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Form 990 Upperture 1 of the Tru Internal Revenue Ser	easury vice year 2
G Check all th	nat app
	Name
Use the IRS	GAME
label	C/O
Otherwise,	Numb
print or type. See Specific Instructions	2215 City o
	ENGI

1 1

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

2009

OMB No 1545-0052

_		venue Ser			The louridatio		e able to us	e a cop	y Or tins				ig requirements		20
				r tax	year beginn						and endi	<u> </u>		1_	, 20
G	Che	ck all th	nat apply		Initial return					f a former pu	blic charit	<u>y</u>	l	Final	return
					Amended re	eturn		A	ddres	s change		1	lame change		
			Name of four	ndatı	on								A Employer iden	itification n	umber
Use the IRS GAMEZ FAMILY FOUNDATION						INC									
	lab	el	C/O GILE	BER'	T GAMEZ,	DIREC	CTOR						84	4-1505	990
C	)then	wise,	Number and	stree	et (or PO box n	umber if i	mail is not del	vered to	street a	ddress)	Room/su	ıte	B Telephone number (s	see page 10 of th	e instructions)
	prii														
_	or ty		2215 CHE	ERR	Y HILLS F	ARM I	ORIVE						(1	877) 8	29-5500
	-	ecific	City or town.	state	e, and ZIP code	e							C If exemption appl		<b>▶</b>
រោ	struc	tions			-,								pending, check h		
			FNCI FWOO	חר	CO 80110	١							D 1 Foreign organi		
	Cho	ok tupo	of organizat		1		c)/3) ovom	nt privis	ato fou	ındatıon			2 Foreign organizations meeting the 85% test, check here and attach		
7	_		•		· · · · · · · · · · · · · · · · · · ·								computation		
+					npt charitable t					/ate foundation			E If private foundati	on status was	terminated _
i	-		value of all				unting met		Ca	ash Acc	ruai		under section 507	7(b)(1)(A) che	ck here . P
	•		m Part II, co		-		ther (speci						F If the foundation		
		▶ \$			358.			i) must	be on	cash basis )			under section 50		
ľ	art I	total o may n	f amounts in c ot necessarily	olun equ	and Expense ons (b), (c), and al the amounts of the instructi	d (d) :in	exper	renue ar nses per ooks		(b) Net inve		(	c) Adjusted net income	fc	Disbursements or charitable purposes sh basis only)
П	1				cerved (attach sche										•
		Check	if the f	ound	ation is not requ	ired to				<del></del>			-	١.	
			— allaus		orary cash invest				160.		160.			AT	CH 1,
-	4		ū	•	m securities			_	3.		3.				CH 2
													.,		
			t rental income or (loss)t gain or (loss) from sale of assets not on line 10					-9.0	056.		-		<del></del>		
Revenue		b Gross sales price for all 24 10							·						
e e	7		on line 6a			<del></del>									
8	7	-	-		from Part IV, lir	-								_	•
ı	8		ort-term capita	_	n										<del>,</del>
- 1			ales less returns		 I		<u> </u>			<del> </del>					····
			wances				}					$\vdash$			
			ost of goods sole									-			
					ich schedule)							<del></del>			
ı	11				edule)			_0	893.		163.		· · · · · · · · · · · · · · · · · · ·		<del></del>
+	12				<u> 11</u>			-0,	093.		105.				
-					ectors, trustees,							-			<del></del>
إي	14				and wages .		-								
ses	15				benefits		<u> </u>							-	
Operating and Administrative Expen			ees (attach so												<del></del>
الد					chedule)		ļ				<del></del>				
é	С	-			attach schedule	•						-	<b></b>		<del></del>
ati	17	Interes	t				-	-				$\mathbb{H}$	ECEIVE	<b>n</b> —	<del> </del>
st	18	Taxes (	attach schedule	) (see	page 14 of the instr	uctions)					-				
٦	19	Depred	ciation (attach	sche	edule) and depl	etion .					8	-	18) ( 7 7	300	<u> </u>
뒨	20	Occup	ancy								Ţ.	1	<u>10v 1820</u>	<u>10   Ö</u>	ļ
P	21	Travel,	conferences,	and	meetings						L L	<u> </u>		IRS	<b> </b>
등	22	Printing	g and publicat	ions								70	3000	<u> </u>	
gu	23	Other	expenses (atta	ach s	chedule)		<u> </u>				<u> </u>	风凉	DEN, I	4)	<u> </u>
rati	24	Total c	perating and	adm	iinistrative exp	enses							•		~
be		Add lin	es 13 through	23											
0	25	Contrib	outions, gifts, g	grant			L								
	26			-	ents Add lines 24	and 25									
	27		ct line 26 from												
		Excess	of revenue over e	xpens	es and disbursem	ents		-8,	893.						
					(if negative, er						163.	[			
						,				<del>                                     </del>					·

c Adjusted net income (if negative, enter -0-). .

