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QQN_DE

Return of Private Foundation

OMB No 1545-0052

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			
or calendar year 2009	, or tax year beginning	, 2009, and ending	, 20
Check all that apply	Initial return	Initial return of a former public charity	Final return

<u>F0</u>	or ca	endar	year 2009,	or t	ax year beg	inning				, and end	_			, 20
G	Che	ck all t	hat apply	_	Initial retu			Initial return		oublic cha			_ Final retu	חזג
_			<u> </u>	<u> </u>	Amended	return		Addres	ss change		_	ame change		
			Name of fou			HOUNT	`				J·	A Employer identifi	cation numbe	r
Use the IRS VOLLBRACHT FAMILY FOUNDA					CCIDENT				9.4	1544613	•			
	lab Other							· · · · · · · · · · · · · · · · · ·		D = ===/=:				
,	otner bri		Number and	stre	et (or PO box	number	mail is not	delivered to street	address)	Room/su	ine	B Telephone number (see	page 10 of the ins	tructions)
	or ty		2400 011	חחח	V CDDEV	COURT	ם ח	# 4 O O			1	120	3) 698-	2016
S	ee Sp	ecific			RY CREEK		DR,	#402		l		C If exemption applica		2940
ŀr	nstruc	tions.	City or town	, sta	te, and ZIP co	ae					ſ	pending, check here		··· 【H
			DENVER,	CO	80208						- [1	D 1. Foreign organizat		
				_		504	(a) (D)					2 Foreign organiza 85% test, check h		,
7	_		-					empt private f		t		computation .		▶∟
+			4947(a)(1) no					ner taxable pr ethod X Ca		crual		E If private foundation		
1			et value of all							auai		under section 507(b		
		ear (iro ▶ \$	m Part II, con		909.	(Part I	column (cify) d) must be on	cash hasis)		۱	F If the foundation is under section 507(b)		
1			sis of Reve				COMMITTE	d) mast be on	oudit buolo /			under section 507(0)		rsements
4	aiti	total o	f amounts in c	olum	nns (b), (c), an	nd (d)		evenue and	(b) Net invi		(c) Adjusted net	for cha	arıtable
		may n	not necessarily n (a) (see pag	equ	al the amount	s in		enses per oooks	incon	ne		income		oses asıs only)
\neg								1,712.		•		. 12	(Casil Da	isis orliy)
			tions, gifts, grants if the t	found	lation is not req	uired to					<u> </u>	**		
		Check I	attacii		В			11,998.	1	1,998.			ATCH	1 :
	3 4		on savings and nds and intere					13,139.		3,139.			ATCH	2
													111011	-
			rents						1		-	. ,		7,
			tal income or (lo					-458,783.						
Revenue	b	Gross s	n or (loss) from ales price for all		1,383						-			
<u>§</u>	7		on line 6a I gain net inco					3°, 13 25 1			· ·	· · · ·	,	Fig. 12
ଅ			ort-term capit)						
	9		e modification				- 11	- 1 2 2 1	. : '	-, -, -, -, -, -, -, -, -, -, -, -, -, -				
	_	Gross sa	ales less returns						21				· ·	
	h		owances · · · · ost of goods sold		 -							- '		
			profit or (loss)		ach schedule)			-	-				,	~
	11		income (attac											
	12		Add lines 1 th					-431,934.	2	25,137.				
	13							0.						
	14	Other	nsation of office employee sate		and wages .	1.::								
ses	15		n plans, emp											
en	16a	Lega	ees patrach so	hedu	benefits (31		·						
Expenses	ь	Accoun	nting fees (at	tach	schedule)	H 3		1,320.		660.		0.		660
	С	Other	professional f	ees (attach scheel	il ę)						······································		
rati	17	Interes		ΞN	IU.T]							ļ	
ist	18		attach schedule			Structions)		263.			_			
틀	19	Depre	ciation (attach	n sch	nedule) and de	epletion.							<u>.</u>	
Ð,	20	Occup	ancy				<u></u>						ļ	
힏	21	Travel	, conferences,	, and	meetings									
ē	22		ig and publica					7 070		7 070				
Operating and Administrative	23		expenses (atta		-			7,279.		7,279.			 	
era.	24		operating and					0 062		7 020		0.		660
ğ			nes 13 throug					8,862		7,939.			 	80,000
_	25		butions, gifts,	•	•			88,862	<u> </u>	7,939.		0.	 	80,660
	26		penses and disbu			24 and 25	 	00,002		1,939.			 	00,000
	27		act line 26 fro					-520,796						
	!		of revenue over ex				<u> </u>	J20,130.	ļ	17,198.			 	
	l		vestment inc		. •	•			·	.,,190.		-0-	 	
	<u>c</u>	Adjus	ted net incom	ie (if	negative, ente	er -U-)	1		<u> </u>		Í	- U -	L	

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions. EQZ0BP E329 10/25/2010 3:40:17 PM V 09-8.3

