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Form **990-PF**Department of the Treasury
Internal Revenue Service

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

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

For calendar year 2011 or tax year beginning and ending Name of foundation A Employer identification number 84-1498572 LOWRIE FAMILY FOUNDATION Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 6729 BEAR POINT WAY (303)934-2424 City or town, state, and ZIP code C If exemption application is pending, check here GOLDEN, CO 80403 G Check all that apply: Initial return Initial return of a former public charity D 1 Foreign organizations, check here Final return Amended return Foreign organizations meeting the 85% test, check here and attach computation Address change Name change 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 Accrual J Accounting method: X Cash 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 814, 401. (Part I, column (d) must be on cash basis) ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income income 40,671 Contributions, gifts, grants, etc., received if the foundation is not required to attach Sch. B. Interest on savings and temporary cash investments 71,502. 71,502.STATEMENT 71,502 Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 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 112,173 71,502 71,502 12 Total. Add lines 1 through 11 0 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wag 15 Pension plans, employee benefits. 16a Legal fees Ö b Accounting fees NOV 2 1 2012 S c Other professional fees 17 Interest OGWEN 116 116 0 . 18 Taxes 19 Depreciation and depletion Occupancy 20 21 Travel, conferences, and meetings $^{\prime}$ $^{\prime}$ $^{\prime}$ $^{\prime}$ $^{\prime}$ $^{\prime}$ Operating and $^{\prime}$ 22 Printing and publications 32,971 16,486 16,485 0. STMT 3 23 Other expenses 24 Total operating and administrative 33,087 0. 16,602 16,485 expenses Add lines 13 through 23 72,109. 72,109. 25 Contributions, gifts, grants paid 26 Total expenses and disbursements. 105,196 16,602 16,485 72,109. Add lines 24 and 25 ANNED 27 Subtract line 26 from line 12: 6,977 8 Excess of revenue over expenses and disbursements 54,900 b Net investment income (if negative, enter -0-) 55,017. C Adjusted net income (if negative, enter -0-) Form **990-PF** (2011) LHA For Paperwork Reduction Act Notice, see instructions

Page 2

Cash non-attents-barring 2 Sayungs and temporary cash investments 2 Sayungs and temporary cash cash cash cash cash cash cash cash	Part II Balance Sheets Attached schedules and amounts in the description			Beginning of year		End of year		
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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.

	n 990-PF (2011) LOWRIE FAMILY FOUNDATION		14985			Page 4
	art VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	1948 -	· see in	STIL	ICTIO	ns)
1a	Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1	1 1				
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)					
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here 🕒 🗶 and enter 1%	1			<u>5</u>	49.
	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).					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	2				0.
3	Add lines 1 and 2	3			5	49.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5			5	49.
6	Credits/Payments					
a	2011 estimated tax payments and 2010 overpayment credited to 2011 6a 844					
	Exempt foreign organizations - tax withheld at source 6b	7				
	Tax paid with application for extension of time to file (Form 8868)	7	l			
	Backup withholding erroneously withheld 6d	1				
	Total credits and payments. Add lines 6a through 6d	۱, ۱			8	44.
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				
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10		_	2	95.
	Enter the amount of line 10 to be: Credited to 2012 estimated tax	11				0.
	art VII-A Statements Regarding Activities	للنب	<u> </u>			
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interven	e in			Yes	No
	any political campaign?	J		1a		Х
h	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)?		<u> </u>	1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials publish	ed or	<u> </u>			
	distributed by the foundation in connection with the activities	CO 01				
	Did the foundation file Form 1120-POL for this year?			1c		х
	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:		<u> </u>	10		
u	(1) On the foundation. \blacktriangleright \$ (2) On foundation managers. \blacktriangleright \$ 0 .					į
	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation	<u>-</u>				
6	managers. > \$ 0.					
0	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		х
	If "Yes," attach a detailed description of the activities					- 22
9	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation,	or				
J	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	OI .		3		v
4.	, , , , , , , , , , , , , , , , , , ,		<u> </u>	_		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year? If "Yes," has it filed a tax return on Form 990-T for this year?	NT	/A	<u>4a</u> 4b	-	
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	14	′ ີ ⊦	5		x
5			-	<u> </u>		
c	If "Yes," attach the statement required by General Instruction T. Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:		1			
0						
	By language in the governing instrument, or By state levelation that offsetrick amends the governing instrument on that no mandatory diseases that positive that the state of the configuration of the configurat	to love				
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state of the consequence and the conflict with the state of the consequence and the conflict with the state of the conflict with the conflit	elaw		_		v
_	remain in the governing instrument?		-	6_	v	<u> </u>
7	Did the foundation have at least \$5,000 in assets at any time during the year?		-	7	Х	
	If "Yes," complete Part II, col. (c), and Part XV					
ва	Enter the states to which the foundation reports or with which it is registered (see instructions)		i			
	CO					
b	of the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			•	4,	
_	of each state as required by General Instruction G? If "No," attach explanation			8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for cal	endar				,,
	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		<u> </u>