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

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For	m 990-	PF (2009)	84-1505990						
	~40	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End o	End of year				
F	alrt III	amounts only (See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value				
	1	Cash - non-interest-bearing							
	2	Savings and temporary cash investments	0.	25,352.	25,352.				
	3	Accounts receivable	. '	1 4 1 2 1	The second				
		Less allowance for doubtful accounts	_						
	4	Pledges receivable	·, ' · · · · · · · · · · · · · · · · · ·	137 x ( ) , + 8 )	The said well of				
		Less allowance for doubtful accounts ▶							
	5	Grants receivable							
	6	Receivables due from officers, directors, trustees, and other							
		disqualified persons (attach schedule) (see page 16 of the instructions)							
	7	Other notes and loans receivable (attach schedule)	1 12 55 12						
		Less allowance for doubtful accounts							
	8	Inventories for sale or use							
Assets	9	Prepaid expenses and deferred charges	·	·					
Ass	10 a	Investments - U.S. and state government obligations (attach schedule)							
-		Investments - corporate stock (attach schedule) ATCH 3		4,373.	6.				
		Investments - corporate bonds (attach schedule)							
	11	Investments - land, buildings, and equipment basis	, , , , ,		112 11 11 11				
		(attach schedule)							
	12 13	Investments - mortgage loans							
	14	Investments - other (attach schedule)  Land, buildings, and equipment basis		,	, , , , , , , , , , , , , , , , , , , ,				
		equipment basis Less accumulated depreciation (allach schedule)		<u>-</u>					
	15	Other assets (describe \)							
	16	Total assets (to be completed by all filers - see the		00 705	05 250				
_		instructions Also, see page 1, item I)		29,725.	25,358.				
	17	Accounts payable and accrued expenses		··· ·· <del>-</del> · · · · · · · · · · · · · · · · · · ·					
	18	Grants payable		<del> </del>					
ies	19	Deferred revenue							
ij	20	Loans from officers, directors, trustees, and other disqualified persons							
Liabilities	21	Mortgages and other notes payable (attach schedule)							
_	22	Other liabilities (describe			,				
		T 4 14 1 44 ( 141 ( 47 th a 48 00)							
_	23	Total liabilities (add lines 17 through 22)	<u>-</u>	<del></del>					
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			_				
ės	24	Unrestricted							
anci	25	Temporanly restricted							
Balar	26	Permanently restricted			l				
Þ		Foundations that do not follow SFAS 117,							
퍨		check here and complete lines 27 through 31 ▶ X							
or Fund	27	Capital stock, trust principal, or current funds							
ş	28	Paid-in or capital surplus, or land, bldg , and equipment fund							
Net Assets	29	Retained earnings, accumulated income, endowment, or other funds	0.	29,725.					
Ā	30	Total net assets or fund balances (see page 17 of the							
ž		instructions)	0.	29,725.					
	31	Total liabilities and net assets/fund balances (see page 17							
_		of the instructions)	0.	29,725.					
E	art I	Analysis of Changes in Net Assets or Fund	Balances						
1		if net assets or fund balances at beginning of year - Part II, co	olumn (a), line 30 (must a	gree with					
	end-	of-year figure reported on prior year's return)	<b>.</b>	1	0.				
		er amount from Part I, line 27a		2	-8,893.				
3	Othe	er increases not included in line 2 (itemize)   ATTACH	MENT 4	3	38,778.				
4	Add	lines 1, 2, and 3	· 	4	29,885.				
5	Dec	reases not included in line 2 (itemize)  ATTACH	MENT 5	5	160.				
		I net assets or fund balances at end of year (line 4 minus line		line 30 6	29,725.				

(a) List and	describe the kind(s) of property sold (e ck warehouse, or common stock, 200 st	g , real estate,	(b) How acquired P-Purchase D-Donation	(c) Date acquired (mo , day, yr )	(d) Date sold (mo , day, yr )
a SEE PART IV SCHED	ULE				
b					
c			ļ		
<u>d</u>			<u> </u>		·- ·-
<u>e</u>			ļ		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (k (e) plus (f) mini	
a			<del> </del>		
<u>b</u>			-		
C			<del>                                     </del>		
d					
e Complete only for assets show	ving gain in column (h) and owned l	by the foundation on 12/31/69	40	O (O-1 (b) -	
	(j) Adjusted basis	(k) Excess of col (i)		Gains (Col. (h) g (k), but not less t	
(i) F M V as of 12/31/69	as of 12/31/69	over col (j), if any		Losses (from co	
а			<u> </u>		
b			ļ		
С			<u> </u>		
d			ļ		
e			ļ,		
Capital gain net income or (r		gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		-9,056.
Net short-term capital gain o	יי ) or (loss) as defined in sections 1222	· · ·	<del>-</del> +		3,000.
	ne 8, column (c) (see pages 13 and				
_	ne 8	4	3		
Part V Qualification Uni	der Section 4940(e) for Reduc	ed Tax on Net Investment Inc	_		
		able amount of any year in the base	period?	[	Yes X N
	ot qualify under section 4940(e) Do	<del></del>	o makina	any ontrior	
(a)	<del></del>	ee page 18 of the instructions befor	e making	(d)	<del></del>
Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets		Distribution ra (col (b) divided by	
2008	0.	0.	<u> </u>	(cor (b) divided by	0.000000
2007	0.	0.	<del> </del>		0.000000
2006	0.	0.	<b>†</b>		0.000000
2005	0.	2,578.			0.000000
2004	0.	0.	· · · · · ·		0.000000
<del>-</del>					
2 Total of line 1, column (d)			2		0.000000
3 Average distribution ratio for	or the 5-year base period - divide th				
number of years the founda	ation has been in existence if less th	han 5 years	3		0.000000
Enter the net value of nonc	haritable-use assets for 2009 from	Part X, line 5	4		31,684.
Multiply line 4 by line 3			5		0.
6 Enter 1% of net investment	income (1% of Part I, line 27b)		6		2.
				-	
7 Add lines 5 and 6			7		2.
Enter qualifying distribution	is from Part XII, line 4	in Part VI, line 1b, and complete	8	using 5 10/ 4-	0