Form 990-PF (2009) PAGE 1

D.	art II	Ralance Sheets	Attached schedules and amounts in the description column should be for end-of-year	Beginning of year	End or	f year
	31 C III	Dalance Officets	amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bear	ing	648.	21,065.	21,065
	2		cash investments	92,869.	542,033.	542,033.
- 1	3					
		Less allowance for doub	btful accounts ▶			
	4					
-	•	Less allowance for dou	btful accounts ▶			
- [5					
	6		fficers, directors, trustees, and other			
-	0					
- 1	_		ich schedule) (see page 16 of the instructions)	,.		
ſ	7		eceivable (attach schedule)	'.	· '	
			btful accounts			
ţ	8		e			
sets	9		eferred charges			
AS			e government obligations (attach schedule)			
	b	Investments - corporate	stock (attach schedule) A.T.C.H6	1,669,799.	680,251.	733,811.
	11	Investments - land, buildings	5 ₁			
		Less accumulated deprecia	ation			
	12	Investments - mortgage	loans			
	13		ach schedule)			
	14	Land, buildings, and	_	1 10	į.	,
		Less accumulated deprecia	tion			
- 1.	15	(attach schedule)	>)			
			pleted by all filers - see the			
	16		age 1, item I)	1,763,316.	1,243,349.	1,296,909.
+					2,213,3131	
- [17		,,,,,,,,			
- 1	18					
ie.	19					ıř
≣ :	20		rs, trustees, and other disqualified persons			*
Liabilities	21	Mortgages and other no	ites payable (attach schedule)			
-	22	Other liabilities (describe	e ▶)			
- 1						•
\bot	23	Total liabilities (add line	s 17 through 22)			·
			low SFAS 117, check here ▶ 24 through 26 and lines 30 and 31.			
Ses	24	Unrestricted				
ă	25					
a	26					
or Fund Balances			not follow SFAS 117,			•
.=		check here and com	plete lines 27 through 31.		1	•
-	27		cipal, or current funds			
5	28		rland, bldg , and equipment fund			
wı	29		ulated income, endowment, or other funds	1,763,316.	1,243,349.	
As	30	=	d balances (see page 17 of the			,
힐	30		· · · · -	1,763,316.	1,243,349.	,
- 1	2.4	Total liabilities and not	t assets/fund balances (see page 17	17,0373101	2721070121	
ĺ	31			1,763,316.	1,243,349.	
			Not Appete of Fred F		1,233,333.	
			anges in Net Assets or Fund E		agrae with	
			alances at beginning of year - Part II,			1 760 010
	end-	or-year figure reported	d on prior year's return)			1,763,316
2	Ente	r amount from Part I,	line 27a ed in line 2 (itemize) ▶ATTACHI		2	-520,796.
3	Othe	er increases not includ	ed in line 2 (itemize) ▶ATTACHI	MENT 7	3	829
4	Add	lines 1, 2, and 3				1,243,349
		reases not included in	line 2 (itemize) ▶		5	
6_	<u>Tot</u> a	I net assets or fund ba	alances at end of year (line 4 minus li	ne 5) - Part II, column (b),	line 30 6	1,243,349
				-		Form 990-PF (2009)

P	art IV Capital Gains	s and Losses for Tax on Inv	estment Income			
		d describe the kind(s) of property sold (•	(b) How acquired P-Purchase	(c) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr.)
1a	CDD DADE TH COUR		dia med day	D-Donation	(, day, y,	
t				-		
-						-
- 0						
_е						
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) mini	
_a					 	
_ <u>b</u>)		<u> </u>			
_ <u>c</u>	<u> </u>					
_d				ļ		 -
_e						·
<u></u>	omplete only for assets s	howing gain in column (h) and owr			Gains (Col (h) g	
	(I) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (i) over col (j), if any	col	(k), but not less t Losses (from co	
_a						
_ <u>b</u>	<u> </u>			ļ		
				<u> </u>		
_d						
<u>e</u>			D 111 7			
	Capital gain net income or	(net capital loss) {	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2	<u>-</u>	458,783.
3		n or (loss) as defined in sections 12 , line 8, column (c) (see pages 13 a				
	If (loss), enter -0- in Part I,	line 8	<u> </u>	3		
P	art V Qualification U	nder Section 4940(e) for Redu	iced Tax on Net Investment Inc	ome		
w		leave this part blank the section 4942 tax on the distrib not qualify under section 4940(e)		ase perio	d?	Yes X No
1	Enter the appropriate am	ount in each column for each year	, see page 18 of the instructions be	efore mak	ing any entries	
_	(a) Base penod years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use assets	l	(d) Distribution ra (col. (b) divided by	atio col (c))
	2008	100,180.	1,860,189.			0.053855
	2007	62,102.	1,353,687.			0.045876
	2006	53,688.	1,227,879.			0.043724
_	2005	40,042.	976,814.			0.040992
_	2004	25,595.	519,346.			0.049283
2	Total of line 1, column (d)		2		0.233730
3	Average distribution ratio	for the 5-year base period - divide dation has been in existence if less	the total on line 2 by 5, or by the	3		0.046746
	·			4	1	296,463.
4		ncharitable-use assets for 2009 fro		4		
5	Multiply line 4 by line 3			5		60,604.
6	Enter 1% of net investme	ent income (1% of Part I, line 27b)		6		172.
7	Add lines 5 and 6			7	-	60,776.
8	Enter qualifying distribution	ons from Part XII, line 4	n Part VI line 1h and complete	8	URING 0 10/ 40	80,660.
	Part VI instructions on par	eater than line 7, check the box i	in rait vi, line rb, and complete t	ilat part	uəniy a 170 la)	Trace See the

Par	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	ne ins	tructi	ons)
1 a	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 ruling letter if necessary - see Instructions)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check		1	72.
	here X and enter 1% 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)			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 2			70
3	Add lines 1 and 2			72.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-) 4			0.
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0			72.
6	Credits/Payments			
	2009 estimated tax payments and 2008 overpayment credited to 2009 6a 497 .			
	Exempt foreign organizations-tax withheld at source			
C	Tax paid with application for extension of time to like (Form 6000)	-	•	
ď	Backup withholding erroneously withheld		,	.07
7	Total credits and payments Add lines 6a through 6d			97.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			325.
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			325.
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ 325. Refunded ▶ 11			
	t VII-A Statements Regarding Activities			
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	J. ,	Yes	_ <u>No</u> _X
	participate or intervene in any political campaign?	1a		
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			Х
	of the instructions for definition)?	1b		
	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			Х
	Did the foundation file Form 1120-POL for this year?	1c		
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 >\$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed	1		
	on foundation managers \$	_ 1		Х
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		
	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			X
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes			V
4 a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4 a		
	If "Yes," has it filed a tax return on Form 990-T for this year?	4 <u>b</u>		X
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		<u> </u>
	If "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that		X	
_	conflict with the state law remain in the governing instrument?	- 6 7	X	
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			-
8 a	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	。	Х	
_	(or designate) of each state as required by General Instruction G? If "No," attach explanation	8ь		
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	9		х
	27)? If "Yes," complete Part XIV			
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their	10		Х
	names and addresses		0-PF	(2000)

