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SCANNET WAY 24 20th

Form 990-PF

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

OMB No 1545-0052

2010

| Departmer Internal Re | nt of the Treasury evenue Service | Note. The fo | undation n | nay be able to us | se a copy of this | s return to satisf | y state re | portir | ig requirements | |
|--------------------------|---|---|----------------|---|-------------------|--------------------|------------|------------|--|--|
| For cale | endar year 2010, or | | | ec 22 | | , and ending | | C | | |
| G Che | ck all that apply | X Initial return | _ | al Return of | | - | п., | | | Final return |
| Name of | foundation | Amended ret | urn | | Address o | hange | Nar | ne d | change Employer identification | number |
| | | Foundation | | | | | | ^ | 27-4347059 | |
| Number a | nger Family and street (or PO box nu | mber if mail is not deli- | vered to str | eet address) | *** *** | Room/suite | | В | Telephone number (see | the instructions) |
| 1520 City or to | W. Canal CT | | | | State | 200 ZIP code | | ļ_ | (303) 794- | |
| Litt: | | | | | | 80120 | | C | 1 Foreign organizations, | n is pending, check here |
| | heck type of organiz | zation X Sec | ction 501 | I(c)(3) exem | | | | | 2 Foreign organizations | meeting the 85% test, check |
| | Section 4947(a)(1 |) nonexempt cha | ritable ti | rust Oth | er taxable p | rivate found | | E | here and attach compu If private foundation s | |
| | ır market value of all ass rom Part II, column (c), li | | | ounting met Other (specify) | | ash ∐ Ao | ccrual | | under section 507(b)(1 |)(A), check here |
| ► \$ | | 0,002. | | column (d) | | cash basis | | F | If the foundation is in under section 507(b)(1 | a 60-month termination (B), check here |
| Part I | Analysis of F | Revenue and | | T | nue and | (b) Net in | - | nt | (c) Adjusted net | (d) Disbursements |
| | Expenses (The columns (b), (c). | ne total of amount and (d) may not | s in neces- | expenses | | inco | | | income | for charitable purposes |
| | sarily equal the (| amounts ın colum | n (a) | | | | | | | (cash basis only) |
| | | s, grants, etc, received | (att sch) | 2 | 91,548. | | | | | |
| | | e foundn is not req to a | | | | | | | | |
| | 3 Interest on sa cash investm | avings and tempo ents | rary | | 2. | | | 2. | | |
| | | terest from securities | | | | | | | | |
| : | 5a Gross rents b Net rental income or (loss) | : | | | | | | | - | |
| R | | om sale of assets not o | n line 10 | | | | | | | |
| E | b Gross sales price assets on line 6a | | | | | <u> </u> | | | | |
| Ė | | ncome (from Part IV, li m capital gain | ne 2) | · · · | | | | | | |
| Ŋ | 9 Income modi | . • | | | | | | | | |
| Ε | 10a Gross sales less returns and allowances | | | | | | | | | |
| | b Less Cost of goods sold | | | | | | | | | |
| 1 | c Gross profit/(los | is) (att sch) | | | | | | | | |
| | 11 Other income | e (attach schedule |) | | | | | | | |
| | 12 Total. Add lir | nes 1 through 11 | | 2 | 91,550. | | | 2. | | |
| | 13 Compensation of | officers, directors, trus | tees, etc | | !- | | | = | RECTA | |
| | 14 Other employee 15 Pension plan | _ | · f. t.a | | | | | + | DECEN | /En |
| Δ | 16a Legal fees (attac | , , , | | | 1,548. | | | 1 | 7/ 1/1 | $\frac{1}{1,548}$ |
| A D M | b Accounting fees | (attach sch) | | | | | | ļ <i>ū</i> | 7 WAT 19 | 01 8 |
| N | c Other prof fees (| (attach sch) | | | | | | <u>i</u> | 00= | |
| O Î P S E T | 17 Interest 18 Taxes (attach schedul | eVsee instr) | | ļ | | | | E. | LY SOEM | 1175 |
| R R A A T T | 19 Depreciation | (attach | | | | | | | - | arphi |
| i I | sch) and dep 20 Occupancy | letion | | | | <u> </u> | | | | |
| GÉ | 21 Travel, confe | erences, and meet | tings | | | | | | | |
| A E N X D P | 22 Printing and 23 Other expens | publications ses (attach sched | ule) | | | | | | - | |
| E | 23 Other expens | ses (attach sened | uic) | | | | | | | |
| Š | | ing and administi | | | 1 540 | | | | | 1,548. |
| S | expenses. A 25 Contributions, g | dď lines 13 throug ifts, grants paid | jn 23 | | 1,548. | | | | | 1,540. |
| | 26 Total expens | ses and disburse | ments. | | 1 540 | | | | | 1 540 |
| | Add lines 24 27 Subtract line | | | 1 | 1,548. | | | | 1 | 1,548. |
| | a Excess of re | venue over expe | nses | , | | | | | | |
| | and disburse | ements Income (if negative, en | ter -0-1 | 2 | 90,002. | | | 2. | | + |
| | | ome (if negative, enter | | | | | | | | |
| BAA F | or Paperwork Redu | uction Act Notice | , see the | instruction | s. | | | TE | EA0301 07/23/10 | Form 990-PF (2010) |



