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## **Return of Private Foundation**

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

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

OMB No 1545-0052

		t of the Treasury venue Service	Note. The fo	undation may l		to use a copy of this			orting requirements.	2010
		idar year 2010, or ta		-			, and e			
		all that apply:	Initial retu			Initial return of a fo	ormer public o	charity	Final return	
			Amended	return		Address change	ge		Name change	
Na	ne of	foundation					-		A Employer identification	number
		_								
<u> </u>		Barker-l						I	84-1481188	
Nur	nber a	and street (or P O box nu				•		Room/suite	B Telephone number 303-953-18	63
C+		1655 Wall		reet #1	09		••	1	<u> </u>	· · · · · · · · · · · · · · · · · · ·
City	/ UI (I	own, state, and ZIP co Boulder		0302					C If exemption application is p D 1. Foreign organizations	
H (	heck	type of organization:			empt n	rivate foundation			Foreign organizations me check here and attach co	eting the 85% test,
	_	ction 4947(a)(1) non				axable private founda	ation			
l Fa		arket value of all asset	<del></del>				Accr	ual	<ul> <li>If private foundation star</li> <li>under section 507(b)(1)</li> </ul>	
(fi	om I	Part II, col. (c), line			her (sp				F If the foundation is in a	60-month termination
	\$	1			mn (d)	must be on cash t	basis.)		under section 507(b)(1)	
Pa	art I	Analysis of Revent (The total of amounts in necessarily equal the a	n columns (b), (c), a	nd (d) may not		) Revenue and penses per books		vestment ome	(c) Adjusted net income	(d) Disbursements for charitable purposes (cash basis only)
	1	Contributions, gifts,							N/A	
	2	Check X if the for		to attach Sch B			<del></del>		· · · · · · · · · · · · · · · · · · ·	
	3	cash investments	, ,			3,437.		3,437.		Statement 1
	52	Dividends and intere Gross rents	ist from securitie	<b>:</b> S		3,431.		3,43/.		Scacement 1
		Net rental income or (los	35)							
Revenue		Net gain or (loss) from s		n line 10		<4,559.	>			
	b Gross sales price for all assets on line 8a 92,464.									
	7	7 Capital gain net income (from Part IV, line 2)					0.			
Œ	8	Net short-term capit	al gaın							
	9	Income modification Gross sales less returns								
	10a									
		Less Cost of goods sol Gross profit or (loss								
	11	Other income	,							
	12	Total Add lines 1 th	rough 11			<1,122.	>	3,437.		
	13	Compensation of officer	s, directors, trustee	es, etc		0.		0.		0.
	14	Other employee sala	•		<u> </u>					
ģ	15	Pension plans, empl	oyee benefits							
, use	IDA	Legal fees Accounting fees	C+	tmt 2	ļ	400.		400.		0.
ă	C	Other professional fe		LINC Z		700.	-	400.		
Ve	17	Interest								
rati	18	Taxes	St	tmt 3		28.		28.		0.
ninistra	19	Depreciation and dep	pletion							<u> </u>
Administrative Expenses	20	Occupancy								
ΨÞ		Travel, conferences,	and meetings'							
and ,	22 23	Printing and publica Other expenses N(		)11 O:						<u> </u>
Operating	24	Total operating and								
perati	-	expenses. Add-lines		5		428.		428.		0.
Š	25	Contributions, gifts,		17		1,750.				1,750.
>	26	Total expenses and						· · ·		
3	<u> </u>	Add lines 24 and 25	•			2,178.		428.		1,750.
\$	27	Subtract line 26 from								
		Excess of revenue over Net investment inco	•			<3,300.	<i>&gt;</i>	3,009.	-	<del> </del>
		Adjusted net incom						<u> </u>	N/A	<del> </del> -
		,	- 1 21 10				<del></del>			

023501 12-07-10 LHA For Paperwork Reduction Act Notice, see the instructions.

