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Form **990-PF**Department of the Treasury

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.

2011

Internal Revenue Service For calendar year 2011 or tax year beginning and ending A Employer identification number Name of foundation 20-3313453 OLIVIA JONES FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 303-830-1120 303 EAST 17TH AVE, SUITE 600 City or town, state, and ZIP code C If exemption application is pending, check here DENVER, CO 80203 initial return of a former public charity Initial return D 1. Foreign organizations, check here G Check all that apply: Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change H Check type of organization: Section 501(c)(3) exempt private foundation E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust _____ Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J Accounting method: Accrual F If the foundation is in a 60-month termination Other (specify) (from Part II, col. (c), line 16) under section 507(b)(1)(B), check here 636,534. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (d) Disbursements or charitable purposes (cash basis only) (a) Revenue and (b) Net investment (c) Adjusted net (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) expenses per books income ıncome N/A 0. 1 Contributions, gifts, grants, etc., received 2 Check X If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 1,248 1,248. STATEMENT 3 15,676. 15,087. STATEMENT Dividends and interest from securities 5a Gross rents PAININED INOV 0 6 2012 b Net rental income or (loss) 12,130. 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 286,697. 12,130. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 29,054 28,465 Total. Add lines 1 through 11 0. 0 0. Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits Expenses 16a Legal fees 1,545. 3,090 1,545 STMT 3 b Accounting fees STMT 4 769 9,769. 0. c Other professional fees Operating and Administrative 17 Interest 244. STMT 5 244. 18 19 Depreciation and depletion 2 4 201 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 47 12. STMT 23 Other expenses 24 Total operating and administrative 1,801. 13,406 11,605. expenses. Add lines 13 through 23 9,000. 9,000 Contributions, gifts, grants paid 26 Total expenses and disbursements. 22,406 11,605 10,801. Add lines 24 and 25 27 Subtract line 26 from line 12: 6,648 a Excess of revenue over expenses and disbursements 16,860. b Net investment income (if negative, enter -0-) N/A C Adjusted net income (if negative, enter -0-)

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Form **990-PF** (2011)

LHA For Paperwork Reduction Act Notice, see instructions.

<u>Fo</u>	rm 99	OLIVIA JONES FAMILY	FOU!	NDATION	20-	3313453 Page 2
F	Part	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	ļ	Beginning of year	End o	
_	_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	ŀ	120 424	FC 244	F.C. 344
	1	Savings and temporary cash investments		139,434.	56,344.	56,344.
	3	Accounts receivable >				
	۱.	Less: allowance for doubtful accounts				
	4	Pledges receivable ► Less: allowance for doubtful accounts ►				
	_	Grants receivable		-		
	5	Receivables due from officers, directors, trustees, and other	ŀ			
	"					
	7	disqualified persons Other notes and loans receivable	ŀ			
	′	Less: allowance for doubtful accounts				
m	۰	Inventories for sale or use				
Assets		Prepaid expenses and deferred charges	ł			
As		Investments - U.S. and state government obligations	ł			
	1		7	466,753.	555,755.	580,190.
	1	Investments - corporate stock STPT	' ŀ	400,733.	333,133.	300,130.
	1 1	Investments - land, buildings, and equipment basis	ŀ			
	''					
	12	Less accumulated depreciation Investments - mortgage loans				
	13	Investments - other	-			
	14	Land, buildings, and equipment basis	ļ			
	'"	Less accumulated depreciation				
	15	Other assets (describe	1			
	"	Onioi dosers (deserring >	—′ ⊦			
	16	Total assets (to be completed by all filers)		606,187.	612,099.	636,534.
_	1	Accounts payable and accrued expenses		00072071	012,0330	030/3341
	18	Grants payable	-			
Ø	19	Deferred revenue	-			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons	-			
iđ	21	Mortgages and other notes payable	-			
Ë		Other liabilities (describe	۱ (
	23	Total liabilities (add lines 17 through 22)		0.	0.	
		Foundations that follow SFAS 117, check here				
		and complete lines 24 through 26 and lines 30 and 31.				
Ses	24	Unrestricted				
<u>a</u>	25	Temporarily restricted				
Ва	26	Permanently restricted				
밀		Foundations that do not follow SFAS 117, check here	X.			
Ę		and complete lines 27 through 31				
S	27	Capital stock, trust principal, or current funds		0.	0.	
Set	28	Paid-in or capital surplus, or land, bldg., and equipment fund		0.	0.	
Net Assets or Fund Balances	29	Retained earnings, accumulated income, endowment, or other fund	ds _	606,187.	612,099.	
Š	30	Total net assets or fund balances		606,187.	612,099.	
_	31	Total liabilities and net assets/fund balances		606,187.	612,099.	
P	art	Analysis of Changes in Net Assets or Fu	nd Ba	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a	a), line :	30		
•		it agree with end-of-year figure reported on prior year's return)	,,		1	606,187.
2		amount from Part I, line 27a			2	6,648.
		r increases not included in line 2 (itemize)			3	0.
		lines 1, 2, and 3			4	612,835.
		eases not included in line 2 (itemize) UNREALIZED	LOSS	ON INVESTMEN		736.
		net assets or fund balances at end of year (line 4 minus line 5) - Pa			6	612,099.
						Form 990-PF (2011)