Attached schedules and amounts in the description column should be for end-of-year amounts only (See instructions.) Part II Balance Sheets (a) Book Value (b) Book Value (c) Fair Market Value 0. 290,002 290,002. Cash - non-interest-bearing 2 Savings and temporary cash investments 3 Accounts receivable Less: allowance for doubtful accounts 1 4 Pledges receivable Less. allowance for doubtful accounts 5 Grants receivable Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions) 7 Other notes and loans receivable (attach sch) ASSETS Less: allowance for doubtful accounts 8 Inventories for sale or use 9 Prepaid expenses and deferred charges 10a Investments - US and state government obligations (attach schedule) b Investments - corporate stock (attach schedule) c 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 (attach schedule) 15 Other assets (describe ► Total assets (to be completed by all filers 290,002 0 290,002. see instructions. Also, see page 1, item I) Accounts payable and accrued expenses 18 Grants payable 19 Deferred revenue 20 Loans from officers, directors, trustees, & other disqualified persons Mortgages and other notes payable (attach schedule) 21 22 Other liabilities (describe ► 23 Total liabilities (add lines 17 through 22) Foundations that follow SFAS 117, check here **►** X and complete lines 24 through 26 and lines 30 and 31. N F E U T N 290,002 24 Unrestricted 25 Temporarily restricted 26 Permanently restricted ASSETS Foundations that do not follow SFAS 117, check here and complete lines 27 through 31. В 27 Capital stock, trust principal, or current funds 28 Paid-in or capital surplus, or land, building, and equipment fund Retained earnings, accumulated income, endowment, or other funds 29 E 290,002 Total net assets or fund balances (see the instructions) Total liabilities and net assets/fund balances 31 0 290,002 (see the instructions) Part III Analysis of Changes in Net Assets or Fund Balances 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 2 290,002 2 Enter amount from Part I, line 27a 3 3 Other increases not included in line 2 (itemize) 4 290,002. Add lines 1, 2, and 3 5 5 Decreases not included in line 2 (itemize) 6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30 290,002. 6

Beginning of year

Form 990-PF (2010) Heringer Family Foundation

27-4347059

End of year

Page 2

7 Add lines 5 and 6

8 Enter qualifying distributions from Part XII, line 4

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.

