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# Form 990-PF

### **Return of Private Foundation**

or Section 4947(a)(1) Nonexempt Charitable Trust

Treated as a Private Foundation

2009

OMB No 1545-0052

Inter	nal Rever	nue Service (77) Note. The foundat	tion ma	ay be able to us	se a copy of this	return to satisfy sta	ate reporting requi	rements	
For	calend	dar year 2009, or tax year beginning				, 2	009, and end	ing	, 20
G	Check	call that apply Initial return	n		Initial Reti	urn of a forme	er public chari	ty	inal return
		Amended r	returi	n [	Address c	hange	☐ Nar	ne change	
Us	e the IF	RS Name of foundation	_		•			A Employer identifi	cation number
	label.	The Shepherds Wa	ау					84-158931	15
O	therwis			all is not del	livered to stre	eet add )	Room/suite	<del></del>	er (see the instructions)
	print or type.	4780 W Fremont (	Coi	ırt		,		303-948-5	5589
	e Speci	•						C If exemption application	is pending, check here
	tructio			3				D 1 Foreign organization	ns, check here
Н	Check	type of organization 🔀 Section 5	501(c	c)(3) exemp	t private fou	ndation	-	<ol> <li>Foreign organization test, check here and</li> </ol>	ns meeting the 85%
П		on 4947(a)(1) nonexempt charitable tru				ate foundation	า	E If private foundation star	tus was
		· · · · · · · · · · · · · · · · · · ·		Accounting	<del>'</del>		Accrual	terminated under section 507(b)(1)(A), check here	
		om Part II, col (c), line 16)		Other (s	_	,·· Lj		F If the foundation is in a	60-month
<b>▶</b> '\$	•	1,604.	(1			be on cash ba	asis )	termination under section 507(b)(1)(B), check here	
Pa		Analysis of Revenue and Expenses							(d) Disbursements
_		The total of amounts in columns (b),	_	. ,	enue and ses per	(b) Net inv	1	(c) Adjusted net	`for charitable
		c), & (d) may not necessarily equal the amounts in column (a) (see instr ) )	•	•	oks	Inco	me	income	purposes (cash basis only)
_	1 (	Contributions, gifts, grants, etc., received (attach schedule)		22	,236.				<u> </u>
	1 '	Check ► If the foundation is no	, †		·	1			
		required to attach Sch B					į		
		Interest on savings and temp cash investments	- [						1
		Dividends and interest from securities	. [						
	5a (	Gross rents							1
		(Net rental income or (loss)	٦, ا					·	-
•		Net gain/(loss) from sale of assets not on line 10	_			1			
ğ		Gross sales price for all assets on line 6a				1			
Revenue	1	Capital gain net income (from Part IV, line 2)	_						
œ	8 1	Net short-term capital gain							1
	9 1	Income modifications			,			· · · · · ·	
		Gross sales less rtns & allowances				]			]
		Less Cost of goods sold · ·							
	c	Gross profit or (loss) (attach schedule	) .						]
	11 (	Other income (attach schedule)	. [						
	12	Total. Add lines 1 through 11		22	,236.				
	13	Compensation of officers, directors, trustees, etc							
		Other employee salaries and wages	L						
S	15	Pension plans purplicate bane his Legal fees (attach schedule)	_						
Sue.		Legal fees (attach schedule)	∟ادٍ						
ă.		Accounting fees (attach schedule)	ર્યા∟		384.				384.
Æ.		Other Bees ស្រុម្មិចម៉ឺន @tacវិ ស្រុម្បីបទ	S-OSC						
atj			<u>K</u>						
ist	18	Laxes((attacheennotherrsee))	<b>~</b> -↓						
Ë	1	Depreciation Occordence depiction	=						
Operating and Administrative Expenses	1	Occupancy	-	<del></del>				•	<u> </u>
and		Travel, conferences, and meetings		<del></del>		_			-
ng 6	1	Printing and publications	L					<del></del>	
rati		Other expenses (attach schedule)	L					<del>- · · · · · · · · · · · · · · · · · · ·</del>	
be	1	Total operating and administrative							
J	1	expenses Add lines 13 through 23	·		384.				384.
		Contributions, gifts, grants paid.	.		,440.				20,440.
		Total exp & disbursements Add lines 24 and 25		20	,824.	<u> </u>		<del> </del>	20,824.
;		Subtract line 26 from line 12  Excess of revenue over expenses	-			I			
ò	6	and disbursements · · · · ·	-	1	,412.				ļ ī
Ó		Net investment income (if neg, enter -0-	-)			<u></u>		<del></del>	- <del>1</del>
	I C	Adjusted net income (if neg. enter -0-)			j	i .	1		1

