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Form **990-PF**

Department of the Treasury

Return of Private Foundation

or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements.

OMB No 1545-0052 2009

Intental Revenue Service For calendar year 2009, or tax year beginning . and ending Final return G Check all that apply: Initial return Initial return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation Use the IRS THE BRENT FAMILY FOUNDATION lahel 51-0395364 C/O DOUGLAS & AVERIL BRENT Otherwise. Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number print or type. 303-993-6234 3105 LAFAYETTE DRIVE See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions BOULDER, CO D 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method: X Cash Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) If the foundation is in a 60-month termination 1,670,660. (Part I, column (d) must be on cash basis) under section 507(b)(1)(B), check here ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements for charitable purposes (cash basis only) (b) Net investment (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income income 120,101 N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 31,142. 31,142. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) <8,675. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain 9 Income modifications 10a Gross sales less returns b Less Cost of goods sold c Gross profit or (loss) 11 Other income Total. Add lines 1 through 11 142,568 31,142. empensation of officers, directors, trustees, etc 14 Other employee salates and wage 15 Pension plans, employee benetits 16a Legal fees 1 9 2010 c Other professional fees 7 Interest 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications STMT 2 3,197. 2,522. 23 Other expenses 0. 24 Total operating and administrative 3,197 2,522 expenses. Add lines 13 through 23 274,129 274,129. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 274,129. 277,326 2,522 Add lines 24 and 25 27 Subtract line 26 from line 12: <134,758. 8 Excess of revenue over expenses and disbursements 28,620 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-) LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions

THE BRENT FAMILY FOUNDAT		51-0	0395364 Page 2
Part II Balance Sheets Attached schedules and amounts in the description	Beginning of year	End of	year
Part II Balance Sheets Audicine Sheedus and amounts in the description column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
1 Cash - non-interest-bearing			
2 Savings and temporary cash investments	884,368.	686,009.	686,009.
3 Accounts receivable ►		·	
Less; allowance for doubtful accounts			
4 Pledges receivable ►			
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			
Less; allowance for doubtful accounts			
8 Inventories for sale or use			
9 Prepaid expenses and deferred charges 100 Inventments - I.I.S. and state government obligations. STMT. 3			
To a investments - 0.3. and state government obligations DIFFE 3	51,276.	51,276.	55,235.
b Investments - corporate stock STMT 4	653,316.	754,359.	641,661.
c Investments - corporate bonds STMT 5	327,687.	275,590.	287,755.
11 Investments - land, buildings, and equipment basis		·	
Less accumulated depreciation			
12 Investments - mortgage loans			
13 Investments - other			
14 Land, buildings, and equipment; basis ▶			
Less accumulated depreciation			
15 Other assets (describe ►)			
16 Total assets (to be completed by all filers)	1,916,647.	1,767,234.	1,670,660.
17 Accounts payable and accrued expenses			
18 Grants payable			
g 19 Deferred revenue			
20 Loans from officers, directors, trustees, and other disqualified persons 21 Mortgages and other notes payable			
21 Mortgages and other notes payable			
22 Other liabilities (describe >)			
	· ·	_]	
23 Total liabilities (add lines 17 through 22)	0.	0.	
Foundations that follow SFAS 117, check here		ļ	•
and complete lines 24 through 26 and lines 30 and 31.			
24 Unrestricted			
25 Temporarily restricted			
26 Permanently restricted			
Foundations that do not follow SFAS 117, check here			
and complete lines 27 through 31.	2 064 552	0.064 550	
24 Unrestricted 25 Temporarily restricted 26 Permanently restricted Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, bldg., and equipment fund 29 Retained earnings, accumulated income, endowment, or other funds 30 Total net assets or fund balances	2,064,578.	2,064,578.	
28 Paid-in or capital surplus, or land, bldg., and equipment fund	0.	0.	
29 Retained earnings, accumulated income, endowment, or other funds	<147,931.>	<297,344.	>
30 Total net assets or fund balances	1,916,647.	1,767,234.	
31 Total liabilities and net assets/fund balances	1,916,647.	1,767,234.	
O 1 TOTAL HADIIILEO AND NOT ASSOCIATION DATAINES			• •

1 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	1,916,647.
2 Enter amount from Part I, line 27a	2	<134,758.>
3 Other increases not included in line 2 (itemize) ► IRS REFUND OF OVERPAID TAXES	3	5,345.
4 Add lines 1, 2, and 3	4	1,787,234.
5 Decreases not included in line 2 (itemize) ► IRS DEPOSIT OF ESTIMATED TAXES	5	20,000.
6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	1,767,234.
		Form 990-PF (2009)