, 1

		<u>84-1498</u>	<u>572</u>	ı	Page 5
Pa	art 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		х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had advisory p	rivileges?			
	If "Yes," attach statement (see instructions)	Ĭ	12		Х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	Ì	13	х	
	Website address ► N/A	,			
14	The books are in care of TROY LOWRIE Telephone no.	(303)9	34-	242	4
	Located at ▶ 6729 BEAR POINT WAY, GOLDEN, CO	ZIP+4 ▶80			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	2		_	T
	and enter the amount of tax-exempt interest received or accrued during the year	15	N,	/ A	
16	At any time during calendar year 2011, did the foundation have an interest in or a signature or other authority over a bank,			Yes	No
	securities, or other financial account in a foreign country?	1	16	. ••	X
	See the instructions for exceptions and filing requirements for Form TD F 90-22.1. If "Yes," enter the name of the foreign	ŀ	10 1		
	country				
Pa	art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			!	
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.			Yes	No
1a	During the year did the foundation (either directly or indirectly):	ì	$\neg \uparrow$		
		s X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	3 (22) 110			
		s X No			
		s X No			
		s X No	1		
		s LALINO			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	(.	İ	- 1	
		s X No	ľ		
	(6) Agree to pay money or property to a government official? (Exception Check "No"		ł		
	If the foundation agreed to make a grant to or to employ the official for a period after				
		s X No			
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations	_	-		
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	N/A	1b		
	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			i	
	before the first day of the tax year beginning in 2011?		1c		<u> </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)).				
а	At the end of tax year 2011, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	,			
	before 2011?	s 🗶 No	İ	ļ	
	If "Yes," list the years	i		l	
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect				
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach	•			
	statement - see instructions.)	N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.				
	>		į		
3a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time				
	during the year?	s X No		1	
b	If "Yes," did it have excess business holdings in 2011 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 di				
	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 2011)	N/A	3ь		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?		4a		X
	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose	that	74	_	
•	had not been removed from jeonardy before the first day of the tax year beginning in 20112		46	1	Y