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

Form 990-PF (2009)

Rev 1

Р	art II	Attached schedules and amounts in the Balance Sheets description column should be for	Beginning of year		End o	f year
_		end-of-year amounts only (See inst )	(a) Book Value	(b) Book Value	;	(c) Fair Market Value
	1	Cash - non-interest-bearing	192.			1,604.
	2	Savings and temporary cash investments .				
	3	Accounts receivable ▶				
		Less allowance for doubtful accts ▶				
	4	Pledges receivable ▶	•			!
		Less allowance for doubtful accts ▶				
	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 schedule) Less allowance for	-	<del></del>		
		doubtful accounts				
Assets	8	Inventories for sale or use				
Ass	9	Prepaid expenses and deferred charges				
-	1	Investments - U S and state govt obligations (attach schedule)				
		Investments - corporate stock (attach schedule)				
	1	Investments - corporate bonds (attach schedule)				
	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 Less accumulated depreciation				·
		Less accumulated depreciation (attach schedule)				
	15	Other assets (describe ▶ )				
	16	Total assets (to be completed by all filers - see the				
	'	instructions Also, see page 1, item I)	192.			1,604.
	17	Accounts payable and accrued expenses				
	18	Grants payable				1
s	19	Deferred revenue .				
iție	20	Loans from officers, directors, trustees, and other disqualified persons				
Liabilities	21	Mortgages and other notes payable (attach schedule) .				
Ë	22	Other liabilities (describe ► )	· · · · · · · · · · · · · · · · · · ·			
						i.
	23	Total liabilities (add lines 17 through 22)				
_		Foundations that follow SFAS 117, check here		**	-	1
		and complete lines 24 through 26 and lines 30 and 31.				1
	24	Unrestricted	192.	1,604	1.	
Ses	25	Temporarily restricted		2,55	-	
<u>a</u>	26	Permanently restricted				;
Ba	-	Foundations that do not follow SFAS 117, ck. here				
пd		and complete lines 27 through 31.				ı
Ē	27	Capital stock, trust principal, or current funds				
õ	27	- · · · · · · · · · · · · · · · · · · ·				
set	28	Paid-in or capital surplus, or land, bldg , and equipment fund				1
As	29	Retained earnings, accumulated income, endowment, or other funds .				r
Net Assets or Fund Balances		The section of the se	100	1 (0)		!
	30	Total net assets or fund balances (see the instructions)	192.	1,604	<del>* •  </del>	
	31	Total liabilities and net assets/fund balances (see the	100	1 (0)	,	
Ð.	art III	Instructions)	192.	1,604	± • _	
		Analysis of Changes in Net Assets or Fund Balance net assets or fund balances at beginning of year - Part II, column (a		th T		
'		net assets of fund balances at beginning of year - Part II, column (a if-year figure reported on prior year's return)		u	1	102
•				.  -	2	192. 1,412.
		amount from Part I, line 27a	•••		3	1,412.
		nes 1, 2, and 3		<del></del>	4	1,604.
		eases not included in line 2 (itemize)	•	-	5	1,004.
		net assets or fund balances at end of year (line 4 minus line 5) - Pa	rt II. column (b). line 30	———	6	1,604.
<u> </u>	. 5.01	attack of the parameter of the property of the parameter of the param	, colonin (b), inic 50	·		