023511

Part IV Capital Gains	and Losses for Tax on In	vestment	Income					
	ribe the kind(s) of property sold (e.g. arehouse; or common stock, 200 shs			w acquired Purchase Donation		acquired lay, yr.)	(d) Date sold (mo., day, yr.)	
1a								
b See Attached	Statement							
<u>C</u>				ļ				
<u>d</u>				<del> </del>				
<u>e</u>	(f) Depreciation allowed	(a) Cos	t or other basis	<del>                                     </del>		(h) G	ain or (loss)	· -
(e) Gross sales price	(or allowable)		xpense of sale				s (f) minus (	
a								
b								
<u>c</u>								· · · · · · · · · · · · · · · · · · ·
<u>d</u>			07.00	-				.4 550
e 92,464.	as some a column (b) and award by	the foundation	97,02	23.		(I) On a (C	2-1 (h)	<4,559.
Complete only for assets snowii	ng gain in column (h) and owned by	r			CC	i) Gains (C d. (k), but	Col. (h) gain not less thai	minus n -0-) <b>or</b>
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (ı) col. (ı), ıf any				(from col. (	
						_		
b								
C								
d								
е								<u>&lt;4,559.</u>
	∫ If gain, also enter	r in Part I, line	7	7				4 550
2 Capital gain net income or (net ca	apital loss) 👤 If (loss), enter -0	- ın Part I, line	7	上	2			<4,559.
3 Net short-term capital gain or (lo		nd (6):						
If gain, also enter in Part I, line 8,					,		N/A	
If (loss), enter -0- in Part I, line 8  Part V Qualification U	Inder Section 4940(e) for	Reduced	Tax on Net	Inve	stment In	come		· <del></del>
(For optional use by domestic privat	<del>`</del>							
		(,		,				
If section 4940(d)(2) applies, leave t	his part blank.							
Was the foundation liable for the sec	tion 4942 tax on the distributable am	nount of any ye	ar in the base pe	rıod?				Yes X No
	lify under section 4940(e). Do not co				·			
1 Enter the appropriate amount in	each column for each year; see instri	uctions before	making any entri					(d)
Base periód years	(b) Adjusted qualifying dis	tributions	Net value of no	(c) oncharit	able-use asset	s	Distrib	(d) oution ratio yided by col. (c))
Calendar year (or tax year beginni	ing in) / Adjusted quality ing all	6,992.			36,12		(001. (0) 014	.193550
2009		6,857.			49,54			.138408
2007		1,900.			69,30			.027415
2006		3,954.			59,38			.066585
2005		2,775.			59,57	8.		.046578
2 Total of line 1, column (d)						2		.472536
3 Average distribution ratio for the		on line 2 by 5,	or by the number	r of year	S			004505
the foundation has been in existe	ence if less than 5 years					3		.094507
								41 027
4 Enter the net value of noncharital	ble-use assets for 2010 from Part X,	line 5				4	1	41,027.
E. Multiply line 4 by line 2						5		3,877.
5 Multiply line 4 by line 3							<del> </del>	370775
6 Enter 1% of net investment incor	me (1% of Part I, line 27h)					6		30.
C Lines 170 or not invocation; inco-	(170 071 211 1, 11110 27 0)							
7 Add lines 5 and 6						7		3,907.
8 Enter qualifying distributions from	m Part XII, line 4					8		1,750.
	n line 7, check the box in Part VI, line	tb, and comp	lete that part usii	ng a 1%	tax rate.			
See the Part VI instructions.								