	t VII-A Statements Regarding Activities (continued)			raye_5
	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			Ī
•	meaning of section 512(b)(13)? If "Yes," attach schedule (see page 20 of the instructions)	11		Х
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			
	August 17, 2008?	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
	Website address ► N/A	<u> </u>		
14	The books are in care of ► LESLIE D. VOLLBRACHT, PRES. Telephone no ► 303-698	3- 29	4 6	
	Located at ▶DENVER, COLORADO ZIP+4 ▶ 80209			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here		▶	T
	and enter the amount of tax-exempt interest received or accrued during the year			
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.	<u></u>	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? Yes X No			-1
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a	ļ:		; ,
	disqualified person?]. ,	. '	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No	- ;		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No	٠.	-	
	(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)?	i	'	
	(6) Agree to pay money or property to a government official? (Exception. Check "No" if	٠.,٠		
	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)]	
			.	
þ	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	1		
	section 53 4941(d)-3 or in a current notice regarding disaster assistance (see page 20 of the instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here		li	
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that	1 c		X
_	were not corrected before the first day of the tax year beginning in 2009?	· · ·		
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private	l .	, ,	`
а	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	<u> </u>		-
а	6e, Part XIII) for tax year(s) beginning before 2009?	-		,
	If "Yes," list the years		ļ, i	* -
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)	<u> </u>		
-	(relating to incorrect 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 page 20 of the instructions)	2 b		X
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here	`.		,
	D			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business	l	1	_
	enterprise at any time during the year? Yes X No			-
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	-		
	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)	3 b	 	<u>v</u>
4 a		4a	 	
b		4.		У
4 a 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?	4 a	-	X

Part	VII-B Statements Regarding Activities for	or Which Form 4	720 May Be Requ	ired (continued))				
5 a	During the year did the foundation pay or incur any amou	nt to				_			
	(1) Carry on propaganda, or otherwise attempt to influer		4945(e))?	Yes X] No				
((2) Influence the outcome of any specific public election (see section 4955), or to carry on,								
	directly or indirectly, any voter registration drive?								
((3) Provide a grant to an individual for travel, study, or oth	ner sımılar purposes?		Yes X	No _		_		
(4) Provide a grant to an organization other than a chari	table, etc., organizatio	n described in		_	(ا	٠,٠		
	section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see page 22 of the in:	structions)	. Yes X] No -		,		
((5) Provide for any purpose other than religious, charitat	ole, scientific, literary,	or educational		_ -	1	ľ		
	purposes, or for the prevention of cruelty to children o	r anımals?		. Yes X] No 🔄		τ.		
b	If any answer is "Yes" to 5a(1)-(5), did any of the trans-	actions fail to qualify	under the exceptions	described in	-		, •		
1	Regulations section 53 4945 or in a current notice regard	ing disaster assistand	e (see page 22 of the	nstructions)?	<u>.</u> <u>5</u>	b	<u> </u>		
(Organizations relying on a current notice regarding disast	er assistance check h	ere	▶∟]]	î [.]			
c i	f the answer is "Yes" to question 5a(4), does the founda	ition claim exemption	from the tax		, I.	<u>'</u>			
1	pecause it maintained expenditure responsibility for the gr	ant?	<i></i>	Yes	No "				
,	If "Yes," attach the statement required by Regulations sect	ion 53 4945-5(d)							
6 a	Did the foundation, during the year, receive any funds, d	rectly or indirectly, to	pay premiums						
,	on a personal benefit contract?,			Yes X	No	1			
b 1	Did the foundation, during the year, pay premiums, direc	tly or indirectly, on a	personal benefit contrac	:t?	6	b	X		
	If "Yes" to 6b, file Form 8870				_	,			
7a /	At any time during the tax year, was the foundation a pai	rty to a prohibited tax	shelter transaction?	Yes X	No 2	- ، ر _د			
_ b !	f yes, did the foundation receive any proceeds or have a					b	X		
Part	VIII Information About Officers, Directors	, Trustees, Foun	dation Managers,	Highly Paid En	nployees,				
1 L	and Contractors ist all officers, directors, trustees, foundation m	anagers and their	compensation (see	page 22 of the in	structions) <u>.</u>			
	(a) Name and address	(b) Title, and average hours per week	(c) Compensation (If not paid, enter	(d) Contributions to employee benefit plan	(e) Ex	pense accou			
		devoted to position	-0-)	and deferred compensa	tion	r allowance	.s 		
			0				^		
<u>A'1'1</u>	ACHMENT 8		0.		0.		0		
				· · · · · · · · · · · · · · · · · · ·					
		ı.							
	ompensation of five highest-paid employees (ot	han those inc	luded on line 4 co	o page 23 of the	unctruction	<u></u>			
2 C	none, enter "NONE."	ner than those inc	iuueu on iiie i - se	e page 25 of the	mstruction	5			
		(b) Title, and average		(d) Contributions to employee benefit		pense accoi	unt		
(a)	Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	plans and deferred		r allowance			
		devoted to position		compensation					
	NONE				}				
	TONE	 -							
Total	number of other employees paid over \$50,000 .								

