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Form 990-PF

Return of Private Foundation

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

2010

OMB No 1545-0052

Department of the Treasury Internal Revenue Service Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements 2010 For calendar year 2010, or tax year beginning DEC 2, DEC 2010 and ending X Initial return Final return G Check all that apply initial return of a former public charity Amended return Address change Name change A Employer identification number Name of foundation WIND POINT FOUNDATION 27-4254631 C/O LEBLANC & YOUNG, PA Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number TWO CANAL PLAZA, PO BOX 7950 (207) 772-2800 City or town, state, and ZIP code C If exemption application is pending, check here PORTLAND, ME 04112-7950 D 1. Foreign organizations, check here 2. Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated I Fair market value of all assets at end of year J Accounting method X Accrual under section 507(b)(1)(A), check here Other (specify) (from Part II, col. (c), line 16) If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis.) under section 507(b)(1)(B), check here ▶\$ Part | Analysis of Revenue and Expenses (d) Disbursements (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 income (cash basis only) N/A Contributions, gifts, grants, etc., received Check X if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments Dividends and interest from securities 5a Gross rents Net rental income or (loss) 62 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) 8 Net short-term capital gain q Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income Ô. 0 12 Total. Add lines 1 through 11 0. 0. 0. 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees 280 b Accounting fees c Other professional fees NOV 1 5 2011 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 23 Other expenses 24 Total operating and administrative 0. 0 0. expenses. Add lines 13 through 23 0. 0. Contributions, gifts, grants paid 8 26 Total expenses and disbursements. 0. 0 Add lines 24 and 25 27 Subtract line 26 from line 12 0 2 Excess of revenue over expenses and disbursements 0 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Paperwork Reduction Act Notice, see the instructions.

Form 990-PF (2010)

Г		Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	of year
	dri	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	·-		
	2	Savings and temporary cash investments		_	
	3	Accounts receivable			
		Less allowance for doubtful accounts			Ì
	4	Pledges receivable	······································		
		Less allowance for doubtful accounts			1
	5	Grants receivable			
	6	Receivables due from officers, directors, trustees, and other		·	
	ľ	disqualified persons			
	7	Other notes and loans receivable			
ι ο	١ ′	Less allowance for doubtful accounts			
	В	Inventories for sale or use			
Assets	,				
As	100	Prepaid expenses and deferred charges Investments - U.S and state government obligations			
	l			······································	+
	l	Investments - corporate stock			
	1	Investments - corporate bonds		,	<u> </u>
	11	Investments - land, buildings, and equipment basis			
		Less accumulated depreciation			-
		Investments - mortgage loans			
	13	Investments - other			
	14	Land, buildings, and equipment basis			
		Less. accumulated depreciation			
	15	Other assets (describe			
				•	
		Total assets (to be completed by all filers)	0.	0.	0.
	17	Accounts payable and accrued expenses			_
	18	Grants payable			_[
es	19	Deferred revenue			
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons			
jab	21	Mortgages and other notes payable			
_	22	Other liabilities (describe			
	23	Total liabilities (add lines 17 through 22)	0.	0.	<u>.</u>
		Foundations that follow SFAS 117, check here			
ģ		and complete lines 24 through 26 and lines 30 and 31.			
ő	24	Unrestricted			
Balance	25	Temporarily restricted			
Ba	26	Permanently restricted			
Net Assets or Fund		Foundations that do not follow SFAS 117, check here			
Ę		and complete lines 27 through 31.			
S O	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.	
As	29	Retained earnings, accumulated income, endowment, or other funds	0.	0.	
š	30	Total net assets or fund balances	0.	0.	
_]
	31	Total liabilities and net assets/fund balances	0.	0.	
	art	Analysis of Changes in Net Assets or Fund E	lalances	- 18	
_			20		1
1		I net assets or fund balances at beginning of year - Part II, column (a), line	30		^
_		st agree with end-of-year figure reported on prior year's return)		1	0.
		r amount from Part I, line 27a		2	0.
3		r increases not included in line 2 (itemize)			0.
4		lines 1, 2, and 3		4	0.
5		reases not included in line 2 (itemize)		5	0.
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, c	olumn (b), line 30		0.