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L	Part IV Capital Gains a	and Losses for Tax on In	vestmen	t Income						
		ibe the kind(s) of property sold (e.g. rehouse; or common stock, 200 shs		_	(b) H	low acqu - Purcha - Donati	uired (ease on) Date a (mo., da	icquired By, yr.)	(d) Date sold (mo., day, yr.)
10	WELLS FARGO AD	VISORS				P	v	ARI	วบร	VARIOUS
_	WELLS FARGO AD	VISORS				P	v	ARIC	วบร	VARIOUS
_(c ROYAL ALLIANCE	ASSOCIATES INC				P	V	ARI	12/11/11	
	ROYAL ALLIANCE					P	V	ARI	OUS	12/12/11
_	e CAPITAL GAINS 1	DIVIDENDS			<u> </u>					
_	(e) Gross sales price	(f) Depreciation allowed (or allowable)		st or other basis expense of sale					in or (loss (f) minus	
_4	167,258.			170,91	4.					<u>-3,656.</u>
_1	55,456.			43,28						12,174.
_(859.			69						167.
_	61,549.		_	59,67	9.					<u> 1,870.</u>
	<u>1,575.</u>									<u>1,575.</u>
_	Complete only for assets showing	g gain in column (h) and owned by t	the foundation	on 12/31/69			(1) (ains (Co	ol. (h) gain	minus
	(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		cess of col. (I) col. (J), if any					ot less that from col. (h))
_8	1									<u>-3,656.</u>
_t	b									12,174.
_	c		_							167.
_(d				ļ					<u>1,870.</u>
_(e									<u>1,575.</u>
2	Capital gain net income or (net cap	ortal loss) { If gain, also enter If (loss), enter -0-			}	2				12,130.
3	Net short-term capital gain or (los	s) as defined in sections 1222(5) an	d (6):							
	If gain, also enter in Part I, line 8, o		- (-)-] [
_	If (loss), enter -0- in Part I, line 8				لل	3			N/A	
L	Part V Qualification U	nder Section 4940(e) for	Reduced	lax on Net	Inve	estme	ent Inco	me		
(F	or optional use by domestic private	foundations subject to the section 4	1940(a) tax on	net investment in	come.	.)				
lf ·	section 4940(d)(2) applies, leave th	is nart hlank								
		•								
		ion 4942 tax on the distributable am		=	iod?					Yes X No
		fy under section 4940(e). Do not co								
1	Enter the appropriate amount in e	ach column for each year; see instru	otions before	making any entrie				ī		(4)
	Base periód years	(b) Adjusted qualifying dist	ributione	Net value of nor	(C)	tabla_uc	a accate	,	Distrib	(d)
	Calendar year (or tax year beginnin	<u> </u>		Net value of Hor	ICHAH				col. (b) alv	ided by col. (c))
_	2010		6,553.				,874.			.057036
_	2009		5,945.				<u>,398.</u>			.060986
	2008		1,594.				<u>,287.</u>			.052197
_	2007		5,625.			426	,072.			.060142
_	2006		1,794.							
_	- A 1 of long 4 on long 44									220261
	Total of line 1, column (d)							2	<u> </u>	.230361
3		-year base period - divide the total o	in line 2 by 5,	or by the number	ot yea	ırs				0.4.6.07.0
	the foundation has been in existen	ice if less than 5 years						3		.046072
4	Enter the net value of noncharitable	e-use assets for 2011 from Part X, I	ıne 5					4		657,877.
5	Multiply line 4 by line 3							5		30,310.
6	Enter 1% of net investment incom	e (1% of Part I, line 27b)						6		<u>169.</u>
7	Add lines 5 and 6							7		30,479.
8	Enter qualifying distributions from	Part XII, line 4						8		10,801.
	If line 8 is equal to or greater than See the Part VI instructions.	line 7, check the box in Part VI, line	1b, and comp	lete that part using	a 1%	6 tax rate	e.			

