	Yes No
b	If "Yes," explain the applicant's present and proposed method(s) of accounting for	long-term ma	anufacturing	
	contracts			
С	Describe the applicant's manufacturing activities, including any required installation of	of manufacture	d goods	
ŀ	To determine a contract's completion factor using the percentage-of-completion method		_	
а	Will the applicant use the cost-to-cost method in Regulations section 1 460-4(b)?		[	Yes No
b	If line 4a is "No," is the applicant electing the simplified cost-to-cost method (se	ee section 46	$0(b)(3)$ and $\underline{}$	
	Regulations section 1 460-5(c))?		<u>L</u>	YesNo
5	Attach a statement indicating whether any of the applicant's contracts are e	either cost-plu	s long-term	
	contracts or Federal long-term contracts			
ar'	Change in Valuing Inventories Including Cost Allocation Changes (Also	o complete P	art III on page	7 and 8 ) N/I
ļ	Attach a description of the inventory goods being changed			
2	Attach a description of the inventory goods (if any) NOT being changed			
3	If the applicant is subject to section 263A, is its present inventory valuation me	ethod in comp	bliance with	
	section 263A (see instructions)?			Yes No
	Γ	Inventory B	eing Changed	Inventory Not
l a	Check the appropriate boxes below		T	Being Changed
	Identification methods	Present Method	Proposed Method	Present Method
	Specific identification	~~ <del>~~</del>		
	FIFO			
	LIFO			
	Other (attach explanation)			
	Valuation methods			ĺ
	Cost			
	Cost or market, whichever is lower			
	Retail cost	<del></del>	<b></b>	
	Retail, lower of cost or market	<del></del>		
	Other (attach explanation)			
b	Enter the value at the end of the tax year preceding the year of change L			
S	If the applicant is changing from the LIFO inventory method to a non-LIFO me	ethod, attach	the following in	nformation (see
	instructions)			
	Copies of Form(s) 970 filed to adopt or expand the use of the method			
b	Only for applicants requesting advance consent. A statement describing wheth required by Regulations section 1 472-6(a) or (b), or whether the applicant is proposition.			to the method
c.	Only for applicants requesting an automatic change. Attach the statement rec			f the Appendix
-	of Ray Proc. 2002-9 (or its successor)			ripporidix

	Form	3115	(Rev	12-2003)
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Part III Method of Cost Allocation (Complete this part if the requested change involves either property subject to section 263A or long-term contracts as described in section 460 (see instructions))

N/A

### Section A - Allocation and Capitalization Methods

Attach a description (including sample computations) of the present and proposed method(s) the applicant uses to capitalize direct and indirect costs properly allocable to real or tangible personal property produced and property acquired for resale, or to allocate and, where appropriate, capitalize direct and indirect costs properly allocable to long-term contracts. Include a description of the method(s) used for allocating indirect costs to intermediate cost objectives such as departments or activities prior to the allocation of such costs to long-term contracts, real or tangible personal property produced, and property acquired for resale. The description must include the following

- 1 The method of allocating direct and indirect costs (i.e., specific identification, burden rate, standard cost, or other reasonable allocation method)
- 2 The method of allocating mixed service costs (i.e., direct reallocation, step-allocation, simplified service cost using the labor-based allocation ratio, simplified service cost using the production cost allocation ratio, or other reasonable allocation method)
- 3 The method of capitalizing additional section 263A costs (i.e., simplified production with or without the historic absorption ratio election, simplified resale with or without the historic absorption ratio election including permissible variations, the U.S. ratio, or other reasonable allocation method)

Section B - Direct and Indirect Costs Required To Be Allocated (Check the appropriate boxes in Section B showing the costs that are or will be fully included, to the extent required, in the cost of real or tangible personal property produced or property acquired for resale under section 263A or allocated to long-term contracts under section 460. Mark "N/A" in a box if those costs are not incurred by the applicant. If a box is not checked, it is assumed that those costs are not fully included to the extent required. Attach an explanation for boxes that are not checked.)