Par	Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of the inst	truction	າຣ)	
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	,		. <del>, -</del>
	Date of ruling or determination letter(attach copy of ruling letter if necessary - see instructions)	1.	٠	
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check			3.
	here ▶ and enter 1% of Part I, line 27b	X,		,
	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4%	15 3	× ~	7
•	of Part I, line 12, col (b)			-
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			
3	Add lines 1 and 2			3.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-			3.
6	Credits/Payments	1 "		
-	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 6a	i.		٠,
	Exempt foreign organizations-tax withheld at source  6b  0.	· · ·		, ·
	Tax paid with application for extension of time to file (Form 8868)  6c  0.		<i>.</i>	,
	Backup withholding erroneously withheld 6d	, -		
7	Total credits and payments Add lines 6a through 6d			0.
8	Enter any penalty for underpayment of estimated tax. Check here			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			3.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			
10 11	Enter the amount of line 10 to be Credited to 2010 estimated tax   Refunded   11			
	VII-A Statements Regarding Activities			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	- [	Yes	No
	participate or intervene in any political campaign?	1a		Х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			
	of the instructions for definition)?	1b		Х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials			
	published or distributed by the foundation in connection with the activities			
С	Did the foundation file Form 1120-POL for this year?	1c	İ	Х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year	,		•
_	(1) On the foundation  \$ (2) On foundation managers \$			
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	,		
•	on foundation managers  \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
_	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	.		
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3	- 1	Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Χ
-	If "Yes," altach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either		İ	
_	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that			
	conflict with the state law remain in the governing instrument?	6	Х	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV	7	X	
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the			
	instructions) ► CO,			
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		į	
	(or designate) 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			
-	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page			
	27)? If "Yes, "complete Part XIV	9		Χ
10	Did any persons become substantial contributors during the tax year? If "Yes," altach a schedule listing their		$\neg \uparrow$	
	names and addresses	10	İ	Χ
		orm 990	DE /	2000)

Form	990;PF (2009) 84-1505990		1	Page 5
Par	t 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 page 20 of the instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			ŀ
	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 ►GILBERT GAMEZ, V.P.  Located at ►2215 CHERRY HILLS FARM DRIVE, ENGLEWOOD  Telephone no 877-829  ZIP+4 ► 80112	9-550	00	
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	·[_]
Par	t 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.	54.	Yes	No
1a		1 4		ľ, ;
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No		13	_ ^
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	,		·, ′
	disqualified person? Yes X No			1
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	1 :	·	/ ·
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No		/	
	(5) Transfer any income or assets to a disqualified person (or make any of either available for		10.0	ļ'
	the benefit or use of a disqualified person)? Yes X No			
	(6) Agree to pay money or property to a government official? ( Exception Check "No" if		13.	,
	the foundation agreed to make a grant to or to employ the official for a period after	,	1	ŀ
	termination of government service, if terminating within 90 days ) Yes X No			
þ	If any 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)?	1b	ļ	-
	Organizations relying on a current notice regarding disaster assistance check here			
С	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?	1c	-	
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			١,
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			
а	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 before 2009?			
	oc, retrying of the year (a) beginning belone 2000 at 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			,
	If "Yes," list the years		1	ŀ
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)		-	
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	2b		
_	to all years listed, answer "No" and attach statement - see page 20 of the instructions )		<del>                                     </del>	
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
2 2	Did the foundation hold more than a 2% direct or indirect interest in any business			
Ja	enterprise at any time during the year?			
b	If "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			l
	Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or beguest, or (3) the lapse			
	of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C. Form 4720, to determine if the	1	1	
	foundation had excess business holdings in 2009)	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?			X
b	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	I	l x

<u>. . . . . . .</u> . . .▶

Total number of other employees paid over \$50,000

3 Five highest-paid independent contractors for professional services (see page 23 of	the instructions). If none,	enter "NO	NE."
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Comp	
NONE			
Fotal number of others receiving over \$50,000 for professional services			NONE
Part IX-A Summary of Direct Charitable Activities		▶]	NONE
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical information of organizations and other beneficianes served, conferences convened, research papers produced, etc.	such as the number	Expe	nses
1 NONE TO DATE.			
2			
3		<u></u>	
4			
Part IX-B Summary of Program-Related Investments (see page 23 of the instruction	ons)		<del></del>
Describe the two largest program-related investments made by the foundation during the lax year on lines 1 and 2		Amo	unt
1 NONE			
2			
All other program-related investments. See page 24 of the instructions		· · - · · · · · · · · · · · · · · · · ·	
3 NONE			
Fotal. Add lines 1 through 3	<b>&gt;</b>		