	n 990-PF (2011) OLIVIA JONES FAMILY FOUNDATION 20-33:			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - se	<u>e instr</u>	uctio	ns)
18	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 instructions)		_	
t	Domestic foundations that meet the section 4940(e) requirements in Part V, check here		3	<u>37.</u>
	of Part I, line 27b			
	c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			_
	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			<u>0.</u>
	Add lines 1 and 2			<u>37.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			$\frac{0.}{37.}$
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			<u> </u>
6	Credits/Payments:			
	a 2011 estimated tax payments and 2010 overpayment credited to 2011 Several foreign organizations tox withhold at course			
	D Exempt foreign organizations - tax withheld at source Tox and with application for extension of time to file (Form 9969)			
	: Tax paid with application for extension of time to file (Form 8868) 4. Backup withholding exceptions of time to file (Form 8868)			
	1 Backup withholding erroneously withheld Total gradita and sayments. Add lance for through 6d.			Λ
	Total credits and payments. Add lines 6a through 6d Figure and each total underpowered to street the Check here. If Form 2000 to attached		_	0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9		3	37.
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid			31.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax			
	art VII-A Statements Regarding Activities			
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
•••	any political campaign?	1a	1.00	X
ь	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or	10		
	distributed by the foundation in connection with the activities.			
c	Did the foundation file Form 1120-POL for this year?	1c		х
	I Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:	10		
Ĭ	(1) On the foundation. > \$ 0 . (2) On foundation managers. > \$ 0 .	ļ		
e	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	İ		
Ī	managers. ►\$ 0.			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		х
Ī	If "Yes," attach a detailed description of the activities.			
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		_x_
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		х
	olf "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 that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year?	7	X	
	If "Yes," complete Part II, col. (c), and Part XV.			
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)	_	}	
	CO	_		
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
	of each state as required by General Instruction G? If "No," attach explanation	8b	Х	
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 2011 or the taxable year beginning in 2011 (see instructions for Part XIV)? If "Yes," complete Part XIV	9		X
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresses	10		\mathbf{x}^{-}

had not been removed from jeopardy before the first day of the tax year beginning in 2011?

