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#### Form 990-PF

B.I

C Adjusted net income (if negative, enter -0-) BAA For Paperwork Reduction Act Notice, see the instructions.

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

OMB No 1545-0052

2010

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 For calendar year 2010, or tax year beginning , 2010, and ending G Check all that apply: Initial return Initial Return of a former public charity Final return Amended return Address change Name change Name of foundation Employer identification number WILD SHORE FOUNDATION 35-1947845 Number and street (or P.O box number if mail is not delivered to street address) Room/suite R Telephone number (see the instructions) 1950 E. GREYHOUND PASS 18-364 (317) 844-8009 City or town ZIP code C If exemption application is pending, check here CARMEL IN 46033-7730 D 1 Foreign organizations, check here Н Check type of organization: X Section 501(c)(3) exempt private foundation 2 Foreign organizations meeting the 85% test, check here and attach computation Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation If private foundation status was terminated Fair market value of all assets at end of year J Accounting method Cash under section 507(b)(1)(A), check here (from Part II, column (c), line 16) Other (specify) If the foundation is in a 60-month termination under section 507(b)(1)(B), check here 1,410,727. (Part I, column (d) must be on cash basis.) Part | Analysis of Revenue and (a) Revenue and (b) Net investment (c) Adjusted net (d) Disbursements Expenses (The total of amounts in expenses per books income ıncome for charitable columns (b), (c), and (d) may not neces-sarily equal the amounts in column (a) purposes (cash basis only) (see the instructions)) Contributions, gifts, grants, etc, received (att sch) 2 Ck X if the foundn is not req to att Sch B Interest on savings and temporary cash investments Dividends and interest from securities 15,997. 15,997. 5a Gross rents b Net rental income or (loss) REVENU 6a Net gain/(loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain 9 Income modifications 10 a Gross sales less returns and allowances Ö 9 2011 b Less Cost of c Gross profit/(loss) (att sch) 11 Other income (attach schedule) Total. Add lines 1 through 11 15,997. 15,997 13 Compensation of officers, directors, trustees, etc 14 Other employee salaries and wages 15 Pension plans, employee benefits. 16a Legal fees (attach schedule) L-16a Stmt 1,160 1,160. b Accounting fees (attach sch) L-16b Stmt 2,500 2,500. c Other prof fees (attach sch) OPERATING 17 Interest 160 18 Taxes (attach schedule)(see instr.) Excise tax Depreciation (attach 19 sch) and depletion GOccupancy . 21 Travel, conferences, and meetings Printing and publications Other expenses (attach schedule) See Line 23 Stmt 5,027 5,027. Total operating and administrative 24 expenses. Add lines 13 through 23 8,847 8,687 25 Contributions, gifts, grants paid . 114,000. 114,000. Total expenses and disbursements. Add lines 24 and 25 . . . 122,847 122,687. 27 Subtract line 26 from line 12: a Excess of revenue over expenses and disbursements -106,850 b Net investment income (if negative, enter -0-) 15,997

Form 990-PF (2010)

