



See a Social Security Number? Say Something!
Report Privacy Problems to <https://public.resource.org/privacy>
Or call the IRS Identity Theft Hotline at 1-800-908-4490



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

OMB No 1545-0052

2009

Department of the Treasury
Internal Revenue Service

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

For calendar year 2009, or tax year beginning , 2009, and ending

G Check all that apply: ☐ Initial return ☐ Initial Return of a former public charity ☐ Final return
☐ Amended return ☐ Address change ☐ Name change

Use the
IRS label.
Otherwise,
print
or type.
See Specific
Instructions.

PARKHOUSE FOUNDATION
5640 S BELLAIRE CT
GREENWOOD VILLAGE, CO 80121

A Employer identification number

84-1552161

B Telephone number (see the instructions)

(720) 529-8067

C If exemption application is pending, check here ☐D 1 Foreign organizations, check here ☐2 Foreign organizations meeting the 85% test, check here and attach computation ☐E If private foundation status was terminated under section 507(b)(1)(A), check here ☐F If the foundation is in a 60-month termination under section 507(b)(1)(B), check here ☐

H Check type of organization: ☒ Section 501(c)(3) exempt private foundation
☐ Section 4947(a)(1) nonexempt charitable trust ☐ Other taxable private foundation

I Fair market value of all assets at end of year
(from Part II, column (c), line 16)

\$ 427,002.

J Accounting method: ☒ Cash ☐ Accrual☐ Other (specify) _____

(Part I, column (d) must be on cash basis.)

Part I Analysis of Revenue and Expenses

(The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see the instructions).)

(a) Revenue and expenses per books

(b) Net investment income

(c) Adjusted net income

(d) Disbursements for charitable purposes (cash basis only)

REVENUE

1 Contributions, gifts, grants, etc., received (att sch)

27,416.

2 Ck ☐ If the foundn is not req to att Sch B

3 Interest on savings and temporary cash investments

1,511.

1,511.

1,511.

4 Dividends and interest from securities

7,556.

7,556.

7,556.

5a Gross rents

b Net rental income or (loss)

6a Net gain/(loss) from sale of assets not on line 10

-3,915.

b Gross sales price for all assets on line 6a

26,816.

7 Capital gain net income (from Part IV, line 2)

0.

8 Net short-term capital gain

0.

9 Income modifications

10a Gross sales less returns and allowances

b Less: Cost of goods sold

c Gross profit/(loss) (att sch)

11 Other income (attach schedule)

605.

605.

12 Total. Add lines 1 through 11

33,173.

9,672.

9,067.

13 Compensation of officers, directors, trustees, etc.

0.

14 Other employee salaries and wages

15 Pension plans, employee benefits

16a Legal fees (attach schedule)

b Accounting fees (attach sch) SEE ST 2

1,685.

1,685.

c Other prof fees (attach sch) SEE ST 3

2,546.

2,546.

17 Interest

18 Taxes (attach schedule) (see instr) SEE STM 4

181.

19 Depreciation (attach sch) and depletion

20 Occupancy

21 Travel, conferences, and meetings

22 Printing and publications

23 Other expenses (attach schedule) SEE STATEMENT 5

6,126.

6,114.

24 Total operating and administrative expenses. Add lines 13 through 23

10,538.

10,345.

25 Contributions, gifts, grants paid. PART XV

14,250.

14,250.

26 Total expenses and disbursements. Add lines 24 and 25

24,788.

10,345.

0.

14,250.

27 Subtract line 26 from line 12:

a Excess of revenue over expenses and disbursements

8,385.

b Net investment income (if negative, enter -0-)

0.

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

9,067.

Part II Balance Sheets		Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)			Beginning of year	End of year	
		(a) Book Value	(b) Book Value	(c) Fair Market Value			
ASSETS	1	Cash — non-interest-bearing					
	2	Savings and temporary cash investments	29,625.	41,763.	41,763.		
	3	Accounts receivable					
		Less: allowance for doubtful accounts					
	4	Pledges receivable					
		Less: allowance for doubtful accounts					
	5	Grants receivable					
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)					
	7	Other notes and loans receivable (attach sch.)					
		Less: allowance for doubtful accounts					
	8	Inventories for sale or use					
	9	Prepaid expenses and deferred charges	801.	569.	569.		
	10a	Investments — U.S. and state government obligations (attach schedule)					
	b	Investments — corporate stock (attach schedule)	436,431.	435,025.	384,670.		
	c	Investments — corporate bonds (attach schedule)					
	LIABILITIES	11	Investments — land, buildings, and equipment: basis				
		Less: accumulated depreciation (attach schedule)					
12		Investments — mortgage loans					
13		Investments — other (attach schedule)					
14		Land, buildings, and equipment: basis	5,277.				
		Less: accumulated depreciation (attach schedule) SEE STMT 6.	5,277.				
15		Other assets (describe)					
16		Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	466,857.	477,357.	427,002.		
17		Accounts payable and accrued expenses					
18		Grants payable					
FUNDS	19	Deferred revenue					
	20	Loans from officers, directors, trustees, & other disqualified persons					
	21	Mortgages and other notes payable (attach schedule)					
	22	Other liabilities (describe)					
23	Total liabilities (add lines 17 through 22)	0.	0.				
FUND BALANCES	Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted					
	25	Temporarily restricted					
	26	Permanently restricted					
	Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.		X				
	27	Capital stock, trust principal, or current funds					
	28	Paid-in or capital surplus, or land, building, and equipment fund					
	29	Retained earnings, accumulated income, endowment, or other funds	466,857.	477,357.			
30	Total net assets or fund balances (see the instructions)	466,857.	477,357.				
31	Total liabilities and net assets/fund balances (see the instructions)	466,857.	477,357.				