Part IV Capital Gains	and Lo	sses for Tax on Ir	vestmen	t Income						
		nd(s) of property sold (e g or common stock, 200 sh			P	How ac - Purc - Dona		(c) Date a (mo , da	icquired ay, yr)	(d) Date sold (mo , day, yr)
<u> </u>										
b NO	NE			·—·						
<u>C</u>										
<u>d</u>										
е			,		<u>.l</u> .				_	
(e) Gross sales price	(f)	Depreciation allowed (or allowable)	107	st or other basis expense of sale					in or (loss (f) minus (
<u> </u>										
b										
<u> </u>		· · · · · · · · · · · · · · · · · · ·								
d										
<u>e</u>	l		<u> </u>	10101100						
Complete only for assets show	1		1					(I) Gains (Cool. (k), but n		
(i) F M V as of 12/31/69	ı	(j) Adjusted basis as of 12/31/69		col (j), if any				Losses	(from col ((h))
a										
<u>b</u>										
_ С										
<u>d</u>	<u> </u>		1			<u> </u>				
<u>e</u>	L					<u> </u>				
2 Capital gain net income or (net c	apıtal loss	If gain, also ente If (loss), enter -0			}	2				
3 Net short-term capital gain or (lo	ss) as defi	ined in sections 1222(5) at	nd (6)							
If gain, also enter in Part I, line 8			(0)		Ĵ					
If (loss), enter -0- in Part I, line 8						3				
Part V Qualification L	<u> Inder S</u>	section 4940(e) for	Reduced	Tax on Ne	t Inv	estn	nent In	come		
(For optional use by domestic prival	e foundati	ons subject to the section	4940(a) tax or	n net investment i	incom	e)				N/A
If section 4940(d)(2) applies, leave	his nart hi	ank								
Was the foundation liable for the sec				-	eriod?				•	Yes No
If "Yes," the foundation does not qua										
1 Enter the appropriate amount in (a)	each coiu		uctions before	e making any enti				ì		(d)
Base periód years Calendar year (or tax year beginn	ıng ın)	(b) Adjusted qualifying dis	tributions	Net value of n	oncha oncha		-use asse	ts		oution ratio vided by col (c))
2009										
2008										
2007										
2006										
2005				l				-		
2 Total of line 1, column (d)								2		
3 Average distribution ratio for the	5-vaar ba	co nariad - dauda tha tatal	on line 2 by 5	or by the numbe	er of w	nare		-		
the foundation has been in existing			on time 2 by 5	, or by the numbe	or y	5415		3		
the touridation has been in existi	siice ii iess	s tilali 3 years			-			3		
4 Enter the net value of nonchanta	ble-use as	sets for 2010 from Part X,	line 5					4		
5 Multiply line 4 by line 3								5		
	(40)				•					
6 Enter 1% of net investment inco	iile (1% 01	ran I, IIN e 270)						6		
7 Add lines 5 and 6								7		
8 Enter qualifying distributions fro								8		
If line 8 is equal to or greater tha See the Part VI instructions	n line 7, cl	neck the box in Part VI, line	e 1b, and com	plete that part usi	ing a 1	% tax	rate			
Oce the Latt At Instructions								· <u> </u>		nm 000 PE (2010

X

8b

N/A

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)

year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If "Yes," complete Part XIV

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their names and addresse

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

of each state as required by General Instruction G? If "No," attach explanation

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b if "Yes," did it have excess business holdings in 2010 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969, (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest, or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

Form 4720, to determine if the foundation had excess business holdings in 2010.)

had not been removed from jeopardy before the first day of the tax year beginning in 2010?

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

N/A

3ь

4a

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X

X

0

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

Paid Employees, and Contractors (continued) Five highest-paid independent contractors for professional services. If none, enter	er "NONE "	
(a) Name and address of each person paid more than \$50,000		(c) Compensation
NONE	(b) Type of service	(C) Compensation
NONE	 	
		
	\dashv	
Total number of others receiving over \$50,000 for professional services .		▶ 0
Part IX-A Summary of Direct Charitable Activities	· · · · · · · · · · · · · · · · · · ·	
List the foundation's four largest direct charitable activities during the tax year. Include relevant stati	stical information such as the	······
number of organizations and other beneficiaries served, conferences convened, research papers pro	oduced, etc	Expenses
1 N/A		
2		
3		·-··
4		
Part IX-B Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax year o	n lines 1 and 2	Amount
1 N/A		
2		
All other program-related investments. See instructions		
3		
Total, Add lines 1 through 3		0.