023521 12-07-10

orm 9	990-PF.(2010) Barker-Hunter Family Foundation t VI   Excise Tax Based on Investment Income (Section 4940)	on O(a), 494	10(b), 4940(e),	84- or 4948	148118 - see inst	8 ructio	Page 4 ns)
	exempt operating foundations described in section 4940(d)(2), check here and en						
	Date of ruling or determination letter: (attach copy of letter if nec						
	Domestic foundations that meet the section 4940(e) requirements in Part V, check here			1			60.
	of Part I, line 27b						
c A	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%	of Part I, I	ine 12, col. (b).		-		
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Ot			2			0.
3 A	Add lines 1 and 2			3_			<u>60.</u>
4 5	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Of	thers enter	-0-)	4_			<u>0.</u>
5 T	Fax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			5			60.
6 (	Credits/Payments:						
a 2	2010 estimated tax payments and 2009 overpayment credited to 2010	6a					
ЬE	Exempt foreign organizations - tax withheld at source	6b					
c T	Fax paid with application for extension of time to file (Form 8868)	6c					
đ E	Backup withholding erroneously withheld	6d					_
	Total credits and payments. Add lines 6a through 6d			7			<u>0.</u>
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here 📖 if Form 2220 is attac	ched		8_		<del></del>	
	Fax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			9			60.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		ì	<b>▶</b> 10			
	Enter the amount of line 10 to be: Credited to 2011 estimated tax			1 11	<u> </u>		
	t VII-A Statements Regarding Activities		<del> </del>			Voc	No
	During the tax year, did the foundation attempt to influence any national, state, or local legisl	lation or di	d it participate or inte	rvene in	-		+
	any political campaign?			\0	18		X
	Old it spend more than \$100 during the year (either directly or indirectly) for political purpos				<u>1b</u>	+	<del>  ^</del>
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and	i copies o	r any materiais put	nisnea or			
	distributed by the foundation in connection with the activities.						X
	Did the foundation file Form 1120-POL for this year?				10	+	
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the			0.			
	(1) On the foundation.   \$ 0. (2) On foundation managers.		nocad on foundation				
	Enter the reimbursement (if any) paid by the foundation during the year for political expending managers. $ ightharpoons$	lure lax iiii	posed on touridation				
	managers. ► \$	062			2		х
	ras the foundation engaged in any activities that have not previously been reported to the in if "Yes," attach a detailed description of the activities	10,					1
	Has the foundation made any changes, not previously reported to the IRS, in its governing in	nstrument	articles of incornora	tion or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the change		articles of incorpora		3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year				48		X
	if "Yes," has it filed a tax return on <b>Form 990-T</b> for this year?	•		N	I/A 4b		<del> </del>
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?				5		X
	If "Yes," attach the statement required by General Instruction T.						
	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied ei	ther:					
	By language in the governing instrument, or						
	By state legislation that effectively amends the governing instrument so that no mandatory	y direction:	s that conflict with the	e 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?				7	X	L
	f "Yes," complete Part II, col. (c), and Part XV.						
8a E	Enter the states to which the foundation reports or with which it is registered (see instruction	ns) 🕨					
	CO						
bί	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the A	ttorney Ge	neral (or designate)				
c	of each state as required by General Instruction G? If "No," attach explanation				86	X	<u> </u>
	s the foundation claiming status as a private operating foundation within the meaning of sec	ction 4942	(j)(3) or 4942(j)(5) fo	or calendar			
}	year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," $c$	omplete l	Part XIV		9	_	<u>X</u> _
10 [	Did any persons become substantial contributors during the tax year? if "Yes," attach a schedu	le listing the	r names and addresses			_	<u> </u>
					Form 99	90-PF	(2010)