Part III Analysis of Changes in Net Assets or Fund Balances

1	Total net assets or fund balances at beginning of year — Part II, column (a), line 30 (must agree with end-of-year figure reported on prior year's return)	1	466,857.
2	Enter amount from Part I, line 27a	2	8,385.
3	Other increases not included in line 2 (itemize) SEE STATEMENT 7	3	2,115.
4	Add lines 1, 2, and 3	4	477,357.
5	Decreases not included in line 2 (itemize)	5	
6	Total net assets or fund balances at end of year (line 4 minus line 5) — Part II, column (b), line 30.	6	477,357.

Part IV Capital Gains and Losses for Tax on Investment Income

(a) List and describe the kind(s) of property sold (e.g., real estate, 2-story brick warehouse, or common stock, 200 shares MLC Company)		(b) How acquired P — Purchase D — Donation	(c) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1a	100 EXPRESS SCRIPTS INC	D	12/03/09	12/03/09
b	580 TECK RESOURCES LTD CL B ORD	D	11/12/09	11/12/09
c	PASS THROUGH ENTITY GAINS	P	VARIOUS	VARIOUS
d	PASS THROUGH ENTITY GAINS	P	VARIOUS	VARIOUS
e				

(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h) Gain or (loss) (e) plus (f) minus (g)
a 8,743.		8,743.	0.
b 18,073.		18,073.	0.
c		2,222.	-2,222.
d		1,693.	-1,693.
e			

Complete only for assets showing gain in column (h) and owned by the foundation on 12/31/69			(l) Gains (Column (h) gain minus column (k), but not less than -0-) or Losses (from column (h))
(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	
a			0.
b			0.
c			-2,222.
d			-1,693.
e			

2 Capital gain net income or (net capital loss).	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 7 If (loss), enter -0- in Part I, line 7 </div>		2	-3,915.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) and (6):	<div style="border: 1px solid black; padding: 2px;"> If gain, also enter in Part I, line 8, column (c) (see the instructions). If (loss), enter -0- in Part I, line 8 </div>		3	-2,222.

Part V Qualification Under Section 4940(e) for Reduced Tax on Net Investment Income

(For optional use by domestic private foundations subject to the section 4940(a) tax on net investment income.)

If section 4940(d)(2) applies, leave this part blank

Was the foundation liable for the section 4942 tax on the distributable amount of any year in the base period?

☐ Yes☒ No

If 'Yes,' the foundation does not qualify under section 4940(e). Do not complete this part.

1 Enter the appropriate amount in each column for each year; see the instructions before making any entries

(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use assets	(d) Distribution ratio (column (b) divided by column (c))
2008	13,000.	411,529.	0.031590
2007	23,150.	424,743.	0.054504
2006	17,706.	340,451.	0.052007
2005	16,445.	277,510.	0.059259
2004	12,220.	236,416.	0.051689

2 Total of line 1, column (d)	2	0.249049
3 Average distribution ratio for the 5-year base period — divide the total on line 2 by 5, or by the number of years the foundation has been in existence if less than 5 years	3	0.049810
4 Enter the net value of noncharitable-use assets for 2009 from Part X, line 5.	4	389,862.
5 Multiply line 4 by line 3	5	19,419.
6 Enter 1% of net investment income (1% of Part I, line 27b)	6	
7 Add lines 5 and 6	7	19,419.
8 Enter qualifying distributions from Part XII, line 4	8	14,250.

If line 8 is equal to or greater than line 7, check the box in Part VI, line 1b, and complete that part using a 1% tax rate. See the Part VI instructions.

Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 – see the instructions)

1 a Exempt operating foundations described in section 4940(d)(2), check here. <input type="checkbox"/> and enter 'N/A' on line 1. Date of ruling or determination letter: _____ (attach copy of letter if necessary - see instr.)		1	0.
b Domestic foundations that meet the section 4940(e) requirements in Part V, check here <input type="checkbox"/> and enter 1% of Part I, line 27b.		2	0.
c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b)		3	0.
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-).		4	0.
3 Add lines 1 and 2		5	0.
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			
5 Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			
6 Credits/Payments:			
a 2009 estimated tax pmts and 2008 overpayment credited to 2009	6a	569.	
b Exempt foreign organizations – tax withheld at source.	6b		
c Tax paid with application for extension of time to file (Form 8868)	6c		
d Backup withholding erroneously withheld	6d		
7 Total credits and payments. Add lines 6a through 6d	7	569.	
8 Enter any penalty for underpayment of estimated tax. Check here <input type="checkbox"/> if Form 2220 is attached	8		
9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	0.	
10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10	569.	
11 Enter the amount of line 10 to be: Credited to 2010 estimated tax <input type="checkbox"/> 569. Refunded <input type="checkbox"/>	11	0.	