| Form | 990-PF (2010) Heringer Family Foundation | 27- | 434705 | 9 | F | age 4 |
|------|---|---------------|-----------|----------|------|--------------|
| Par | t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - | see | the instr | ıctions) | | |
| 1ช | Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1. | | | | | |
| | Date of ruling or determination letter: (attach copy of letter if necessary — see instr.) | | 1 | | | |
| b | Domestic foundations that meet the section 4940(e) requirements in Part V, | - | 1 | | | 0. |
| | check here ► and enter 1% of Part I, line 27b . | | | | | |
| С | All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, column (b) | | | | | |
| 2 | Tax under section 511 (domestic section 4947(a)(1) trusts and taxable | | | | | _ |
| _ | foundations only. Others enter -0-) | | 2 | _ | | <u> </u> |
| | Add lines 1 and 2 | | 3 | | | <u>0.</u> |
| | Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0- |) | 5 | | | _0. |
| | Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0- Credits/Payments | | 3 | | | <u> </u> |
| | 2010 estimated tax pmts and 2009 overpayment credited to 2010 | | | | | |
| | Exempt foreign organizations — tax withheld at source 6b | | | | | |
| | Tax paid with application for extension of time to file (Form 8868) 6c | | | | | |
| | Backup withholding erroneously withheld 6d | | | | | |
| | 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 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 | _ | | 0. |
| | Enter the amount of line 10 to be: Credited to 2011 estimated tax | > | 11 | _ | | |
| _ | t VII-A Statements Regarding Activities | | | | | |
| | During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it | | _ | | Yes | No |
| | participate or intervene in any political campaign? | | | 1a | | Х |
| b | Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)? | | | 1b | | <u>x</u> |
| | If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials or distributed by the foundation in connection with the activities | publ | shed | | - | |
| С | Did the foundation file Form 1120-POL for this year? | | | 1c | | <u> </u> |
| 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 \$ Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax impos | ed on | | | | |
| · | foundation managers \$ | 00 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. | | | | | |
| 2 | Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, art | cles | | _ | | |
| • | of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes | | | 3 | | <u>x</u> |
| 4a | Did the foundation have unrelated business gross income of \$1,000 or more during the year? | | | 4a | | <u> </u> |
| b | if 'Yes,' has it filed a tax return on Form 990-T for this year? | | | 4b | | <u> </u> |
| 5 | Was there a liquidation, termination, dissolution, or substantial contraction during the year? | | | 5 | | <u>x</u> |
| | If 'Yes,' attach the statement required by General Instruction T. | | | | | |
| 6 | Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: | | | - 1 | | |
| | By language in the governing instrument, or | | | j | | |
| | • By state legislation that effectively amends the governing instrument so that no mandatory directions that | at con | flict | 6 | v | ' |
| - | with the state law remain in the governing instrument? | | | 7 | X | ├─ |
| | 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 is Enter the states to which the foundation reports or with which it is registered (see the instructions) | • | | | Λ_ | |
| oa | CO - Colorado | _ | | | | 1 |
| ь | 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 | \ 4 | 042/->/5> | 86 | Х | <u> </u> |
| 9 | Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3 for calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes,' com | or 4 plete | Part XIV | 9 | _ | х |
| 10 | Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing the and addresses | eir na | mes | 10 | х | |
| BAA | | | | Form 99 | 0-PF | (2010) |

| Form | 1 990-PF (2010) Heringer Family Foundation | 27- | -43470 | 59 | F | age 5 |
|------|--|------------------|--------|-----------|------|-------------|
| Par | t VII-A Statements Regarding Activities (Continued) | | | | | |
| 11` | At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see 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. Website address $N/A =$ | application | on? | 13 | Х | |
| 14 | The books are in care of Kevin Heringer Telephone | | | 794 | -216 | 55 |
| 15 | Located at 1520 W. Canal Ct. #200 Littleton CO ZIP+4 > | <u>801</u> | _20 | | | FT - |
| 15 | Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here and enter the amount of tax-exempt interest received or accrued during the year | ► | 15 | | | ⊔ — |
| 16 | At any time during calendar year 2010, did the foundation have an interest in or a signature or other autbank, securities, or other financial account in a foreign country? | hority ov | er a | 16 | Yes | No X |
| | See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the nan foreign country ► | ne of the | | | | |
| Parl | t VII-B Statements Regarding Activities for Which Form 4720 May Be Required | | | | | |
| | File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies. | | | | Yes | No |
| 1 a | During the year did the foundation (either directly or indirectly). | | _ | | | |
| | (1) Engage in the sale or exchange, or leasing of property with a disqualified person? | Yes | X No | | | |
| | (2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? | Yes | X No | | | |
| | (3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? | Yes Yes | X 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)? | 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 after termination of government service, if terminating within 90 days.) | Yes | X No | | | |
| Ь | olf 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 instruction | ns)? | _ | 1 b | | |
| | Organizations relying on a current notice regarding disaster assistance check here | • | • ∐ | | | |
| c | Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2010? | | | 1c | | <u>x</u> |
| 2 | Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private operating foundation defined in section 4942(j)(3) or 4942(j)(5)) | | | İ | | |
| a | At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010? | Yes | X No | | | |
| | If 'Yes,' list the years ► 20 , 20 , 20 , 20 | | | | | , |
| t | Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a (relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a all years listed, answer 'No' and attach statement — see the instructions) | a)(2))(2) to | | 2 b | - | |
| c | tif the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years he | ere | | | | |
| | ► 20, 20, 20 | | | | | |
| | Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? | — | X No | | | |
| t | o If 'Yes,' did it have excess business holdings in 2010 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 2010) | | | - _ 3b | | |
| 42 | Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes? | | | 4a | | x |
| t | 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 2010? | | | 4b | | х |
| BAA | | | | Form 99 | 0-PF | (2010) |