orm 990-PF (20		ndation	Dominod (	84-14811	88 Page 6
	Statements Regarding Activities for Which I	Form 4720 May be F	required (contin	uea)	
• .	rear did the roundation pay or incur any amount to: In propaganda, or otherwise attempt to influence legislation (section	n 4945(e)\?	☐ Ye	s X No	
	ce the outcome of any specific public election (see section 4955); c				
. ,	er registration drive?	in to during only directly or interior		s X No	1
•	e a grant to an individual for travel, study, or other similar purposes	?		s X No	
. ,	e a grant to an organization other than a charitable, etc., organizatio				
	(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No	
	e for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo	or		
	vention of cruelty to children or animals?		☐ Ye	es X No	
b If any answ	er is "Yes" to 5a(1)-(5), did <b>any</b> of the transactions fail to qualify uni	der the exceptions described i	n Regulations		
section 53.4	1945 or in a current notice regarding disaster assistance (see instru	ictions)?		N/A	5b
Organizatioi	ns relying on a current notice regarding disaster assistance check h	nere			
c If the answe	er is "Yes" to question 5a(4), does the foundation claim exemption f	rom the tax because it maintai			
expenditure	responsibility for the grant?	N	//A 🔲 Ye	s No	
If "Yes," at	tach the statement required by Regulations section 53.494	5-5(d)			
6a Did the four	ndation, during the year, receive any funds, directly or indirectly, to	pay premiums on			
a personal t	penefit contract?		Ye	es X No	
<b>b</b> Did the four	ndation, during the year, pay premiums, directly or indirectly, on a p	personal benefit contract?			6b X
	6b, file Form 8870				
	during the tax year, was the foundation a party to a prohibited tax s		Ye	es X No	
b If "Yes," did	the foundation receive any proceeds or have any net income attribu				7b
Part VIII	Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, Foundation Ma	nagers, Higniy	y	
1 List all office	ers, directors, trustees, foundation managers and their	compensation.			
		(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans	(e) Expense
	(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	account, other allowances
Harriet	V Barker	President/Dir	<del></del>	- Component	
	lena Way				
Boulder,		0.00	0.	0.	0.
	er M Hunter III	Director			
3035 Gal	ena Way				
Boulder,	CO 80303	0.00	0.	0.	0.
<del></del>					
		ļ			
		luded on time 4) 16 mans	anton (INIONE II		
2 Compensar	tion of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) Expense
(a) Nam	ne and address of each employee paid more than \$50,000	hours per week	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances
NTC	)NTE	devoted to position		compensation	allowalices
INC	ONE				
					1
	• •			_	
		1			
-		1			
			-		
**· <del>=</del>					
Total number of	other employees paid over \$50,000			<b>D</b>	0
-				Form !	<b>990-PF</b> (2010)

Form 990-PF (2010)

Total. Add lines 1 through 3

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations, se	e instructions )
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		<del></del>
a	Average monthly fair market value of securities	1a	36,424.
b	Average of monthly cash balances	1b	36,424. 5,228.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	41,652.
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	41,652.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	625.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	41,027.
6	Minimum investment return. Enter 5% of line 5	6	2,051.
P	art XI Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here   and do not complete this part.)	id certain	
1	Minimum investment return from Part X, line 6	1	2,051.
2a	Tax on investment income for 2010 from Part VI, line 5		<u>-</u>
b	Income tax for 2010. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	60.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,991.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	1,991.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	1,991.
P	art 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	1,750.
b	Program-related investments - total from Part IX-B	1b	0.
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	1,750.
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	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	1,750.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	ualifies for th	ne section
	4940(e) reduction of tax in those years.		

Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d</b> ) 2010
1 Distributable amount for 2010 from Part XI,				
line 7				1,991.
2 Undistributed income, if any, as of the end of 2010				
a Enter amount for 2009 only			0.	
b Total for prior years:				
		0.		
3 Excess distributions carryover, if any, to 2010:				
a From 2005				
<b>b</b> From 2006 627.				
¢ From 2007				
d From 2008 4,416.				
e From 2009 5,242.	10 205			
f Total of lines 3a through e	10,285.		-	
4 Qualifying distributions for 2010 from				
Part XII, line 4: ► \$ 1,750.			0.	
a Applied to 2009, but not more than line 2a				
<b>b</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 2010 distributable amount	- 0.			1,750.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2010	241.			241.
(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:	-			
2 Corpus Add lines 3f, 4c, and 4e Subtract line 5	10,044.			
<b>b</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 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			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)	0.			
8 Excess distributions carryover from 2005	_			
not applied on line 5 or line 7	0.	-		<del>-</del> · · <del>- ·</del>
9 Excess distributions carryover to 2011	10 044			
Subtract lines 7 and 8 from line 6a	10,044.			
10 Analysis of line 9: a Excess from 2006 386.				
b Excess from 2007				
c Excess from 2008 4,416.				
d Excess from 2009 5, 242.				
e Excess from 2010				
	<del></del>			Form <b>990-PF</b> (2010)