Form 990-PF (2011) LOWRIE FAMILY FOUNDATION		•	84-14985	72 [Page 6
Part VII-B Statements Regarding Activities for Which	Form 4720 May Be F	Required (contin	nued)		
5a During the year did the foundation pay or incur any amount to:					
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	n 4945(e))?	Y	es X No		l
(2) Influence the outcome of any specific public election (see section 4955);	or to carry on, directly or indire	ectly,			l
any voter registration drive?		Y	es X No		1
(3) Provide a grant to an individual for travel, study, or other similar purposes	37	Y	es X No		
(4) Provide a grant to an organization other than a charitable, etc., organization	on described in section				1
509(a)(1), (2), or (3), or section 4940(d)(2)?			es X No		1
(5) Provide for any purpose other than religious, charitable, scientific, literary	, or educational purposes, or (1
the prevention of cruelty to children or animals?	, , , , , , , , , , , , , , , , , , , ,		es X No		1
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify un	der the exceptions described i				1
section 53.4945 or in a current notice regarding disaster assistance (see instri			N/A	5b	1
Organizations relying on a current notice regarding disaster assistance check l	•			-	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption to		ined			i
expenditure responsibility for the grant?		. —	es 🔲 No		
If "Yes," attach the statement required by Regulations section 53 494		.,	29 [] 110		İ
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	• •				l
a personal benefit contract?	pay premiums on		es X No		1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a	parcanal hanafit contract?			6b	Х
If "Yes" to 6b, file Form 8870.	Jersonal Denemi Commact?		-	00	
•	shalter transaction?		es X No		ĺ
7a At any time during the tax year, was the foundation a party to a prohibited tax:		¥ŧ	· · · · · · -	75	
b If "Yes," did the foundation receive any proceeds or have any net income attrib Part VIII Information About Officers, Directors, Trust		nagara Highl		7b	
Part VIII Paid Employees, and Contractors	ees, roundation wa	magers, migni	y		
1 List all officers, directors, trustees, foundation managers and their	compensation.				
		(c) Compensation	(d) Contributions to	(e) Exp	ense
(a) Name and address	(b) Title, and average hours per week devoted to position	(If not paid,	(d) Contributions to employee benefit plans and deferred	(e) Expe account, allowar	other
TROY H. LOWRIE		enter-0-)	compensation	allowal	ices
6729 BEAR POINT WAY	DIRECTOR/ PRE	SIDENT/ T	REAS		
GOLDEN, CO 80403	0 00	0.	0		^
	0.00 DIRECTOR/ SEC		0.	 	0.
PAMELA ANN GRIFFIN-LOWRIE	DIRECTOR/ SEC	RETARY			
390 MESA VIEW WAY	- 00	_			^
GOLDEN, CO 80403	0.00	0.	0.		0.
VALI L. LOWRIE	DIRECTOR				
418 ROYAL MEADOWS COURT					_
SANTA ROSA, CA 95404	0.00	0.	0.	 	0.
JOHN REED	DIRECTOR				
418 ROYAL MEADOWS COURT					_
SANTA ROSA, CA 95404	0.00	0.	0.	<u> </u>	0.
2 Compensation of five highest-paid employees (other than those inc		enter "NONE."	(d) Contributions to	(-) [vo	
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	employee benefit plans and deferred compensation	(e) Expe account, allowan	other
NONE					
]	1			
]				
		·		1	
	1				
	1				
Total number of other employees paid over \$50,000		•	•		0

Part VIII Information About Officers, Directors, Trustees, Foundary Paid Employees, and Contractors (continued)		4985/2 Page 7
3 Five highest-paid independent contractors for professional services. If none, enter	r "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 statis number of organizations and other beneficiaries served, conferences convened, research papers pro	stical information such as the duced, etc.	Expenses
1 N/A		
·		
2		
3		
1		
D. J. W. D. C.		
Part IX-B Summary of Program-Related Investments Describe the two largest program-related investments made by the foundation during the tax year or	lines 1 and 2	Amount
1 N/A	Times I and 2.	Amount
N/A		
2		
		····
All other program-related investments See instructions.		
3		
Total. Add lines 1 through 3	>	0.

Form **990-PF** (2011)

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:	_	
a	Average monthly fair market value of securities	1a	0.
	Average of monthly cash balances	1b	4,993.
	Fair market value of all other assets	1c	779,340.
d	Total (add lines 1a, b, and c)	1d	784,333.
	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	784,333.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	11,765.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	772,568.
<u>6</u>	Minimum investment return. Enter 5% of line 5	6	38,628.
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	38,628.
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	549.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	38,079.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	38,079.
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	38,079.
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	72,109. 0.
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:		
а	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	72,109.
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	549.
6	Adjusted qualifying distributions Subtract line 5 from line 4	6	71,560.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of 4940(e) reduction of tax in those years.	ualifies foi	the section

Form **990-PF** (2011)

Part XIII Undistributed Income (see instructions)