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| Form 990-PF (2010) Heringer Family F | | | 27-434 | 17059 | Page 6 |
|--|--|---|--|---------------------------|------------------|
| Part VII-B Statements Regarding Activit | | <u>1 4720 May Be Req</u> | uired (continued) | | |
| 5a During the year did the foundation pay or incur | any amount to. | | | | |
| (1) Carry on propaganda, or otherwise attemp | t to influence legislation | (section 4945(e))? | Yes X | No | |
| (2) Influence the outcome of any specific publ on, directly or indirectly, any voter registra | ic election (see section tion drive? | 4955), or to carry | Yes X | No | |
| (3) Provide a grant to an individual for travel, | study, or other similar p | eurposes? | ∐ Yes X | No | |
| (4) Provide a grant to an organization other the in section 509(a)(1), (2), or (3), or section | an a charitable, etc, org 4940(d)(2)? (see instru | ganization described ctions) | Yes X | No | |
| (5) Provide for any purpose other than religiou educational purposes, or for the prevention | is, charitable, scientific, n of cruelty to children o | literary, or r animals? | Yes X | No | |
| b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in (see instructions)? | he transactions fail to q a current notice regardi | ualify under the exception ing disaster assistance | ons | 5b | - |
| Organizations relying on a current notice regar | ding disaster assistance | e check here | ▶ 🗍 | | |
| c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure response | ibility for the grant? | • | Yes [| No | |
| If 'Yes,' attach the statement required by Regu | lations section 53.4945- | ·5(d) | | | - |
| 6a Did the foundation, during the year, receive an on a personal benefit contract? | • | | Yes X | I | |
| b Did the foundation, during the year, pay premit If 'Yes' to 6b, file Form 8870 | ums, directly or indirecti | y, on a personal benefit | contract | 6b | x |
| 7a At any time during the tax year, was the found | ation a party to a prohib | orted tax shelter transact | ion? Yes X | No | |
| b If yes, did the foundation receive any proceeds | | | | | |
| Part VIII Information About Officers, D and Contractors | irectors, Trustees, | Foundation Manag | gers, Highly Paid E | mployees, | |
| 1 List all officers, directors, trustees, foundation | n managers and their co | ompensation (see instru | ıctions). | | |
| (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 a other allow | |
| Kevin G Heringer 1520 W. Canal Ct. #200 | Director, Pres , Sectry | _ | | | 0 |
| Littleton CO 80120 | 1.00 | 0. | 0. | | 0. |
| Jill E Heringer 1520 W. Canal Ct. #200 | Director, Vice-Pres | | | | • |
| Littleton CO 80120 | 1.00 | 0. | 0. | | 0. |
| | | | | | |
| 2 Compensation of five highest-paid employee | s (other than those incl | uded on line 1— see ins | tructions). If none, ente | r 'NONE.' | |
| (a) Name and address of each employee | (b) Title and average | (c) Compensation | (d) Contributions to | (e) Expense | |
| paid more than \$50,000 | hours per week devoted to position | | employee benefit plans and deferred compensation | other allow | ances |
| NONE | | | | | |
| 0 | | | | | |
| | | | | | |
| 0 | | | | | |
| 0 | | | | | |
| 0 | | | | | |
| | - | | | | |
| Table and a fall and a | <u> </u> | | > | | N |
| Total number of other employees paid over \$50,000 | TEEA0306 (| 07/23/10 | | Form 990-F | None F (2010) |