Part IV Capital Gains	and l	osses for Tax on Inves	tment Income			
(a) List and describe	he kın	d(s) of property sold (e g , rea	estate,	(b) How acquired P - Purchase	(c) Date acquired	(d) Date sold
2-story brick wareho	use, o	r common stock, 200 shs ML0	C Co )	D - Donation	(mo , day, yr )	(mo , day, yr )
1 a			<u> </u>			
<u>b</u>						<del></del>
<u>c</u>						
<u>d</u>					<u> </u>	<del></del> _
θ			<del></del>	<u> </u>		<del></del>
(e) Gross sales price		(f) Depreciation allowed	(g) Cost or o			or (loss)
		(or allowable)	plus exper	ise of sale	(e) plus (	f) minus (g)
<u>a</u>				<del> </del>	<u></u>	
<u>b</u>			<del> </del>			·
<u>c</u> d						<del></del>
θ					<del></del>	<del>-</del> .
	wing (	gain in column (h) and owned	by the foundation of	12/31/60	(I) Gains (Co	(h) gain minus
	]	(j) Adjusted basis	(k) Excess		col (k), but not l	_
(i) F M V as of 12/31/69		as of 12/31/69	over col	.,		rom col (h))
a			3707 001	u// ·· ···//		001 (11)/
b						
c						
d						
е .						<del></del>
Contal can not manne or (a		If gain, a	ilso enter in Part I, Ii	ne 7		<del></del>
2 Capital gain net income or (r	iet cap	If (loss),	enter -0- in Part I, li	ne 7	2	
3 Net short-term capital gain o	r (loss	as defined in sections 1222(	5) and (6)	_		
If gain, also enter in Part I, lii	ne 8, c	olumn (c) (see the instructions	s)	<b>J</b>		
If (loss), enter -0- in Part I, lir	ne 8 .				3	
Part V Qualification L	<u>Jnde</u>	r Section 4940(e) for Re	duced Tax on N	let Investment	t Income	
(For optional use by domestic pr	vate fo	oundations subject to the secti	on 4940(a) tax on n	et investment inco	ome )	
If section 4940(d)(2) applies, lea	ve this	part blank				
Was the foundation liable for the			• •	•	od?	∐ Yes ⊠ No
f "Yes," the foundation does not						
	it in ea	ch column for each year, see	the instructions before			
Base period years		(b) Adjusted qualifying distribut		Net value of	Distr	ibution ratio
Calendar year (or tax year beg	<u> 1n)</u>	- Adjusted qualifying distribut	noncha	ritable-use assets	(col (b) di	vided by col (c))
2008						
2007						
2006 2005						
2005						
2004			<u> </u>		<del></del>	
2 Total of line 1, column (d)					. 2	
	the 5-	year base period - divide the t	otal on line 2 by 5. o	r by the number	. 2	
		n existence if less than 5 years		by the number	3	
or yours the loundation has t	,ccii (l	i chiatorico il less tilati o years		•	3	
4 Enter the net value of nonch	arıtabl	e-use assets for 2009 from Pa	rt Y line 5		. 4	
The fire het value of honor	antabi	e-use assets for 2005 from Fa	it A, inte 5 .		. 4	
5 Multiply line 4 by line 3					5	
					· · · ·   •	
6 Enter 1% of net investment i	ncome	(1% of Part L line 27h)			. 6	
		(1.75 or 1 dit 1, into 210)			·   - <del></del>	
7 Add lines 5 and 6					7	
	٠	• • • •	••			
B Enter qualifying distributions	from F	Part XII line 4			8	20,824.
		ine 7, check the box in Part VI	line 1b, and compl	ete that nart using	<u> </u>	
instructions		, chican the box in rail vi	, 13, and compi	puit dailly	, 170 MATERIE GEE II	IO I WILL VI