	(a)	(b)	(c)	(d)
	Corpus	Years prior to 2010	2010	2011
1 Distributable amount for 2011 from Part XI,				
line 7				38,079.
2 Undistributed income, if any, as of the end of 2011				
a Enter amount for 2010 only			0.	
b Total for prior years:		_		
,,		0.		<u> </u>
3 Excess distributions carryover, if any, to 2011:				
a From 2006				
b From 2007 5 , 118 .				
c From 2008 12,976.				
d From 2009 46,271.				
e From 2010 64,729.	100 004			
f Total of lines 3a through e	129,094.			
4 Qualifying distributions for 2011 from				
Part XII, line 4: ► \$ 72,109.	-		_	
a Applied to 2010, but not more than line 2a			0.	
b Applied to undistributed income of prior		0		
years (Election required - see instructions)	<u> </u>	0.	***	
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			20 070
d Applied to 2011 distributable amount	24 020			38,079.
e Remaining amount distributed out of corpus	34,030.		· · · - ·	0.
5 Excess distributions carryover applied to 2011 (If an amount appears in column (d), the same amount must be shown in column (a))	0.			0.
6 Enter the net total of each column as indicated below:				
	163,124.			
Corpus Add lines 3f, 4c, and 4e Subtract line 5 Prior years' undistributed income. Subtract	103,124.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		<u> </u>	-	
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	i	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	163,124.			
10 Analysis of line 9:				
a Excess from 2007 5, 118.				
b Excess from 2008 12,976.	ļ			
c Excess from 2009 46,271.				
d Excess from 2010 64,729.				
<u>e Excess from 2011</u> 34,030.	<u> </u>			5 000 PE (0044)

	FAMILY FOUN			84-14	198572 Page 10
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 o	r determination letter tha	it it is a private operating			
foundation, and the ruling is effective fo	r 2011, enter the date of	the ruling	▶		
b Check box to indicate whether the found	lation is a private operati	ng foundation described i	n section	4942(j)(3) or4	942(j)(5)
2 a Enter the lesser of the adjusted net	Tax year		Prior 3 years		_
income from Part I or the minimum	(a) 2011	(b) 2010	(c) 2009	(d) 2008	(e) Total
investment return from Part X for					
each year listed					
b 85% of line 2a					
c Qualifying distributions from Part XII,					
line 4 for each year listed					
d Amounts included in line 2c not					
used directly for active conduct of exempt activities					
e Qualifying distributions made directly					
for active conduct of exempt activities.					
Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed					
c "Support" alternative test - enter:					
(1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties)					
(2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii)					
(3) Largest amount of support from					
an exempt organization					
(4) Gross investment income					
Part XV Supplementary Info			if the foundation	n had \$5,000 or m	ore in assets
at any time during t	he year-see inst	ructions.)			
Information Regarding Foundation a List any managers of the foundation who year (but only if they have contributed m TROY H. LOWRIE b List any managers of the foundation who	o have contributed more fore than \$5,000). (See s	section 507(d)(2).)			·
other entity) of which the foundation has	s a 10% or greater intere	st.	or an equally large porti	on of the ownership of a p	partnership or
TROY H. LOWRIE	-				
2 Information Regarding Contribute Check here ► X if the foundation o the foundation makes gifts, grants, etc. (nly makes contributions	to preselected charitable (organizations and does i	not accept unsolicited req omplete items 2a. b. c. an	uests for funds. If d d.
a The name, address, and telephone numb				, ., .,	
		m applications should be			
b The form in which applications should b	e submitted and informa	tion and materials they sh	ould include:		
c Any submission deadlines;				, , , , , , , , , , , , , , , , , , ,	
d Any restrictions or limitations on awards	, such as by geographic	al areas, charitable fields,	kinds of institutions, or	other factors:	

Total

Part XVI-A **Analysis of Income-Producing Activities**

Inter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)	
1 Program service revenue:	(a) Business code	(b) Amount	Exclu- sion code	(d) Amount	Related or exempt function income	
						
a	-	· · · · · · · · · · · · · · · · · · ·				
	1 1	····				
d	1 1	-	 			
e					-	
- Face and contracts from covernment agencies	- 		 			
g Fees and contracts from government agencies 2 Membership dues and assessments		 -				
•	 					
3 Interest on savings and temporary cash		71 500				
investments	900000	71,502.				
4 Dividends and interest from securities	 					
5 Net rental income or (loss) from real estate:			 			
a Debt-financed property						
b Not debt-financed property		-				
6 Net rental income or (loss) from personal						
property	1		ļ			
7 Other investment income			ļ			
8 Gain or (loss) from sales of assets other						
than inventory		-			, <u>, , , , , , , , , , , , , , , , , , </u>	
9 Net income or (loss) from special events		· · · · · · · · · · · · · · · · · · ·				
O Gross profit or (loss) from sales of inventory		 .	L			
1 Other revenue.	1 1					
a			<u></u>			
b						
C						
d	1 1					
e						
2 Subtotal Add columns (b), (d), and (e)		71,502.		0.	0.	
3 Total Add line 12, columns (b), (d), and (e)					71,502.	
See worksheet in line 13 instructions to verify calculations.)				_		
Part XVI-B Relationship of Activities	to the Acco	mplichment of Ev		+ Durnocos		
Part AVI-B Relationship of Activities	to the Acco	mphannent of Ex	temp	it Purposes		
Line No Explain below how each activity for which inc			contri	outed importantly to the accor	nplishment of	
the foundation's exempt purposes (other tha	n by providing fur	nds for such purposes).				
		- 				
	<u>-</u> -					
	•			 -		
						