TEEA0301 07/23/10

Part II		Balance Sheets  Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End	year	
		(See instructions )	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash – non-interest-bearing	3,687.	15,907	15,907.	
	2	Savings and temporary cash investments	1,122,369.	1,003,459		
	3	Accounts receivable .		,		
	1	Less: allowance for doubtful accounts				
	4	Pledges receivable	2			
		Less: allowance for doubtful accounts		- ~	· · · · · · · · · · · · · · · · · · ·	
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see the instructions)				
	7	·			<del> </del>	
A		Less: allowance for doubtful accounts				
S	8					
A S E T	9	Prepaid expenses and deferred charges	4,780.	4 620	4 (20	
S		a Investments – U.S. and state government	4,700.	4,620.	4,620.	
		obligations (attach schedule) .  b Investments — corporate stock (attach schedule) L-10b Stmt	407.076	107.076	2005	
	1	c Investments — corporate bonds (attach schedule) L—LOD SETTE	487,876.	487,876.	386,741.	
			1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1	<u> </u>		
	''	Investments – land, buildings, and equipment: basis	21 73 5 2	3.		
		Less: accumulated depreciation (attach schedule)				
	12	Investments – mortgage loans				
	13	Investments - other (attach schedule)				
	14	Land, buildings, and equipment basis ▶				
		Less. accumulated depreciation (attach schedule) .				
	15 16	Other assets (describe Total assets (to be completed by all filers — see instructions. Also, see page 1, item I)	1,618,712.	1,511,862.	1,410,727.	
L	17	· · · · · · · · · · · · · · · · · · ·	2/020/1221	1,011,002.	1/110/121.	
A	18	Grants payable				
Ê	19	• •				
- 1	20	Loans from officers, directors, trustees, & other disqualified persons				
ī	21	Mortgages and other notes payable (attach schedule)				
T	22	Other liabilities (describe ►				
Ė						
<u> </u>	23	Total liabilities (add lines 17 through 22)			with military and the	
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.				
N F E U T N	24	Unrestricted	1,618,712.	1,511,862.		
TN	25	Temporarily restricted .				
D	26	Permanently restricted		<del></del>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
A S S A E T A		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
	27	Capital stock, trust principal, or current funds				
SNC	28	Paid-in or capital surplus, or land, building, and equipment fund	<u> </u>		· · · · · · · · · · · · · · · · · · ·	
O E	29	Retained earnings, accumulated income, endowment, or other funds				
RS	30	Total net assets or fund balances (see the instructions)	1,618,712.	<u>1,511,862.</u>	, i	
	31	Total liabilities and net assets/fund balances (see the instructions)	1,618,712.	1,511,862.	,	
Parl	E III	Analysis of Changes in Net Assets or Fund Balance		1,511,002.	<del></del>	
'	end-	net assets or fund balances at beginning of year — Part II, colum of-year figure reported on prior year's return)	ın (a), iine 30 (must agre	ee with	1,618,712.	
2		r amount from Part I, line 27a		2	-106,850.	
		increases not included in line 2 (itemize)	•	2	100,000.	
		lines 1, 2, and 3			1,511,862.	
		ases not included in line 2 (itemize)	•	5	1,311,002.	
		net assets or fund balances at end of year (line 4 minus line 5) -	- Part II, column (b), line		1,511,862.	
					_,	

Pa		Losses for Tax on Investmen			12.	1 - 416
	(a) List and describ 2-story brick warehou	te the kind(s) of property sold (e.g., rese; or common stock, 200 shares ML	al estate, C Company)	b) How acquired P — Purchase D — Donation	(C) Date acquired (month, day, year)	(d) Date sold (month, day, year)
1	a					
	b					
	с				<u> </u>	
	d					
	e	(0.00	(1) 0 1 11 11 11 11		4.0	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (e) plus (f) m	
	a				· ··· · · · · · · · · · · · · · · · ·	<del></del>
	b	<del> </del>			·	
_	<u>c</u>		······································			<del></del>
	de	1				
	<del></del>	Ing gain in column (h) and owned by	the foundation on 12/31/69		//> On the /Online	(b)
	(i) Fair Market Value as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of column (i) over column (j), if any	) t	(I) Gains (Col gain minus column ( han -0-) or Losses (fi	k), but not less
	a					
	b					-
	<u>c</u>					<del>-</del> <del>-</del>
	d					-
	<u>e                                      </u>		<del></del>		<del>T · · · · · · · · · · · · · · · · · · ·</del>	
2	Capital gain net income or (net	<del></del>	enter in Part I, line 7 er -0- in Part I, line 7	_2		
3	Net short-term capital gain or (	loss) as defined in sections 1222(5) a	nd (6):			
	If gain, also enter in Part I, line in Part I, line 8	e 8, column (c) (see the instructions)	If (loss), enter -0-	3		
Ŗá	Qualification Unde	r Section 4940(e) for Reduced	Tax on Net Investmen	t Income		
Was	es,' the foundation does not qual	tion 4942 tax on the distributable amo	plete this part		. Yes	X No
_1		n each column for each year; see the	instructions before making an	ny entries		<del></del> _
	(a)  Base period years  Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asset	s (co	<b>(d)</b> Distributior lumn (b) divided	
	2009	90,004.	1,362,	159.		0.066075
	2008	134,475.	1,662,	605.		0.080882
	2007	108,281.	1,735,			0.062400
	2006	25,706.		012.		0.055881
	2005	31,089.	440,	742.	1	0.070538
2	Total of tine 1, column (d)			2		0.335776
3	Average distribution ratio for th number of years the foundation	e 5-year base period — divide the tota has been in existence if less than 5	l on line 2 by 5, or by the years	_ 3		0.067155
4	Enter the net value of nonchari	table-use assets for 2010 from Part X	, line 5	4		., 455, 335.
5	Multiply line 4 by line 3			. 5		97,733.
6	Enter 1% of net investment inc	ome (1% of Part I, line 27b)		6		160.
7	Add lines 5 and 6		•	7		97,893.
8	Enter qualifying distributions fro	om Part XII, line 4		8		122,687.
	If line 8 is equal to or greater the Part VI instructions.	nan line 7, check the box in Part VI, li	ne 1b, and complete that part	t using a 1%	tax rate. See the	