Part VII-A Statements Regarding Activities

	Yes	No
1 a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1a	X
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1b	X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities		
c Did the foundation file Form 1120-POL for this year?	1c	X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: (1) On the foundation \$ 0. (2) On foundation managers \$ 0.		
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers \$ 0.		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	2	X
If 'Yes,' attach a detailed description of the activities.		
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	3	X
4 a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a	X
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	4b	N/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5	X
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 conflict with the state law remain in the governing instrument?	6	X
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV.	7	X
8 a Enter the states to which the foundation reports or with which it is registered (see 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 (or designate) of each state as required by General Instruction G? If 'No,' attach explanation.	8b	X
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)? If 'Yes,' complete Part XIV	9	X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names and addresses	10	X

BAA

Form 990-PF (2009)

Part VII-A Statements Regarding Activities Continued

11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	
Website address <u>N/A</u>				
14	The books are in care of <u>STEPHEN PARKHOUSE</u> Telephone no. <u></u>			
Located at <u>5640 S BELLAIRE CT GREENWOOD VILLAGE CO</u> ZIP + 4 <u>80121</u>				
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here <u>N/A</u>			
and enter the amount of tax-exempt interest received or accrued during the year <u>15</u> <u>N/A</u>				

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required

File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.

	Yes	No
1a During the year did the foundation (either directly or indirectly):		
(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(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)?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days).	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b 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 the instructions)?		
Organizations relying on a current notice regarding disaster assistance check here <u></u>	1b	N/A
c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2009?	1c	X
2 Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5))		
a 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?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If 'Yes,' list the years <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
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) to all years listed, answer 'No' and attach statement - see the instructions.)	2b	N/A
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here. <u>20__</u> , <u>20__</u> , <u>20__</u> , <u>20__</u>		
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> 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)	3b	N/A
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a	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	X

BAA

Form 990-PF (2009)

Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required (continued)**5a** During the year did the foundation pay or incur any amount to:

- (1) Carry on propaganda, or otherwise attempt to influence legislation (section 4945(e))?. ☐ Yes ☒ No
- (2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive? ☐ Yes ☒ No
- (3) Provide a grant to an individual for travel, study, or other similar purposes? ☐ Yes ☒ No
- (4) Provide a grant to an organization other than a charitable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) ☐ Yes ☒ No
- (5) Provide for any purpose other than religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? ☐ Yes ☒ No

b If any answer is 'Yes' to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53.4945 or in a current notice regarding disaster assistance (see instructions)?**5b**

N/A

Organizations relying on a current notice regarding disaster assistance check here ☐**c** If the answer is 'Yes' to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant?

N/A.

☐ Yes☐ No

If 'Yes,' attach the statement required by Regulations section 53.4945-5(d).

6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?☐ Yes☒ No**b** Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract?**6b**

X

If 'Yes' to 6b, file Form 8870

7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?☐ Yes☒ No**b** If yes, did the foundation receive any proceeds or have any net income attributable to the transaction?**7b**

N/A

Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors**1** List all officers, directors, trustees, foundation managers and their compensation (see instructions).

(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
SEE STATEMENT 8		0.	0.	0.

2 Compensation of five highest-paid employees (other than those included on line 1— see instructions). If none, enter 'NONE.'

(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NONE				

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

0

Part VIII. Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid Employees, and Contractors (continued)**3** Five highest-paid independent contractors for professional services – (see 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.

0

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 beneficiaries served, conferences convened, research papers produced, etc.

	Expenses
1 N/A	
2	
3	
4	

Part IX-B. Summary of Program-Related Investments (see instructions)

Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2	Amount
1 N/A	
2	
All other program-related investments. See instructions.	
3	
Total. Add lines 1 through 3	0.

BAA

Form 990-PF (2009)

Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions.)

1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
a	Average monthly fair market value of securities	1a	360,105.
b	Average of monthly cash balances	1b	35,694.
c	Fair market value of all other assets (see instructions)	1c	
d	Total (add lines 1a, b, and c)	1d	395,799.
e	Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation)	1e	0.
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	395,799.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	5,937.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	389,862.
6	Minimum investment return. Enter 5% of line 5	6	19,493.

Part XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here ☐ and do not complete this part.)

1	Minimum investment return from Part X, line 6	1	19,493.
2a	Tax on investment income for 2009 from Part VI, line 5	2a	
b	Income tax for 2009. (This does not include the tax from Part VI)	2b	
c	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	19,493.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	19,493.
6	Deduction from distributable amount (see instructions)	6	
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	19,493.

Part XII Qualifying Distributions (see instructions)

1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc. — total from Part I, column (d), line 26	1a	14,250.
b	Program-related investments — total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	14,250.
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 instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	14,250.

Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI, line 7.				19,493.
2 Undistributed income, if any, as of the end of 2009:				
a Enter amount for 2008 only			0.	
b Total for prior years: 20 __, 20 __, 20 __		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
b From 2005				
c From 2006				
d From 2007	416.			
e From 2008				
f Total of lines 3a through e	416.			
4 Qualifying distributions for 2009 from Part XII, line 4: ► \$ 14,250.				
a Applied to 2008, but not more than line 2a.			0.	
b Applied to undistributed income of prior years (Election required — see instructions)		0.		
c Treated as distributions out of corpus (Election required — see instructions)	0.			
d Applied to 2009 distributable amount				14,250.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009 (If an amount appears in column (d), the same amount must be shown in column (a).)	416.			416.
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e. Subtract line 5	0.			
b Prior years' undistributed income. Subtract line 4b from line 2b		0.		
c 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 been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable amount — see instructions		0.		
e Undistributed income for 2008. Subtract line 4a from line 2a. Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines 4d and 5 from line 1. This amount must be distributed in 2010.				4,827.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions).	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	0.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a.	0.			
10 Analysis of line 9:				
a Excess from 2005				
b Excess from 2006				
c Excess from 2007				
d Excess from 2008				
e Excess from 2009				