						
						
	_					
			_			

orm 990	-PF (20)11) LOW	RIE FAMILY	FOUNDA	TION		84-	1498572	Page 13
Part >	(VII	Information Exempt Org	Regarding Tran	sfers To a	and Transactions	and Relations	ships With No	ncharitable	
1 Did	the ora			of the followin	ig with any other organizati	on described in sec	ction 501(c) of	1	Yes No
	-	=			27, relating to political organ		,		
			undation to a noncharita						
	Cash	om mo roporting ro		0.0 0.0p. 0	garrication on			1a(1)	x
	Other :	assets						1a(2)	X
		actions:						1.5.64	
	_		arıtable exempt organiza	tion				1b(1)	х
			a noncharitable exempt (1b(2)	X
		of facilities, equipme	•	, ga				1b(3)	Х
		ursement arrangeme	·					1b(4)	Х
		or loan guarantees						1b(5)	Х
		-	r membership or fundrai	sına solicitatio	ons			1b(6)	Х
			, mailing lists, other asse	-				1c	X
	-				edule. Column (b) should al	ways show the fair	market value of the	goods, other asse	ets,
					ed less than fair market val				
			ds, other assets, or serv						
(a) Line no	· (b) Amount involved	(c) Name o	f noncharitable	e exempt organization	(d) Description	on of transfers, transaction	ons, and sharing arra	angements
				N/A					
		,,							
					-				
								<u> </u>	
ın s	ection (•	other than section 501(c		or more tax-exempt organ tion 527?	izations described		Yes	X No
<u> </u>	00, 00		f organization		(b) Type of organization		(c) Description of re	elationship	
		N/.			,,,,,		<u>, , , , , , , , , , , , , , , , , , , </u>	·-	
			·						
									
					ng accompanying schedules and			May the IRS d	ecuse this
Sign Here		X	7//	eparer (other tha	n taxpayer) is based on all inform	1 Pre	er has any knowledge	return with the shown below (preparer
	Signa	ature of officer or tru		15	Date '	Title	T-011	L CTIV	
		Print/Type ørepærer	's name	Preparer's s	ignature	Date	Check if self- employed	PTIN	
Paid		HARVEY B	OLSHOUN	HARVEY	BOLSHOUN	11/14/12		P00434	746

Firm's name ▶ SMITH, BROOKS, BOLSHOUN & CO., L.L.P.

DENVER, CO 80211-3932

18TH STREET, SUITE 200

Form **990-PF** (2011)

303-480-1200

Firm's EIN ► 84-0579402

Phone no.

Preparer

Use Only

Firm's address ▶ 2680

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

Department of the Treasury Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

2011

Name of the organization

Employer identification number

	LOWRIE FAMILY FOUNDATION	84-1498572					
Organization type (chec	ck one)						
Filers of:	Section:						
Form 990 or 990-EZ	501(c)() (enter number) organization						
	4947(a)(1) nonexempt charitable trust not treated as a private foundation						
	527 political organization						
Form 990-PF	X 501(c)(3) exempt private foundation						
	4947(a)(1) nonexempt charitable trust treated as a private foundation						
	501(c)(3) taxable private foundation						
General Rule X For an organiza	I(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Spe						
Special Rules							
509(a)(1) and 1	D1(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of th 70(b)(1)(A)(vi) and received from any one contributor, during the year, a contribution of on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ, line 1 Complete Parts I and II	•					
total contribution	For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 for use <i>exclusively</i> for religious, charitable, scientific, literary, or educational purposes, or the prevention of cruelty to children or animals. Complete Parts I, II, and III						
For a section 501(c)(7), (8), or (10) organization filing. Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use exclusively for religious, charitable, etc., purposes, but these contributions did not total to more than \$1,000 lf this box is checked, enter here the total contributions that were received during the year for an exclusively religious, charitable, etc., purpose Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year							
Caution. An organization	n that is not covered by the General Rule and/or the Special Rules does not file Scheo	dule B (Form 990, 990-EZ, or 990-PF),					