orm 990-PF (2011) OLIVIA JONES FAMILY FOUN			<u> 20-33134</u>	<u> 153</u>	Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	ued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (sectio	n 4945(e))?	Ye	es X No		Ì
(2) Influence the outcome of any specific public election (see section 4955); (or to carry on, directly or indire	ectly,			ŀ
any voter registration drive?		Ye	es X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Ye	s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization					ľ
509(a)(1), (2), or (3), or section 4940(d)(2)?			s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary.	or educational purposes, or f				
the prevention of cruelty to children or animals?	,		s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i				
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h				-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption f		ined			
expenditure responsibility for the grant?		//A □ Y€	s No	-	
If "Yes," attach the statement required by Regulations section 53 494		1/23		Ì	
6a Did the foundation, during the year, receive any funds, directly or indirectly, to a personal benefit contract?	pay premiums on		es X No		
•	annonal hanafet anntracta	16	S LAL NO	6b	x
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	Dersonal Denem Contract?		-	OU	<u> </u>
If "Yes" to 6b, file Form 8870	-h-lk 4		es X No		
7a At any time during the tax year, was the foundation a party to a prohibited tax s		Y6		76	
b If 'Yes,' did the foundation receive any proceeds or have any net income attrib		Lliebl	N/A	7b	
Part VIII Information About Officers, Directors, Trust Paid Employees, and Contractors	ees, roundation Ma	inagers, migni	y 		
List all officers, directors, trustees, foundation managers and their	compensation.				
(-) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (if not paid,	(d) Contributions to employee benefit plans	(e)	Expense ount, other
(a) Name and address	to position	enter -0-)	and deferred compensation	all	owances
JEFFREY W. BARKER	PRESIDENT, TR	EASURER,	DIRE		
303 EAST 17TH AVE, SUITE 600					
DENVER, CO 80203	5.00	0.	0.		0.
LISSA HARRIS	SECRETARY				
303 EAST 17TH AVE, SUITE 600	1				
DENVER, CO 80203	5.00	0.	О.	,	0.
OLIVIA JONES	SPECIAL DIREC	TOR			
100 ADAMS STREET					
DENVER, CO 80224	5.00	0.	0.		0.
DAVID G. JONES, JR.	SPECIAL DIREC		<u> </u>		
PO BOX 9883					
ASPEN, CO 81612	5.00	0.	О.		0.
2 Compensation of five highest-paid employees (other than those inc				'	<u></u>
	(b) Title, and average		(d) Contributions to employee benefit plans and deferred		Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation		ount, other owances
NONE	Loroida to position		20111190111111111	<u> </u>	
ATVATE	†				
				<u> </u>	
	1				
	1				
		 			
	†				
			 	+	
	1				
Total number of other employees paid over \$50,000		l		ــــــــــــــــــــــــــــــــــــــ	<u> </u>

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Part VIII Information About Officers, Directors, Trustees, Foundate Paid Employees, and Contractors (continued)	tion Managers, Highly	
3 Five highest-paid independent contractors for professional services. 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		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant statisti number of organizations and other beneficiaries served, conferences convened, research papers produced to the conference of the confere	uced, etc.	Expenses
DONATIONS TO PUBLIC CHARITIES APPROVED BY DI	RECTORS AND	
RELATED EXPENSES		00 251
		22,371.
2		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year on li	ines 1 and 2.	Amount
N/A		
<u> </u>		
All other program-related investments. See instructions.		
An outer program ายเลเอน แพชองเทยและ อฮอ แเจน นอนเงแจะ ใ		
Additional Absorption		

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	ndations,	see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
·	Average monthly fair market value of securities	1a	603,383.
	Average of monthly cash balances	1b	64,512.
	Fair market value of all other assets	1c	,
d	Total (add lines 1a, b, and c)	1d	667,895.
	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	667,895.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	10,018.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	657,877.
6	Minimum investment return. Enter 5% of line 5	6	32,894.
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.)	d certain	
1	Minimum investment return from Part X, line 6	1	32,894.
2a	Tax on investment income for 2011 from Part VI, line 5		
b	Income tax for 2011. (This does not include the tax from Part VI.)		
C	Add lines 2a and 2b	2c	337.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	32,557.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	32,557.
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	32,557.
P	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
а	Expenses, contributions, gifts, etc total from Part I, column (d), line 26	1a	10,801.
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	10,801.
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	10,801.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	jualifies for	the section

4940(e) reduction of tax in those years.