		Present method	Proposed method
	Pior de restaural		Froposed method
1	Direct material		<del></del>
2	Direct labor	· · · · · · · · · · · · · · · · · · ·	
3	Indirect labor		
4	Officers' compensation (not including selling activities)		
5	Pension and other related costs		
6	Employee benefits		
7	Indirect materials and supplies		
8	Purchasing costs		
9	Handling, processing, assembly, and repackaging costs		
10	Offsite storage and warehousing costs		
11	Depreciation, amortization, and cost recovery allowance for equipment and facilities placed in		
	service and not temporarily idle		
12	Depletion		
13	Rent		
14	Taxes other than state, local, and foreign income taxes		
15	Insurance		
16	Utilities		
17	Maintenance and repairs that relate to a production, resale, or long-term contract activity		
18	Engineering and design costs (not including section 174 research and experimental		
	expenses)		
19	Rework labor, scrap, and spoilage		
20	Tools and equipment		
21	Quality control and inspection		
22	Bidding expenses incurred in the solicitation of contracts awarded to the applicant	-	
23	Licensing and franchise costs		
24	Capitalizable service costs (including mixed service costs)		
25	Administrative costs (not including any costs of selling or any return on capital)		
26	Research and experimental expenses attributable to long-term contracts		
27	Interest		
28	Other costs (Attach a list of these costs )		

Form 3115 (Rev 12-2003)

	3145 (Rev 12-2003)		Page o
	*Method of Cost Allocation (see instructions) (continued) N/A		<del></del>
	edule C - Other Costs Not Required To Be Allocated (Complete Section C only if the applied for those section)	icant is requesti	ing to change its
neun	od for these costs )	Present method	Proposed method
1	Marketing, selling, advertising, and distribution expenses		
2	Research and experimental expenses not included on line 26 above	i	
3	Bidding expenses not included on line 22 above		
4	General and administrative costs not included in Section B above		
5	Income taxes		
6	Cost of strikes		
7	Warranty and product liability costs		
8			
9	Section 179 costs		
0	On-site storage		
	Other costs (Attach a list of these costs)		
1 Sche	edule E - Change in Depreciation or Amortization (see instructions)	<del></del>	<u> </u>
			<del></del>
	cants requesting approval to change their method of accounting for depreciation or amor cants must provide this information for each item or class of property for which a change is request		te this section
	See the List of Automatic Accounting Method Changes in the instructions for information		
ındei	sections 56, 167, 168, 197, 1400I, 1400L, or former section 168. Do not file Form 3115 with	respect to certa	ain late elections
and e	lection revocations (see instructions)		
1	Is depreciation for the property determined under Regulations section 1 167(a)-11 (CLADR)?	<u></u>	Yes No
•	If "Yes," the only changes permitted are under Regulations section 1 167(a)-11(c)(1)(iii)		] res140
_	Is any of the depreciation or amortization required to be capitalized under any Code section (e	a costion	
2		·	٦, ٣٦,
	263A)?		Yes No
_	If "Yes," enter the applicable section ▶  Has a depreciation or amortization election been made for the property (e.g., the election unc		
3	·		n., —
	168(f)(1))?		Yes No
	If "Yes," state the election made		
4 a	To the extent not already provided, attach a statement describing the property being changed		
	type of property, the year the property was placed in service, and the property's use in the	applicant's trade	e or business or
_	income-producing activity	_	
b	If the property is residential rental property, did the applicant live in the property before renting it?		Yes No
С	Is the property public utility property?		Yes No
5	To the extent not already provided in the applicant's description of its present method, explain		
	under the applicant's present method (e.g., depreciable property, inventory property, supp	lies under Reg	ulations section
	1 162-3, nondepreciable section 263(a) property, property deductible as a current expense, etc.)	_	
6	If the property is not currently treated as depreciable or amortizable property, provide the	tacts supportin	g the proposed
	change to depreciate or amortize the property		
7	If the property is currently treated and/or will be treated as depreciable or amortizable in	property, provid	e the following
	information under both the present (if applicable) and proposed methods		
а	The Code section under which the property is or will be depreciated or amortized (e.g., section 16		
þ	The applicable asset class from Rev Proc 87-56, 1987-2 C.B 674, for each asset depreciate		
	or under section 1400L, the applicable asset class from Rev Proc 83-35, 1983-1 CB 745, for		•
	former section 168 (ACRS), an explanation why no asset class is identified for each asset for	r which an ass	et class has not
	been identified by the applicant		
c	The facts to support the asset class for the proposed method		
d	The depreciation or amortization method of the property, including the applicable Code section	n (eg, 200% d	eclining balance
	method under section 168(b)(1))		<del>-</del>
е	The useful life, recovery period, or amortization period of the property		
f	The applicable convention of the property		

# TIM & LIBBY BROWN FAMILY FOUNDATION F/K/A BROWN FAMILY FOUNDATION

EIN: 46-0732753

PART II LINE 13

TRADE OR BUSINESS: PRIVATE FOUNDATION PROVIDING

SUPPORT TO LOCAL CHARITIES
PROMOTING HEALTH AND WELLNESS

BUSINESS ACTIVITY CODE:

813000

PART IV LINE 25

**481a ADJUSTMENT CALCULATION** 

	11/2008
ACCOUNTS REC.	0
PREPAIDS	0
ACCOUNTS PAY.	0
ACCRUALS	0
	0

SCHEDULE A PART I LINE 3

ACCRUAL METHOD USED FOR BOOKS OF ACCOUNT CHANGE REQUESTED FOR TAX OVERALL METHOD OF ACCOUNTING TO ALSO USE ACCRUAL METHOD.