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990, 990-EZ, or 990-PF. Schedule B (Form 990, 990-EZ, or 990-PF) (2011)

but it must answer "No" on Part IV, line 2, of its Form 990, or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to

certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF)

Name of organization

Employer identification number

LOWRIE FAMILY FOUNDATION

Part I	Contributors (see instructions) Use duplicate copies of Part	I if additional space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	VARIOUS VARIOUS VARIOUS	\$\$ 40,671.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

Employer identification number

LOWRIE FAMILY FOUNDATION

Part II	Noncash Property (see instructions) Use duplicate copies of F	Part II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
	*** *** ******************************		
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
			-
		\$	
(a) No. rom	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
—			
		\$	990 990-EZ or 990-PE) (2

Schedule B	(Form 990, 990-EZ, or 990-PF) (2011)		Page ·					
Name of org	anization		Employer identification number					
LOWRIE Part III	E FAMILY FOUNDATION Exclusively religious, charitable, etc., indiv year. Complete columns (a) through (e) and the total of exclusively religious, charitable, etc. Use duplicate copies of Part III if additional and the complete copies of Part III if additional and the copies of Par	ne following line entry. For organizations, contributions of \$1,000 or less for	84-1498572 (7), (8), or (10) organizations that total more than \$1,000 for the one of the sear. (Enter this information once) \$\\ \\$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of gif	t					
,	Transferee's name, address, an	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift Transferee's name, address, and ZIP + 4 Relationship of transferor to transferee							
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
-	Transferee's name, address, an	ad ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
		(e) Transfer of giff						
	Transferee's name, address, an		Relationship of transferor to transferee					

Part XV Supplementary Information	FAMILY FOUNDAT		04-14	98572
3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	any foundation manager or substantial contributor	recipient		
			·	
GLENDALE HIGH SCHOOL		HIGH SCHOOL		
				1,438
GLENDALE POLICE DEPARTMENT		GOVERNMENT		
		AGENCY		2,000
LUMINOUSE SPORTS MANAGEMENT		NOT FOR PROFIT		8,000
MORRISON POLICE DEPARTMENT		GOVERNMENT		
		AGENCY		10,000
PHILIP MICHAEL JOHNSON		N/A		1,000
PLANNED PARENTHOOD		NOT FOR PROFIT		
				1,134
QUIANDEZ MCAFEE		N/A		1,000
RESPONDER RESCUE		NOT FOR PROFIT		
				15,715
ROCKY MOUNTAIN CHILDREN'S LAW CENTER		NOT FOR PROFIT		1,000
SCHONICE DANIELLE DABBS		N/A		
	1			1,000
Total from continuation sheets				56,159

LOWRIE FAMILY FOUNDATION

Part XV Supplementary Information				
3 Grants and Contributions Paid During the Ye	ear (Continuation)			
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)	or substantial contributor	recipient	Contribution	
SUSAN G. KOMEN FOUNDATION		NOT FOR PROFIT		
				8,000.
THE ACTION CENTER		NOT FOR PROFIT		
				500.
THE DADDY BRUCE FOUNDATION		NOT FOR PROFIT		
				372,
YMCA		NOT FOR PROFIT		F 000
				5,000.
			*** * *** ***	
		 		