Part-XIII Undistributed Income (see instructions)

 		·		
	(a) Corpus	(b) Years prior to 2010	(c) 2010	(d) 2011
1 Distributable amount for 2011 from Part XI,		·		
line 7				32,557.
2 Undistributed income, if any, as of the end of 2011			•	
a Enter amount for 2010 only			0.	
b Total for prior years:				
3 Excess distributions carryover, if any, to 2011:		0.		
a From 2006 11,538.				
b From 2007 4,427.				
c From 2008 1,472.				
d From 2009 6,641.				
e From 2010 5,013.				
f Total of lines 3a through e	29,091.			
4 Qualifying distributions for 2011 from	25,051.	·=		
Part XII, line 4: ► \$ 10,801.				
a Applied to 2010, but not more than line 2a		İ	0.	
b Applied to undistributed income of prior			V•	
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus			-	
(Election required - see instructions)	0.			
d Applied to 2011 distributable amount			<u> </u>	10,801.
e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2011	21,756.			21,756.
(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:				
& Corpus Add lines 3f, 4c, and 4e Subtract line 5	7,335.			
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 2010. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2011. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2012				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 2006				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2012.				
Subtract lines 7 and 8 from line 6a	7,335.			
O Analysis of line 9:				
a Excess from 2007				
b Excess from 2008				
c Excess from 2009 2,322.				
d Excess from 2010 5,013.				
e Excess from 2011				Form 990-PF (2011)

Part XIV Private Operating F	JONES FAMIL			20-33	13453 Page 10
	<u></u>		I-A, question 9)	N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective fo	•	•	· ▶└─		1404 1451
b Check box to indicate whether the found		ig toundation described I		4942(j)(3) or 49)42(j)(5) I
2 a Enter the lesser of the adjusted net	Tax year	/b) 2010	Prior 3 years	(4) 2008	(a) Total
income from Part I or the minimum	Irn from Part X for I Ibutions from Part XII, Iyear listed		(6) 10141		
	t return from Part X for listed e 2a distributions from Part XII,				
each year listed	-				
b 85% of line 2a					
• •					
line 4 for each year listed			_		
•					
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
(1) Value of all assets					<u> </u>
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter					
2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:	,				
(1) Total support other than gross					
investment income (interest,			İ		
dividends, rents, payments on					
securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public					
and 5 or more exempt					
organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info	mation (Comple	te this part only	if the foundation	on had \$5,000 or mo	ore in assets
at any time during t					
1 Information Regarding Foundation	n Managers:				
a List any managers of the foundation wh	o have contributed more	than 2% of the total cont	ributions received by t	the foundation before the clos	se of any tax
year (but only if they have contributed n					•
NONE					
b List any managers of the foundation who	o own 10% or more of th	e stock of a corporation (or an equally large po	rtion of the ownership of a pa	artnership or
other entity) of which the foundation has	s a 10% or greater interes	t.			
NONE					
2 Information Regarding Contributi	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🗶 if the foundation o	nly makes contributions t	o preselected charitable	organizations and doe	s not accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	iduals or organizations u	nder other conditions,	, complete items 2a, b, c, and	<u>d </u>
a The name, address, and telephone numl	ber of the person to whom	n applications should be	addressed:		
					
b The form in which applications should b	e submitted and informat	ion and materials they st	nould include:		
c Any submission deadlines:					
d Any restrictions or limitations on awards	euch as hy gasgraphics	l areas charitable fields	kinds of institutions of	or other factors:	
d Any restrictions or limitations on awards	i, audii aa by yeoyiapilloa	ii ai cao, chai nable lielus,	rango of monutions, (or other lacture,	
					222 55

Part XV Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, Recipient Foundation show any relationship to Purpose of grant or Amount any foundation manager status of contribution Name and address (home or business) or substantial contributor recipient a Paid during the year ANIMAL WELFARE INSTITUTE N/A PRIVATE TO REDUCE PAIN & FEAR 900 PENNSYLVANIA AVE SE ASSOCIATION INFLICTED ON ANIMALS WASHINGTON, DC 20003 BY HUMANS 4,500. INTERNATIONAL RESCUE COMMITTEE N/A PRIVATE TO WORK WITH PEOPLE 122 EAST 42ND STREET ASSOCIATION AFFECTED BY ARMED NEW YORK, NY 10168 CONFLICT WORLD 4,500. Total ▶ 3a 9 000 b Approved for future payment NONE