Pa	art X Minimum Investment Return (All domestic foundations must complete this part F see page 24 of the instructions)	oreign foundation	ns,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,	5 57	
	purposes		
a	Average monthly fair market value of securities	1a	18,869.
b	Average of monthly cash balances	1b	13,298.
С	Fair market value of all other assets (see page 24 of the instructions)	1c	0.
d		1d	32,167.
е	Reduction claimed for blockage or other factors reported on lines 1a and		<u> </u>
	1c (attach detailed explanation)	20	
2	Acquisition indebtedness applicable to line 1 assets		0.
3	Subtract line 2 from line 1d	3	32,167.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25	• • • • • • • • • • • • • • • • • • • •	
	of the instructions)	4	483.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	31,684.
6	Minimum investment return. Enter 5% of line 5	· · <u> </u>	1,584.
Pa	art XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5)		
	foundations and certain foreign organizations check here $\blacktriangleright$ and do not complete	this part )	
1	Minimum investment return from Part X, line 6	1 . 1	1,584.
	Tax on investment income for 2009 from Part VI, line 5	3.	
b		<del></del>	
	Add tipes 2s and 2h	2c	3.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	1,581.
4	Recoveries of amounts treated as qualifying distributions	4	1,301.
5	Add to a 2 and 4		1,581.
6	Deduction from distributed amount (one near 25 of the materials)		1,301.
7	Distributable amount (see page 25 or the instructions)  Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,	• • • • • • • • • • • • • • • • • • • •	
•		7	1,581.
	line 1	/	1,301.
Pa	art XII Qualifying Distributions(see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	2 ,	
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	0.
b			0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		<del></del>
	DUTDOSAS	2	0.
3	Amounts set aside for specific charitable projects that satisfy the		i
a		3a	0.
b		25-	0.
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	0.
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 (see page 26 of the instructions)	5	N/A
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0.
•	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating	· · · <u>L</u>	
	qualifies for the section 4940(e) reduction of tax in those years	, whether the lound	ation

Pa	Undistributed Income (see page	26 of the instruction	15)		
1	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	<b>(d)</b> 2009
	line 7			" 1- 1 d 3 - 18	1,581.
2	Undistributed income, if any, as of the end of 2009 Enter amount for 2008 only		., . ,	0.	44.6
a		۵۰, ;			
b	Total for pnor years 20 07 20 06 20 05	<del>, , , , , , , , , , , , , , , , , , , </del>			194
3	Excess distributions carryover, if any, to 2009				
a	From 2004		, ,		
b	From 2005		-		
С.	From 2006	, ,	, ,	1 32 1	
d	From 2007	· · · · · ·		1	" 10 m
e	110111 2000	0.	,		* ", " , "
Ţ	Total of lines 3a through e	0.		· · · · · · · · · · · · · · · · · · ·	
4	Qualifying distributions for 2009 from Part XII,		• • • • • • • • • • • • • • • • • • • •	,	14.11 114
	line 4 • \$ 0.		. '	0.	4.440
a	Applied to 2008, but not more than line 2a	· · · · · · · · · · · · · · · · · · ·	7.11	0.	7 88 4 7 7 A 4 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
b	Applied to undistributed income of prior years (Election	.' ' .' '			
	required - see page 26 of the instructions)	· · · · · · ·		72	3 3 3 3 3 3 3
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				,,
d	Applied to 2009 distributable amount				
е	Remaining amount distributed out of corpus	0.	·		
5	Excess distributions carryover applied to 2009	0.			0.
6	(If an amount appears in column (d), the same amount must be shown in column (a) ) Enter the net total of each column as			, , , ,	
	indicated below:	0.		,	,
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5		<u> </u>		
þ	Prior years' undistributed income Subtract line 4b from line 2b			-	' '
С	Enter the amount of prior years' undistributed income for which a notice of deficiency has been	1			,
	issued, or on which the section 4942(a) tax has been previously assessed			-	
d	Subtract line 6c from line 6b Taxable				
е	amount - see page 27 of the instructions			· · · · · · · · · · · · · · · · · · ·	
	4a from line 2a Taxable amount - see page 27 of the instructions			0.	
f	Undistributed income for 2009 Subtract lines				
	4d and 5 from line 1. This amount must be				1,581.
7	distributed in 2010				1,301.
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	Instructions)  Excess distributions carryover from 2004 not applied on line 5 or line 7 (see page 27 of the instructions)				
9	Excess distributions carryover to 2010.				
•	Subtract lines 7 and 8 from line 6a	0			
10	Analysis of line 9				
	Excess from 2005				ĺ
b	Excess from 2006	]			
С	Excess from 2007	]			
d	Excess from 2008	]			
_ e	Excess from 2009 0 .			<u> </u>	