BAA

Form 990-PF (2009)

Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9)

N/A

1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2009, enter the date of the ruling.

b Check box to indicate whether the foundation is a private operating foundation described in section ☐ 4942(j)(3) or ☒ 4942(j)(5)

	Tax year				(e) Total
	(a) 2009	(b) 2008	(c) 2007	(d) 2006	
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c					
3 Complete 3a, b, or c for the alternative test relied upon:					
a 'Assets' alternative test — enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b 'Endowment' alternative test — enter 2/3 of minimum investment return shown in Part X, line 6 for each year 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)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from an exempt organization					
(4) Gross investment income					

Part XV Supplementary Information (Complete this part only if the organization had \$5,000 or more in assets at any time during the year — see instructions.)**1 Information Regarding Foundation Managers:**

a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).)

SEE STATEMENT 9

b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest

NONE

2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs:

Check here ☒ if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d.

a The name, address, and telephone number of the person to whom applications should be addressed:

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

c Any submission deadlines:

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

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	Foundation status of recipient	Purpose of grant or contribution	Amount
Name and address (home or business)				
<i>a</i> Paid during the year SEE STATEMENT 10				
Total			3a	14,250.
<i>b</i> Approved for future payment				
Total			3b	

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.

Enter gross amounts unless otherwise indicated.		Unrelated business income		Excluded by section 512, 513, or 514		(e) Related or exempt function income (see the instructions)
		(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	
1	Program service revenue:					
a						
b						
c						
d						
e						
f						
g	Fees and contracts from government agencies					
2	Membership dues and assessments					
3	Interest on savings and temporary cash investments			14	1,511.	
4	Dividends and interest from securities			14	7,556.	
5	Net rental income or (loss) from real estate:					
a	Debt-financed property					
b	Not debt-financed property					
6	Net rental income or (loss) from personal property					
7	Other investment income					
8	Gain or (loss) from sales of assets other than inventory			18	-3,915.	
9	Net income or (loss) from special events					
10	Gross profit or (loss) from sales of inventory					
11	Other revenue					
a	PASS THRU INVESTMENT INC			14	605.	
b						
c						
d						
e						
12	Subtotal. Add columns (b), (d), and (e)				5,757.	
13	Total. Add line 12, columns (b), (d), and (e)					5,757.

(See worksheet in the instructions for line 13 to verify calculations.)

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

[illegible]

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

▶ **Attach to Form 990, 990-EZ, or 990-PF**

OMB No. 1545-0047

2009

Name of the organization

PARKHOUSE FOUNDATION

Employer identification number

84-1552161

Organization type (check one).

Filers of:

Form 990 or 990-EZ

Section:

- ☐ 501(c)(____) (enter number) organization
☐ 4947(a)(1) nonexempt charitable trust **not** treated as a private foundation
☐ 527 political organization

Form 990-PF

- ☒ 501(c)(3) exempt private foundation
☐ 4947(a)(1) nonexempt charitable trust treated as a private foundation
☐ 501(c)(3) taxable private foundation

Check if your organization is covered by the **General Rule** or a **Special Rule**.

Note: Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule —

- ☒ For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor. (Complete Parts I and II)

Special Rules —

- ☐ For a section 501(c)(3) organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of the regulations under sections 509(a)(1)/170(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts I and II.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, aggregate contributions of more than \$1,000 for use *exclusively* for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III.
- ☐ For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ, that received from any one contributor, during the year, contributions for use *exclusively* for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Do not complete any of the parts unless the **General Rule** applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year... . . . ▶ \$ _____

Caution: An organization that is not covered by the General Rule and/or the Special Rules does not file Schedule B (Form 990, 990-EZ, or 990-PF) but it **must** answer 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Form 990-EZ, or on line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF).

BAA For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

PARKHOUSE FOUNDATION

84-1552161

Part I Contributors (see instructions)

(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	STEPHEN PARKHOUSE 5640 S BELLAIRE CT GREENWOOD VILLAGE, CO 80121	\$ 8,743.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
2	STEPHEN PARKHOUSE 5640 S BELLAIRE CT GREENWOOD VILLAGE, CO 80121	\$ 18,073.	Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input checked="" type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)
			Person <input type="checkbox"/> Payroll <input type="checkbox"/> Noncash <input type="checkbox"/> (Complete Part II if there is a noncash contribution.)

Name of organization

Employer identification number

PARKHOUSE FOUNDATION

84-1552161

Part II Noncash Property (see instructions)

(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	100 SHS EXPRESS SCRIPTS INC	\$ 8,743.	12/03/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
2	580 SHS TECK RESOURCES LTD	\$ 18,073.	11/12/09
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	

BAA

Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

Name of organization

Employer identification number

PARKHOUSE FOUNDATION

84-1552161

Part III Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. (Complete cols (a) through (e) and the following line entry.)