-01	H 990-FF (2010) C/O LEBLANC & YOUNG, PA		Page 8
P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign fou	ndations, see instructions.)	
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	0.
е	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	1 ₂ 1	0.
3	Subtract line 2 from line 1d	3	0.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	0.
6	Minimum investment return. Enter 5% of line 5	6	0.
P	art XI Distributable Amount (see instructions) (Section 4942(i)(3) and (j)(5) private operating foundations are foreign organizations check here in and do not complete this part ()	nd certain	
1	Minimum investment return from Part X, line 6	1	0.
2a	Tax on investment income for 2010 from Part VI, line 5		
b	Income tax for 2010 (This does not include the tax from Part VI)		
C	Add lines 2a and 2b	_2c	0.
3	Distributable amount before adjustments Subtract line 2c from line 1	3	0.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	0.
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	0.
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	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	0.
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	0.
	Note: The amount on line 6 will be used in Part V, column (h), in subsequent warrs when coloulating whether the foundation	qualifies for the section	

4940(e) reduction of tax in those years

Part XIII Undistributed Income (see instructions)

1 Distributable amount for 2010 from Part XI, Ine 7 2 Undistributes recome, If any, as of the end of 2010 a Enter amount for 2009 only b Total for prior years 3 Excess distributions carryover, if any, to 2010 a From 2005 b From 2006 c From 2007 d From 2008 e From 2009 1 Total of lines 3 through e 4 Qualifying distributions for 2010 from Part XII, Ine 4 ▶ s O . A Appided to 2009, but not more than line 2a Appided to 2009, but not more than line 2b Appided to undistributed income of prior years (Election required - see instructions) c Treated as distributions out of corpus (Election required - see instructions) d Appided to 2010 distributable amount e Remaining amount distributed out of corpus 5 Excess destributions carryover applied to 2010 mast be shown in column (a), this series amount mate the shown in column (a), this series amount as indicated below: 3 Corpus Add lines 31, 4c, and 4c Subcract line 5 Prior years 'indistributed income Subtract line 4 b from line 2 b C Editer the amount of prior years' undistributed income Subtract line 4 b from line 20 C Editer the amount of prior years' undistributed income Subtract line 4 from line 2 a Taxable amount - see instructions 4 Indistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 a Taxable amount - see instructions Undistributed income for 2010 Subtract line 4 from line 2 from line 1 This amount must		(a) Corpus	(b) Years prior to 2009	(c) 2009	(d) 2010
2. Undistributed income, If any, so of the end of 2010 a. Enter amount for 2009 only b. Total for prory years 3. Excess distributions carryover, if any, to 2010 a. From 2005 b. From 2006 c. From 2007 d. From 2008 e. From 2009 1. Total of lines 3 at through a 4. Qualifying distributions for 2010 from Part XII, tine 4 № \$ 5. Qualifying distributions for 2010 from Part XII, tine 4 № \$ 6. Qualifying distributions for 2010 from Part XII, tine 4 № \$ 7. Applied to 2009, but not more than line 2a 8. Applied to undistributed income of pnor 9 years (Election required - see instructions) 9. Created as distributions out of corpus (Election required - see instructions) 9. Created as distributions out of corpus (Election required - see instructions) 9. Created as distributions out of corpus 5. Excess distributions out of corpus 5. Excess distributions comprove septime to 2010 0. Created in the complex of the corpus 5. Excess distributions comprove septime to 2010 0. On the complex of the corpus 0. Created in the complex of the corpus 0. Created in the corpus of the corpus of the corpus 0. Created in the corpus of the	· •		10010 prior to 2000	2000	
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9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a 0 Analysis of line 9	•	0.			
Subtract lines 7 and 8 from line 6a 0 • 10 Analysis of line 9					······································
		0.			
	F				······································
	1		Í		
b Excess from 2007	b Excess from 2007				
c Excess from 2008	c Excess from 2008				
d Excess from 2009	d Excess from 2009				
e Excess from 2010	e Excess from 2010				