923511 02-02-10

C/O DOUGLAS & AVERIL BRENT

Part IV Capital Gallis	and Lusses for Tax On in	IAE2111ELL	IIICOIIIC					
	ribe the kind(s) of property sold (e.garehouse; or common stock, 200 sh			`P-F	w acquired Purchase		acquired day, yr)	(d) Date sold (mo., day, yr.)
· · ·	·		4	D-1	Donation			
	ART NT 8/10/99 6) F 07F9	<u> </u>			8/06	08/10/09
b 25000 UTS INTL		4/29/03	3_5.875%		P		8/06	08/04/09
c DB POWERSHARES				ļ	Р		8/06	12/31/09
d DB POWERSHARES					P		8/06	12/31/09
e DB POWERSHARES		T	h 16		P 1			
(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				iain or (loss s (f) minus	
a 25,000.		 	26,42	4.				<1,424.
b 16,837.	• • • • • • • • • • • • • • • • • • • •	 	25,67					<8,836.
c 188.		1						188.
d		 	85	5.				<855.
e 2,252.		†						2,252.
	ng gain in column (h) and owned by	the foundation	on 12/31/69			(I) Gains (C	Col. (h) gain	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1) col. (1), if any			òl. (k), but	not less tha (from col.	n -0-) or
a		<u> </u>						<1,424.
b						- · · · ·		<8,836.
C		†		$-\dagger$				188.
d			•					<855·
e				-				2,252.
	∫ If gain, also ente			7	_			
2 Capital gain net income or (net ca	apıtal loss) 👤 lf (loss), enter -()- ın Part I, line	7	<i>7</i> -	2			<8,675.
	ss) as defined in sections 1222(5) a	nd (6):		٦١				
If gain, also enter in Part I, line 8,				}	.		N/A	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	Jnder Section 4940(e) for	r Baducad	Tay on Net	Inve	3 stment In	come	N/ F	<u> </u>
	e foundations subject to the section				Stricit iii	Oome		
If "Yes," the foundation does not qua	ction 4942 tax on the distributable ar ilify under section 4940(e). Do not co each column for each year; see inst	omplete this pa	rt.					Yes X No
(a) Base period years	(b)	etributione	Net value of no	(c)	blo-uca accat		Dıştrı	(d) bution ratio
Calendar year (or tax year beginn			Net value of no				(col. (b) dr	vided by col. (c))
2008		22,277.			049,21			.157269
2007		10,400.	 		336,81			.060082
2006		94,300.			215,63			.077573
2005		LO,800.			182,12			.009136
2004	<u> </u>	30,700.		Ι,	163,23	<u> </u>	1	.026392
								220452
2 Total of line 1, column (d)	e control double the test	b 0 b 5			_	2	-	.330452
	5-year base period - divide the total	on line 2 by 5,	or by the number	or year:	S			.066090
the foundation has been in existe	ence it less than 5 years					3	 	•000030
4 Enter the net value of noncharita	ble-use assets for 2009 from Part X,	, line 5				4		1,630,963.
E. Multimbuling Abusting 2						5		107,790.
5 Multiply line 4 by line 3						٦	 	
6 Enter 1% of net investment incom	me (1% of Part I, line 27b)					6		286.
7 Add lines 5 and 6						7	ļ	108,076.
8 Enter qualifying distributions fro	m Part XII, line 4					. 8		274,129.
If line 8 is equal to or greater tha	in line 7, check the box in Part VI, lin	e 1b, and comp	lete that part usin	ng a 1%	tax rate.	1.		
See the Part VI instructions.							×	
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THE BRENT FAMILY FOUNDATION