For organizations completing Part III, enter total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once — see instructions.) . . . \$ N/A

(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held
	N/A		
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee
	(e) Transfer of gift		
	Transferee's name, address, and ZIP + 4		Relationship of transferor to transferee

2009

FEDERAL STATEMENTS

PAGE 1

CLIENT 07-AH01

PARKHOUSE FOUNDATION

84-1552161

11/11/10

05:26PM

STATEMENT 1
FORM 990-PF, PART I, LINE 11
OTHER INCOME

	(A) REVENUE PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME
PASS THRU INVESTMENT INC.	\$ 605.	\$ 605.	
TOTAL	\$ 605.	\$ 605.	0.

STATEMENT 2
FORM 990-PF, PART I, LINE 16B
ACCOUNTING FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
ACCOUNTING	\$ 1,685.	\$ 1,685.		
TOTAL	\$ 1,685.	\$ 1,685.	\$ 0.	\$ 0.

STATEMENT 3
FORM 990-PF, PART I, LINE 16C
OTHER PROFESSIONAL FEES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
MANAGEMENT FEES	\$ 2,546.	\$ 2,546.		
TOTAL	\$ 2,546.	\$ 2,546.	\$ 0.	\$ 0.

STATEMENT 4
FORM 990-PF, PART I, LINE 18
TAXES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FEDERAL TAXES	\$ 181.			
TOTAL	\$ 181.	\$ 0.	\$ 0.	\$ 0.

2009

FEDERAL STATEMENTS

PAGE 2

CLIENT 07-AH01

PARKHOUSE FOUNDATION

84-1552161

11/11/10

05:26PM

STATEMENT 5
FORM 990-PF, PART I, LINE 23
OTHER EXPENSES

	(A) EXPENSES PER BOOKS	(B) NET INVESTMENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITABLE PURPOSES
FOREIGN TAX PAID	\$ 41.	\$ 41.		
LICENSE & PERMITS.....	10.	10.		
OFFICE SUPPLIES	404.	404.		
PASSTHROUGH DEDUCTIONS.....	5,659.	5,659.		
PASSTHROUGH NON-DEDUCTIBLE EXP ...	12.			
TOTAL	\$ 6,126.	\$ 6,114.	\$ 0.	\$ 0.

STATEMENT 6
FORM 990-PF, PART II, LINE 14
LAND, BUILDINGS, AND EQUIPMENT

CATEGORY	BASIS	ACCUM. DEPREC.	BOOK VALUE	FAIR MARKET VALUE
MACHINERY AND EQUIPMENT	\$ 5,277.	\$ 5,277.	\$ 0.	\$ 0.
TOTAL	\$ 5,277.	\$ 5,277.	\$ 0.	\$ 0.

STATEMENT 7
FORM 990-PF, PART III, LINE 3
OTHER INCREASES

PRIOR YEAR NON TAXABLE DIVIDENDS	\$ 2,115.
TOTAL	\$ 2,115.

STATEMENT 8
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

NAME AND ADDRESS	TITLE AND AVERAGE HOURS PER WEEK DEVOTED	COMPEN- SATION	CONTRI- BUTION TO EBP & DC	EXPENSE ACCOUNT/ OTHER
STEPHEN PARKHOUSE 5640 S BELLAIRE CT GREENWOOD VILLAGE, CO 80121	PRESIDENT 8.00	\$ 0.	\$ 0.	\$ 0.
PATRICIA PARKHOUSE 5640 S BELLAIRE CT GREENWOOD VILLAGE, CO 80121	SECRETARY 4.00	0.	0.	0.
MIKE GRIFFITH 290 W. 12TH AVENUE, UNIT 306 DENVER, CO 80204	EXECUTIVE DIREC 2.00	0.	0.	0.

2009

FEDERAL STATEMENTS

PAGE 3

CLIENT 07-AH01

PARKHOUSE FOUNDATION

84-1552161

11/11/10

05:26PM

STATEMENT 8 (CONTINUED)
FORM 990-PF, PART VIII, LINE 1
LIST OF OFFICERS, DIRECTORS, TRUSTEES, AND KEY EMPLOYEES

<u>NAME AND ADDRESS</u>	<u>TITLE AND AVERAGE HOURS PER WEEK DEVOTED</u>	<u>COMPEN- SATION</u>	<u>CONTRI- BUTION TO EBP & DC</u>	<u>EXPENSE ACCOUNT/ OTHER</u>
ANNE PARKHOUSE 1524 EAST EASTER CIRCLE LITTLETON, CO 80122	VP SPECIAL PROJ 2.00	\$ 0.	\$ 0.	\$ 0.
RALPH PARKHOUSE 1524 EAST EASTER CIRCLE LITTLETON, CO 80122	VP RESEARCH 2.00	0.	0.	0.
JOANNE PARKHOUSE 10165 E. PEAKVIEW AVENUE ENGLEWOOD, CO 80111	VP FUNDRAISING 2.00	0.	0.	0.
PAUL GRIFFITH 13284 WHITTIER STERLING HEIGHTS, MI 48312	VP OF TECH 2.00	0.	0.	0.
LIBBY GRIFFITH 13284 WHITTIER STERLING HEIGHTS, MI 48312	VP COMMUNICATIO 2.00	0.	0.	0.
ALAN SOLLENBERGER 3752 BACCURATE WAY MARIETTA, GA 30062	FINANCE COMMITE 2.00	0.	0.	0.
JODI WIERENGA 1319 CASTLEPOINT CIRCLE CASTLE ROCK, CO 80104-8287	VP MARKETING 2.00	0.	0.	0.
TOTAL		\$ 0.	\$ 0.	\$ 0.