	,	INT FOUNDA'			27_42	54631 Page 10
	rt XIV Private Operating Fo			A, question 9)	N/A	Jacob Tage 10
1 a	If the foundation has received a ruling or foundation, and the ruling is effective for Check box to indicate whether the foundation.	determination letter the 2010, enter the date of	at it is a private operating the ruling	•		942(j)(5)
	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
- "	income from Part I or the minimum	(a) 2010	(b) 2009	(c) 2008	(d) 2007	(e) Total
	investment return from Part X for	<u> </u>	<u> </u>			-
	each year listed					
h	85% of line 2a					
-	Qualifying distributions from Part XII,			_		
٠	line 4 for each year listed					
d	Amounts included in line 2c not				-	
٠	used directly for active conduct of					
	exempt activities					
	Qualifying distributions made directly				-	
E	for active conduct of exempt activities					
	Subtract line 2d from line 2c					
3	Complete 3a, b, or c for the					
_	alternative test relied upon					
а	"Assets" alternative test - enter					
	(1) Value of all assets		 	<u> </u>	***	-
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i) "Endowment" alternative test - enter	•				
IJ	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)		ļ	_		
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	(3) Largest amount of support from					
	an exempt organization					
_	(4) Gross investment income					<u> </u>
Pa	srt XV Supplementary Info				nad \$5,000 or m	ore in assets
	at any time during t		instructions.)	N/A		
1	Information Regarding Foundation					
8	List any managers of the foundation who			ributions received by the	foundation before the clo	ose of any tax
	year (but only if they have contributed m	(3ee (11811) 9101)	Section 507(u)(2))			
				 		
t	List any managers of the foundation who			or an equally large portion	on of the ownership of a p	partnership or
	other entity) of which the foundation has	a 10% or greater inter	est			
		<u>-</u> _	~· <u></u>			
2	Information Regarding Contributi					
	Check here ► X If the foundation of					
	the foundation makes gifts, grants, etc. (-		omplete items 2a, b, c, an	<u> </u>
ä	The name, address, and telephone numb	per of the person to wh	om applications should be	addressed		

b The form in which applications should be submitted and information and materials they should include

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors

c Any submission deadlines

Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient a Paid during the year NONE **▶** 3a 0. Total b Approved for future payment NONE 0. **▶** 3b Total 023611 12-07-10 Form **990-PF** (2010)

Part XVI-A	Analysis	of Income-Produ	cina Activities
Part AVI-A	Analysis (ot income-Produ	CING ACTIVITIES

nter gross amounts unless otherwise indicated	(a)	business income (b)	(C) Exclu-	by section 512, 513, or 514 (d)	(e) Related or exempt
Program-service revenue	Business code	Amount	sion	Amount	function income
a					
	-				
· 	l t				
				•	-
Fees and contracts from government agencies					
Membership dues and assessments					
nterest on savings and temporary cash					
nvestments					-
Dividends and interest from securities				· · · · · · · · · · · · · · · · · · ·	
Net rental income or (loss) from real estate Debt-financed property					
Not debt-financed property					
Net rental income or (loss) from personal					
property					
Other investment income					
Gain or (loss) from sales of assets other					
than inventory					
Net income or (loss) from special events					
Gross profit or (loss) from sales of inventory Other revenue					
d					
e					
Subtotal Add columns (b), (d), and (e)			0.		•
Total. Add line 12, columns (b), (d), and (e) e worksheet in line 13 instructions to verify calculations)	•			13	
Explain below how each activity for which inc the foundation's exempt purposes (other than				d importantly to the acc	omplishment of
	_				

Form 990-PF (2010) Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

	e organization directly or indir					ction 501(c) of		res	NO
the Co	ode (othër than section 501(c)	(3) organizations) or	ın section 52	7, relating to political organ	izations?				
a Trans	fers from the reporting founda	ition to a noncharitab	le exempt org	janization of					
(1) 0	ash			•			1a(1)		_X
(2) (ther assets						1a(2)		X
b Other	transactions								
(1) S	ales of assets to a noncharitat	ble exempt organizati	on				16(1)		X
(2) P	urchases of assets from a nor	ncharitable exempt or	ganization				1b(2)		X
(3) F	ental of facilities, equipment, (or other assets	•				1b(3)		X
	leimbursement arrangements						16(4)		X
	oans or loan guarantees						1b(5)	i	X
• •	erformance of services or me	mhershin or fundrais	ına salıcıtatın	ns			1b(6)		Х
• •	ng of facilities, equipment, mai	•	-				10		X
	answer to any of the above is			•	uave chow the fau	r market value of the ac	L	otc	
	vices given by the reporting fo		-	• •	=	=		5615,	
	nn (d) the value of the goods, (ou 1655 tilali lali lilalket valu	ie ili aliy transacti	on or snamy arrangen	ient, snow in		
a) Line no	(b) Amount involved	,		exempt organization	(d) Decemb	ion of transfers, transaction			
a) Line no	(b) Amount involved	(6) Ivaine of	N/A	exempt organization	(u) Descripti	ion of transfers, transaction	s, and sharing ar	rangeme	nts
			IV/A						
		ļ							
			 						