FORM 990-PF (2009) C/O DOUGLAS & AVERIL BRENT		<u> </u>			age 4
Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 49	40(e), or 49	948 - see	instru	ction	าร)
1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1.)				
Date of ruling or determination letter: (attach copy of letter if necessary-see instruction	s)				
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🗓 and enter 1%	-	1		2	86.
of Part I, line 27b					
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 丿				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)		2			0.
3 Add lines 1 and 2	Γ	3		2	86.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	Ī	4			0.
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	ſ	5		2	86.
6 Credits/Payments:	Ī				
a 2009 estimated tax payments and 2008 overpayment credited to 2009 6a 1	.0,933.				
b Exempt foreign organizations - tax withheld at source 6b					
c Tax paid with application for extension of time to file (Form 8868)					
d Backup withholding erroneously withheld 6d					
7 Total credits and payments. Add lines 6a through 6d		7	1	0,9	33.
8 Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	ŀ	8			
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	▶ أ	9			
10 Overpayment, If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	•	10	1	0,6	47.
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax 10,647.	Refunded	11		-,-	0.
Part VII-A Statements Regarding Activities					
1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participal	te or intervene i	ın	T	Yes	No
any political campaign?			1a		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for	definition)?		1b		X
If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any mater	•	d or	"		
distributed by the foundation in connection with the activities	naio pabilotico			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 during the year:					
(1) On the foundation. ► \$ (2) On foundation managers. ► \$	0.		1		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on for					
managers. > \$ 0.	manon				
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
If "Yes," attach a detailed description of the activities.			-		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of ir	icorporation or	,			
bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	icorporation, or		3		Х
4a Did the foundation have unrelated business gross income of \$1,000 or more during the 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 year?		11, 11	5		X
If "Yes," attach the statement required by General Instruction T.			 		
 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: By language in the governing instrument, or 					
	t with the state	lour			
By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict reserve to the government to government.	i willi lile state	iaw	ا ۽ ا	х	-
remain in the governing instrument?			6	X	
7 Did the foundation have at least \$5,000 in assets at any time during the year?			7		
If "Yes," complete Part II, col (c), and Part XV					
8a Enter the states to which the foundation reports or with which it is registered (see instructions)					
DE					
b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or des	ignate)				-
of each state as required by General Instruction G? If "No," attach explanation			8b	Х	
9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 494	2(j)(5) for caler	ndar			
year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV			9		X
10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and a	ddresses		10	X	

THE BRENT FAMILY FOUNDATION

Form 990-PF (2009) C/0

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Pa	irt VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of			_
•	section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A			
14	The books are in care of ▶ DOUGLAS BRENT Telephone no. ▶ 303-99		234	
	Located at ► 2105 LAFAYETTE DRIVE, BOULDER, CO ZIP+4 ►80	<u> 305</u>		
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here			
	and enter the amount of tax-exempt interest received or accrued during the year	N	/A_	
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly):			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?			
	(5) Transfer any income or assets to a disqualified person (or make any of either available			
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			
	If the foundation agreed to make a grant to or to employ the official for a period after			
	termination of government service, if terminating within 90 days.)			
D	of fany answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)? N/A	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
C	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected		-	~ ·
^	before the first day of the tax year beginning in 2009? Takes an fallow to distribute people (content 4043) (does not enable for years the foundation was a private program of the fallow of the fall	10	\rightarrow	<u>X</u>
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation			
	defined in section 4942(j)(3) or 4942(j)(5)): At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1		
a	before 2009? Let the end of tax year 2005, did the foundation have any undistributed income times od and de, Part XIII) for tax year(s) beginning Yes X No			
	If "Yes," list the years			
h	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			t
٠	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
c	of the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
Ť				
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
-	during the year?			
ь	of "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after			
_	May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose			
	of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,			
	Form 4720, to determine if the foundation had excess business holdings in 2009) N/A	3b	-	
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that			
	had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		<u>X</u>

Page 5

THE BRENT FAMILY FOUNDATION C/O DOUGLAS & AVERIL BRENT 51-0395364 Form 990-PF (2009) Page 6 Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued) 5a During the year did the foundation pay or incur any amount to: Yes X No (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))? (2) Influence the outcome of any specific public election (see section 4955); or to carry on, directly or indirectly, Yes X No any voter registration drive? Yes X No (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a charitable, etc., organization described in section _ Yes 🗶 No 509(a)(1), (2), or (3), or section 4940(d)(2)? (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for Yes X No the prevention of cruelty to children or animals? b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations N/A 5b section 53.4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained _ Yes □ No N/A expenditure responsibility for the grant? 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 pay premiums on Yes X No a personal benefit contract? 6b X b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870.] Yes 🗶 No 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b If yes, did the foundation receive any proceeds or have any net income attributable to the transaction? Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors List all officers, directors, trustees, foundation managers and their compensation. (d) Contributions to employee benefit plans and deferred (e) Expense account, other allowances (b) Title, and average (c) Compensation hours per week devoted to position (If not paid, enter -0-) (a) Name and address compensation PRESIDENT/DIRECTOR DOUGLAS BRENT 3105 LAFAYETTE DRIVE 0.00 0 0 0. VICE PRESIDENT/DIRECTOR AVERIL R. BRENT 3105 LAFAYETTE DRIVE 0.00 0. 0. ANDREW AUCHINCLOSS C/O WHITE & CASE VICE PRESIDENT/DIRECTOR 1155 AVENUE OF THE AMERICAS 0.00 0 0.