_	rt XIV Private Oper	ating Foundations	roo page 27 of the	instructions and Pad	t VIII A guestion (1)	NOT APPLICABLE
			·			NOT ATTECABLE
1 a				t it is a private opera	ting	
	foundation, and the ruling		-		. ▶ <u>└</u>	<del></del>
b	Check box to indicate whe	ther the foundation is a pi	rivate operating foundatio	n described in section	4942(J)	(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Pnor 3 years	· · · · · · · · · · · · · · · · · · ·	(e) Total
	justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(0) 10101
	for the minimum investment					
	return from Part X for each year listed					
		· · ·	··· · · · · · · · · · · · · · · · · ·			
Ð	85% of line 2a					
С	Qualifying distributions from Part					
	XII line 4 for each year listed .		<u> </u>			
đ	Amounts included in line 2c not used directly for active conduct					
e	of exempt activities	-				
•	directly for active conduct of					
	exempt activities Subtract line					
3	2d from line 2c 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	1				
	under section 4942(j)(3)(B)(i)		ļ			
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest-					
	ment return shown in Part X, line 6 for each year listed					
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		İ			
	provided in section 4942 (j)(3)(B)(iii)		]			
	(3) Largest amount of sup-					
	port from an exempt					
	organization		-			
Pa		ary Information (C	omplete this part	only if the founda	ation had \$5,000	or more in assets
		during the year - se			,	
1	Information Regarding	<del></del>				
a	List any managers of	,		e than 2% of the total	contributions receiv	ed by the foundation
_				more than \$5,000) (So		,
	CTIDEDM CAN	ADD CTIUTA CAMI				
	· · · · · · · · · · · · · · · · · · ·	MEZ, SILVIA GAM				<del></del>
b	List any managers of					large portion of the
	ownership of a partner	rship or other entity) o	t which the foundation	has a 10% or greater	interest	
	N/A			· · · · · · · · · · · · · · · · · · ·		
2	Information Regarding	g Contribution, Grant,	Gift, Loan, Scholarsh	ıp, etc., Programs:		
	Check here ▶ If	the foundation only	makes contributions	to preselected charit	able organizations a	nd does not accept
	unsolicited requests	for funds. If the foun	dation makes gifts, o	grants, etc (see page	28 of the instructio	ns) to individuals or
	organizations under of	ther conditions, comple	ete items 2a, b, c, and	ld		
a	The name, address, ar	nd telephone number of	f the person to whom a	applications should be a	ddressed	
_	N/A	ia telephone namber o	r the person to whom e	ippiloditorio strodio be d		
		ications should be sub-	mitted and information	and materials thou aba	uld include	<del></del>
b	The form in which appl	icadons snould be SUDI	milleu anu imomialion	and materials they Sno	uio ilicidae	
	N/A					
С	Any submission deadli	nes				
	N/A					
-d	Any restrictions or I	imitations on awards	such as by neogra	anhical areas charital	ble fields kinds of	institutions or other
•	factors	5.0010 011 0110103	, 555. 55 by geogre	apoui urous, orialitai	olo nolad, kinda Of	
	N/A					
ISA	II/ A	<del></del>	<del></del>			5 000 DE 10000

Form 990-P				84-1505990	Page <b>11</b>
Part XV	Supplementary Information (c	ontinued)			
3 Gra	ants and Contributions Paid Duri	ng the Year or App	roved for F	uture Payment	ı
	Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
	me and address (home or business)	or substantial contributor	recipient	CONTINUION	
a Pai	d dunng the year				
		•			
			1		
			1		
					:
Tot	tal		<u>.                                    </u>	<b>▶</b> 3a	
	proved for future payment				
		:			
			-		
					1
To	tal			▶ 3b	

	amounts unless otherwise indicated		ed business income	Excluded by	section 512, 513, or 514	(e) Related or exempt function income
Ū	service revenue	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of the instructions)
Ū	i Service revenue					the mandenons /
a b						
c		i i	<del></del>			
				<u> </u>		
e						
· _						
	and contracts from government agencies					
•	ship dues and assessments					
	n savings and temporary cash investments		-			
	ds and interest from securities			14	163.	
	al income or (loss) from real estate	,	*	- 1 1	401111	3.3 475
	t-financed property					
	debt-financed property					
	I income or (loss) from personal property		<del></del>			
	vestment income					
	oss) from sales of assets other than inventory	1		14	-9,056.	
•	me or (loss) from special events					
	rofit or (loss) from sales of inventory					
•	venue a					
b						
с		·				
d						
e						
12 Subtotal	Add columns (b), (d), and (e)				-8,893.	
13 Total. A	dd line 12, columns (b), (d), and (e)				13	-8,893.
	neet in line 13 instructions on page 28 to					
Part XVI Line No ▼	Relationship of Activities  Explain below how each activithe accomplishment of the for page 29 of the instructions.)	ity for whic	h income is report	ed in column	n (e) of Part XVI-A con	
	page 29 of the instructions )					
					. <u> </u>	
			NOT APPLICAE	LE	· · · · · · · · · · · · · · · · · · ·	
· <del></del> -						
		·				<del></del>
				-	·· · · · · · · · · · · · · · · · · · ·	

For	n 990-Pi	f (2Q09)	ı						,	84-15U	5990				Pa	әgв <b>1</b> .
Pá	irt XV		Information Exempt Orga			nsfers	To and	Transa	ctions	and Re	elations	nips W	ith 1	Vonc	harit	table
1	In se	ection	ganization directles 501(c) of the C	ode (other	than s	ection 50	)1(c)(3) org	anization:	s) or In s	ny other section 5	organiza 27, relatir	ion desc ig to po	ribed litical		Yes	No
ā	orgar Trans	nzation sfers fr	s? om the reporting f	oundation to	a nonc	harilable e	exempt organ	izalion of						1		
	(1) C	Cash ,												1a(1)		X
	(2) C	Other as	ssets											1a(2)		X
ì	Other														}	١.,
	(1) S	ales o	f assets to a nonch	naritable exen	npt orga	nization .								16(1)	ļ	X
			ses of assets from											16(2)		^
			of facilities, equipm											1b(3)	├—	X
			rsement arrangeme											1b(4)	<del> </del>	X
			r loan guarantees lance of services o											1b(6)		$\frac{n}{x}$
,			acilities, equipmen											10		X
			wer to any of t												fair r	marke
			ne goods, other													
			ny transaction or													
		·	<del></del>						·							
(a)	Line no	<del></del>	Amount involved	(c) Name	e of none	hantable e	exempt organiz	ation		ciption of t	ransfers, tra	sactions,	and sha	nng arra	ngeme	nts
		N.	/A						N/A							
		<b> </b>							<b> </b>							
				<u></u>					ļ							
		<del> </del>							<del></del>							
		<del>                                     </del>							<b></b> -		<del></del>					
		<del>                                     </del>														
		L.														
		Ĺ														
				<u> </u>												
		<b> </b>								<del></del>						
	sectio	n 501( s," con	dation directly or c) of the Code (oth nplete the following	er than secti I schedule		c)(3)) or u	n section 52	7?				· · · · ·	[	Y	*s []	×] Νο
		(a)	Name of organization			(6)	Type of organ	nization	<del></del>		(c) Des	inption of	relations	hlp		
			·				<del></del>				·					
			es of perjury. I decla e. correct, and comp													
ĺ	<u> </u>	<u> </u>	1101	In.	رخ.				11.1.2	-10	$\mathbf{L}$	11.11	7	سدسعه مهردی د	 .•	
اع	SI	gnalure	of officer or trustee		1				Date		Title	<u> </u>				
윈								Date		Chask	,		parer's			
Sign Here	Paid Preparer's Use Only	Prepa signa		17 ta	Ucr	2651		11/	12/10	Check i self-em	ployed ►		ber (Se			
۳	Paid cpare se Or	Ť	s name (or yours if	BKD,	LLP			1	-11-	_1	EIN	44-1	0160	260		
1	Prep Use		mployed), address.	$\frac{3700}{1700}$			STREET,	SUITE	E 1400		EllA					
- }			IP code	DEN		CO	- •		802	203	Phon	eno 3	03-8	61-4	545	