						 			
							 .		
					_			~	
									
	·								
		-							
2a Is the	foundation directly or indirect	tly affiliated with, or re	elated to, one	or more tax-exempt organi	zations described	•	, , ,		
	tion 501(c) of the Code (other						Yes	X	No
	s," complete the following sch		(0), 0: 0000						
y	(a) Name of org			(b) Type of organization		(c) Description of rel	ationship		
	N/A			(-)),		(0)			
	21,72					• • • • • • • • • • • • • • • • • • • •		•	
					-	 			
	 						<u> </u>		
Г	Under penalties of penjury, I declare	e that have examined th	is return unclude	ng accompanying schedules and	I statements and to	the hest of my knowledge	and belief it is to	ue come	rct
eia-	and complete Declaration of prep						a.a bener, it is t	, wife	~4
Sign Here	. //~/)//	Kn		11-5-1	//	Tregar	_		
Here	Supporture of officer or tra	7		7/- 5 /			-		
	Signature of officer or tru	<u> </u>	D	Date	P-4-	Title	DTIN		
	Print/Type preparer's na	nne	Preparer's si		Date		PTIN		
D : :			E. D	New Chang	11/1/11	self- employed			
Paid	E. DREW CH				1				
Prepar		ER NEWMAN	& NOY	ES		Firm's EIN			
Use O			_						
	Firm's address $ ightharpoonup P$.			_				_	_
	PO	RTLAND, M	E 0411	2		Phone no (2	<u>207)879</u>		
							Form 990	-PF	(2010)

Form **8868**

(Rev. January 2011)

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

• • •	re filing for an Automatic 3-Month Extension, completer filing for an Additional (Not Automatic) 3-Month Extension	_				X
-	-				0000	
	omplete Part II unless you have already been granted a		•			
	c filing (e-file). You can electronically file Form 8868 if y			•	•	
	o file Form 990-T), or an additional (not automatic) 3-mor					
	file any of the forms listed in Part I or Part II with the exc					
Personal	Benefit Contracts, which must be sent to the IRS in pap	er format	(see instructions). For more details on th	ne elec	tronic filing of this fo	om,
	urs.gov/efile and click on e-file for Charities & Nonprofits					
Part I	Automatic 3-Month Extension of Time	Only su	bmit original (no copies needed).			
A corpora	ation required to file Form 990-T and requesting an autor	natic 6·mo	nth extension - check this box and com	plete		
Part I only	y					
	corporations (including 1120-C filers), partnerships, REM ome tax retums	ICs, and t	rusts must use Form 7004 to request an	exten	sion of time	
Type or	Name of exempt organization			Emp	loyer identification	number
print	WIND POINT FOUNDATION				•	
	C/O LEBLANC & YOUNG, PA			2	7-4254631	
File by the due date for filing your	Number, street, and room or suite no. If a P.O. box, s TWO CANAL PLAZA, PO BOX 795		tions.	·	·	
return See Instructions	City, town or post office, state, and ZIP code. For a for PORTLAND, ME 04112-7950	oreign add				04
Applicati	Return code for the return that this application is for (file	Return	Application	•		
. ' _	UII .					Return
Is For		Code	Is For			Code
Form 990		01	Form 990-T (corporation)			07
Form 990		02	Form 1041-A		····	08
Form 990	PEZ	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
	MATTHEW REYNOLI	DS				
• The b	ooks are in the care of TWO CANAL PLAZ	A, PO	BOX 7950 - PORTLAND	, M	E 04112-79	50
	none No. ► (207) 772-2800		FAX No. ▶	·		
	organization does not have an office or place of business	s in the Ur				
• If this	is for a Group Return, enter the organization's four digit	Group Exe	emotion Number (GEN) If the	ie ie fo	r the whole group c	hack this
box ▶	. If it is for part of the group, check this box	and atta	ich a liet with the names and Elbis of all	mamh	om the extension is	for
	quest an automatic 3-month (6 months for a corporation	recurred	to file Form 990-Theytension of time unt	memo	ers the extension is	ior.
			tion return for the organization named a		The autonous	
ie f	or the organization's return for:	t Organiza	non return for the organization framed a	wove.	the extension	
	calendar year or					
>	X tax year beginning DEC 2, 2010	, an	d ending <u>DEC 31, 2010</u>		_·	
2 lf 11	ne tax year entered in line 1 is for less than 12 months, c Change in accounting period	heck reas	on: X Initial return Fina	al retur	n	
3a If ti	nis application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any	<u> </u>		
nor	refundable credits. See instructions.			За	\$	0.
	nts application is for Form 990-PF, 990-T, 4720, or 6069,					·····
	imated tax payments made. Include any prior year overp			3ь	\$	0.
	lance due. Subtract line 3b from line 3a. Include your pa					
	using EFTPS (Electronic Federal Tax Payment System).			3c	\$	0.
LHA F	If you are going to make an electronic fund withdrawal voor Paperwork Reduction Act Notice, see Instructions	vitn this Fo	orm 8853-EO and Form	8879-	EO for payment inst Form 8868 (Re	