_			J		
]			
2	Compensation of five highest-paid employees (other than those in	cluded on line 1). If none	, enter "NONE."		
	(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
_	NONE				
_					-
_				ļ	
_		-		,	
_					
To	otal number of other employees paid over \$50,000		·		

Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	ition Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none, enter	r "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	_	
	-∤	1
	-	
	\dashv	
Total number of others receiving over \$50,000 for professional services	1	▶ 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statis	tical information such as the	F
number of organizations and other beneficiaries served, conferences convened, research papers produced	duced, etc.	Expenses
1 THE FOUNDATION IS SOLELY A GRANT MAKING ORGA		
DOES NOT PARTICIPATE IN DIRECT CHARITABLE A	CTIVITIES	
		0.
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		
2		
All other program-related investments. See instructions.	- i	
3	ļ	
Total. Add lines 1 through 3	<u> </u>	0.
		Form 990-PF (2009)

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes.		
а		1a	893,110.
b	Average of monthly cash balances	1b	893,110. 762,690.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	1,655,800.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,655,800.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	24,837.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,630,963.
6	Minimum investment return. Enter 5% of line 5	6	81,548.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	81,548.
2a	Tax on investment income for 2009 from Part VI, line 5		•
b	Income tax for 2009. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	286.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	81,262.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	81,262.
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	81,262.
P	art XII Qualifying Distributions (see instructions)		-
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		054 400
а	, , , , , , , , , , , , , , , , , , , ,	18	274,129.
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:		
а	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	274,129.
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	286.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	273,843.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	jualifies fo	r the section

Form **990-PF** (2009)

Part XIII Undistributed Income (see instructions)

1 Destributable amount for 2009 from Part XI, time 7 2 Lindambodic count, If we want of the end of 2009 a Enter amount for 2008 only 5 Excess distributions carryover, if any, to 2009, a From 2004 6 From 2005 6 From 2006 6 From 2006 7 29, 168. 6 From 2008 7 29, 168. 7 28, 26, 26, 26, 26, 26, 26, 26, 26, 26, 26		(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
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Series amount for 2006 only					01,202.
3 Excess distributions carryever, if any, to 2009: a From 2004 From 2005 From 2006 From 2007 29, 168. eFrom 2008 1 Total of line 3s through e 4 Qualitying distributions for 2009 from Part XII, line 4: № \$ 274, 129. a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008, but not more than line 2a Applied to 2008 distributible amount (Election required -see instructions) C Treated as distributions of of corpus (Election required -see instructions) C Treated as distributions of the corpus Elemaning amount distributed und corpus C Elemaning amount distributed und corpus Elemaning amount distributed und corpus C Elemaning amount distributed und corpus C Elemaning amount distributed und corpus C Elemaning amount applied to a Subtract line 45 from line 2) C Elemaning amount of pror years' undistributed income (subtract line 45 from line 2) C Elemaning amount of pror years' undistributed income (subtract line 45 from line 2) C Elemaning amount of pror years' undistributed income for 2000. Subtract line 45 from line 2) C Elemaning amount - see instructions O . Undistributed income for 2008. Subtract line 45 from line 201 C Amounts treated as distributions out of corpus to satisfy requirements imposed by section 1709(1) (1) or 4942(9)(3) C Excess from 2001 C Paccess from 2005 C Excess from 2008 C Excess from 2	-			0.	
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	dExcess from 2008 220 . 377 .				
	e Excess from 2009 192,867.				

THE BRENT FAMILY FOUNDATION 51-0395364 C/O DOUGLAS & AVERIL BRENT Page 10 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling 4942(j)(5) b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or Prior 3 years Tax year 2 a Enter the lesser of the adjusted net (a) 2009 (b) 2008 (c) 2007 (d) 2006 (e) Total income from Part I or the minimum investment return from Part X for each year listed **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 Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(III) (3) Largest amount of support from an exempt organization (4) Gross investment income Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets Part XV at any time during the year-see the instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: Check here $\triangleright X$ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc. (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number of the person to whom applications should be addressed.

b The form in which applications should be submitted and information and materials they should include:

c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

Form **990-PF** (2009)

Form 990-PF (2009) C/O DOUGLAS & AVERIL BRENT

Part XV Supplementary Information (continued)

51-0395364

Page 11

3 Grants and Contributions Paid During the	Year or Approved for Future	Payment		
Recipient	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	Contribution	
a Paid during the year SEE STATEMENT 6	or substantial contributor	recipient		
Total		,	▶ 3a	274,129.
b Approved for future payment NONE				
Total			▶ 3b	0.
923611 02-02-10	-	- 	F	orm 990-PF (2009)

Part XVI-A **Analysis of Income-Producing Activities**

Form 990-PF (2009)