		<u>ly Foundati</u>			<u> 81188 Page 10</u>
Part XIV Private Operating F	oundations (see in	structions and Part VII	A, question 9)	N/A	
1 a If the foundation has received a ruling of	r determination letter that	t it is a private operating			
foundation, and the ruling is effective for	r 2010, enter the date of t	the ruling	<b>▶</b>		
<b>b</b> Check box to indicate whether the found	lation is a private operatir	ng foundation described i		4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years	T	
income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
investment return from Part X for					
each year listed					
<b>b</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>b</b> "Endowment" alternative test - enter	·				<del></del>
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)			<del></del>		
(3) Largest amount of support from				1	
an exempt organization					
(4) Gross investment income  Part XV   Supplementary Info	rmation (Cample	to this port only	if the foundation	had \$5 000 ar m	oro in occoto
at any time during t	•	•	ir the foundation	nad \$5,000 or m	ore in assets
		1130 000013.7			
1 Information Regarding Foundatio	-	4b 00/ -44b- 4-4-l		fadak.a.a b.afa iba ala	af an., ta.,
a List any managers of the foundation wheyear (but only if they have contributed meaning that it is a supplied to the foundation of the foundation when it is a supplied to the foundation of the foundation when it is a supplied to the foundatio			ributions received by the	toundation before the cit	ise of any tax
. ,	1010 παη ψο,000). (000 3	(4)(2).)			
None	100/ 114				
b List any managers of the foundation who other entity) of which the foundation has			or an equally large portion	on of the ownership of a p	partnership or
• •	ya 1070 or greater interes	J.,			
None					
2 Information Regarding Contributi		• • • •	-		
Check here <b>X</b> if the foundation of the foundation makes gifts, grants, etc.	•	•	-	•	
	•			miplete itellis za, u, u, ali	<del></del>
a The name, address, and telephone number	per of the person to who	m applications should be	addressed:		
L. The farms in subset and the second			and palude		
b The form in which applications should b	e suomitteo ano informa	tion and materials they sh	iouia include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	s, such as by geographic	al areas, charitable fields,	kınds of institutions, or o	other factors:	,
023601 12-07-10					Form <b>990-PF</b> (2010)

Part XV Supplementary Informatio	n (continued)			-
3 Grants and Contributions Paid During the Recipient	If recipient is an individual.			
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year CU College of Music 301 UCB Boulder, CO 80309	None	501(c)(3) Charity	Charitable Contribution	1,000.
Colorado Shakespeare Festival 277 UCB Boulder, CO 80309	None	501(c)(3) Charity	Charitable Contribution	250.
Expand Beyond 1777 Broadway Boulder, CO 80302	None	501(c)(3) Charity	Charitable Contribution	500.
Total		<u> </u>	▶ 3a	1,750.
b Approved for future payment				
None				
Total		L	<b>▶</b> 3b	0.
Total 023611 12-07-10				orm <b>990-PF</b> (2010)

Part XVI-A	Analysis of	Income-Producing	<b>Activities</b>

nter gross amounts unless otherwise indicated.	Unrelated	business income		ded by section 512, 513, or 514	(e)
	(a) Business code	(b) Amount	Exclu- sion code	( <b>d)</b> Amount	Related or exempt function income
Program service revenue:	Code	<del>_</del>			
a	<del></del>				
	i 1				
	1 1			<del></del>	
e				<u> </u>	
g Fees and contracts from government agencies					
g Fees and contracts from government agencies  Membership dues and assessments				··	
Interest on savings and temporary cash		· · · · · · · · · · · · · · · · · · ·			
investments					
Dividends and interest from securities			14	3,437.	
Net rental income or (loss) from real estate:		· · · · · · · · · · · · · · · · · · ·	<del> </del>	<u> </u>	
a Debt-financed property		·		******	
b Not debt-financed property	-				
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
Gain or (loss) from sales of assets other					
than inventory			18	<4,559.	<b>&gt;</b>
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory					
Other revenue:					
a					_
b		· · · · · · · · · · · · · · · · · · ·			
	1				
c					
<u> </u>					
c e		0.		<1,122.	> 0
e Subtotal. Add columns (b), (d), and (e)		0.			> 0
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e)		0.			
e Subtotal. Add columns (b), (d), and (e)  Total Add line 12, columns (b), (d), and (e)  See worksheet in line 13 instructions to verify calculate	ions.)		cemp	13 _	
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activi	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activi	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activities. ine No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activi ine No. Explain below how each activity for whit	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activi ine No. Explain below how each activity for whit	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activi ine No. Explain below how each activity for whit	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) ee worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activities. ine No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculate Part XVI-B Relationship of Activitions No. Explain below how each activity for white	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122
c d e Subtotal. Add columns (b), (d), and (e) Total Add line 12, columns (b), (d), and (e) Eee worksheet in line 13 instructions to verify calculate  Part XVI-B Relationship of Activitions to the columns (b).  Explain below how each activity for white the columns (b).	ties to the Acco	mplishment of Ex		13 _ t Purposes	<1,122