	990-PF <sub>4</sub> (2010) WILD SHORE FOUNDATION 35-1947			Page
Par	t VI. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the ins	tructions	;)	
1 a	Exempt operating foundations described in section 4940(d)(2), check here and enter 'N/A' on line 1.  Date of ruling or determination letter: (attach copy of letter if necessary — see instr.)		-	
	Domestic foundations that meet the section 4940(e) requirements in Part V,			160.
	check here X and enter 1% of Part I, line 27b			160.
			44	
•	: All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b)		2	·
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
3	Add lines 1 and 2			160.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-			160.
6	Credits/Payments:	.,	,	1
a	2010 estimated tax pmts and 2009 overpayment credited to 2010 6a 4,780.		•	
t	Exempt foreign organizations – tax withheld at source 6b		,,	
c	: Tax paid with application for extension of time to file (Form 8868) 6c 0.			
	Backup withholding erroneously withheld . 6d			
7				780.
8	Enter any <b>penalty</b> for underpayment of estimated tax. Check here			_/00.
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			
				620
10			4,	620.
11 Bär	Enter the amount of line 10 to be. Credited to 2011 estimated tax 4,620. Refunded 11   12   13   14   15   15   15   15   16   16   17   17   18   18   18   18   18   18			<del></del>
	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in any political campaign?	1	Yes	X X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see the instructions for definition)?	1	ь	X
	If the answer is 'Yes' to <b>1a</b> or <b>1b</b> , attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities	*	\$	
	Did the foundation file Form 1120-POL for this year?	1	<u>c</u>	X
C	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year.  (1) On the foundation		1	-
е	(1) On the foundation			,
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			-
4	If 'Yes,' attach a detailed description of the activities.	2	+	X
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
4 2	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4		$\frac{1}{x}$
	If 'Yes,' has it filed a tax return on <b>Form 990-T</b> for this year?	4		+~
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
,	If 'Yes,' attach the statement required by General Instruction T.	3	1 27	
c	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either.		`	4
6	, , , , , , , , , , , , , , , , , , , ,		1	1
	By language in the governing instrument, or		,	1 -
	• 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? If 'Yes,' complete Part II, column (c), and Part XV	7	Х	<u></u>
8a	Enter the states to which the foundation reports or with which it is registered (see the instructions)	_ [		
	IN - Indiana		1.	٠.٠
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	8	b 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 calendar year 2010 or the taxable year beginning in 2010 (see instructions for Part XIV)? If 'Yes.' complete Part XIV	) j	-	x x

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

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Form 990-PF (2010)