Enter gross amounts unless otherwise indicated.	<u> </u>	d dusiness income		dea by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income
a					
b					
c					
d					
e					
f	-				
g Fees and contracts from government agencies	-		\vdash		
2 Membership dues and assessments			 		
3 Interest on savings and temporary cash			-		
investments	1 [•	
4 Dividends and interest from securities			14	31,142.	
				31,142.	
5 Net rental income or (loss) from real estate:			_		
a Debt-financed property	<u> </u>		├		
b Not debt-financed property					
6 Net rental income or (loss) from personal	1 1	1			
property	ļ		 		
7 Other investment income			<u> </u>		
8 Gain or (loss) from sales of assets other	l i				
than inventory			18	<8,675.	<u> </u>
9 Net income or (loss) from special events					
10 Gross profit or (loss) from sales of inventory			<u></u>		
11 Other revenue:					
a	_				
b					
С					
d	_				
e					
12 Subtotal. Add columns (b), (d), and (e)	-	0.		22,467.	0.
13 Total. Add line 12, columns (b), (d), and (e)				13	22,467.
(See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acco	omplishment of Ex	kemp	t Purposes	
Line No. Explain below how each activity for which in	come is reported i	in column (e) of Part YVI-4	contrib	outed importantly to the accor	nnlichment of
the foundation's exempt purposes (other tha			· commi	oted importantly to the accor	nphomnon or
4&8 THE FOUNDATION IS SOLI			DC3	NTZATION AND	TMVECTO TTO
FUNDS TO PRODUCE INCOM					
ADMINISTERING THE FOUR	IDATIONAL	VE SOCU GENT	10 0	HOWN ABOVE TE	E EVLENDED OF
NOT DERIVED FROM ANY					
BUT MERELY REFLECT A I	NORMAL R	ETURN ON THE	FO	UNDATION'S AS	SETS.
					
		-			
				····	
					
					
				 	
022621				=	
923621 02-02-10					Form 990-PF (2009)

Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

		=======================================					Yes		
1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of									
	the C	ode (other than section 501(c)	(3) organizations) or in section 52	7, relating to political organiz	zations?				
а	Trans	fers from the reporting founda	ition to a noncharitable exempt org	ganization of:					
	(1) (eash				1a(1)		<u>X</u>	
	(2) (Other assets				1a(2)		_X_	
b	Other	transactions:							
	(1) S	ales of assets to a noncharital	ole exempt organization			1b(1)		X	
	(2) F	Purchases of assets from a noi	ncharitable exempt organization			1b(2)		X	
	(3) F	Rental of facilities, equipment,	or other assets			1b(3)		X	
	(4) F	Reimbursement arrangements				1b(4)		X	
	(5) L	oans or loan guarantees				1b(5)		X	
	(6) F	erformance of services or me	mbership or fundraising solicitatio	ns		1b(6)		X	
C	Sharı	ng of facilities, equipment, ma	iling lists, other assets, or paid em	ployees		10		X	
d	If the	answer to any of the above is	"Yes," complete the following sche	dule. Column (b) should alwa	ays show the fair market value of the goods, o	ther ass	ets,		
	or sei	vices given by the reporting fo	oundation. If the foundation receive	ed less than fair market value	e in any transaction or sharing arrangement, sl	now in			
	colun		other assets, or services received.						
a):	Line no	(b) Amount involved	(c) Name of noncharitable	exempt organization	(d) Description of transfers, transactions, and s	haring an	rangeme	nts	
			N/A						
				<u> </u>					
2a	Is the	foundation directly or indirect	lly affiliated with, or related to, one	or more tax-exempt organiza	ations described				
	ın sed	ction 501(c) of the Code (other	than section 501(c)(3)) or in sect	ion 527?		Yes	X	No	
b	If "Ye	s," complete the following sch	edule.						
		(a) Name of org	anization	(b) Type of organization	(c) Description of relations	пр			
		N/A							
		<u> </u>							
l			ave examined this return, including acco I than taxpeyer or fiduciary) is based on		ents, and to the best of my knowledge and belief, it is the	rue, corre	ect,		
	and con		diameter of induction and indu						
_	_	< TWAY TO	en	11-14-10	_ 				
֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	Signature of officer or trustee Date Title Preparer's Date Date Check if Preparer's								
5							ying nun	nber	
signature \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \									
	Paid Preparer's Use Only	Firm's name (or yours RAEB	ER & ASSOCIATES	•	EIN ►		_		
-	- Pre Us	if self-employed), 448	W. OLIVE STREET					_	
		address, and ZIP code LONG	BEACH, NY 1156	<u> 1</u>	Phone no. 516 – 4				
			· ·		Fo	rm 990)-PF ((2009)	

101111000111(20

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, or 990-PF.