SEE ATTACHED BALANCE SHEET AND INCOME STATEMENT

R10111B		TIM & LIBBY BROWN FOUNDATION	DATION		09/25/09 11 01 48
TAC0004		Balance Sheet			Page - 1
		As of November 30, 2008	<b></b>		
	电电电影电影电影 医电影电影电影电影电影电影 医电影电影 医电影电影 医电影 医	**** Amounts ****	***********	Change	***************************************
Description	Current	Last Month End	Last Year End	This Month	This Year
TIM & LIBBY BROWN FOUNDATION BUSINESS UNIT					
4SSETS CURRENT ASSETS					
CASH & CASH EQUIN ALENTS					
CASH WITH PROUND STICK	1.00.	A. 050 A.	A1 075 Ch	00 005 11	20,000,00
CASH	F1 6/F, F	15 979 14	42.379 14	11.500 00-	37 900 00-
CASH	F7 6/F*F	£7 (/4/C)	F1 610'7F		-00 006,10
CASH EQUIVALENTS					
Cash & Cash Equin Alents	4,479 14	15,979 14	42,379 14	11 500 00-	37 900 00-
RECEIVABLES					
TRADE RECEIV 1BLE					
ACCOUNTS RECEIVABLE					
.VR TO BE BILLED					
ACCRUED RECEIVABLES					
ALLOWANCE FOR UNCOLLECTAB					
TRADE RECEIV ABLE					
NETTING SUSPENSE					
INTERCOMPANY DUE TO/DUE FR					
INTEREST AND DIVIDENDS REC					
INTEREST FROM INVESTMENTS					
DINIDENDS					
INTEREST AND DIVIDENDS REC					
RECEIVABLES					
PREPAIDS AND OTHER					
PREPAID ENPENSE					
OTHER CURRENT ASSETS					
PREPAIDS AND OTHER					
CURRENT ASSETS	4,479 14	15,979 14	42,379 14	11,500 00-	37,900 00-

11-3

INV ESTNIENTS IN OTHER COMPAN

LONG-FERM ASSETS

EQUITY INVESTMENTS INITIAL CASH INV ESTMENT 09/25/09 11 01 48 \*\*\*\*\*\*\*\*\*\*\*\* Thus I ear Page -Change This Month Last Year End TIM & LIBBY BROWN FOUNDATION As of November 30, 2008 Balance Sheet Last Month End Amounts \*\*\*\*\*\*\* Current COMPUTER HARDWARE & SOFTW IN ESTMENTS IN OTHER COMPAN ADDITIONAL CASH INVESTMEN ACCUMUL LTED AMORTIZATION VD COMPUTER HARDWRE & SO PROPERTY PLANT & EQUIPMENT √D AUTOS & OTHER VEHICLE ACCUM DEPREC - ENTERNAL OFFICE & OTHER EQUIPMENT OFFICE & OTHER EQUIPMENT A/D FURNITURE & FIXTURES AUTOS & OTHER VEHICLES OTHER LONG-TERM ASSETS AND OFFICE EQUIPMENT FURNITURE & FIXTURES INTEREST FROM NOTES SAB SIGAINS (LOSSES) EQUITY INVESTMENTS INTEREST RECEIVABLE INTEREST RECEIVABLE ACCUNTULATED DD&A ACCUMULATED DD&A INTANGIBLE ASSETS INTANGIBLE ASSETS OFFICE EQUIPMENT LONG-TERM ASSETS DEPRECIATION **DEPRECIATION** P&L PICK-UP ARTWORK RIUIIIB TAC0004