Par	(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 acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		x
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A			
14	The books are in care of ► KELLY MILLS Telephone no. ► (317)  Located at ► 1950 GREYHOUND PASS#18-364 CARMEL IN ZIP + 4 ► 46033-773		-800	<u> </u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of <b>Form 1041</b> — Check here			<b>-</b>
	and enter the amount of tax-exempt interest received or accrued during the year . ► 15			ш
16	At any time during calendar year 2010, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	16	Yes	No X
	See the instructions for exceptions and filing requirements for Form TD F 90-22 1. If 'Yes,' enter the name of the foreign country •			
Par	VII-B Statements Regarding Activities for Which Form 4720 May Be Required	,		
	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	-:	Yes	No
1 a	During the year did the foundation (either directly)		j	
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?  . LYes X No		-	
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?  Yes X No	,	· -,	, ,
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?  Yes X No			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?  Yes X No		~ ,	3
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)? Yes X No			(
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' if the	- , , , , ,	7 }	
	foundation agreed to make a grant to or to employ the official for a period after termination of government service, if terminating within 90 days.)  Yes X No		!	. '!
b	If any answer is 'Yes' to 1a(1)-(6), did <b>any</b> of the acts fail to qualify under the exceptions described in Regulations section 53 4941(d)-3 or in a current notice regarding disaster assistance (see the instructions)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here	''		
c	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts,			
	that were not corrected before the first day of the tax year beginning in 2010?	1 c	·	X
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))		· .	- 4
а	At the end of tax year 2010, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2010?  Yes X No	4	· [	
	If 'Yes,' list the years ▶ 20 , 20 , 20	"		(2)
b	Are there any years listed in 2a for which the foundation is <b>not</b> 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 <b>all</b> years listed, answer 'No' and attach statement — see the instructions.)	2b		x
С	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	► 20 , 20 , 20 , 20		:.	
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?		بر . د م	·
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, Form 4720, to determine if the foundation had excess business holdings in 2010)	3b		
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
b	Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2010?	4b		<u>x</u>
BAA	Fo	rm <b>99</b> 0	)-PF (	2010)

Form 990-PF (2010) WILD SHORE FOUNDA	TION		35-19	47845 Pag	ge €
Part VII-B   Statements Regarding Activit	ies for Which Form	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur (1) Carry on propaganda, or otherwise attemp	-	(section 4945(e))?	Yes X	No	
	_	• • •	les k	110	
(2) Influence the outcome of any specific publication, directly or indirectly, any voter registra		4955); or to carry 	Yes X	No '-	
(3) Provide a grant to an individual for travel,	study, or other similar p	ourposes?	. Yes X	No	- vr
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section	an a charitable, etc, org 4940(d)(2)? (see instru	ganization described .	Yes X	No	
(5) Provide for any purpose other than religious educational purposes, or for the prevention			Yes X	No .	· ·
b If any answer is 'Yes' to 5a(1)-(5), did any of to described in Regulations section 53.4945 or in (see instructions)?	he transactions fail to q a current notice regard	ualify under the exception ing disaster assistance	ons	5b	
Organizations relying on a current notice regar	ding disaster assistance	e check here			<del>- ;</del>
c If the answer is 'Yes' to question 5a(4), does the	ne foundation claim exe	mption from the			
tax because it maintained expenditure respons If 'Yes,' attach the statement required by Regu	-	-5(d)	. Yes X	No	-
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indir	ectly, to pay premiums	. Yes X	No	
<b>b</b> Did the foundation, during the year, pay premit	ums, directly or indirectl	ly, on a personal benefit	contract? .	6b 2	X
If 'Yes' to 6b, file Form 8870.  7a At any time during the tax year, was the found.	ation a party to a probib	utad tav shaltar transaci	ion? Yes X	No Trail	- £
<b>b</b> If yes, did the foundation receive any proceeds	* = :			7b	- 7
Part VIII Information About Officers, D					
and Contractors				<del></del>	
1 List all officers, directors, trustees, foundation			uctions).		
(a) Name and address	(b) Title and average hours per week devoted to position	(c) Compensation (If not paid, enter -0-)	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense accourting other allowances	
EVAN L. NOYES, JR					
PO BOX 368	PRES/TREAS				
CEDARVILLE MI 49719	2.00	0.	0.		0.
ELIZABETH H. NOYES 272 W 107TH ST.	V.P.				
NEW YORK NY 10025	2.00	0.	0.		<u>0.</u>
TOM EVASHEVSKI	G				
CEDARVILLE MI CEDARVILLE MI 49719	Secretary 2.00	0.	0		^
EVAN NOYES III	2.00	U.	0.	<u></u>	0.
HUNTINGTON TRUST DEPT 45 N PENNSYLVANIA	DIRECTOR				
INDIANAPOLIS IN 46204	2.00	0.	0.		0.
2 Compensation of five highest-paid employee	s (other than those incl	uded on line 1— see ins	tructions). If none, ente	r 'NONE.'	_
(a) Name and address of each employee paid more than \$50,000	(b) Title and average hours per week devoted to position	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Expense accour other allowances	
NONE			compensation		
0				<u> </u>	
0					
0					_
0					
0					
Total number of other employees paid over \$50,000	·		<b>•</b>	Nor	
BAA	TEEA0306 0	7/23/10		Form <b>990-PF</b> (20)	10)