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

Form 990-PF (2009)

Pa	Art X Minimum Investment Return (All domestic foundations must complete this part. Fore see page 24 of the instructions.)	gn foundation	IS,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
	purposes		
а	Average monthly fair market value of securities	1a	759,822.
b	Average of monthly cash balances	1 b	556,384.
С	Fair market value of all other assets (see page 24 of the instructions)	1 c	0.
d		1d	1,316,206.
е	Reduction claimed for blockage of other factors reported on lines 1a and		
	1c (attach detailed explanation)] .: }	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,316,206.
4	Cash deemed held for charitable activities Enter 1 1/2 % of line 3 (for greater amount, see page 25		
	of the instructions)	4	19,743.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,296,463.
6	Minimum investment return. Enter 5% of line 5	6	64,823.
Pa	Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) privations and certain foreign organizations check here ▶ and do not complete this	ate operating part)	
1	Minimum investment return from Part X, line 6	1	64,823.
2 a	Tax on investment income for 2009 from Part VI, line 5 2a 172.	- 1	
b	Income tax for 2009 (This does not include the tax from Part VI) 2b	1	
c		2c	172.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	64,651.
4	Recoveries of amounts treated as qualifying distributions		
5		5	64,651.
6	Add lines 3 and 4 Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1	7	64,651.
Pa	art XII Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes	T T	
•	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1 a	80,660.
a	Dragger related investments, total from Bort IV B	1b	00,000:
p	Program-related investments - total from Part IX-B Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,	10	
2		2	0.
	purposes		
3	Amounts set aside for specific charitable projects that satisfy the	1 22	0.
а	Suitability test (prior IRS approval required)	3a	0.
ь		4	80,660.
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4		00,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income	•	172.
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	6	80,488.
6	Adjusted qualifying distributions. Subtract line 5 from line 4		
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating v qualifies for the section 4940(e) reduction of tax in those years	nether the foul	idation

Form 990-PF (2009)

Pa	Part XIII Undistributed Income (see page 26 of the instructions)								
		(a)	(b)	(c)	(d)				
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009				
	line 7				64,651.				
2	Undistributed income, if any, as of the end of 2009			· · · · · · · · · · · · · · · · · · ·					
	Enter amount for 2008 only		1	24,773.					
b	Total for prior years 20 07 20 06 20 05								
3	Excess distributions carryover, if any, to 2009		 						
-			, , ,		,				
ä	From 2004	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		,					
D	From 2005	The state of the s		W 2	-				
C	From 2006		7						
d	From 2007 , , , , ,	, 4	[
е		1 .			<u>.</u>				
f	Total of lines 3a through e	0.							
4	Qualifying distributions for 2009 from Part XII,								
	line 4 ▶ \$80,660.								
а	Applied to 2008, but not more than line 2a			24,773.					
b	Applied to undistributed income of prior years (Election								
	required - see page 26 of the instructions)				- ,				
С	Treated as distributions out of corpus (Election								
_	required - see page 26 of the instructions)			, ,	· · · · · · · · · · · · · · · · · · ·				
đ	Applied to 2009 distributable amount				55,887.				
	Remaining amount distributed out of corpus	· ^		1,1	- (-				
5	Excess distributions carryover applied to 2009	0.	-	`	0.				
	(If an amount appears in column (d), the same		- 147		,				
6	amount must be shown in column (a)) Enter the net total of each column as		E 11 1	, , , ,					
ŭ	indicated below:	·		=					
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.	,	,	, î				
	Prior years' undistributed income Subtract								
Ь	line 4b from line 2b	,		, ,					
С	Enter the amount of prior years' undistributed	-		,	-				
	income for which a notice of deficiency has been	,							
	issued, or on which the section 4942(a) tax has				l I				
	been previously assessed				· · · · · · · · · · · · · · · · · · ·				
a	Subtract line 6c from line 6b Taxable amount - see page 27 of the instructions				•				
е	Undistributed income for 2008 Subtract line								
	4a from line 2a Taxable amount - see page	-			-				
	27 of the instructions								
f	Undistributed income for 2009 Subtract lines	-							
	4d and 5 from line 1. This amount must be				8,764.				
7	distributed in 2010	`		-	07701.				
•	to satisfy requirements imposed by section				•				
	170(b)(1)(F) or 4942(g)(3) (see page 27 of the				•				
8	instructions)								
•	applied on line 5 or line 7 (see page 27 of the								
	instructions)								
9	Excess distributions carryover to 2010.	0.							
	Subtract lines 7 and 8 from line 6a	J							
10	Analysis of line 9								
а	Excess from 2005	1	}						
b	Excess from 2006	-							
С	Excess from 2007]			ı				
d]							
e	Excess from 2009 0 .								

Form 990-PF (2009)

Pa	rt XIV Private Oper	rating Foundations	(see page 27 of the	e instructions and P	art VII-A, question 9)	NOT APPLICABL
1 a	If the foundation has	received a ruling or o	determination letter the	at it is a private ope	erating	
	foundation, and the rulin	g is effective for 2009, e	enter the date of the ruling	9	▶	
b	Check box to indicate wh					(J)(3) or 4942(J)(5)
۰.		Tax year		Prior 3 years		
2 a	Enter the lesser of the ad- justed net income from Part	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	for the minimum investment		<u> </u>			
	return from Part X for each year listed			Ì		
_						
D	85% of line 2a				_	
С	Qualifying distributions from Part]		
d	XII, line 4 for each year listed . Amounts included in line 2c not					
u	used directly for active conduct					
	of exempt activities		 	 		<u></u>
е	Qualifying distributions made directly for active conduct of		l	1	1	
	exempt activities Subtract line	-				
	2d from line 2c					· · · · · · · · · · · · · · · · · · ·
3	Complete 3a, b, or c for the alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets					
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)					ļ
b	"Endowment" alternative test-					
	enter 2/3 of minimum invest- ment return shown in Part X,					Ì
	line 6 for each year listed					
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)					
	public and 5 or more					
	exempt organizations as provided in section 4942					
	(j)(3)(B)(iii)					
	(3) Largest amount of sup- port from an exempt					
	organization			 		
	(4) Gross investment income	1.6	1		4-4: b 65 000	
Pá		ary information (C during the year - se			dation had \$5,000	or more in assets
_				istructions./		
1	Information Regardin	J		than 20/ af the tal		
а	List any managers of	the foundation who i	nave contributed mor hev have contributed	e than 2% of the tol	See section 507(d)(2)	red by the foundation
	·		ney have contributed	(000 000	
		VOLLBRACHT				<u></u>
b	List any managers of					y large portion of the
	ownership of a partner	rship or other entity) o	f which the foundatio	n has a 10% or greate	er interest	
	N/A	 ,				
2	Information Regardin	g Contribution, Gran	t, Gift, Loan, Scholars	hip, etc., Programs:		
					ritable organizations a	
					e 28 of the instruction	ons) to individuals or
	organizations under ot	ther conditions, compl	ete items 2a, b, c, and	d d		
а	The name, address, a	nd telephone number	of the person to who	m applications should	be addressed	
	ATTACHM	ENT 9	_			
b	The form in which app		bmitted and informat	on and materials the	y should include	
	····				-	
	LETTER FOR	M WITH EXEMPTI	ON CERTIFICATE			
	Any submission dead	ines		 	······································	
·	any businesson dead	. •				
	N/A					
	Any restrictions or l	imitations on awards	s such as hy geogr	anhical areas charis	table fields kinds of	institutions or other
u	factors	audiona on awaius	o, such as by geogr	apinoui dicas, ciiali	table helds, killes of	Jacatorio, or other
	N/A					