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| Form 990-PF (2010) Heringer Family Foundation 27-43 | |
|---|---------------------------|
| Part VIII Information About Officers, Directors, Trustees, Foundation Managers, Highly Paid I and Contractors (continued) | Employees, |
| | |
| 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 | None |
| Part IX-A Summary of Direct Charitable Activities | |
| | |
| List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc | Expenses |
| 1 | |
| |] |
| 2 | |
| ² | - |
| | |
| 3 | |
| | - |
| 4 | |
| | } |
| | <u> </u> |
| 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 | _ |
| | - |
| 2 | |
| | - |
| All other program-related investments See instructions. | |
| 3 | |
| | 1 |
| Total Add lines 1 through 2 | |
| Total. Add lines 1 through 3 BAA | Form 990-PF (2010) |

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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

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)

6 Adjusted qualifying distributions. Subtract line 5 from line 4

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Form 990-PF (2010)

0. 548. Part XIII Undistributed Income (see instructions)

| | (a) Corpus | (b) Years prior to 2009 | (c) 2009 | (d) 2010 |
|---|---------------|----------------------------|--------------------|---------------------------|
| 1 Distributable amount for 2010 from Part XI, | | | | 352. |
| line 7 2 Undistributed income, if any, as of the end of 2010: | | | | 332. |
| a Enter amount for 2009 only | | | 1 | |
| b Total for prior years: 20 , 20 , 20 | | | · · · · · | |
| 3 Excess distributions carryover, if any, to 2010: | · · - · - · | | | |
| a From 2005 | | | | |
| b From 2006 | | | | |
| c From 2007 | | | | |
| d From 2008 | | | | |
| e From 2009 | | | | |
| f Total of lines 3a through e | | | | |
| 4 Qualifying distributions for 2010 from Part | | | | |
| XII, line 4: ► \$1,548. | | | | |
| a Applied to 2009, but not more than line 2a | | | | |
| b Applied to undistributed income of prior years (Election required — see instructions) | | | | |
| c Treated as distributions out of corpus (Election required — see instructions) | | | | |
| d Applied to 2010 distributable amount . | | | | 352. |
| e Remaining amount distributed out of corpus | 1,196. | | | |
| 5 Excess distributions carryover applied to 2010 | | | | |
| (If an amount appears in column (d), the same amount must be shown in column (a).) | | | | |
| 6 Enter the net total of each column as | | | | |
| indicated below: | 1,196. | | | |
| a Corpus Add lines 3f, 4c, and 4e Subtract line 5 | 1,190. | | | |
| b Prior years' undistributed income Subtract line 4b from line 2b | | 0. | | |
| c Enter the amount of prior years' undistribut- ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed | | | | 44,2444 |
| d Subtract line 6c from line 6b. Taxable amount — see instructions | | 0. | | |
| e Undistributed income for 2009 Subtract line 4a from | | | | |
| line 2a Taxable amount — see instructions | | | 0. | |
| f Undistributed income for 2010 Subtract lines 4d and 5 from line 1. This amount must be distributed in 2011 | | | | 0. |
| 7 Amounts treated as distributions out of corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see instructions) | | | | |
| 8 Excess distributions carryover from 2005 not applied on line 5 or line 7 (see instructions) | 0. | | | |
| 9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a | 1,196. | | | |
| 10 Analysis of line 9. | | - | | |
| a Excess from 2006 0. |] | | | |
| b Excess from 2007 0. |] | | | |
| c Excess from 2008 0. | 1 | | 1 | |
| d Excess from 2009 0. |] | | | |
| e Excess from 2010 1,196. | | <u></u> | <u> </u> | <u> </u> |
| RAA | | | | Form 990-PF (2010) |