Part .	KVII ]	Information Re Exempt Organ	-	sters To a	and Transa	ictions a	nd Relations	inips With N	Ioncharitable	Ð	
1 Did	the oro	anization directly or indir		of the followin	ng with any othe	r organizatio	n described in sec	tion 501(c) of		Yes	No
	-	other than section 501(c)			-			11011 30 1(0) 01			
	•	rom the reporting found				milical organi	izations.				
	Cash	rom the reporting loanua	ation to a noncharital	DIG GAGITIPE OF	gamzanon or.				1a(1)		x
	Other	accate							1a(2)		X
٠,		assers actions:							14/2/		
		of assets to a noncharital	ible evernt organizat	tion					16(1)		X
٠,		ases of assets from a no	· -						1b(2)		X
٠,,		of facilities, equipment,	•	n yanızatıon					1b(3)		Х
		ursement arrangements							1b(4)		X
٠,		or loan guarantees							1b(5)		X
		mance of services or me	mhershin or fundras	eina ealicitatio	nne				1b(6)	<del> </del>	X
٠,		facilities, equipment, ma	•	•					10		X
	•	er to any of the above is	- '			h) should alv	vavs show the fair	market value of th		sets.	
		given by the reporting fo		_		-				,	
		the value of the goods,					•	_			
(a) Line n	<del></del>	b) Amount involved			e exempt organi	zation	(d) Descriptio	n of transfers, transa	actions, and sharing a	rangeme	ents
			<del></del>	N/A							
-											
			-					<u> </u>	<del></del>		
					·						
							_				
							_				
							-				
	_		_	· · · · · · · · · · · · · · · · · · ·							
							<del> </del>				
		dation directly or indirect				empt organi	zations described			TV.	ON [
		501(c) of the Code (other	• •	)(3)) or in sect	tion 5277				Yes	LA	☐ INO
<b>b</b> 11	res, co	mplete the following sch (a) Name of org			(b) Type of or	rnanization		(c) Description of	of relationship		
		N/A	janization		(b) Type of or	gamzanon		(d) Doddingston o	, rolationomp		
		N/B_		·-··	_						
									<u> </u>		
		7									
		penalties of perjuy, I declar		his return, includ	ling accompanying	schedules an	d statements, and to t	ne best of my knowle	edge and belief, it is t	ue, corre	et,
Sign		omplete Declaration of steps	arer (other than sexpayer	or fiduciary) is b	ased on all informa	ation of which	preparer has any know	rieage / L	10-11		
Here			NW				\	1/17	20 U		
		Signature of officer or tru		,		Date		Title (			
		Print/Type preparer's na	ame	Preparer's s	ignature		Date	Check X	If PTIN		
_				1/0	10		//	self- employed			
Paid		JAY BOYD			Deg !		1///1///		<u> </u>		
Prepa		Firm's name ► W .	Jay Boyd,	CPA,	PC		-	Fırm's EIN ▶	i		
Use (	Jnly	Franka addissa a di =		<u>-</u>	<u> </u>		000	-			
		Firm's address ► 17			St., St	iite l	000	0	202 750	272	. 7
		De	nver, CO	80710				Phone no.	<u> 303-759-</u>	<u> </u>	<u>, / </u>