Phone no 303-861-4545

### SCHEDULE D (Form 1041)

Department of the Treasury

Internal Revenue Service

**Capital Gains and Losses** 

 Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

2009

Employer identification number Name of estate or trust GAMEZ FAMILY FOUNDATION INC 84-1505990 C/O GILBERT GAMEZ, DIRECTOR Note: Form 5227 filers need to complete onlyParts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less Part I (e) Cost or other basis (f) Gain or (loss) for (b) Date acquired (a) Description of property (Example 100 shares 7% preferred of "Z" Co ) (c) Date sold (see page 4 of the instructions) the entire year Subtract (e) from (d) (d) Sales price (mo, day, yr) (mo, day, yr) 1a b Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 Net short-term gain or (loss) from partnerships, S corporations, and other estates or trusts Short-term capital loss carryover Enter the amount, if any, from line 9 of the 2008 Capital Loss Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (f) Gain or (loss) for (e) Cost or other basis (c) Date sold (mo , day, yr ) (a) Description of property (Example 100 shares 7% preferred of "Z" Co) (b) Date acquired (d) Sales pnce (see page 4 of the instructions) the entire year Subtract (e) from (d) (mo, day, yr) 6a -9,056. 6b **b** Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 8 Capital gain distributions 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss) Combine lines 6a through 11 in column (f) Enter here and on line 14a, column (3) on the back . . . . . . . . . . . -9,056.

Schedule D (Form 1041) 2009

For Paperwork Reduction Act Notice, see the Instructions for Form 1041

Schedule D (Form 1041) 2009				Page 2
Part III Summary of Parts I and II		(1) Beneficiaries'	(2) Estate's	(2) Total
Caution: Read the instructions before completing this p	oart	(see page 5)	or trust's	(3) Total
Net short-term gain or (loss)	13			
14 Net long-term gain or (loss):				
a Total for year	14a			-9,056.
b Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b		. <u> </u>	
c 28% rate gain	14c			
15 Total net gain or (loss). Combine lines 13 and 14a ▶	15			-9,056.
Note: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form				
o Part V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete Po	art IV ar	nd the Capital Loss Ca	arryover Workshe	ets necessary
Part IV Capital Loss Limitation				<del>-</del>
Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, P	art I, lin	e 4c, if a trust) , the sr	naller of	
a The loss on line 15, column (3) or b \$3,000			16	( 3,000.)
Note: If the loss on line 15, column (3), is more than \$3,000, or if Form 1041, pag CarryoveWorksheeton page 7 of the instructions to figure your capital loss carryove	ie 1, line er	e 22 (or Form 990-T, li	ne 34), is a loss, c	omplete the Capital Loss
Part V Tax Computation Using Maximum Capital Gains Rate		<del></del>		
form 1041 filers. Complete this part only if both lines 14a and 15 in colu		l are name or an am	ount is entered	in Part I or Part II and
here is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more			iodin is entered	in raiti or Faith and
Caution: Skip this part and complete the worksheet on page 8 of the instruction				
Either line 14b, col. (2) or line 14c, col. (2) is more than zero, or				
Both Form 1041, line 2b(1), and Form 4952, line 4g are more than zero				
Form 990-T trusts. Complete this part only if both lines 14a and 15 ar				
of Form 990-T, and Form 990-T, line 34, is more than zero. Skip this pa	irt and	complete the works	sheet on page 8	of the instructions if
either line 14b, col (2) or line 14c, col (2) is more than zero				
Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)		. 17		
18 Enter the smaller of line 14a or 15 in column (2)				
but not less than zero				
19 Enter the estate's or trust's qualified dividends		f +		
from Form 1041, line 2b(2) (or enter the qualified		1. 1		
dividends included in income in Part I of Form 990-T)				
20 Add lines 18 and 19	·			
21 If the estate or trust is filing Form 4952, enter the				
amount from line 4g, otherwise, enter -0-				
Subtract line 21 from line 20 If zero or less, enter -0		. 22		
Subtract line 22 from line 17 If zero or less, enter -0-		. 23		
Enter the smaller of the amount on line 17 or \$2,300		. 24		
25 Is the amount on line 23 equal to or more than the amount on line 24?				
Yes Skip lines 25 and 26, go to line 27 and check the "No" box				
No. Enter the amount from line 23		25		
Subtract line 25 from line 24		. 26		
27 Are the amounts on lines 22 and 26 the same?				
Yes Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or lin	e 22	27		
Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		
Subtract line 28 from line 27		29		
30 Multiply line 29 by 15% ( 15)			30	
31 Figure the tax on the amount on line 23 Use the 2009 Tax Rat				
(see the Schedule Ginstructions in the instructions for Form 1041) .				
32 Add lines 30 and 31			32	·
33 Figure the tax on the amount on line 17 Use the 2009 Tax Rat	e Sche	edule for Estates ar		
(see the Schedule Ginstructions in the instructions for Form 1041) .		. <b></b>		
Tax on all taxable income. Enter the smaller of line 32 or line 33	here a	nd on Form 1041,	Schedule	
G, line 1a (or Form 990-T, line 36)	<u></u>		<sub>.</sub> .   34	