| Form 990-PF (2010) Heringer Family | | | | 27-434705 | 9 Page 10 | | |
|--|---|--|--|-------------------------|------------------|--|--|
| Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) N/A | | | | | | | |
| 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2010, enter the date of the ruling | | | | | | | |
| b Check box to indicate whether the founda | | ating foundation de | | 4942(j)(3) or | 4942(j)(5) | | |
| 2a Enter the lesser of the adjusted net income from Part I or the minimum | Tax year | | Prior 3 years | T | | | |
| investment return from Part X for each year listed | (a) 2010 | (b) 2009 | (c) 2008 | (d) 2007 | (e) Total | | |
| 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 | | | ļ <u>-</u> | | | | |
| 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 | | | |
| (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 | | | <u> </u> | | <u> </u> | | |
| Part XV Supplementary Information assets at any time during t | ı (Complete this he year — see in | part only if the structions.) | organization ha | ad \$5,000 or moi | e in | | |
| Information Regarding Foundation Mana a List any managers of the foundation who close of any tax year (but only if they hav Kevin Heringer | have contributed mo | re than 2% of the to han \$5,000) (See s | otal contributions rec ection 507(d)(2).) | ceived by the foundat | ion before the | | |
| b List any managers of the foundation who a partnership or other entity) of which the | own 10% or more of foundation has a 10 | the stock of a corpo % or greater interes | oration (or an equal st. | ly large portion of the | e ownership of | | |
| 2 Information Bassading Contribution Con- | nt Gift Laam Sakal | archin etc Progres | | | | | |
| 2 Information Regarding Contribution, Gra Check here \(\) \(\) if the foundation only requests for funds. If the foundation make | makes contributions | to preselected char | itable organizations | | | | |
| complete items 2a, b, c, and d. a The name, address, and telephone numb | er of the person to w | hom applications st | nould be addressed | | | | |
| a The hame, address, and telephone humb | er or the person to w | nom applications si | louid be addressed. | | | | |
| | | | | | | | |
| b The form in which applications should be | submitted and inform | mation and materials | s they should includ | e. | | | |
| c Any submission deadlines: | | | | | | | |
| d Any restrictions or limitations on awards, | such as by geograph | nical areas, charitab | ile fields, kinds of in | stitutions, or other fa | uctors: | | |
| ., | | ., | | | | | |

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BAA

Form **990-PF** (2010)

Page 11

| 3 Grants and Contributions Paid During the Ye | ar or Approved for Futu | re Payment | · | |
|---|--|----------------------|----------------------------------|--------|
| Recipient | If recipient is an individual, show any relationship to any foundation manager or substantial contributor | Foundation status of | Purpose of grant or contribution | Amount |
| Name and address (home or business) | substantial contributor | recipient | Contribution | |
| a Paid during the year | substantial contributor | | | |
| Total | | | ► 3a | |
| b Approved for future payment | | | | |
| | | | | |
| | | <u> </u> | | |
| Total | | <u>-</u> | ► 3b | |

Part XVI-A Analysis of Income-Producing Activities

| | | 1 | | | | |
|---|---|--|---|--|--------------------------|--|
| inter gross | amounts unless otherwise indicated. | | business income | | section 512, 513, or 514 | (e) |
| | | (a) Business code | (b) Amount | Exclu- sion | (d) Amount | Related or exempt function income (see the instructions) |
| - | am service revenue | | | code | | |
| | | | | +-+ | | |
| | | - | | | | |
| c | | | | + | | |
| | | | | + | | |
| | | ↓ | | +-+ | | |
| f | | | · · · · - · - · - · - · - · - · - · - · | | | |
| | and contracts from government agencies | | | ++ | | |
| | pership dues and assessments | | | + | | |
| | t on savings and temporary cash investments | | | 14 | 2. | |
| | ends and interest from securities | | | | | |
| | ental income or (loss) from real estate: | | - , - | + | | |
| | financed property | | | + | | |
| | ebt-financed property | - | | ++ | | |
| | ntal income or (loss) from personal property . | | | | | |
| | investment income | | _ | + | | |
| | r (loss) from sales of assets other than inventory | | | | | |
| | ncome or (loss) from special events | <u> </u> | | | | |
| 10 Gross | s profit or (loss) from sales of inventory | | | | | |
| 11 Other | revenue. | - | | | | |
| a | | | | | | |
| b | | - | | | | |
| c | | | | | | |
| d | | | | | | |
| e | | | | | | |
| 12 Subto | otal Add columns (b), (d), and (e) | | | | 2, | |
| | | | | | | |
| 13 Total | . Add line 12, columns (b), (d), and (e) | | | | 13 | 2. |
| 13 Total | . Add line 12, columns (b), (d), and (e) theet in line 13 instructions to verify calculated | ons.) | | | 13 | 2. |
| 13 Total See works | heet in line 13 instructions to verify calculation | | hment of Exem | pt Purpose | <u> </u> | 2. |
| 13 Total See works Part XVI | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI | heet in line 13 instructions to verify calculation | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | |
| 13 Total See works Part XVI Line No. | -B Relationship of Activities to the | e Accomplis | | | 9S | to the e instructions.) |