023622 04-26-11

Form **990-PF** (2010)

Form 8688 Explanation for Extension Statement 5

Explanation

Part IV   Capital Gains and Los	ses for Tax on Investment Income				
(a) List and 2-story bri	describe the kind(s) of property so ick warehouse; or common stock, 2	ld, e.g., real estate, 200 shs. MLC Co.	(b) How acquired P - Purchase D - Donation	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
1a Boardwalk Pipe:	line		P	10/30/09	01/05/10
b Boardwalk Pipe:			P	10/30/09	01/05/10
c Fiduciary Clay			P	01/05/10	04/01/10
d Diamond Offshor			P	<del></del>	<u>07/23/10</u>
e Prospect Capita			P		11/24/10
1 Prospect Capita	<u>al</u>	<u> </u>	P	03/05/10	
g Cushing MLP			P	07/23/10	12/08/10
h	<del></del>			ļ	
			<del></del>	<del></del>	
<u>k</u>				<del></del>	
					·
<u>m</u>		· ·		<del></del>	
<u>n</u> o			<del></del>	<del> </del>	
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	(h	) Gain or (loss) blus (f) minus (g)	<del></del>
15 024	(UI allowable)	<u> </u>	(e) t	ilus (I) Illilius (y)	2 1 5 0
a 15,034.		12,876. 7,733.			2,158. 1,288.
b 9,021. c 23,121.		22,256.			8 <u>6</u> 5.
d 23,121. d 14,982.		22,236.			<7,943.>
$\frac{14,382}{e}$ 9,720.		11,293.			<1,573.>
f 3,888.		5,014.			$\frac{\langle 1, 3, 5, \rangle}{\langle 1, 126, \rangle}$
g 16,698.		14,926.			1,772.
h		12,3200			
1					
k					
1					
<u>m</u>					
<u>n</u>					
0					<del></del>
Complete only for assets showing	g gain in column (h) and owned by	<del></del>	(I) Los	sses (from col. (h))	
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (i) over col. (j), if any	but n	of col. (h) gain over not less than "-0-")	COI. (K),
a					2,158.
b					1,288.
С					<u>865.</u>
<u>d</u>					<7,943.>
<u>e</u>	<u></u>		···		<u>&lt;1,573.</u> >
f		ļ			<u>&lt;1,126.</u> >
9	<del></del>	<del>-</del>			1,772.
<u>h</u>		<del></del>		<del>-</del> -	
<u>'</u>		<del> </del>		<del></del>	<del></del>
k					_
1			<del></del>		
m					
n	<del></del>		<del></del>		
0					
Capital gain net income or (net cap	outal loss) [ If gain, also ente	r in Part I, line 7 0-" in Part I, line 7	,		<4,559.>
		`	2		<u> </u>
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, of if (loss), enter "-0-" in Part I, line 8	column (c).	nd (6):	3	_N/A	

Form 990-PF Dividend	ds and	Inter	est from	Secui	rities	Statement	1	
Source	Gross Amount			ital Gains ividends	Column (A) Amount			
JMS	3,437.			0.	3,437.			
Total to Fm 990-PF, Part I,	ln 4	3,437.			0.	3,437.		
Form 990-PF	Ac	counti	ng Fees			Statement	2	
Description	Expe	(a) (b) enses Net Inve Books ment Inc		rest-	(c) Adjusted Net Incom			
Accounting		400.	400.				0.	
	400.		400				_	
To Form 990-PF, Pg 1, ln 16b		400.		400.			0.	
To Form 990-PF, Pg 1, ln 16b = Form 990-PF		400.	es	400.		Statement	3	
Form 990-PF	Expe	Taxo	(b)	vest-	(c) Adjusted Net Income	(d) Charital	3 ble	
Form 990-PF  Description	Expe	Taxo a) nses	(b)	vest-	Adjusted	(d) Charital	3 ble	
=	Expe	Taxo a) nses Books	(b)	rest-	Adjusted	(d) Charital	3 ble	
Form 990-PF  Description Form 990-PR	Expe	Taxonses Books 28.	(b)	rest- icome	Adjusted	(d) Charital	3 ble	
Form 990-PF  Description Form 990-PR  To Form 990-PF, Pg 1, ln 18  Form 990-PF	Expe	Taxonses Books 28.	(b) Net Inv	rest- acome 28.	Adjusted	(d) Charital e Purpose	3 blees 0. 0.	
Form 990-PF  Description Form 990-PR  To Form 990-PF, Pg 1, ln 18	Expe Per	Taxonses Books 28.	(b) Net Inv	rest- acome 28.	Adjusted Net Income	(d) Charital Purpose Statement	3 0. 0.	