OMB No 1545-0047

Employer identification number

2009

	HE BRENT FAMILY FOUNDATION	51 0205264
Organization type (check	ODE:	51-0395364
o gameation type (oncor	one,	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt chantable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Check if your organization	is covered by the General Rule or a Special Rule.	
· ·	c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule See instructions
General Rule		
	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or m plete Parts I and II.	nore (in money or property) from any one
Special Rules	•	
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test (0)(b)(1)(A)(vi), and received from any one contributor, during the year, a contributor (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.	
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any coutions of more than \$1,000 for use exclusively for religious, charitable, scientific cruelty to children or animals Complete Parts I, II, and III.	
contributions for If this box is chec purpose. Do not a	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any cuse exclusively for religious, charitable, etc., purposes, but these contributions caked, enter here the total contributions that were received during the year for an complete any of the parts unless the General Rule applies to this organization below, etc., contributions of \$5,000 or more during the year.	lid not aggregate to more than \$1,000. exclusively religious, charitable, etc ,
	that is not covered by the General Rule and/or the Special Rules does not file Sc	
	n Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, o illing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)	r on line 2 of its Form 990-PF, to certify
LHA For Privacy Act and	I Paperwork Reduction Act Notice, see the Instructions	chedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Employer identification number

THE BRENT FAMILY FOUNDATION C/O DOUGLAS & AVERIL BRENT

51-0395364

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	AVERIL BRENT 3105 LAFAYETTE DRIVE BOULDER, CO 80305	\$\$	Person Payroll Noncash X (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	AVERIL BRENT 3105 LAFAYETTE DRIVE BOULDER, CO 80305	\$\$	Person X Payroll
(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 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.)

Name of organization

THE BRENT FAMILY FOUNDATION C/O DOUGLAS & AVERIL BRENT

51-0395364

Employer identification number

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	893 SPDR TR UNIT SER 1 STANDARD & POORS DEPOSITARY RCPT	_	-
		\$\s\s\	12/28/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		 \$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		s	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		_	

of Part III

ame of organ	ization INT FAMILY FOUNDATION		Employer identification number					
	IGLAS & AVERIL BRENT		51-0395364					
Part III	Exclusively religious, charitable, etc., in	columns (a) through (e) and the us, charitable, etc, contributions	on 501(c)(7), (8), or (10) organizations aggregating of following line entry For organizations completing of					
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
-								
-		(e) Transfer of gift	t					
	Transferee's name, address, ar	d ZIP + 4	Relationship of transferor to transferee					
-								
(a) No. from	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
Part I								
Γ	(e) Transfer of gift							
	Transferee's name, address, ar	id 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							
	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 gif	t					
-	Transferee's name, address, at	nd ZIP + 4	Relationship of transferor to transferee					
-								
23454 02-01-10)		Schedule B (Form 990, 990-EZ, or 990-PF) (200					

	···								
FORM 990-PF D	IVIDENDS	AND	INTER	EST	FROM	SECUI	RITIES	STATEMENT	1
SOURCE			GROSS	AMO	TNUC		TAL GAINS	COLUMN (A	A)
BANK OF AMERICA DEUTCHE BANK AND TRUST DEUTCHE BANK AND TRUST		_		7	300. 621.		0. 0. 0.		300. 521.
POWER SHARES DB COMMOD TRACKING FD		X		250	26.		0.	20,-	26.
TOTAL TO FM 990-PF, PART I, LN 4		4 =		31,	,142.	0.		31,142	
FORM 990-PF		O'.	THER E	XPEI	ISES			STATEMENT	2
DESCRIPTION		EXPE	A) NSES BOOKS		(B) INVI T INC		(C) ADJUSTED NET INCOM		
AGENCY FEES AND OTHER INVESTMENT EXPENSES	_	3	3,197.		2 ,	,522.		-	0.
TO FORM 990-PF, PG 1,	LN 23	-	3,197.	===	2 ,	522.			0.
FORM 990-PF U.S	. AND ST	ATE/O	CITY G	OVE	RNMENT	r OBL	GATIONS	STATEMENT	3
DESCRIPTION			U.S GOV'		THER OV'T	вос	OK VALUE	FAIR MARKE VALUE	ET
50 K FNMA NOTES DTD 8/	17/2006	5.259	k X				51,276.	55,2	235.
TOTAL U.S. GOVERNMENT	OBLIGATI	ons		ı			51,276.	55,2	235.
TOTAL STATE AND MUNICI	PAL GOVE	RNME	NT OBL	IGAT	rions				
TOTAL TO FORM 990-PF,	PART II,	LINE	E 10A				51,276.	55,2	235.
									