Total from continuation sheets				

FORM 990-PF INTEREST ON SAVI	INGS AND TEM	PORARY CASH	INVESTMENTS	STATEMENT	1
SOURCE				AMOUNT	
VCG LOAN RECEIVABLE				71,50)2.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A		71,50)2.
FORM 990-PF	TAX	ES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS		(C) ADJUSTEI NET INCOM		
FEDERAL INCOME TAX	116.	116		0.	0.
TO FORM 990-PF, PG 1, LN 18	116.	116		0.	0.
FORM 990-PF	OTHER E	XPENSES	<u></u>	STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME			
BANK CHARGES ACCOUNTING	· · · · · · · · · · · · · · · · · · ·			19. 50.	0.
GOLF TOURNAMENT FUND RAISING EVENT	30,172.	15,086	15,08	36.	0.
TO FORM 990-PF, PG 1, LN 23	32,971.	16,486	16,48	.85.	
FORM 990-PF	OTHER	ASSETS		STATEMENT	4
DESCRIPTION		BEGINNING OF END OF YEAR YR BOOK VALUE BOOK VALUE		FAIR MARKET VALUE	
OTHER ASSETS PREPAID INCOME TAX		20,145.	20,145.	20,14	15. 34.
TO FORM 990-PF, PART II, LINE	15	20,145.	21,029.	21,02	.9

Form **8868**

(Rev. January 2012) Department of the Treasury Internal Revenue Service

Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

Form **?868** (Rev. 1-2012)

If you a Do not a Electron required of time to	are filing for an Automatic 3-Month Extension, complete are filing for an Additional (Not Automatic) 3-Month Extended Part II unless you have already been granted a ic filing (e-file). You can electronically file Form 8868 if you to file Form 990-T), or an additional (not automatic) 3-month of file any of the forms listed in Part I or Part II with the exception of the forms listed in Part I or Part II with the exception.	ension, con automated auto	omplete only Part II (on page 2 of the complete only Part II (on page 2 of the complete of the	y filed For e to file (6 e Form 88 ransfers A	months for a co 68 to request a asociated With	in extension Certain
	Benefit Contracts, which must be sent to the IRS in paper		see instructions). For more details o	ii tile elec	Horne ming or ti	33 10111,
Part I	v.irs.gov/efile and click on e-file for Charities & Nonprofits. Automatic 3-Month Extension of Time		ubmit original (no copies ner	eded)		
	ation required to file Form 990-T and requesting an auton					
Part I on	•	alic Offic	THE EXCENSION - CHECK THIS DOX AND	ompioto		
	corporations (including 1120-C filers), partnerships, REM	 !Ca and to		t an avtac	olon of time	
	corporations (including 1120-0 lilers), partnerships, Reivil come tax returns.	ics, and ii	usis must use rollil 7004 to reques	t arrextern	sion of time	
Type or	Name of exempt organization or other filer, see instruc	ctions.		Employer	identification n	umber (EIN) or
print	LOWRIE FAMILY FOUNDATION			X 84-1498572		
File by the due date fo filing your	About an about and an account of the D.O. have a	ee instruct	tions.	Social security number (SSN)		
return See		oreign add	ress, see instructions.			
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			04
Applicat	tion	Return	Application			Return
is For		Code	is For			Code
Form 99	0	01	Form 990-T (corporation)			07
Form 99		02	Form 1041-A			08
Form 990-EZ		01	Form 4720			09
Form 99	0-PF	04	Form 5227			10
Form 99	0-T (sec. 401(a) or 408(a) trust)	05	Form 6069	···		11
	0-T (trust other than above)	06	Form 8870			12
Telep	TROY LOWRIE cooks are in the care of ► 6729 BEAR POINT chone No. ► (303)934-2424 organization does not have an office or place of business is so for a Group Return, enter the organization's four digit	s in the Ur	FAX No. ▶ Intel States, check this box		· · · · · · · · · · · · · · · · · · ·	▶ □
box ▶		Gloup Exe	sinplion Number (GEN)	f oil momb	om the extensi	ap, check this
1 Ir	equest an automatic 3-month (6 months for a corporation $AUGUST\ 15$, 2012 , to file the exemptor the organization's return for: X calendar year X year X calendar year X yea	required it organiza	to file Form 990-T) extension of time tion return for the organization nam	until		5115 (01.
•	tax year beginning	, an	nd ending		 ·	
2 If	the tax year entered in line 1 is for less than 12 months, on the control of the	heck reas	on: Initial return	Final retur	n	
3a if	this application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	enter the tentative tax, less any			
	onrefundable credits. See instructions.			3a	\$	300.
	this application is for Form 990-PF, 990-T, 4720, or 6069,	_	nter any refundable credits and			
	estimated tax payments made. Include any prior year overpayment allowed as a credit. 3b \$			844.		
	alance due. Subtract line 3b from line 3a. Include your pa					
	/ using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
Caution	. If you are going to make an electronic fund withdrawal	with this F	orm 8868, see Form 8453-EO and F	om 8879-	EO for paymen	t instructions.