-										
_•									_	
	m 990-PF (2009) The Shepherds Way						1589			ige 4
	art VI Excise Tax Based on Investment Income (Section 4940(a				8 - se	e the	instruc	tions	<u>)                                     </u>	
1a	Exempt operating foundations described in section 4940(d)(2), check here ▶ ☐ &									- 1
	Date of ruling or determination letter (attach copy of lett		$\overline{}$	see instr	) [					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check h	ere 🕨	<b>►</b> ⊠			1	ļ			
	and enter 1% of Part I, line 27b									
С	All other domestic foundations enter 2% of line 27b Exempt foreign organizations en	nter								İ
	4% of Part I, line 12, col (b)	-			╛					J
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations of	only O	thers ente	er-0-)	•	2			0	
3	Add lines 1 and 2	•		•		3				
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations	-	thers ente	er -0-) .		4			0	
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -	0-			•	5			0	
6	Credits/Payments	1 1	ı							:
а	2009 estimated tax payments and 2008 overpayment credited to 2009	6a								
b	Exempt foreign organizations - tax withheld at source	6b								i
С	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				
8	Enter any penalty for underpayment of estimated tax. Check here 📙 if Form 2220	) is atta	ached			8				
9	Tax due. If the total of lines 5 and 8 is more than line 7, enteramount owed	•			•	9				
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter theamount overp	oaid	•		•	10				
	Enter the amount of line 10 to be Credited to 2010 estimated tax		R	efunded	<u> </u>	11				
	art VII-A Statements Regarding Activities									
1a	During the tax year, did the foundation attempt to influence any national, state, or loc	cal legi	slation or	did it parti	cipat	e or		_	Yes	No
	intervene in any political campaign?				• • •			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political	purpos	ses (see tl	ne instruct	ons '	for				
	definition)?		-			•	.	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	copies	s of any m	aterials pu	ıblısh	ed				
	or distributed by the foundation in connection with the activities						-			
C	Did the foundation fileForm 1120-POL for this year?	•			•		. [	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed dur	ing the	year							
	(1) On the foundation   \$ (2) On foundation main	nagers	<b>▶</b> \$							:
е	Enter the reimbursement (if any) paid by the foundation during the year for political e	expend	iture tax ii	mposed						!

	who there is the test of the test of the test of the delivered and depict of the published			
	or distributed by the foundation in connection with the activities			
С	Did the foundation fileForm 1120-POL for this year?	1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year			
	(1) On the foundation   \$ (2) On foundation managers   \$			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			į
	on foundation managers   \$			]
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		Х
	If "Yes," attach a detailed description of the activities			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of			الــــــا
	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
b	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	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			j
	that conflict with the state law remain in the governing instrument?	6		
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7		X
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)			
	<u>► CO</u>			
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		
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 in instructions)? If "Yes,"			<u>_</u>
	complete Part XIV	9		Х
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their			
	names and addresses	10	X	<u></u>
	For	n 990-	PF (20	0091

Form	990-PF (2009) The Shepherds Way 84-15893	315	Pa	ge <b>5</b>
Par	t VII-A Statements Regarding Activities (continued)			
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity			
	within the meaning of section 512(b)(13)?	1 1		!
	If "Yes," attach schedule (see 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			
14	The books are in care of ▶ Hayden French  Telephone no ▶ 303	8-948	3-5	589
	Located at ▶ 4780 W Fremont Ct CO Littleton ZIP+4 ▶ 80128			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of form 1041 - Check here			<b>&gt;</b>
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	During the year did the foundation (either directly or indirectly)			
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)			
	a disqualified person?	1		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1		
	(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)? Yes X 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			i
	after termination of government service, if terminating within 90 days )			i i
b	If any answer is "Yes" to 1a(1)-(6), didany 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)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			ļ
	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			i
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))			-
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d			
-	and 6e, Part XIII) for tax year(s) beginning before 2009? Yes No			
	If "Yes," list the years ▶ 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			1
_	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)			i
	to all years listed, answer "No" and attach statement - see the instructions )	2b		
_		1		
C	If the provisions of section 4942(a)(2) are being applied toany of the years listed in 2a, list the years here  ▶ 20 , 20 , 20 , 20			,
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			-
•	enterprise at any time during the year?			
h	If "Yes," did it have excess business holdings in 2009 as a result of 1) any purchase by the foundation			;
5	or disqualified persons after May 26, 1969,(2) the lapse of the 5-year period (or longer period approved			í
	by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, o(3)  the large of the 10, 15, or 20 year first phase holding period? (Lies Schodule C. Form 4730, to determine			İ
	the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C, Form 4720, to determine			<b>-</b> <sup>j</sup>
۰.	if the foundation had excess business holdings in 2009)	3b		<del></del>
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		Х