Form 990-PF (2010) Heringer Family Foundation 27-4347059 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

| | | | | | | | | Yes No |
|-------------------------------------|---|--|--|---|--|--|--------------------------------------|---------------|
| describe | organization directly ed in section 501(c) o to political organizat | of the Code (ol | ngage in any of the follow ther than section 501(c)(| wing with any oth 3) organizations) | ner organization) or in section 52° | 7, | | |
| _ | . • | | a noncharitable exempt | organization of | | | | |
| | | | a nonchamable exempt | • | | | 1a (1) | X |
| | | | | | | | 1a (2) | $\frac{x}{x}$ |
| | ansactions: | | | | | | | |
| | | charitable eve | mpt organization | | | | 1b(1) | X |
| | | | ble exempt organization | | | | | $\frac{x}{x}$ |
| | | | r assets | | | | | $\frac{x}{x}$ |
| | | | | | | | | X |
| • - | _ | | | | | | 1b (5) | X |
| • • | • | | ip or fundraising solicitat | | | | 1b (6) | X |
| | | | ts, other assets, or paid | | | | | $\frac{1}{x}$ |
| CORMING | or racingos, equipms | sing maning na | is, outer assets, or para | Cimpley 555 7777 | | | | |
| d if the an the good any tran | iswer to any of the a ds, other assets, or s isaction or sharing a | bove is 'Yes,' of the services given the services given the services given the services are | complete the following so by the reporting foundati now in column (d) the va | chedule. Column on. If the founda lue of the goods, | (b) should alway tion received less other assets, or | s show the fair r s than fair marke services receive | market value o et value in ed. | of |
| (a) Line no. | (b) Amount involved | (c) Name | of nonchantable exempt organi | zation (d | Description of trans | sfers, transactions, a | nd sharing arran | gements |
| | | | | | | | | |
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| | | | | | | | | |
| describe | oundation directly or ed in section 501 (c) complete the followi | of the Code (o | ated with, or related to, of their than section 501(c)(| one or more tax-(3)) or in section | exempt organizat 527? | ons · · · · · · · · · · · · · · · · · · · | | X No |
| (a | a) Name of organizat | ion | (b) Type of org | anization | (c |) Description of | relationship | |
| | | | | | | | | |
| | | | | | | | | |
| | | | L | | | | | |
| | | | | | <u> </u> | | | |
| | | | | | | | | |
| Under | penalties of perjury, I decia | ire that I have exam | nined this return, including acco than taxpayer or fiduciary) is b | mpanying schedules a | and statements, and to | the best of my knowl | edge and belief, it | ıs true, |
| | , and complete, Declaration | or preparer (digg | r trean taxpayer or notucary) is o | aseo on all injormation | i oi wiici preparei na | is any knowledge. | | |
| Sign | | | | 1 | 5/11/ | · Door | siden | + |
| lere | <u> </u> | -77 | | | 0/17/1 | | 1101 2 | <u> </u> |
| sx | gnature of officer or trustee | | 10-7 | Dat | Data | Title | Tems: | |
| | Print/Type preparer's na | _ | Proparer's signature | Silani | Date | Check if X | r PTIN | ימונה |
| Paid | Karen E. So | | Pyllent | SAMM | 05/14/11 | self-employed | POOL | 2449 |
| Preparer | Firm's name | LARTFIELD | SONNÍER & JOHN | NSON, P.C. | | Firm's EIN► & | <u>4-156</u> | 2947 |
| Use Only | Firm's address | 8435 W 80 | TH AVE | | | | | • |
| | iriii s auuless | ARVADA | | CO 80 | 0005 | Phone no. (3) | 03) 421-9 | 9379 |
| BAA | | | | | | | Form 99 | D-PF (2010) |