STATEMENT 9
FORM 990-PF, PART XV, LINE 1A
FOUNDATION MANAGERS - 2% OR MORE CONTRIBUTORS

STEPHEN PARKHOUSE
 PATRICIA PARKHOUSE
 MIKE GRIFFITH

2009

FEDERAL STATEMENTS

PAGE 4

CLIENT 07-AH01

PARKHOUSE FOUNDATION

84-1552161

11/11/10

05 26PM

STATEMENT 10
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

NAME AND ADDRESS	DONEE RELATIONSHIP	FOUND- ATION STATUS	PURPOSE OF GRANT	AMOUNT
BIAC - OUTDOOR ADVENTURE 6825 EAST TENNESSEE AVE., #405 DENVER, CO 80224	NONE		TO IMPROVE THE QUALITY OF LIFE FOR SURVIVORS OF BRAIN INJURY AND THEIR FAMILIES	\$ 3,250.
GOLF FOR FUN PO BOX 27595 DENVER, CO 80227	NONE		ASSIST PEOPLE WITH DISABILITIES IMPROVE THE QUALITY OF LIFE BY GOLFING AGAIN	5,000.
IRIS FOUNDATION PO BOX 358 , RUSSELL ON CANADA K4R1E2 CANADA	NONE		PROVIDES EDUCATION AND RESOURCES TO CHILDREN IN BELEZE	1,500.
BRAIN INJURY ASSOCIATION OF MN 34 13TH AVENUE N.E., STE. B001 MINNEAPOLIS, MN 55413	NONE		TO IMPROVE THE QUALITY OF LIFE FOR SURVIVORS OF BRAIN INJURY AND THEIR FAMILIES	1,000.
EMMA'S HUGS 4707 GULFWAY DR BAYTOWN, TX 77521	NONE		TO SUPPORT FAMILIES AND CAREGIVERS OF THOSE IN HOSPITAL SETTINGS SO THEY CAN BETTER FOCUS ON THEIR LOVED ONE'S RECOVERY.	2,500.
THE LIMB PRESERVATION FOUNDATION 1601 E 19TH AVE, SUITE 3900 DENVER, CO 80218	NONE		TO SUPPORT TREATMENT, RESEARCH, AND EDUCATIONAL PROGRAMS REGARDING LIMB PRESERVATION.	250.
FOUNDATION FOR SARCOIDOSIS RESEARCH 122 S MICHIGAN AVE, SUITE 1700 CHICAGO, IL 60603	NONE		TO IMPROVE CARE FOR SARCOIDOSIS PATIENTS AND TO FIND A CURE FOR THE DISEASE.	500.

2009

FEDERAL STATEMENTS

PAGE 5

CLIENT 07-AH01

PARKHOUSE FOUNDATION

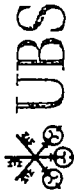
84-1552161

11/11/10

05.26PM

STATEMENT 10 (CONTINUED)
FORM 990-PF, PART XV, LINE 3A
RECIPIENT PAID DURING THE YEAR

<u>NAME AND ADDRESS</u>	<u>DONEE RELATIONSHIP</u>	<u>FOUND- ATION STATUS</u>	<u>PURPOSE OF GRANT</u>	<u>AMOUNT</u>
ROCKY MOUNTAIN MS CENTER 701 E HAMPDEN AVE, SUITE 420 ENGLEWOOD, CO 80113	NONE		TO BE INVESTED IN CARE, SUPPORT, EDUCATION, AND RESEARCH FOR PEOPLE LIVING WITH MS AND THEIR FAMILIES.	\$ 250.
TOTAL \$				<u>14,250.</u>



Business Services Account
December 2009

Account name: PARKHOUSE FOUNDATION
Account number: DK 11708 90

Your Financial Advisor:
NUGENT, PERLMUTTER
303-741-3224/800-547-3178

Your assets

Some prices, income and current values shown may be approximate. As a result, gains and losses may not be accurately reflected. See *Important information about your statement* at the end of this document for more information.

Cash

Cash and money balances

Holding	Opening balance on Dec 1 (\$)	Closing balance on Dec 31 (\$)	Price per share on Dec 31 (\$)	Average rate	Dividend/Interest period	Days in period
RMA MONEY MKT. PORTFOLIO	4,565.33	4,415.64	1.00	0.01%	Nov 23 to Dec 23	31

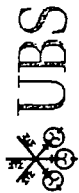
Alternative strategies

Assets held outside UBS Financial Services Inc.

These assets are held outside UBS Financial Services Inc. and are included in your statement as a service to you. Information about these assets, including their value, is provided by the Issuer and UBS Financial Services Inc. does not guarantee the accuracy of the information and is not responsible for it. The value shown is not necessarily the value you would receive from the issuer if you sold the assets. These assets are not covered by SIPC.

Hedge funds

Holding	Trade date	Number of shares	Price per share (\$)	Value (\$)
ROBECO-SAGE TRITON FUND LLC CLASS A AS OF 11/30/09	Nov 26, 07		1.000	86,757.00
UBS EQUITY OPP FUND II LLC				
AS OF NOVEMBER 30, 2009	Dec 21, 07		1.000	86,239.00
Total				\$172,996.00



UBS Strategic Advisor
December 2009

Account name: PARKHOUSE FOUNDATION
Account number: DK 88000 90

Your Financial Advisor:
NUGENT, PERLMUTTER
303-741-3224/800-547-3178

Your assets

Some prices, income and current values shown may be approximate. As a result, gains and losses may not be accurately reflected. See *Important information about your statement* at the end of this document for more information.