Form **990-PF** (2009)

Ear	m990-PF(2009) The Shepherds W	Na v			84-158	9315	Page 6
	rt VII-B Statements Regarding Activ		rm 4720 May Be Reg	uired (co		9313	rage 6
	During the year did the foundation pay or incur	**	illi 4720 illay be iteq	unca (oo	intiliaca)		
•	(1) Carry on propaganda, or otherwise attemp	•	(section 4945(e))? .	. П	Yes 🛛 N	0	
	(2) Influence the outcome of any specific publ	•	` ''				
	on, directly or indirectly, any voter registrat	,	•	П	Yes X N	o	
	(3) Provide a grant to an individual for travel,			П	Yes X N	o	
	(4) Provide a grant to an organization other th	•	,				
	in section 509(a)(1), (2), or (3), or section 4	4940(d)(2)? (see instruc	ctions).	. П	Yes X N	o	
	(5) Provide for any purpose other than religiou	us, charitable, scientific,	literary, or		_		
	educational purposes, or for the prevention	n of cruelty to children o	r anımals? .		Yes 🛛 N	o	
ı	If any answer is "Yes" to 5a(1)-(5), didany of the	ne transactions fail to qu	alify under the exceptions	described	n —		
	Regulations section 53 4945 or in a current no	tice regarding disaster a	assistance (see the instruc	ctions)? .		5b	
	Organizations relying on a current notice regar	ding disaster assistance	e check here		▶ 📗		
•	If the answer is "Yes" to question 5a(4), does to	he foundation claim exe	emption from the	_	_		
	tax because it maintained expenditure respons	sibility for the grant?		. []	Yes   N	o	
	If "Yes," attach the statement required by Regu	ulations section 53 4945	5-5(d)				
6	a Did the foundation, during the year, receive an	y funds, directly or indire	ectly, to pay				
	premiums on a personal benefit contract? .	• • •		📙	Yes 🛚 N	o	,  <del>-</del>
ı	Did the foundation, during the year, pay premit	ums, directly or indirectly	y, on a personal benefit co	ontract?		. 6b	L X
	If "Yes" to 6b, file Form 8870						
	a At any time during the tax year, was the founda				Yes 🛚 N	i	
	If yes, did the foundation receive any proceeds	<del></del>			 	7b	
Ρe	Information About Officers,	Directors, Trustee	s, Foundation Mana	gers, Hig	niy Paid Er	mpioyee	s,
4	and Contractors	manager and their ea					<del></del>
<del>'</del>	List all officers, directors, trustees, foundation	(b) Title, and average		T	ributions to	( ) 5	
	(a) Name and address	hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	employee	benefit plans	, , ,	ise account, Ilowances
	Hayden P French	President					
	4780 W Fremont Ct	1	0				
	Jacquelyn R French	VP Treasur					
	4780 W Fremont Ct	1	0				
	Al French	Secretary					
	12470 Leeds Dr	1	0				
				<u> </u>			
2	Compensation of five highest-paid employees If none, enter ``NONE."	(other than those inclu	ided on line 1 - see the in	structions).			
(	a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employ-	ributions to ee benefit d deferred ensation		nse account illowances
	NONE						
					_		
		1	i				

Form **990-PF** (2009)

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

		Page 7
dation Managers, Highly Paid E	Employees,	
nstructions). If none, enter "NONE."		
(b) Type of service	(c) Compe	nsation
	L	
	<b>•</b>	
<del></del>	T	
	Expens	ses
ed, research papers produced, etc		
	20	,440.
	20	, 440.
··· ··- ··-		
e instructions)		
ring the tax year on lines 1 and 2	Amou	nt
<del> </del>		
	dation Managers, Highly Paid Enstructions). If none, enter "NONE."  (b) Type of service  de relevant statistical info such ed, research papers produced, etc	(b) Type of service (c) Compe

Total Add lines 1 through 3 .