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

Schedule of Contributors

► Attach to Form 990, 990-EZ, or 990-PF

2010

OMB No 1545-0047

| Internal Revenue Service | Attach to Form 550, 550-EE, or 550-1 | | |
|--|--|---|---|
| Name of the organization | | Employer ic | dentification number |
| Heringer Family | Foundation | 27-434 | 17059 |
| Organization type (check | one): | | |
| Filers of: | Section: | | |
| Form 990 or 990-EZ | 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as 527 political organization | s a private foui | ndation |
| Form 990-PF | X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust treated as a p 501(c)(3) taxable private foundation | orivate foundat | ion |
| Check if your organization Note. Only a section 501(d | is covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule and a | 3 Special Rule. | See instructions. |
| General Rule X For an organization fili contributor (Complete | ng Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more Parts I and II.) | ∍ (ın money or | property) from any one |
| Special Rules | | | |
| 509(a)(1) and 170(b)(1 | organization filing Form 990 or 990-EZ, that met the 33-1/3% support test of t)(A)(vi), and received from any one contributor, during the year, a contribution on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1. Complete Parts i | of the greater | under sections of (1) \$5,000 or |
| aggregate contribution | i, (8), or (10) organization filing Form 990 or 990-EZ, that received from any or s of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, lite ty to children or animals. Complete Parts I, II, and III. | ne contributor, erary, or educa | during the year, itional purposes, or |
| contributions for use e |), (8), or (10) organization filing Form 990 or 990-EZ, that received from any or xclusively for religious, charitable, etc, purposes, but these contributions did no enter here the total contributions that were received during the year for an <i>excl</i> ete any of the parts unless the General Rule applies to this organization becau | ot aggregate to <i>lusivelv</i> religiou | more than \$1,000. us, charitable, etc. |
| religious, charitable, e | tc, contributions of \$5,000 or more during the year | | ►\$ |
| 990-PF) but it must answe | hat is not covered by the General Rule and/or the Special Rules does not file Ser 'No' on Part IV, line 2 of their Form 990, or check the box on line H of its Forbes not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-F | m 990-EZ, or o | rm 990, 990-EZ, or on line 2 of its Form |
| BAA For Paperwork Red 990EZ, or 990-PF. | uction Act Notice, see the Instructions for Form 990, Schedule | B (Form 990, | , 990-EZ, or 990-PF) (201 |

| Schedule Name of org | B (Form 990, 990-EZ, or 990-PF) (2010) | Page 1 | of 1 of Part I |
|-------------------------|--|-----------------------------------|---|
| _ | ger Family Foundation | ' ' | 347059 |
| Part I | Contributors (see instructions.) | | |
| (a) Number | (b) Name, address, and ZIP + 4 | (c) Aggregate contributions | (d) Type of contribution |
| | Kevin Heringer 1520 W. Canal Ct. #200 Littleton CO 80120 | \$290,000. | Person X Payroll Noncash (Complete Part II if there is a noncash contribution.) |
| (a) Number | (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) Number | (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) Number | (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) Number | (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) Number | (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.) |

Form 990-PF, Page 1, Part I Line 16a - Legal Fees

| Name of Provider | Type of Service Provided | Amount Paid Per Books | Net Investment Income | Adjusted Net Income | Disbursements for Charitable Purposes |
|----------------------|-----------------------------|-----------------------------|-----------------------------|---------------------------|---|
| Berenbaum Weinshienk | Legal Services | 1,548. | | | 1,548. |

Total <u>1,548.</u> <u>1,548.</u>