Schedule D (Form 1041) 2009

Schedule D-1 (Form 1041) 2009 Page **2** 

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side GAMEZ, FAMILY FOUNDATION INC

Employer identification number 84-1505990

(a) Description of property (Example 100 sh 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (los Subtract (e) from
00 APPLE INC	06/06/2008	11/09/2009	19,941.	18,597.	1,3
00 EVERGREEN ENERGY INC	09/02/2008	11/09/2009	37.	161.	-1:
900 EVERGREEN ENERGY INC	09/04/2008	11/09/2009	700.	2,895.	-2,19
000 LIMELIGHT NETWORKS INC	11/05/2007	11/09/2009	3,427.	11,508.	-8,08
	-	_			
		_			
		<u> </u>			

GAMEZ FAMILY FOUNDATION INC
FORM 990-PF - PART IV

CA	PITAL GA	INS AND LO	<u>OSSES FO</u>	R TAX ON	INVEST	M	IENT INCOM	1E
Kind of Pre	operty		Desc	ription		or D	Date acquired	Date sold
Gross sale price less expenses of sale	Depreciation allowed/ allowable	Cost or other basis	FMV as of 12/31/69	Adj basis as of 12/31/69	Excess of FMV over adj basis		Gain or (loss)	
		100 APPLE I	NC			Р	06/06/2008	11/09/2009
19,941.		PROPERTY TY	PE: SECURIT	IES			1,344.	
		100 EVERGRE				Р	09/02/2008	11/09/2009
37.		161.					-124.	
		1900 EVERGR				Р	09/04/2008	11/09/2009
700.		2,895.					-2,195.	
		1000 LIMELI PROPERTY TY				P	11/05/2007	11/09/2009
3,427.		11,508.					-8,081.	
TOTAL GAIN (LC	oss)						-9,056.	
		:						:
-								

# FORM 990PF, PART I - INTEREST ON TEMPORARY CASH INVESTMENTS

NET INVESTMENT INCOME	160.	160.
REVENUE AND EXPENSES PER BOOKS	160.	160.
		TOTAL
DESCRIPTION	1ST BANK OF CHERRY CREEK	

PAGE 16

ATTACHMENT 2

84-1505990

- DIVIDENDS AND INTEREST FROM SECURITIES PART I FORM 990PE, REVENUE AND EXPENSES PER BOOKS

. ო

NET INVESTMENT INCOME

. ش

DESCRIPTION

CHARLES SCHWAB

TOTAL

PAGE 17

GAMEZ FAMILY FOUNDATION INC

PART II - CORPORATE STOCK FORM 990PF,

ATTACHMENT 3

ENDING BOOK VALUE

ENDING FMV

DESCRIPTION

CHARLES SCHWAB

4,373.

. છ

TOTALS

ATTACHMENT 3

PAGE 18

FORM 990PF, PART III - OTHER INCREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

AMOUNT

CUMULATIVE PRIOR PERIOD ADJUSTMENTS

38,778.

TOTAL

38,778.

FORM 990PF, PART III - OTHER DECREASES IN NET WORTH OR FUND BALANCES

DESCRIPTION

<u>AMOUNT</u>

DEPOSIT CORRECTION

160.

TOTAL

160.

5245

## Form **8868**

(Rev April 2009)

## Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury
Internal Revenue Service