<u> </u>			
FORM 990-PF	CORPORATE STOCK		STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
2000 SHS COCA-COLA, IN	c.	118,500.	114,000
6702.22 PIMCO DEV LOCA		72,607.	68,747
900 SHS DB COMMODITY I	4	23,075.	22,158
20949.26 DWS LARGE CAP	VALUE FD CLASS A	440,076.	336,655
893 SPDR TR UNIT SER 1 DEPOSITARY RCPT	STANDARD & POORS	100,101.	100,101
TOTAL TO FORM 990-PF,	PART II, LINE 10B	754,359.	641,661
FORM 990-PF	CORPORATE BONDS	·-··	STATEMENT
DESCRIPTION		BOOK VALUE	FAIR MARKET VALUE
25000 CISCO SYS INC SR	NT 2/22/06 5.25%	25,067.	26,233
25000 UTS WALMART NT 8		0.	0
	IN CORP 4/29/03 5.875%	0.	0
	P CORP 10/21/05 4.875%	24,740.	25,854
	NS INC, GLOBAL NOTE 5.3%	50,224.	51,977
50000 VERIZON NEW JERS		50,951.	53,272
50000 GOLDMAN SACHS GR	OUP 5.15%	49,456.	52,893
25000 BANK AMERICA COR	P NT 5.375%	25,191.	25,893
50000 MORGAN STANLEY N	T 5.375%	49,961.	51,633
TOTAL TO FORM 990-PF,	PART II, LINE 10C	275,590.	287,755

FORM 990-PF	GRANTS AND CONTRIBUTIONS	STATEMENT 6
•	PAID DURING THE YEAR	

RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		CIPIENT STATUS	AMOUNT
CORNELL UNIVERSITY-JOHNSON GRADUATE SCHOOL 114 EAST AVENUE ITHACA, NY 14853	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	10,000.
FAIRVIEW HIGH SCHOOL CHOIRS 1515 GREENBRIAR BLVD BOULDER, CO 80305	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	1,000.
THE FIELD CENTER FOR CHILDREN'S INTEGRATED DEVELOPMENT 83 PARK STREET MONTCLAIR, NY 07042	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	5,000.
DOCTORS WITHOUT BORDERS 333 SEVENTH AVENUE, 2ND FL NEW YORK, NY 10001	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	25,000.
DENVER RESCUE MISSION P.O. BOX 5206 DENVER, CO 80217	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	1,000.
COMMUNITY FOOD SHARE 6363 HORIZON LANE LONGMONT, CO 80503	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	3,000.
SUPPORTERS OF FAIRVIEW IB 1515 GREENBRIAR BLVD BOULDER, CO 80305	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	1,000.
SUPPORTERS OF SUMMIT, INC. 333 WEST RIVER ROAD ELGIN, IL 60123	NONE GENERAL PURPOSE CONTRIBUTION	501 (3)	(C)	3,000.

THE BRENT FAMILY FOUNDATION C/C	DOUGLAS		, 51-039536 4
MEALS ON WHEELS 909 ARAPAHOE, STE 121 BOULDER, CO 80302	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	1,000.
MONTIFIORI MEDICAL CENTER-STEIN FUND 111 EAST 210 TH STREET BRONX, NY 10467	NONE GENERAL PURPOSE CONTRIBUTION		197,629.
WORLD VISION P.O. BOX 9716 FEDERAL WAY, WA 98063	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	1,000.
EXTREME ICE SURVEY 1435 YARMOUTH AVENUE, SUITE 104 BOULDER, CO 80304	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	500.
PKD FOUNDATION 8330 WARD PARKWAY, SUITE 510 KANSAS CITY, MO 64114	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	2,000.
MONTCLAIR HS ALUMNI-BRADLEY RICHARDS SCHOLARSHIP P.O. BOX 43549 UPPER MONTCLAIR, NJ 07043	GENERAL PURPOSE	501 (C) (3)	500.
ALZHEIMER ASSOCIATION 225 N. MICHIGAN AVE., FL. 17 CHICAGO, IL 60601	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	1,500.
CONCERN WORLWIDE USA 104 EAST 40TH ST NEW YORK, NY 10016	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	20,000.
INTERNATIONAL ACTION - HAITI 808 "L" ST. SE WASHINGTON, DC 20003	NONE GENERAL PURPOSE CONTRIBUTION	501 (C) (3)	1,000.
TOTAL TO FORM 990-PF, PART XV, LI	NE 3A	_	274,129.

, Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

• If y	ou are filing for an Automatic 3-Month Extension, complete only Part I and check this box		ightharpoons X
• If y	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this	form)	
Do no	ot complete Part II unless you have already been granted an automatic 3-month extension on a previously fi	led Fo	rm 8868.
Par	Automatic 3-Month Extension of Time. Only submit original (no copies needed)		
A con	poration required to file Form 990-T and requesting an automatic 6-month extension - check this box and con	nolete	
Part I	only	•	▶ □
All oth to file	ner corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request ar Income tax returns	exter	nsion of time
noted (not a you m	ronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extension below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 electronical utomatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite or conjust submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electronic files gov/efile and click on e-file for Charities & Nonprofits.	ically i nsolid	f (1) you want the additional ated Form 990-T. Instead.
Туре		Emp	loyer identification number
print	THE BRENT FAMILY FOUNDATION	_	
File by	C/O DOUGLAS & AVERIL BRENT	5	1-0395364
due dat filing you return 5	Number, street, and room or suite no. If a P.O. box, see instructions. 13105 LAFAYETTE DRIVE		
instruct			
Chec	k type of return to be filed (file a separate application for each return):		
	Form 990 Form 990-T (corporation) Form 47	700	
\sqcap			
H			
\mathbf{x}			
	Form 990-PF L Form 1041-A ' L Form 88	370	
	DOUGLAS BRENT		
	books are in the care of \blacktriangleright 2105 LAFAYETTE DRIVE - BOULDER, CO 8030	5	
	ephone No. ► 303-993-6234 FAX No. ►		
	ne organization does not have an office or place of business in the United States, check this box		▶ 📖
	nis is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)		
box 🕨	If it is for part of the group, check this box lead attach a list with the names and EINs of all	memb	ers the extension will cover
	I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time unt AUGUST 15, 2010 , to file the exempt organization return for the organization named a is for the organization's return for		The extension
	► X calendar year 2009 or		
	tax year beginning, and ending		
2	If this tax year is for less than 12 months, check reason Initial return		Change in accounting period
За	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any		
	nonrefundable credits. See instructions.	За	\$ 0.
b	If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated		
	tax payments made. Include any prior year overpayment allowed as a credit	3b	\$ 0.
	Balance Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required,		
	deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System)	L	_
	See instructions.	_3c	<u>\$</u>
Cauti	on. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form	8879-	EO for payment instructions.
LHA	For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form 8868 (Rev. 4-2009)

Form	8868 (Rev. 4-2009)			Page 2
• If v	ou are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this bo	×		X
	Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed		8868	بغف
	you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1).			
_	Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no co	pies r	needed)	
Type print	or THE BRENT FAMILY FOUNDATION	Emp	loyer identification	number
File by extend due da filing th	the Number, street, and room or suite no. If a PO box, see instructions te for 3105 LAFAYETTE DRIVE		RS use only	
return	See City, town or post office, state, and ZIP code For a foreign address, see instructions			ļ,
Chec	k type of return to be filed (File a separate application for each return): Form 990 Form 990-EZ Form 990-T (sec. 401(a) or 408(a) trust) Form 990-BL Form 990-PF Form 990-T (trust other than above) Form 4720		orm 5227	orm 8870
STO	P! Do not complete Part II if you were not already granted an automatic 3-month extension on a previou	sly file	ed Form 8868.	
• Th	DOUGLAS BRENT . ne books are in the care of 2105 LAFAYETTE DRIVE - BOULDER, CO 8030 slephone No 303-993-6234 FAX No.	5		
	the organization does not have an office or place of business in the United States, check this box			
	this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this	s is fo	r the whole group, c	heck this
box	▶ ☐ . If it is for part of the group, check this box ▶ ☐ and attach a list with the names and EINs of all			
4	I request an additional 3-month extension of time until NOVEMBER 15, 2010			
5	For calendar year 2009, or other tax year beginning, and ending			
. 6	If this tax year is for less than 12 months, check reason: Initial return Final return		Change in accountii	ng penod
7	State in detail why you need the extension		· ·	٠.
8a	If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
	nonrefundable credits See instructions.	8a	\$	0.
b	If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
	tax payments made. Include any prior year overpayment allowed as a credit and any amount paid			
	previously with Form 8868	8b	\$	0.
C	Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit			
	with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instructions	8c	\$	<u> </u>
	Signature and Verification			
	penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the ue, correct, and complete, and that I am authorized to prepare this form.	best o	f my knowledge and be	elief,
Signa	ture ▶ Title ▶	Date	•	

Form 8868 (Rev. 4-2009)