LHA

For Privacy Act and Paperwork Reduction Act Notice, see Instructions.

Formt886	8 (Rev. 1-2012)					Page 2	
	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II and check this	box		► X	
Note. On	ly complete Part II if you have already been granted an a	utomatic :	3-month extension on a previously fil	led Form	3868.		
• If you a	are filing for an Automatic 3-Month Extension, complete	te only Pa	rt I (on page 1).				
Part II	Additional (Not Automatic) 3-Month E	xtensio	n of Time. Only file the origin	al (no c	opies neede	≥d)	
			Enter filer's	identifyir	g number, se	e instructions	
Type or print	pe or Name of exempt organization or other filer, see instructions				Employer identification number (EIN) or		
File by the	LOWRIE FAMILY FOUNDATION			X	X 84-1498572		
due date for	b) tile					(SSN)	
filing your return See	6729 BEAR POINT WAY						
instructions	City, town or post office, state, and ZIP code. For a fo	oreign add	ress, see instructions.			 	
	GOLDEN, CO 80403						
Enter the	Return code for the return that this application is for (file	e a separa	te application for each return)			0 4	
Applicati	ion.	Return	Application			Return	
Is For	OII	Code	Is For			Code	
Form 990)	01	13 - 07		·····	- 0000	
Form 990		02	Form 1041-A	·		08	
Form 990		01	Form 4720			09	
Form 990		04	Form 5227			10	
Form 990)-T (sec. 401(a) or 408(a) trust)	05	Form 6069				
Form 990	OT (trust other than above)	06	Form 8870			12	
STOP! D	o not complete Part II if you were not already granted	an auton	natic 3-month extension on a prev	iously file	ed Form 8868.		
	TROY LOWRIE						
• The be	poks are in the care of ▶ 6729 BEAR POINT	r way	- GOLDEN, CO 8040	3			
Telepi	none No. ► (303) 934-2424		FAX No. ▶				
If the	organization does not have an office or place of business	s in the Ur	nited States, check this box			▶ □	
If this	is for a Group Return, enter the organization's four digit	Group Exe	emption Number (GEN) I	f this is fo	r the whole gro	up, check this	
box 🕨	. If it is for part of the group, check this box		ach a list with the names and EINs of	all memb	ers the extens	on is for.	
	· ·		BER 15, 2012.				
	calendar year 2011 , or other tax year beginning $_$, and ending			 ·	
6 If ti	ne tax year entered in line 5 is for less than 12 months, c	heck reas	on: LInitial return L	Final r	eturn		
<u> </u>	Change in accounting period						
	te in detail why you need the extension AXPAYER IS UNABLE TO ACCUMULA	א מוזים	TI THE NECECCARY II	NEODM	AMTON N	EEDED	
	FILE A COMPLETE RETURN AT		TIME.	NF ORM	ATION N.	EEDED_	
<u> </u>	O TIBL A COMPLETE RETORN AT	11110	I IME .				
8a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069 e	inter the tentative tax less any				
	nrefundable credits. See instructions.	0, 0005, 0	inter the temative tax, less any	8a	\$	300.	
_	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter any	refundable credits and estimated	1			
	payments made. Include any prior year overpayment al						
	eviously with Form 8868.			8b	\$	844.	
	lance due. Subtract line 8b from line 8a. Include your pa	yment wit	th this form, if required, by using		_ 		
	TPS (Electronic Federal Tax Payment System). See instri			80	\$	0.	
			st be completed for Part II o				
Under pen	alties of perjury, I declare that I have examined this form, includ	ing accomp	panying schedules and statements, and to	the best o	f my knowledge	and belief,	
it is true, c	correct, and complete, and that I am authorize byto prepare this to	orm.	PA		/	1.,	
Signature	► Harry X De Comme >	<u> </u>	/~· y	Date	► \$/6/	112	
	′ (68 (Rev. 1-2012)	