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Total

Part XVI-A

OLIVIA JONES FAMILY FOUNDATION

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
a	_				
b	_				
C	_				
d			<u> </u>		
e					
f					
g Fees and contracts from government agencies					
2 Membership dues and assessments					
3 Interest on savings and temporary cash				-	
investments			14	1.248.	
4 Dividends and interest from securities		-	14	1,248. 15,676.	
5 Net rental income or (loss) from real estate:					
a Debt-financed property			1		· · <u>-</u>
b Not debt-financed property			1		
6 Net rental income or (loss) from personal					
property					
7 Other investment income			+ -		
	-		+ -		
8 Gain or (loss) from sales of assets other			18	12 120	
than inventory			1 그이	12,130.	
9 Net income or (loss) from special events	-		+	-	
0 Gross profit or (loss) from sales of inventory	-		+		
1 Other revenue:	1				
a	_		+ +		
b	i i		+ -		·
C			 		
d	_		+-+		
e	_	•	1 -	00 054	
2 Subtotal. Add columns (b), (d), and (e)		0.	<u>, </u>	29,054.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	29,054.
See worksheet in line 13 instructions to verify calculations. Part XVI-B Relationship of Activities		omplishment of E	xemp	t Purposes	
Line No. Explain below how each activity for which in					olishment of
▼ the foundation's exempt purposes (other the				· · · · · · · · · · · · · · · · · · ·	,
	-				
 -					
					
				<u> </u>	
			_		

Form **990-PF** (2011)

OLIVIA JONES FAMILY FOUNDATION 20-3313453 Form 990-PF (2011) Page 13 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash 1a(1) X (2) Other assets 1a(2) **b** Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) 1b(3) (3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) X (6) Performance of services or membership or fundraising solicitations 1b(6) c Sharing of facilities, equipment, mailing lists, other assets, or paid employees d If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (c) Name of noncharitable exempt organization (b) Amount involved (a) Line no (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No Yes in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A ned this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this all information of which preparer has any knowledge return with the preparer shown below (see instr.)? Sign Here X Yes Title Date PTIN Date Check [self- employed Paid P00360323 JEFFREY W. BARKER

Form **990-PF** (2011)

303-830-1120

Firm's EIN ► 01-0724563

Preparer

Use Only

SUITE 600

Firm's name ► ANTON COLLINS

Firm's address ▶ 303 EAST 17TH AVENUE,

DENVER, CO 80203

				
FORM 990-PF INTEREST ON SAVINGS	AND TEM	PORARY CASH]	INVESTMENTS	STATEMENT 1
SOURCE				AMOUNT
COMPASS BANK COMPASS BANK - CD WELLS FARGO ADVISORS WELLS FARGO ADVISORS - OID				14. 1,150. 7. 77.
TOTAL TO FORM 990-PF, PART I, LI	INE 3, CO	LUMN A		1,248.
FORM 990-PF DIVIDENDS A	AND INTER	EST FROM SECU	JRITIES	STATEMENT 2
SOURCE	GROSS		PITAL GAINS DIVIDENDS	COLUMN (A) AMOUNT
NON DIVIDEND DISTRIBUTION WF ROYAL ALLIANCE WELLS FARGO ADVISORS		109. 4,039. 13,103.	0. 948. 627.	109. 3,091. 12,476.
TOTAL TO FM 990-PF, PART I, LN 4	1	17,251.	1,575.	15,676.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT 3
	(A) KPENSES ER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
ACCOUNTING FEES	3,090.	1,545.		1,545.
TO FORM 990-PF, PG 1, LN 16B	3,090.	1,545.		1,545.
FORM 990-PF OTHE	ER PROFES	SIONAL FEES		STATEMENT 4
	(A) KPENSES ER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOM	
INVESTMENT FEES	9,769.	9,769.		0.
TO FORM 990-PF, PG 1, LN 16C	9,769.	9,769.		0.