File a separate application for each retu

OMB No 1545-1709

Internal Revenue S	ervice		File a sepa	rate application for each	h return.		
<ul> <li>If you are fr</li> </ul>	iling for an Autor	matic 3-Mon	th Extension, com	plete only Part I and	check this box		<b>▶</b> X
				n Extension, complet an automatic 3-mont			
Part I Auto	matic 3-Montl	h Extensior	n of Time. Only s	ubmit original (no co	ppies needed)		
				automatic 6-month ex			complete
Part I only							▶ 📙
	orations (includi ome tax returns	ing 1120-C	filers), partnership	s, REMICs, and trust	s must use Fo	orm 7004 to	request an extension of
one of the rel electronically i returns, or a co	turns noted bel if (1) you want omposite or con	low (6 mont the addition asolidated Fr	ths for a corporat al (not automatic) rom 990-T Instead	ion required to file F 3-month extension o	Form 990-T) H or (2) you file F e fully complete	lowever, you Forms 990-BL ed and signed	extension of time to file cannot file Form 8868 , 6069, or 8870, group page 2 (Part II) of Form & Nonprofits.
Type or	Name of Exemp	ot Organization	GAMEZ FAMII	Y FOUNDATION 1	INC	Employ	yer identification number
print	C/O GII	LBERT GAM	MEZ, DIRECTOR	₹		84	-1505990
File by the	Number, street,	, and room or s	suite no If a P O box,	see instructions		•	
due date for	2215 CH	HERRY HII	LLS FARM DRIV	E			
filing your return See instructions	L	ost office, state		foreign address, see inst	ructions		
Check type o	of return to be fi	led (file a se	parate application	for each return)			
Form 990	0	·	Form 990-T (corpo	ration)		Form 4720	
Form 990	)-BL		Form 990-T (sec 4	101(a) or 408(a) trust)		Form 5227	
Form 990							
X Form 990			Form 1041-A	,		Form 8870	
Telephone  If the organ  If this is for	No ▶ 877 8 nization does nor a Group Return	829-5500 of have an off n, enter the o	rganization's four o	FAX No ▶ iness in the United Sta ligit Group Exemption	Number (GEN)		If this is
	group, check this Ns of all membe			of the group, check th	nis box ►	and attact	h a list with the
01101	st an automat 08/1 rganization's reti calendar year tax year beginn	urn for	n (6 months for	a corporation reduction returning to a corporation returning to the corporation returning to the corporation reduction returning to the corporation reduction reduction returning to the corporation reduction reduction returning to the corporation reduction returning to the corporation reduction returning to the corporation reduction reduction returning to the corporation reduction reduction returning to the corporation reduction returning to the corporation reduction reduction returning to the corporation	in for the organ	Form 990- ization named	T) extension of time above The extension is
2 If this tax	year is for less	than 12 mor	nths, check reason	Initial return	Fınal retui	rn Chan	ge in accounting period
3a If this ap	pplication is for	Form 990-B	3L, 990-PF, 990-T,	4720, or 6069, ent	er the tentative	e tax, less an	y
nonrefun	dable credits Se	ee instruction	ns			<u> </u>	3a \$
b If this ap	oplication is for I	Form 990-PF	or 990-T, enter a	iny refundable credits	and estimated	tax payment	
			ment allowed as a	-		•	3ь \$
	D coupon or,			our payment with this (Electronic Federal			ıt
_		ake an elect	ronic fund withdray	val with this Form 886	88, see Form 84	453-EO and Fo	orm 8879-EO
for payment in				· · ·			
For Privacy A	ct and Paperwo	ork Reductio	on Act Notice, see I	nstructions.	SUPF	PORT	Form 8868 (Rev 4-2009)

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Form 8	868 (Rev	4-2009)			Page 2
• If y	ou are	filing for an Additional (Not Automatic) 3-Month Extension, complete only	Part II and check this box	<del></del>	<b>▶</b> X
Note	. Only	complete Part II if you have already been granted an automatic 3-month exten	sion on a previously filed F	orm 8	868
• If y	ou are	filing for an Automatic 3-Month Extension, complete only Part I ( on page	1)		
		Additional (Not Automatic) 3-Month Extension of Time. Only		pies	needed).
		Name of Exempt Organization GAMEZ FAMILY FOUNDATION INC	Employer identi		
Type print		C/O GILBERT GAMEZ, DIRECTOR	84-15059	90	
File by		Number, street, and room or suite no. If a P.O. box, see instructions	,		
extend	led	2215 CHERRY HILLS FARM DRIVE			
due da filing th	ne	City, town or post office, state, and ZIP code. For a foreign address, see instructions		£ 500	. Yes 200
retum		ENGLEWOOD, CO 80110			
Chec	k type	of return to be filed (File a separate application for each return)			
	Form		Form 1041- A	ſ	Form 6069
П		990-B L Form 990-T (sec 401(a) or 408(a) tr ust)	Form 4720	İ	Form 8870
П		990-EZ Form 990-T (trust other than above)	Form 5227	_	
STO		not complete Part II if you were not already granted an automatic 3-mo		ously	filed Form 8868.
		s are in the care of ▶ GILBERT GAMEZ, V.P.			
		e No ▶ 877 829-5500 FAX No ▶			_
		anization does not have an office or place of business in the United States, chi	eck this box		
	•	or a Group Return, enter the organization's four digit Group Exemption Number		f this is	s
		e group, check this box If it is for part of the group, check this		ach a	
		names and EINs of all members the extension is for			
4		est an additional 3-month extension of time until 11/15/2010			
5		alendar 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 Chan	ge in	accounting period
7	State	in detail why you need the extension		•	<b>.</b>
		ITIONAL TIME IS REQUIRED TO ACCUMULATE THE INFORMAT	ION NECESSARY TO		
	FII	E A COMPLETE AND ACCURATE RETURN.	<del></del>		
8a	If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter th	e tentative tax, less any		
	nonre	fundable credits. See instructions	•	8a	\$
b	If this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundab	le credits and estimated		
	tax p	ayments made include any prior year overpayment allowed as a credi	t and any amount paid		-
	previo	usly with Form 8868		8b	<b>]</b> \$
С	Balar	ce Due. Subtract line 8b from line 8a Include your payment with this form	n, or, if required, deposit		
	with	FTD coupon or, if required, by using EFTPS(Electronic Federal Tax Payment	System) See instructions	8c	\$
		Signature and Verification	on .		
	-	es of perjury, I declare that I have examined this form, including accompanying schedules	and statements, and to the best	of my	knowledge and belief
ıt ıs trı	ие, сопте	ct, and complete, and that I am authonzed to prepare this form			
Signal	lure 🕨	Title ▶	Date	<b>&gt;</b>	
	E	KD, LLP		Forr	n <b>8868</b> (Rev 4-2009)
	1	700 LINCOLN STREET, SUITE 1400			

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