Cash

Cash and money balances

Holding	Opening balance on Dec 1 (\$)	Closing balance on Dec 31 (\$)	Price per share on Dec 31 (\$)	Average rate	Dividend/Interest period	Days in period
RMA MONEY MKT PORTFOLIO	27,845 04	37,347 00	1 00	0 01%	Nov 23 to Dec 23	31

Equities

Closed end mutual funds

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
SPDR DOW JONES REIT ETF				
Symbol RWR Exchange NYSE				
EAI \$106 Current yield 3 92%	Oct 29, 07	25 000	49 210	1,230 25
	Jan 7, 08	30 000	49 210	1,476 30
Security total		55 000		2,706 55

SPDR DOW JONES GLOBAL REAL EST

ETF				
Symbol RWX Exchange NYSE				
EAI \$151 Current yield 6 18%	Oct 29, 07	30 000	34 890	1,046 70
	Jan 7, 08	40 000	34 890	1,395 60
Security total		70 000		2,442 30

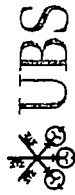
SPDR FTSE/MACQUARIE GL INC 100

ETF				
Symbol GII Exchange NYSE				
EAI \$170 Current yield 3 48%	Oct 29, 07	80 000	42 520	3,401 60
	Jan 7, 08	35 000	42 520	1,488 20
Security total		115 000		4,889 80

SPDR MSCI ACWI EX-US ETF

Symbol CWI Exchange NYSE				
EAI \$134 Current yield 1.59%	Oct 29, 07	220 000	31 200	6,864 00

continued next page



Account name: PARKHOUSE FOUNDATION
Account number: DK 88000 90

Your assets • Equities • Closed end mutual funds (continued)

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
Security total	Jan 7, 08	50 000	31 200	1,560 00
SPDR S&P DIVID ETF		270 000		8,424 00
Symbol SDY Exchange NYSE				
EAI \$523 Current yield 3.83%	Oct 29, 07	255 000	46 250	11,793 75
Security total	Jan 7, 08	40 000	46 250	1,850 00
		295 000		13,643 75
VANGUARD TOTAL STOCK MKT ETF				
Symbol VTI Exchange NYSE				
EAI \$229 Current yield 2.54%	Oct 29, 07	130 000	56 370	7,328 10
Security total	Jan 7, 08	30 000	56 370	1,691 10
		160 000		9,019 20
Total				\$41,125.60

Total estimated annual income: \$1,313

Mutual funds

Total reinvested is the total of all reinvested dividends. It does not include any cash dividends. It is not a tax lot for the purposes of determining holding periods or cost basis. The shares you receive each time you reinvest dividends become a separate tax lot.

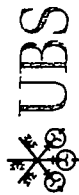
Cost basis is the total purchase cost of the security, including reinvested dividends. The cost basis may need to be adjusted for return of capital payments in order to determine the adjusted cost basis for tax reporting purposes.

Unrealized gain or loss is the difference between the current value and the cost basis. The unrealized gain or loss may need to be adjusted for return of capital payments in order to determine the realized gain or loss for tax reporting purposes.

Investment return is the current value minus the amount you invested. It does not include any cash dividends that were not reinvested.

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
AIM INTERNATIONAL				
GROWTH FUND CLASS A				
Trade date Mar 6, 06		994,827	24 760	24,631 92
Total reinvested		110 104	24 760	2,726 17
EAI \$325 Current yield 1.19%				
Security total		1,104 931		27,358 09
ING INTERNATIONAL VALUE				
FUND CLASS A				
Trade date Feb 6, 01		323 206	11 480	3,710 40
Trade date Apr 5, 01		354,862	11 480	4,073 82
Trade date Aug 13, 01		368 732	11 480	4,233 04

continued next page



UBS Strategic Advisor
December 2009

Account name:
Account number:

PARKHOUSE FOUNDATION
DK 88000 90

Your Financial Advisor:
NUGENT, PERLMUTTER
303-741-3224/800-547-3178

Your assets • Equities • Mutual funds (continued)

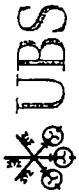
Holding	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
Total reinvested	1,024,933	11 480	11,766 23
EAI \$354 Current yield 1 49%			
Security total	2,071,733		23,783 49
OPPENHEIMER GLOBAL FUND			
CLASS A			
Trade date Apr 25, 06	343 312	53 010	18,198 97
Total reinvested	97,768	53 010	5,182 68
EAI \$122 Current yield 0 52%			
Security total	441 080		23,381 65
Total			\$74,523.23
Total estimated annual income: \$801			

Fixed income

Closed end mutual funds

Holding	Trade date	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
ISHARES BARCLAYS TIPS BOND FUND			
Symbol TIP Exchange NYSE			
EAI \$667 Current yield 3 89%	Oct 29, 07	103 900	15,065 50
Security total	Jan 7, 08	103,900	2,078 00
			17,143 50
SPDR LEHMAN INTL TREAS BOND			
Symbol BWX Exchange NYSE			
EAI \$1,000 Current yield 5 50%	Oct 29, 07	56 830	15,912 40
Security total	Jan 7, 08	56 830	2,273 20
			18,185 60
VANGUARD BD INDEX FD INC TOTAL BOND MKT ETF			
Symbol BND Exchange NYSE			
EAI \$873 Current yield 3 90%	Oct 29, 07	78 590	20,433 40
Security total	Jan 7, 08	78 590	1,964.75
			22,398 15

continued next page



Account name: PARKHOUSE FOUNDATION
Account number: DK 88000 90

Your assets > Fixed income > Closed end mutual funds (continued)

Holding	Trade date	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
Total			\$57,727.25

Total estimated annual income: \$2,540

Mutual funds

Total reinvested is the total of all reinvested dividends. It does not include any cash dividends. It is not a tax lot for the purposes of determining holding periods or cost basis. The shares you receive each time you reinvest dividends become a separate tax lot.