P	art X Minimum Investment Return (All domestic foundations must complete this part Foreign foundations	dations, s	ee the instructions)
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	
þ	Average of monthly cash balances	1b	<del></del>
С	Fair market value of all other assets (see the instructions)	1c	
d	I Total (add lines 1a, b, and c)	1d	
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c		
	(attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	
4	Cash deemed held for charitable activities Enter 1 1/2% of line 3 (for greater amount,		
	see the instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	
6	Minimum investment return. Enter 5% of line 5	6	
Р	art XI Distributable Amount (see the instructions) (Section 4942(j)(3) and (j)(5) private operating found	ations	
	and certain foreign organizations check here ▶ and do not complete this part )		
1	Minimum investment return from Part X, line 6	1	
2 8	a Tax on investment income for 2009 from Part VI, line 5		
ı	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	
4	Recoveries of amounts treated as qualifying distributions	. 4	
5	Add lines 3 and 4	5	
6	Deduction from distributable amount (see the instructions)	6	•
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	
Ρ	Part XII Qualifying Distributions (see the 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	20,824.
ı	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		
ā	a Suitability test (prior IRS approval required)	3a	
ı	b Cash distribution test (attach the required schedule)	3ь	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	. 4	20,824.
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 the instructions)	. 5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,824.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo	undation	
	qualifies for the section 4940(e) reduction of tax in those years		

Form 990-PF (2009)

Rev 1

Fal	t Alli Ulidistributed income (see the	e instructions)			
	Distributable amount for 2009 from Part XI,	(a) Corpus	(b) Years prior to 2008	(c) 2008	( <b>d</b> ) 2009
11	ne 7				
<b>2</b> U	Indistributed income, if any, as of the end of 2009				
a E	Enter amount for 2008 only	<u>-</u>			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
b T	otal for prior yrs 20, 20 , 20				
3 E	Excess distribs carryover, if any, to 2009		_		
	From 2004				
ЬF	From 2005				
c F	rom 2006				
	From 2007				!
	From 2008				
					!
	Total of lines 3a through e				- 1
	Qualifying distributions for 2009 from Part XII,				
	ne 4 ▶\$20,824				
	Applied to 2008, but not more than line 2a				
b A	Applied to undistributed income of prior				
У	rears (Election required - see the instr )				
сТ	reated as distributions out of corpus				
(	Election required - see the instructions)	·			
d A	Applied to 2009 distributable amount				
e F	Remaining amt_distributed out of corpus	20,824.			
5 E	Excess distribs carryover applied to 2009				
(	If an amount appears in column (d), the				
s	ame amount must be shown in col (a))				, !
	Enter the net total of each column as				l ,
	ndicated below:				,
	Corpus Add lines 3f, 4c, & 4e Subtract line 5	20,824.			!
	Prior years' undistributed income. Subtract				
	ne 4b from line 2b				
	Enter the amount of prior years' undistributed				
	ncome for which a notice of deficiency				!
	· 1				,
	las been issued, or on which the section				!
	942(a) tax has been previously assessed				
	Subtract line 6c from line 6b Taxable				į
	imount - see the instructions				, , , , , , , , , , , , , , , , , , , ,
	Indistributed income for 2008 Subtract				
	ne 4a from line 2a Taxable amount -				1
_	ee the instructions				<u>-</u>
	Indistributed income for 2009 Subtract				
	nes 4d and 5 from line 1. This amount				
	nust be distributed in 2010	* * * * * * * * * * * * * * * * * * * *			
7 A	Amounts treated as distributions out of				l !
С	corpus to satisfy requirements imposed by				
s	ection 170(b)(1)(F) or 4942(g)(3) (see the				:
И	nstructions)	20,824.			ľ
8 E	Excess distributions carryover from 2004				
n	ot applied on line 5 or line 7 (see the				
II	nstructions)				ı
	excess distributions carryover to 2010.				·
	Subtract lines 7 and 8 from line 6a				1
	Analysis of line 9				!
	Excess from 2005				
	Excess from 2006				
	excess from 2007				
	excess from 2008				
	excess from 2009				1