Part XV Supplementary Information (continued)

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 Purpose of grant or contribution Amount Am									
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount					
Name and address (home or business)	or substantial contributor	recipient	Contribution						
a Paid during the year]								
ATTACHMENT 10									
		ļ							
Total			▶ 3a	80,000.					
b Approved for future payment									
	ļ								
		ļ							
		Ì	ĺ						
	1								
		1							
			}	}					
	L	<u> </u>	N 25						
Total	<u></u> <u></u>	<u></u>	▶ 3b	l					

er gross amounts unless otherwise indicated	Unrel	ated business income	Excluded b	y section 512, 513, or 514	(e)
Program service revenue	(a) Business code	(b)	(c) Exclusion code	(d)	Related or exempt function income (See page 28 of the instructions)
a			<u> </u>		
b					
c			ļ <u> </u>		
d			 		
e			 		······································
·					
g Fees and contracts from government agencies					
Membership dues and assessments			14	11,998.	
Interest on savings and temporary cash investments Dividends and interest from securities			14	13,139.	······································
Net rental income or (loss) from real estate	•			20/2001	
a Debt-financed property			 		
Net rental income or (loss) from personal property					
Other investment income			<u> </u>		
Gain or (loss) from sales of assets other than inventory			18	-458,783.	
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue a					· · · · · · · · · · · · · · · · · · ·
i.					
					
d					
Subtotal Add columns (b), (d), and (e)	o verify calci	ulations)			100
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to TXVI-B Relationship of Activities ne No. Explain below how each activities the accomplishment of the form	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to rt XVI-B Relationship of Activities The No. Explain below how each activity the accomplishment of the form	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to Relationship of Activities The No. Explain below how each activity the accomplishment of the form	o verify calco to the Ac ty for whi	ulations) complishment of Exc	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions on page 28 to Relationship of Activities The No. Explain below how each activity the accomplishment of the form	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64
Subtotal Add columns (b), (d), and (e) Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions on page 28 to the columns of the football and the complishment of the football and the columns of the columns	o verify calco to the Ac ty for whi	ulations) complishment of Excomplishment of except purposes (of	empt Purp	oses (e) of Part XVI-A con	-433, 64

Form	990-PF	(2009)				84-15	544613			Pa	age 13
Pa	rt XVII	Information Exempt Orga	•	ransfers To and 1	ransactions	and I	Relationshi	ps With	Nonc	harii	able
1	in sec	ction 501(c) of the C	Code (other than	engage in any of the section 501(c)(3) orga	nizations) or in					Yes	No
a				ncharitable exempt organiz					4-14		X
											X
_		ner assets , , , ,	• • • • • • • • • •						18(2)		
0			haritable evernt o	rganization					1h/1)		x
				xempt organization							X
				is							X
											Х
											X
				fundraising solicitations							X
С	Sharın	g of facilities, equipme	nt, mailing lists, oth	her assets, or paid employe	es				1 c		X
d		•		es," complete the following	=			•			
		-		ces given by the repo							
	value	in any transaction o	r sharing arrang	gement, show in colum	n (d) the value	e of the	goods, other	assets, or	servic	es red	ceived
		4.1.4	T								
(a) l	_ine no	(b) Amount involved	(c) Name of n	oncharitable exempt organiza	N/A	escription	of transfers, transf	actions, and sn	aring arra	ingeme	nts
		14/11	 								
			 								
										-	
			 								
	T I										
	j										
										_	
			<u> </u>	······································			· ·				
									-		
			 								
											
		formulation dispatity as		and with an enlated to d	no or more tax		organizations (denorthed in			
28		•	•	ed with, or related to, one of the control of the c		-exempt		Jeschbed III	\square_{v}	es 🗀	No
h		;," complete the following		0 1(0)(0)) 01 111 30011011 021					۱۰ لــا		
	11 , 00	(a) Name of organization		(b) Type of organ	ization	*	(c) Descri	ption of relation	nship		
_						L	 				
	Under police of the second of	penalties of perjury, I dec t is true, correct, and con	iare that I have exa nplete Declaration o	imined this return, including if preparer (oth <u>er than taxpa</u>	accompanying sch ver or fiduciary) is	nedules and based on a	d statements, an all information of	d to the best which prepar	ofmyk erhasa	nowled ny knov	ge and wledge
		Sec.	$\mathcal{L}(\mathcal{L})$	11/2/	10-4.5		. رما .	~ l . ~			
a		nature of officer or trustee	0.00	in Dus out 12	Date		Title	51/10			
er	. 31	griature or princer or trustee			Date	-1	1100	Preparer'	s identif	vina	
Sign Here	Paid Preparer's Use Only	Preparer's signature	+ original	- CPA	10/25/1	Chec self-	ck if employed ►	number (spage 30 o	See Sign the insti	ature o	n)
S	Paid Preparer' Use Only	Firm's name (or yours	BRINKF	RHOFF REVENIG 8	CORRIGAN	P.C.	EIN ▶	84-103			
	Pre	self-employed), addres					LIN				
		and ZIP code	DENVER			0222	Phone	no 303-	757-8	000	
_				·			1 : 22-1-		Form 99		(2009)