Cost basis is the total purchase cost of the security, including reinvested dividends. The cost basis may need to be adjusted for return of capital payments in order to determine the adjusted cost basis for tax reporting purposes.

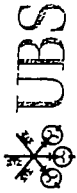
Unrealized gain or loss is the difference between the current value and the cost basis. The unrealized gain or loss may need to be adjusted for return of capital payments in order to determine the realized gain or loss for tax reporting purposes.
Investment return is the current value minus the amount you invested. It does not include any cash dividends that were not reinvested.

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
THE HARTFORD STRATEGIC INCOME FUND CLASS A				
Trade date	Aug 10, 07	2,623.295	8.780	23,032.53
Total reinvested		448.900	8.780	3,941.34
EAI \$1,604 Current yield 5.95%				
Security total		3,072.195		26,973.87

Alternative strategies

Closed end mutual funds

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
POWERSHARES DB G10 CURRENCY HARVEST FUND				
Symbol DBV Exchange NYSE	Oct 29, 07	70.000	23.540	1,647.80
Security total	Jan 7, 08	75.000	23.540	1,765.50
		145.000		3,413.30



UBS Strategic Advisor
December 2009

Account name: PARKHOUSE FOUNDATION
Account number: DK 88000 90

Your Financial Advisor:
NUGENT, PERLMUTTER
303-741-3224/800-547-3178

Your assets (continued)

Broad commodities

Closed end mutual funds

Holding	Trade date	Number of shares	Price per share on Dec 31 (\$)	Value on Dec 31 (\$)
ISHARES S&P GSCI COMMODITY IND				
Symbol GSG Exchange NYSE	Oct 29, 07	40 000	31.820	1,272.80
	Jan 7, 08	40 000	31.820	1,272.80
Security total		80 000		2,545.60
SPDR GOLD TRUST				
Symbol GLD Exchange NYSE	Oct 29, 07	25 000	107.310	2,682.75
	Jan 7, 08	25,000	107.310	2,682.75
Security total		50 000		5,365.50
Total				\$7,911.10

- If you are filing for an **Additional (Not Automatic) 3-Month Extension**, complete only **Part II** and check this box ☒ **X**.
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868.
- If you are filing for an **Automatic 3-Month Extension**, complete only **Part I** (on page 1).

Part II: Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).

Type or print File by the extended due date for filing the return. See instructions.	Name of Exempt Organization	Employer identification number For IRS use only	
	PARKHOUSE FOUNDATION		84-1552161
	Number, street, and room or suite number. If a P.O. box, see instructions. R.G. FOWLER & COMPANY, P.C. 5460 S. QUEBEC STREET, #230		
	City, town or post office, state, and ZIP code. For a foreign address, see instructions ENGLEWOOD, CO 80111		

Check type of return to be filed (File a separate application for each return):

- | | | | |
|--------------------------------------|--|--------------------------------------|------------------------------------|
| <input type="checkbox"/> Form 990 | <input checked="" type="checkbox"/> Form 990-PF | <input type="checkbox"/> Form 1041-A | <input type="checkbox"/> Form 6069 |
| <input type="checkbox"/> Form 990-BL | <input type="checkbox"/> Form 990-T (section 401(a) or 408(a) trust) | <input type="checkbox"/> Form 4720 | <input type="checkbox"/> Form 8870 |
| <input type="checkbox"/> Form 990-EZ | <input type="checkbox"/> Form 990-T (trust other than above) | <input type="checkbox"/> Form 5227 | |

STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.

- The books are in care of. ▶ STEPHEN PARKHOUSE
Telephone No. ▶ _____ FAX No. ▶ _____
- If the organization does not have an office or place of business in the United States, check this box ☐
- If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box. ☐ . If it is for part of the group, check this box. ☐ and attach a list with the names and EINs of all members the extension is for.

- 4 I request an additional 3-month extension of time until 11/15, 20 10.
- 5 For calendar year 2009, or other tax year beginning _____, 20____, and ending _____, 20____.
- 6 If this tax year is for less than 12 months, check reason: ☐ Initial return ☐ Final return ☐ Change in accounting period
- 7 State in detail why you need the extension. TAXPAYER RESPECTFULLY REQUESTS ADDITIONAL TIME TO GATHER INFORMATION NECESSARY TO FILE A COMPLETE AND ACCURATE TAX RETURN.

8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	8a \$	0.
b If this application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit and any amount paid previously with Form 8868	8b \$	569.
c Balance Due. Subtract line 8b from line 8a. Include your payment with this form, or, if required, deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). See instrs.	8c \$	0.

Signature and Verification

Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete, and that I am authorized to prepare this form.

Signature ▶ [Signature] Title ▶ CPA / Agent Date ▶ 8/13/10