Form-3868 (Rev 1-2011)						Page 2	
If you are filing for an Additional (Not Automatic) 3-Mor	nth Extension,	complete only Part II and check this t	оох	,	<b>&gt;</b>	X	
Note. Only complete Part II if you have already been grante			d Form	8868.			
If you are filing for an Automatic 3-Month Extension, co							
Part II Additional (Not Automatic) 3-Mor	ith Extensio	n of Time. Only file the original (no				<del></del> -	
Type or Name of exempt organization	Name of exempt organization					number	
print Barker-Hunter Family Four	Barker-Hunter Family Foundation				84-1481188		
File by the extended Number, street, and room or suite no. If a P O	box, see instruc	tions					
due date for C/O W. Jay Boyd, CPA - 1	777 S. H	arrison Street #100	0		_		
return See City, town or post office, state, and ZIP code. F	or a foreign add	dress, see instructions.					
Denver, CO 80231		<u> </u>			_		
_							
Enter the Return code for the return that this application is	for (file a separa	ite application for each return)				0 4	
Application	Return	Application		-		Return	
ls For	Code	Is For				Code	
Form 990	01				,		
Form 990-BL	02	Form 1041-A				08	
Form 990-EZ	03	Form 4720				09	
Form 990-PF	04	Form 5227				10	
Form 990-T (sec 401(a) or 408(a) trust)	05	Form 6069				11	
Form 990-T (trust other than above)	06	Form 8870				12	
STOP! Do not complete Part II if you were not already gr		natic 3-month extension on a previo	usly file	d Form 886	8		
Harriet V Ba		11 00000					
• The books are in the care of ▶ 3035 Galena	Way, Bo						
Telephone No. ► 303-494-0642		FAX No. ►			_		
<ul> <li>If the organization does not have an office or place of but</li> </ul>					•		
If this is for a Group Return, enter the organization's four							
box If it is for part of the group, check this box		ach a list with the names and EINs of a	ll memb	ers the exter	nsion is	ior.	
I request an additional 3-month extension of time until	·	ber 15, 2011.					
For calendar year 2010, or other tax year beginning		, and ending	Final r				
6 If the tax year entered in line 5 is for less than 12 mor	itns, check reas	on: L Initial return L	J FINALI	eturri			
Change in accounting period  State in detail why you need the extension							
· · · <u>—</u> —		#-:	<u> </u>		- <del></del>		
Exempt Organization is missing informations complete and accurate return	rion trom ou	TSIDE SOURCES THAT IS Reeded.	or	der to ti	le_a		
	<del></del>						
8a If this application is for Form 990-BL, 990-PF, 990-T,	4720. or 6069. e	enter the tentative tax, less any			-		
nonrefundable credits. See instructions.						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 overpaym							
previously with Form 8868.			8b	\$		0.	
c Balance due. Subtract line 8b from line 8a. Include y	our payment wi	th this form, if required, by using					
EFTPS (Electronic Federal Tax Payment System). See	e instructions.		8c	\$		0.	
	_	nd Verification					
Under penalties of perjury, I declare that I have examined this form, it is true, correct, and complete, and that I am authorized to prepare	, including accom e this form	panying schedules and statements, and to t	he best o	f my knowlede	ge and be	lief,	
Signature > William Title	e ► CPA		<u>Date</u>	> 8/3	[11_		
				Form 8	<b>868</b> (Re	v. 1-2011)	