VOLLBRACHT FAMILY FOUNDATION

ARY CASH INVESTMENTS
CASH
I ON TEMPORARY
ON
INTEREST
I
F, PART I
990P
FORM

NET INVESTMENT INCOME	6,308. 5,690.	11,998.
REVENUE AND EXPENSES PER BOOKS	6,308.	11,998.
		TOTAL
DESCRIPTION	ALPINE BANK - MONEY MARKET 1ST BANK CHECKING	

ATTACHMENT 1

VOLLBRACHT FAMILY FOUNDATION

SECURITIES
FROM
INTEREST
AND
DIVIDENDS
I ⊢-(
PART]
990PF.
FORM

NET INVESTMENT INCOME	4,892. 8,247.	13,139.
REVENUE AND EXPENSES PER BOOKS	4,892. 8,247.	13,139.
		TOTAL
DESCRIPTION	UBS FINANCIAL SERVICES INC. ALPINE BANK	

ATTACHMENT 3

VOLLBRACHT FAMILY FOUNDATION

COUNTING FEES
AC
-
H
PART
990PF,
FORM

CHARITABLE PURPOSES	.099	.099
ADJUSTED NET INCOME		0
NET INVESTMENT INCOME	.099	. 660.
REVENUE AND EXPENSES PER BOOKS	1,320.	1,320.
		TOTALS
DESCRIPTION	ACCOUNTING FEES	

FORM 990PF, PART I - TAXES

REVENUE AND EXPENSES

DESCRIPTION

PER BOOKS

FOUNDATION EXCISE TAXES - 2008

263.

TOTALS

263.

EQ20BP E329

PAGE 19

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ATTACHMENT

- OTHER EXPENSES PART I FORM 990PE,

VOLLBRACHT FAMILY FOUNDATION

DESCRIPTION INVESTMENT ADVISOR FEES

REVENUE AND EXPENSES PER BOOKS

INCOME 7,279. INVESTMENT

7,279.

TOTALS

ATTACHMENT

10/25/2010 3:40:17 PM V 09-8.3

VOLLBRACHT FAMILY FOUNDATION

- CORPORATE STOCK PART II FORM 990PF,

DESCRIPTION

UBS FINANCIAL SERVICES INC. ALPINE TRUST

TOTALS

ATTACHMENT 6

BOOK VALUE ENDING

ENDING

0 680,251.

733,811.

0

680,251.

733,811.

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

DESCRIPTION

AMOUNT

DIV & INTERSEST PAID TAXABLE NEXT YEAR

829.

TOTAL

829.

VOLLBRACHT FAMILY FOUNDATION
FORM 990-PF - PART IV

Kind of Pro			Des	cription		P O 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)	
	RII O TTOLO			STRIBUTIONS			465.	
96,385.		UBS S/T SA 145,191.	LES				VAR -48,806.	VAR
90,722.		UBS L/T SA 739,434.	LES				VAR -248,712.	VAR
95,491.		APLINE S/T 957,484.	SALES				VAR -161,993.	VAR
263.		APLINE L/T	SALES				VAR 263.	VAR
200.							203.	
TAL GAIN(LOS	SS)						-458,783.	
							i	
							;	
							-	
		ļ						

USTEES
ORS, AND TRUSTEES
FICERS, DIRECTORS, AN
LIST OF OFFIC
RT VIII - L
ORM 990PE, PA
FOF

EXPENSE ACCT AND OTHER ALLOWANCES	.0	.0	. 0	.0	0.
CONTRIBUTIONS TO EMPLOYEE BENEFIT PLANS	.0	.0	.0	.0	0
COMPENSATION	Ö	.0	.0	.0	0
TITLE AND AVERAGE HOURS PER WEEK DEVOTED TO POSITION	PRESIDENT	VICE PRESIDENT	TREASURER	SECRETARY	GRAND TOTALS
NAME AND ADDRESS	LESLIE D. VOLLBRACHT 2400 CHERRY CREEK SOUTH DR., #402 DENVER, CO 80209	WILLIAM B. VOLLBRACHT 2400 CHERRY CREEK SOUTH DR., #402 DENVER, CO 80209	DANA L. VOLLBRACHT 625 S. DOWNING ST DENVER, CO 80209	ALISON VOLLBRACHT WINFIELD 359 WARD STREET SEATTLE, WA 98109	

PAGE 23

FORM 990PF, PART XV - NAME, ADDRESS AND PHONE FOR APPLICATIONS

LESLIE D. VOLLBRACHT, PRESIDENT 2400 CHERRY CREEK DRIVE SOUTH, #402 DENVER, CO 80209 303-698-2946

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

	RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND		
RECIPIENT NAME AND ADDRESS	FOUNDATION STATUS OF RECIPIENT	PURFOSE OF GRANT OR CONTRIBUTION	AMOUNT
DENVER CHILDREN'S HOME 1501 ALBION STREET DENVER, CO 80220	NONE 501(C)(3)	GENERAL OPERATING	0
MAXEUND ANIMAL ADOFTION CENTER 1025 GALAFAGO STREET DENVER, CO 80204-3942	NONE 501(C)(3)	GENERAL OPERATING	5,000
SEATTLE WORKS 2123 EAST UNION STREET SEATTLE, WA 98122	NONE 501(C)(3)	GET YOUNG ADULIS INVOLVED IN SEATTLE PROJECTS	Ö
HARRISON MEMORIAL ANIMAL HOSPITAL 191 YUWA STREET DENVER, CO 80223-1205	NONE 501(C)(3)	ASSIST LOW INCOME PET OWNERS W/ VET CARE	5,000
THE JUDITH ANN GRIESE FOUNDATION 1741 GAYLORD STREET DENVER, CO 80206	NONE 501(C)(3)	GENERAL OPERATING	20,000
ROUNDUP RIDERS OF THE ROCKIES HERITAGE/TRAILS FDN 9902 NORTH HEATHER DRIVE CASTLE ROCK, CO 80108-9133	NONE 501(C)(3)	GENERAL OPEERATING	10,000

ATTACHMENT 10 (CONT'D)