Form 990-PF (2009) The Shepherds Way

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid Duri	ng the Year or App	roved for F	Future Payment	
Recipient	If recipient is an individual, show any relationship to any foundation manager	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 Mission PO Box 3 80155- Quinn An 80126 Britts C 21040 Hw 38388		Public Public Public	Diapers/Formula	11,300. 6,940. 2,000.
_Total			<b>⊳</b> 3a	20,240.
b Approved for future payment				
Total			<b>▶</b> 3h	

	Analysis of income-Producti					T
	s amounts unless otherwise indicated	(a) Business	ed business income (b) Amount	(c) Excl	(d) Amount	(e) Related or exempt function income (See the
1 Prog	gram service revenue	code	·	code		instructions)
a		ļ				<del> </del>
b						
c						
_						
f		1				
g Fees	s and contracts from government agencies					
-	nbership dues and assessments .			·-		
	est on savings and temporary cash investments					
	dends and interest from securities			<del>                                     </del>		
	rental income or (loss) from real estate					
	t-financed property			<u> </u>		-
	debt-financed property					
6 Net	rental inc or (loss) from personal property		. <del> </del>			
7 Othe	er investment income					
8 Gain d	or (loss) from sales of assets other than inventory					
9 Net	income or (loss) from special events .					
	ss profit or (loss) from sales of inventory					
	er revenue a					
		·	<del></del> -			<del>                                     </del>
		<del> </del>				
d		-				<del> </del>
θ						
2 Subi	total Add columns (b), (d), and (e)					
	al. Add line 12, columns (b), (d), and (e) .				13	
ee work	sheet in line 13 instructions to verify calculation	ons)				
See works		ons)		npt Purpo		
See works Part XV	sheet in line 13 instructions to verify calculated.  Relationship of Activities to	<sup>ons)</sup> the Accon	nplishment of Exer		oses	antly to the
See works Part XV	sheet in line 13 instructions to verify calculated.  Relationship of Activities to	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculation.  Relationship of Activities to Explain below how each activity for which	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculation.  Relationship of Activities to Explain below how each activity for which	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculation.  Relationship of Activities to Explain below how each activity for which	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculation.  Relationship of Activities to Explain below how each activity for which	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculation.  Relationship of Activities to Explain below how each activity for which	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
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ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
ee work Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
See works Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
See works Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	•
See works Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	· ·
See works Part XV Line No.	Sheet in line 13 instructions to verify calculated Relationship of Activities to Explain below how each activity for which is the street of th	ons ) <b>the Accon</b> ich income is	nplishment of Exer	of Part XVI-	oses A contributed importa	· ·