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		TIM & LIBBY BROWN FOUNDATION Balance Sheet	DATION		09/25/09 11 01 48 Pare - 3
		As of November 30, 2008	8		
	***************************************	Amounts ****	***************************************	Change	
Description	Current	Last Mouth End	Last Year End	This Month	This bear
PROPERTY PLANT & EQUIPMENT					
i	4 479 14	15,979 14	42,379 14	11,500 00-	37,900 00-
LIABILITES & EQUITY CURRENT LIABILITIES					
CURRENT PORTION-LONG TERM D					
SYSTEM ACCOUNTS PAY ABLE					
A/P LOGGING SUSPENSE S) STEN! \CCOUNTS PA\ ABLE		Strain .			
RECEIVED NOT VOUCHERED					
ACCRUED LIABILITIES					
ACCRUED EXPENSES					
ACCRUED PROPERTY TAXES					
USE/SELF ASSESSMENT TAX					
SALES TAN COLLECTED					
CCRUED LIABILITIES					
FLENIBLE BENEFIT CLEARING					
ACCOUNTS PAYABLE & ACCRUED					
DEFERRED REVENUE DEFERRED REVENUE OTHER					
DEFERRED REVENUE					
CURRENT LIABILITIES					
OTHER LONG-TERM LIABILITIES					
DETERRED REVENUE					
INTEREST PAYABLE O FIIER L'A LIABILITIES					
I					
OTIIER LONG-TERM LIABILITIES					

RIO111B		TIM & LIBBY BROWN FOUNDATION	ATION		09/25/09 11 01 48
TAC 0004		Balance Sheet			Page. 4
		As of November 30, 2008			
		Amounts		************** Change	计操作法 医骨髓 医骨髓 医水杨素 医精神经療
Description	Сипеві	Last Month End	Last Year End	This Mouth	This I ear
OW NER'S LQUITY COMMON STOCK SINGLE CLASS COMMON STOCK CLASS A CLASS B		,			
COMMON STOCK					
ADDITIONAL PAID IN CAPITAL CAPITAL CONTRIBUTIONS	325,000 00-	325,000 00-	235,000 00-		-00 000 000
RETAIN EARNINGS/ACCUM DEFIC OTHER COMPREHENSIVE INCONIE PENSION LIABILITIES FOREIGN CURRENCY ADJUSTNIEN	192,620 86	192,620 86	192,620 86		,
OTHER COMPREHENSIVE INCOME					
NET INCOME	127,900 00	116,400 00		11,500 00	127 900 00
owner's equity	4,479 14-	15,979 14-	42,379 14-	11,500 00	37,900 00
LIABILITIES & EQUITY	4,479 14-	15,979 14-	42,379 14-	11,500 00	37 900 00
11M & LIBBY BROWN FOUNDATION					

R10211B			TIM	TIM & LIBBY BROWN FOUNDATION	OUNDATION			60/52/60	709 11 00 35
1AC00005				Income Statement	=			Page -	-
			For the Twe	For the Twelve Months Ending November 30, 2008	ovember 30, 2008			1 1 4	•
Description	Current Month	%	Last Year	%	Year to Date	%	Last Year to Date	Şŧ	*
	Actual	Revenue	Achial	Revenue	Actual	Revenue	Actual	Revenue	Change
TIM & LIBBY BROWN FOUNDATION									
OPERATING REVENUE									
OTHER OPERATING REVENUE									
RUYALTIES & LICENSES FEES									
FOUND ATION MEMBERSHIP FEES									
OPERATING REVENUE									
OPENSA TING FABENSES									
TOWING TO SEE									
DD&A EVPENSE									
DEPRECIATION EXPENSE									
AMORTIZATION ENPENSE									
DD&A EXPENSE									
OPERATING ENPENSES									
. BAD DEBT									
COMMITTY PROGRAMS									
SEN VE HISNOO									
EQUIPMENT RENTAL									
CONSULTANIS									
NARKETING									٠
GENERAL MARKETING							-	i	
MARKETING									
MISCELLANEOUS									
OUTSIDE SERVICES/TEMPS									
TRAVEL									
VEHICLE EVPENSE									
SUPPLIES & PARTS									
NIEDIA RELATIONS-COMMUNICA									
OPERATING ENPENSES									
FOUND AT ION GRANTS/DONATION									
BENETIT DINNERS									
PMARINITY OR ANY PROGRAMS									
STATE OF THE STATE									
INNI'R CITY ART PROGRAMS									
STAN 400 BUILD	00 003 11		00 000 00		00 000 261		00 003 03		
	00 000,11		0.000175		2007 177		00 000 40		47.91
FOUND ATION GRANTS/DONATION	11,500 00		49,000 00	0	127,900 00	0	00 005 68	0	42 91

R10211B			TIM	TIM & LIBBY BROWN FOUNDATION	OUNDATION			09/25/06	09/25/09 11 00 35
TAC00005				Income Statement				Page -	2
			For the Twel	For the Twelve Mouths Ending November 30 2008	ovember 30 2008				
Description	Current Month	<b>%</b>	Last Year	×	Year to Date	%	Last Year to Date	%	ž
	Actual	Revenue	Actual	Revenue	Actual	Revenue	Actual	Revenue	Change
3RD PARTY SERVICES									
PROFESSIONAL CONSULTANTS									
TEMPS/O1 HER SERVICES									
CONTRIBUTIONS									
3RD PARTY SERVICES									
ENTERTAINMENT									
EQUIPMENT AND TOOLS									
G& 1-ENTERNAL ACCT GROUP									
BUSINESS FEES/PERMITS									

." .