D DURING THE YEAR
GRANTS AND CONTRIBUTIONS PAID DURING
GRANTS AND CO
PART XV -
FORM 990PE

ION	0	5, 000	25,000	10,000
PURPOSE OF GRANT OR CONTRIBUTION	GENERAL OPERATING	GENERAL OPERATING	GENERAL OPERATING	GENERAL OPERATING
RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR AND FOUNDATION STATUS OF RECIPIENT	NONE 501(C)(3)	NONE 501(C)(3)	NONE 501(C)(3)	NONE 501(C)(3)
RECIPIENT NAME AND ADDRESS	DENVER DUMB FRIENDS LEAGUE 2080 SOUTH QUEBEC DENVER, CO 80231	COLORADO HORSE RESCUE 10386 NORTH 65TH STREET LONGMONT, CO 80403	THE CHILDREN'S HOSPITAL 13123 E 16TH AVENUE AURORA, CO 80045	UNIVERSITY OF WASHINGTON EXPERIMENTAL EDUCATION UNIT BOX 357925 SEATTLE, WA 98195

TOTAL CONTRIBUTIONS PAID

80,000.

PAGE 26 ATTACHMENT 10

SCHEDULE D (Form 1041)

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

Name of estate or trust

Department of the Treasury Internal Revenue Service

VOLLBRACHT FAMILY FOUNDATION

C/O LESLIE D. VOLLBRACHT, PRESIDENT

Employer Identification number

84-1544613

	: Form 5227 filers need to complete only Pa						
Par		1		ear or Less	(e) Cost or other	basis	(f) Gain or (loss) for
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo, day, yr)	(c) Date sold (mo , day, yr)	(d) Sales price	(see page 4 of instructions	the	the entire year Subtract (e) from (d)
1a							
			-	<u> </u>			
		 					
		 					
					<u> </u>		
b	Enter the short-term gain or (loss), if any, f	rom Schedule D	-1 line 1b			1 b	-210,799.
	Enter the short term gam or (1888), if any, i	TOTAL COLLOCATE D	,o				
2	Short-term capital gain or (loss) from Form	ns 4684, 6252,	6781, and 882	4		2	
3	Net short-term gain or (loss) from partners	hins Sicornora	tions, and other	r estates or trusts		3	
4	Short-term capital loss carryover Enter the						
	Carryover Worksheet					4	()
5	Net short-term gain or (loss). Combine line					5	-210,799.
Par	column (3) on the back	s - Assets Held	More Than Or	ne Year			210,1331
	(a) Description of property (Example 100 shares 7% preferred of "Z" Co)	(b) Date acquired (mo , day, yr)		(d) Sales price	(e) Cost or other (see page 4 of instructions	the	(f) Gain or (loss) for the entire year Subtract (e) from (d)
6a							
		-					
			-				
		1					
		<u> </u>					
b	b Enter the long-term gain or (loss), if any, from Schedule D-1, line 6b					6 b	-248,449.
7	7 Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824					7	
8	8 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts					8	
9	9 Capital gain distributions					9	465.
10	Gain from Form 4797, Part I					10	
11	Long-term capital loss carryover Enter the	e amount, if any	, from line 14 o	of the 2008 Capital Los	SS		,
					11	()	
12	Net long-term gain or (loss). Combine line column (3) on the back					12	-247,984.

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

Schedule D (Form 1041) 2009

	A III . Cummon: of Dorto Land II	1 445				Tage 2
Pai	'Summary of Parts I and II Caution: Read the instructions before completing this part		Beneficiaries' see page 5)	(2) Es or tru		(3) Total
13	Net short-term gain or (loss) 13		,			-210,799.
14	Net long-term gain or (loss):					
а	Total for year	·				-247,984.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht) 14b)				
С	28% rate gain					
15	Total net gain or (loss). Combine lines 13 and 14a ▶ 15					-458,783.
Note	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Form 99 rt V, and do not complete Part IV If line 15, column (3), is a net loss, complete Part IV	0-T, Pa	rt I, line 4a) If line e Capital I oss Cai	es 14a and 1	5, colum	nn (2), are net gains, go
	t IV Capital Loss Limitation	4170 1170		1,000		3 recessary
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, Part I,	line 4c.	if a trust), the sr	naller of	ГТ	
а	· · · · · · · · · · · · · · · · · · ·		• • •		16 (3,000)
Note	The loss on line 15, column (3) or b \$3,000	ine 22	(or Form 990-T, I	ne 34), is a	loss, coi	mplete the Capital Loss
	over Worksheet on page 7 of the instructions to figure your capital loss carryover Tax Computation Using Maximum Capital Gains Rates		· · · · · · · · · · · · · · · · · · ·			
Par	n 1041 filers. Complete this part only if both lines 14a and 15 in column ((2) ara	gaine or an an	nount is on	torod u	. Post Lor Post II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is more that			ilouiit is ei	ilerea ii	i Fait I Di Fait II and
	tion: Skip this part and complete the worksheet on page 8 of the instructions					
 E 	ther line 14b, col (2) or line 14c, col (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero					
	n 990-T trusts. Complete this part only if both lines 14a and 15 are gain					
	orm 990-T, and Form 990-T, line 34, is more than zero. Skip this part and it ine 14b, col. (2) or line 14c, col. (2) is more than zero.	a com	piete the work	sneet on p	age 8	of the instructions if
						
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 34)	··F	17			
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero	[<i>'</i> [
19	but not less than zero		1			
19	from Form 1041, line 2b(2) (or enter the qualified	1			1	
	dividends included in income in Part I of Form 990-T) 19				}	
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 ▶ 21				ı	
22	Subtract line 21 from line 20 if zero or less, enter -0		22		Ì	
23	Subtract line 22 from line 17 If zero or less, enter -0-	_	23			
					,	
24	Enter the smaller of the amount on line 17 or \$2,300	L	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))	
26	Subtract line 25 from line 24	🗀	26			
27	Are the amounts on lines 22 and 26 the same?				. 1	
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or line 22		27		Ï	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)	· · · -	28			
29	Subtract line 28 from line 27				20	
30	Multiply line 29 by 15% (15)	hodulo	for Estatos or		30	
31	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	
32	Add lines 30 and 31				32	
33	Add lines 30 and 31	hedule	for Estates ar	nd Trusts	 -	
-	(see the Schedule Ginstructions in the instructions for Form 1041)				33	
34	Tax on all taxable income. Enter the smaller of line 32 or line 33 here					
_ •	G, line 1a (or Form 990-T, line 36)				34	
					Schod	ule D (Form 1041) 2009

SCHEDULE D-1 (Form 1041)

Department of the Treasury Internal Revenue Service

Name of estate or trust

Continuation Sheet for Schedule D (Form 1041) ▶ See instructions for Schedule D (Form 1041).