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Form 8868 (Rev. 1-2011)					Page 2
• If you are filing for an Additional (Not Automatic) 3-Month Exte	ension, c	emplete only Part II and check this bo	х.		\mathbf{X}
Note. Only complete Part II if you have already been granted an au	itomatic :	3-month extension on a previously filed	Form (3868.	
If you are filing for an Automatic 3-Month Extension, complete	only Pa	rt I (on page 1).			
Part II Additional (Not Automatic) 3-Month Ex	tensio	of Time. Only file the original (no co	pies n	eeded).	
Name of exempt organization			Empl	oyer Identification	number
Type or WIND POINT FOUNDATION			_		
C/O LEBLANC & YOUNG, PA			2	7-4254631	
File by the extended Number, street, and room or sulte no. If a P.O. box, see	e instruct	tions.			
due date for TWO CANAL PLAZA, PO BOX 7950 filing your				- 	
City, town or post office, state, and ZIP code. For a for	elgn add	ress, see instructions.			
PORTLAND, ME 04112-7950					
Enter the Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Application	Return	Application			Return
ls For	Code	Is For	7.77		Code
Form 990	01		<u> </u>	* 14 C 14	, y
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			
Form 990-T (trust other than above)	06	Form 8870			12
STOP: Do not complete Part II if you were not already granted: MATTHEW REYNOLD		natic 3-month extension on a previous	sty file	ed Form 8868.	
	-	DOV 7050 DODMY AND	14	E 0/112 70	EΛ
 The books are in the care of ► TWO CANAL PLAZA Telephone No. ► (207) 772-2800 	, PU		, M	E 0411Z-/9	<u> </u>
		FAX No.			
If the organization does not have an office or place of business If this is for a County Business and the form it is to be a formation of the form it is to be a formation of the format					L
 If this Is for a Group Return, enter the organization's four digit G box ► If it is for part of the group, check this box ► 					
		ch a list with the names and EINs of all BER 15, 2011.	memb	ers the extension is	tor.
5 For calendar year, or other tax year beginning D			ኮድሮ	31, 2010	
6 If the tax year entered in line 5 is for less than 12 months, ch			Final r		
Change in accounting period	eck reas	on. A initial return	rinai r	etum	
7 State in detail why you need the extension					
INFORMATION FROM THIRD PARTIES	HAS	YET TO BE RECEIVED.	тH	EREFORE	
ADDITIONAL TIME IS NECESSARY T					IIRN .
				90101111 11111	01411
8a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or	r 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, e	enter any	refundable credits and estimated	74 77 75	- 	
tax payments made. Include any prior year overpayment allo			77		
previously with Form 8868.			8b	\$	0.
c Balance due. Subtract line 8b from line 8a. include your pay	ment wit	h this form, if required, by using			
EFTPS (Electronic Federal Tax Payment System). See instruc			8c	s	0.
		d Verification			
Under penalties of perjury, I declare that I have examined this form, including	ng accomp		best o	f my knowledge and be	ilef,
it is true, correct, and complete, and that I am authorized to prepare this for	m i			- 1	•
Signature ► // // Title ► C	PA		Date	<u>►8/11/11</u>	
<i>i</i> -				Form 8868 (Re	