MISCELLANGOUS
POSTAGE.FREIGHT DELIVERY
PRINTING & DUPLICATION
PUBLICATIONS & SUBSCRIPTI
RECRUITING COSTS
RELOCATION COSTS
RENT
OFFICE REN T
EQUIPMENT RENT

MAINT ENANCE SERVICE CONTR

LEGAL PEES

PROFESSIONAL MEMBERSHIPS

MEDICAL CLAIMS PAID

MEMBERSHIPS

BUSINESS MEALS

SOCIAL MENIBERSHIPS

MEMBERSHIPS

REPAIR & MAINTENANCE

SALARY

REGULAR SALARIES

SALES COMMISSIONS BONUSES

SALIRY

SALARY BURDEN
SOFTWARE & HARDWARE
SUPPLIES AND AMMENITIES

IA VES SALES & USE TAV

Doctorook   Doct	R10211B			TIM &	TIM & LIBBY BROWN FOUNDATION	UNDATION			09/22/09	9 11 00 35
Control Month Nr. Larvier Februaria Basedour Actual Revenue Actual Revenue Actual Revenue Control Month Larvier Control Month Larvie	TAC00005				Income Statement	:			Page -	
	Description	Current Month	%	For the Twelv Last Year	ve Mouths Ending Nov	vember 30, 2008 Year to Date	発	Last Year to Date		
11.5suron 49.600.00 127.900.00 89.500.00 13.7.500.00 1		Actual	Revenue	Actual	Revenue	Actual	Revenue	Actual	Revenue	Change
28 2 20 00 00 00 00 121 2 100 00 00 00 121 2 100 00 00 00 121 2 100 00 00 00 00 00 00 00 00 00 00 00 00	OTHER BUSINESS TAN VATTAN TANES									
11500 00 49,000 00 127,900 00 89,500	TELEPHOND/COMMUNICATIONS TRAINING EDUCATION OTHER TRAVEL TRAVE									
11.560 00 49,000 00 1127,900 00 89,500 00 55.00	TRAINING/EDUC (TION									
11.550 00 49,000 00 1127,900 00 89 500 00 51.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.	UTLITIES VEHICLE EXPENSE G&A RECOVERED G&A EXPENSE									
SS SS SS SS SS SS SS SS SS SS SS SS SS	OPERATING EXPENSES	11,500 00		49,000 00		127,900 00		89 500 00		42 91
	O CHIER INCONIE & EXPENSE INTEREST INCOME INTEREST INCOME INTEREST ENPENSE O CHIER NET (GAIN)LOSS ON ASSET SALES NET BOOK VALUE-DISPOSAL DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING DISPOSAL-CASH CLEARING OTHER, INT INC(LOSS)-CONSO SUBSIDIARY (INCOME) LOSS DIN IDEND INCOME OTHER, NET UNLOCATED DIFFERENCES OTHER, INCOME) EXPENSE DISCOUNTS AV AILABLE DISCOUNTS AV AILABLE DISCOUNTS LOST VOUCIIER MATCH RECONCILAT FOREIGN CURRENCY EX(GAIN UNREALIZED GAINLOSS ON DISCOUNTS TAKEN JOB COST OTHER NET									

, \*\* × -09/25/09 11 00 35 TIM & LIBBY BROWN FOUNDATION

Change Page -Revenue % 89 500 00 Last Year to Date Actual Revenue % For the Twelve Months Ending November 30, 2008 Year to Date Actual Income Statement Revenue % 49,000 00 Last Year Actual Revenue % 11,500 00 Current Month Actual TIM & LIBBY BROWN FOUNDATION OTHER INCOME & EXPENSE Description OTHER NET 1AC00005 R10211B

127,900 00

FORM 990PF, PART VIII - LIST OF OFFICERS, DIRECTORS, AND TRUSTEES

NAME AND ADDRESS

TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION

> ELIZABETH A. BROWN 1727 TREMONT PLACE

CHAIR OF BOARD/PRES

DENVER, CO 80202

VICE CHAIR/VICE PRES

TIMOTHY T. BROWN 1727 TREMONT PLACE DENVER, CO 80202

1727 TREMONT PLACE M. LAVOY ROBISON

DENVER, CO 80202

EXEC DIRECTOR

GRAND TOTALS