▶ Attach to Schedule D to list additional transactions for lines 1a and 6a.

OMB No 1545-0092

Employer identification number

VOLLBRACHT FAMILY FOUNDA		As Hald One Ve		84-1544613	
Part I Short-Term Capital Gains (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 (loss) Subtract (e) from (d)
1a UBS S/T SALES	VAR	VAR	96,385.	145,191.	-48,806.
APLINE S/T SALES	VAR	VAR	795,491.	957,484.	-161,993.
					_
				·	
<u> </u>					
					
					<u> </u>
					· · · · · · · · · · · · · · · · · · ·
			<u> </u>		

1b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 1b . . . For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D-1 (Form 1041) 2009

-210,799.

7 -

Name of estate or trust as shown on Form 1041. Do not enter name and employer identification number if shown on the other side Employer Identification number Part II Long-Term Capital Gains and Losses - Assets Held More Than One Year (d) Sales price (e) Cost or other basis (b) Date (a) Description of property (Example 100 sh 7% preferred of "Z" Co) (c) Date sold (f) Gain or (loss) Subtract (e) from (d) (see page 4 of the __instructions) (see page 4 of the instructions) acquired (mo , day, yr) (mo, day, yr) 6a UBS L/T SALES VAR 490,722. 739,434 VAR -248,712. APLINE L/T SALES VAR VAR 263. 0. 263. -248,449. 6b Total. Combine the amounts in column (f) Enter here and on Schedule D, line 6b . .

· Form 8868

(Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Internal Revenue S		► Flie a separate application for each return.	}				
	If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box						
If you are f Do not comple	iling for an te Part II u	n Additional (Not Automatic) 3-Month Extension, complete only Part II (on pag nless you have already been granted an automatic 3-month extension on a prev	ie 2 of this viously filed	form) d Form 8868			
Part I Auto	matic 3-	Month Extension of Time. Only submit original (no copies needed)					
		o file Form 990-T and requesting an automatic 6-month extension - check this b	ox and cor	mplete _	_		
Part I only				.` ▶ ∟			
All other corp time to file inco		including 1120-C filers), partnerships, REMICs, and trusts must use Form 70 turns	004 to red	quest an extension	of		
one of the ref electronically i returns, or a co	turns note f (1) you omposite	Generally, you can electronically file Form 8868 if you want a 3-month autobed below (6 months for a corporation required to file Form 990-T). However, want the additional (not automatic) 3-month extension or (2) you file Forms or consolidated From 990-T. Instead, you must submit the fully completed and in the electronic filing of this form, visit www irs.gov/efile and click on e-file for C	er, you ca 990-BL, 6 I signed pa	annot file Form 88 3069, or 8870, gro age 2 (Part II) of Fo	68 oup		
Type or	Name of	Exempt Organization VOLLBRACHT FAMILY FOUNDATION	Employer	identification number	r		
print	C/C	LESLIE D. VOLLBRACHT, PRESIDENT	84-1	544613			
File by the	Number,	street, and room or suite no. If a P.O. box, see instructions			_		
due date for filing your		O CHERRY CREEK SOUTH DR, #402					
return See instructions	•	or post office, state, and ZIP code. For a foreign address, see instructions. VER, CO 80209					
Check type of	return to	be filed (file a separate application for each return)			_		
Form 990		Form 990-T (corporation)	m 4720				
Form 990-	_		m 5227				
Form 990-		—	m 6069				
X Form 990-	PF	Form 1041-A Form	m 8870				
		care of ► LESLIE D. VOLLBRACHT, PRES. 03 698-2946 FAX No ►					
 If the organ 	ızatıon do	es not have an office or place of business in the United States, check this box .		▶ [
 If this is for 	a Group F	Return, enter the organization's four digit Group Exemption Number (GEN)		If this is			
for the whole g names and EIN		ck this box · ▶ ☐ If it is for part of the group, check this box · . ▶ ☐ and embers the extension will cover	d attach a	a list with the	_		
1 reques	t an au	tomatic 3-month (6 months for a corporation required to file Form	n 990-T)	extension of tim	ne		
untıl		tomatic 3-month (6 months for a corporation required to file Form $08/15$, 2010 , to file the exempt organization return for the organization	named at	oove The extersion	IS		
for the org	ganızatıon	's return for					
► [X]	calendar	year_2009_ or					
		peginning , and ending					
F L	tax your -	11111	'	' 			
2 If this tax	year is foi	less than 12 months, check reason Initial return Final return	Change	in accounting period	ţ		
3a If this ap	plication i	s for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, I	ess any	T-T	_		
• •		its See instructions		3a \$ 0).		
b If this app	olication is	for Form 990-PF or 990-T, enter any refundable credits and estimated tax pa	ayments		_		
		prior year overpayment allowed as a credit		3b \$ 497	<u>·</u>		
		ract line 3b from line 3a Include your payment with this form, or, if required,	-	S. C.			
	-	or, if required, by using EFTPS (Electronic Federal Tax Payment System	n) See	1 1.	1		
Instruction		to make an electronic fined withdrawal with the Form 2000 and Form 2000 FO		10010	.		
Caution. If you for payment ins	-	to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO	, and Form	1 00/9-EU			
		perwork Reduction Act Notice, see Instructions.		Form 8868 (Rev 4-200)9)		