		Exempt Orga	anizations							_		
1	Did th	e organization directly or	indirectly engag	e in any of the fol	llowing with any	other organ	ızatıon des	cribed in sec	tion		Yes	No
	501(c)	of the Code (other than	section 501(c)(3	) organizations) o	or in section 527	relating to	political org	ganizations?		- 1		
а	Transi	fers from the reporting fo	undation to a no	ncharitable exem	pt organization	of						
	(1)	Cash			•		•		18	(1)		X
	(2)	Other assets .							1a	(2)		Х
b	Other	transactions										
	(1)	Sales of assets to a none	charitable exemp	ot organization		•			. 18	(1)		Х
	(2)	Purchases of assets from	n a noncharitable	e exempt organiz	ation				1b	(2)		Х
	(3) Rental of facilities, equipment, or other assets						1t	(3)		Х		
	(4)	Reimbursement arrange	ments .						1t	(4)		Х
	(5)	Loans or loan guarantee	s						1t	(5)		Х
	(6)	Performance of services	or membership	or fundraising sol	licitations				1t	(6)		Х
С	Sharır	ng of facilities, equipment	t, mailing lists, ot	her assets, or pa	id employees				1	С		Х
		answer to any of the above				ımr(b) shoul	d always si	now the fair r	narket value o	f the		
		, other assets, or service		-			=				tion	
		ring arrangement, show		-					,			
		,	<b>(</b> -,			,						
(a)	Line no	(b) Amount involved	(c) Name of nor	ncharitable exem	pt organization	(d) Desc o	f transfers.	transactions	, and sharing	arran	aeme	ents
		,,				7-333			,		3	
				·,					· · · · · · · · · · · · · · · · · · ·	-		
		* * * * * * * * * * * * * * * * * * * *			•							
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	1- 45-					<u> </u>			<del></del>			
2a		e foundation directly or ii	•			tax-exempt	organizatio	ns described	l iu —	١.,		
		ion 501(c) of the Code (c		n 501(c)(3)) or in	section 5277			•	L	Ye	s 🛚	No
b	Iţ "Y	es," complete the following							<del></del>			
(a) Name of organization (b) Type of organization (c) Description of rel					ion of relation	ship						
		· · ·										
								· · · · · · · · · · · · · · · · · · ·	-			
									<del></del>			
	Lucia			1	<del></del>							
	true, co	penalises of perjury, I declare that priect and complete Declaration	of preparer (other than	return, including accom n taxpayet/or fiduciary)	ipanying schedules ar is based on all inform	id statements, a ation of which pr	nd to the best eparer has any	or my knowleage knowleage	and belief, it is			
									+			
	185	tray m	A P			<del>08</del> /04/	2010		esida	1/		
Ð	<b>▼</b> Sı	gnature of officer or trust	tee		<u> </u>	Date	,	Title				
<u>=</u>			// 00	$\mathcal{A}$	Date		Check if		Preparer's I			
L	<b>,</b>		/	//_/			self-emp	loyed ▶∐	(see Signat		the	
ыди неге	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Preparer's Instruction instruction					instructions	)				
מ	Paid Preparer's	signature	<u> </u>	VVVV		4/2010			P00037	390	)	
	Pre -	Firm's name (or your			Service	Inc		EIN ▶ 2	6-15867	53		
		ıf self-employed),		8th St				Phone no				
		address, and ZIP co	de BOULD	ER CO 80	303-				303-440	-55	5 <u>4</u> 1	

#### Schedule B (Form 990, 990-EZ, or 990-PF) Department of the Treasury Internal Revenue Service

Name of the organization

#### **Schedule of Contributors**

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

OMB No 1545-0047

2009

**Employer identification number** 

84-1589315 The Shepherds Way Organization type (check one) Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trustnot 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 K 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 Form 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 41) \$5,000 or (2) 2% of the amount on Form 990, Part VIII, line 1h or 2% of the amount on Form 990-EZ, line 1 Complete Parts I and II For a section 501(c)(7), (8), or (10) organization filing Form 990, or Form 990-EZ, that received from any one contributor, during the year, aggregate contributions or bequests 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 Form 990-EZ, that received from any one contributor, during the year, some 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. Organization that are not covered by the General Rule and/or the Special Rules do not file Schedule B (Form 990, 990-EZ, or 990-PF), but they must answer "No" on Part IV, line 2 of their Form 990, or check the box in the heading of their Form 990-EZ, or on line 2 of their Form 990-PF, to certify that they do not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF) Schedule B (Form 990, 990-EZ, or 990-PF) (2009) For Privacy Act and Paperwork Reduction Act Notice, see the Instructions for Form 990. These instructions will be issued separately.

Name of organization

The Shepherds Way

Employer identification number 84-1589315

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Al & Pat French 12470 Leeds Dr	\$6,000.	Person X Payroll Noncash
	AUBURN CA 95603-		(Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Hayden & Jacqueline Frenc  4780 W Fremont Ct  LITTLETON CO 80128-	\$\$	Person X Payroll Noncash  (Complete Part II If there is a
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	noncash contribution ) (d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II If there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II If there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash  (Complete Part II If there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
			Person Payroll Noncash (Complete Part II If there is a noncash contribution)

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US 990PF	Substantial Contri	Substantial Contributors				
Name	Address (Enter street, zip code, state, and city, in that order)					
Al and Pat French	12470 Leeds Dr	95603-	CAAUBURN			
layden Jacque French	4780 W Fremont Ct	80128-	COLITTLETON			