	<u> </u>			
FORM 990-PF	TAX	ES		STATEMENT 5
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEI NET INCOM	
FOREIGN TAXES FEDERAL TAXES	236. 252.	118. 126.	- 	118. 126.
TO FORM 990-PF, PG 1, LN 18	488.	244.		244.
FORM 990-PF	OTHER E	XPENSES		STATEMENT 6
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTEL NET INCOM	
BANK CHARGES MARGIN INTEREST	24. 35.	12. 35.		12.
TO FORM 990-PF, PG 1, LN 23	59.	47.		12.
FORM 990-PF	CORPORAT	E STOCK		STATEMENT 7
DESCRIPTION		вос	OK VALUE	FAIR MARKET VALUE
ROYAL ALLIANCE WELLS FARGO INVESTMENTS			194,367. 361,388.	196,480. 383,710.
TOTAL TO FORM 990-PF, PART I	I, LINE 10B		555,755.	580,190.

Form 8868 (Rev.® 1-2012)				Page 2		
If you are filing for an Additional (Not Automatic) 3-Month Ex	tension, d	complete only Part II and check this	s box	X		
Note. Only complete Part II if you have already been granted an a	automatic	3-month extension on a previously fi	iled Form 8868.			
If you are filing for an Automatic 3-Month Extension, comple			1./ ·			
Part II Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	nal (no copies needed).			
		Enter filer's	identifying number, see ins			
Type or Name of exempt organization or other filer, see instru	ctions		Employer identification numb	per (EIN) or		
print CT TITE TOWNS TOWN TO THE POST TOWN			X 20-331345			
filing your Number, street, and room or suite no. If a P.O. box, s		tions.	Social security number (SSN)		
return See Instructions City, town or post office, state, and ZIP code. For a fo		Irona non instructions				
DENVER, CO 80203	Jieigii aud	ness, see mstructions.				
Enter the Return code for the return that this application is for (file	a senara	te application for each return)		0 4		
and the field from the folding that the approach from the	a copura	application of decirious,				
Application	Return	Application		Return		
ls For	Code	Is For		Code		
Form 990	01					
Form 990-BL	02	Form 1041-A		08		
Form 990-EZ	01	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 granted	l an autor	natic 3-month extension on a prev	iously filed Form 8868.			
LISSA HARRIS						
• The books are in the care of ► 303 E. 17TH AVI	ENUE,	SUITE 600 - DENVE	R, CO 80203			
Telephone No. ► <u>(303)</u> 830-1120		FAX No. 🕨				
If the organization does not have an office or place of business			· · · · · · · · · · · · · · · ·			
If this is for a Group Return, enter the organization's four digit	1					
box If it is for part of the group, check this box		ich a list with the names and EINs of	all members the extension is	for		
· · · · · · · · · · · · · · · · · · ·	NOVEM.	BER 15, 2012	_			
 For calendar year 2011, or other tax year beginning If the tax year entered in line 5 is for less than 12 months, c 	book roop	on Initial return	g Final return	·		
6 If the tax year entered in line 5 is for less than 12 months, c Change in accounting period	HECK IEAS	on mida return _	Final retuin			
7 State in detail why you need the extension						
OUR CLIENT IS ASSEMBLING ADDIT	rtona:	I THEORMATION NEED	ED TO FILE A			
COMPLETE AND ACCURATE FORM 990			<u> </u>			
<u> </u>						
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, 6	or 6069. e	nter the tentative tax, less any				
nonrefundable credits. See instructions	, -		8a \$	0.		
b If this application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated				
tax payments made. Include any prior year overpayment all	=					
previously with Form 8868.			8b \$	0.		
c Balance due. Subtract line 8b from line 8a Include your pa	yment wit	h this form, if required, by using				
EFTPS (Electronic Federal Tax Payment System). See instru			8c \$	0.		
		st be completed for Part II o	-			
Under penalties of perjury, I declare that I have examined this form, includ it is true, correct, and complete, and that I am authorized to prepare this fo	ing accomp irm.	panying schedules and statements, and to	o the best of my knowledge and b	elief,		
Signature ► Title ► (Date >			

Form **8868** (Rev 1-2012)