# Part IX-B Summary of Program-Related Investments (see Instructions) Describe the two largest program-related investments made by the foundation during the tax year on lines 1 and 2. Amount 2 All other program-related investments. See instructions. 3

Total, Add lines 1 through 3 Form 990-PF (2010)

Form 990-PF (2010) WILD SHORE FOUNDATION 35-1947845 PantX Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, 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 1 a 364,400. b Average of monthly cash balances 1 b 1,113,097. c Fair market value of all other assets (see instructions) 1 c 1,477,497. d Total (add lines 1a, b, and c) 1 d e Reduction claimed for blockage or other factors reported on lines 1a and 1c (attach detailed explanation) . 1 e Acquisition indebtedness applicable to line 1 assets 2 Subtract line 2 from line 1d . 3 1,477,497. Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions) 22,162. Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 5 1,455,335. Minimum investment return. Enter 5% of line 5 6 72,767. Particles Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) Minimum investment return from Part X, line 6 72,767. 2a Tax on investment income for 2010 from Part VI, line 5 160. 2b b Income tax for 2010. (This does not include the tax from Part VI.) c Add lines 2a and 2b . 2 c 160 3 72,607 3 Distributable amount before adjustments Subtract line 2c from line 1 Recoveries of amounts treated as qualifying distributions 4 5 Add lines 3 and 4 72,607 Deduction from distributable amount (see instructions) . 6 Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII, line 1 72,607 Part 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	2 7 1 a	122,687.
b Program-related investments — total from Part IX-B	1 b	
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)	3 <i>a</i>	
<b>b</b> Cash distribution test (attach the required schedule) .	3 b	
4 Qualifying distributions Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 .	4	122,687.
5 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income Enter 1% of Part I, line 27b (see instructions)	5	160.
6 Adjusted qualifying distributions. Subtract line 5 from line 4	6	122,527.

Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation qualifies for the section 4940(e) reduction of tax in those years

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Form 990-PF (2010)

#### Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2009	<b>(c)</b> 2009	<b>(d)</b> 2010
1 Distributable amount for 2010 from Part XI, line 7				
2 Undistributed income, if any, as of the end of 2010				72,607.
a Enter amount for 2009 only			67,888.	
<b>b</b> Total for prior years 20, 20, 20			07,000.	<u> </u>
3 Excess distributions carryover, if any, to 2010:		,		
a From 200531,089.		,		
<b>b</b> From 2006 25, 706.		, ,		
<b>c</b> From 2007 108, 281.	,		,	
<b>d</b> From 2008 . 131, 996.		ray. La	,	_
e From 2009 . 90,004.		•		
f Total of lines 3a through e	387,076.			<u>.</u>
4 Qualifying distributions for 2010 from Part				•
XII, line 4. • \$ 122, 687.				
a Applied to 2009, but not more than line 2a				
<b>b</b> Applied to undistributed income of prior years (Election required – see instructions)				
c Treated as distributions out of corpus		,   -	-	
(Election required – see instructions)				
d Applied to 2010 distributable amount	100 000			
e Remaining amount distributed out of corpus .	122,687.	<u> </u>		·
5 Excess distributions carryover applied to 2010 .  (If an amount appears in column (d), the		<del></del>		
same amount must be shown in column (a).)	-			- <u>s</u>
		•	,	
6 Enter the net total of each column as indicated below:		* - 3	en syra e :	
a Corpus. Add lines 3f, 4c, and 4e. Subtract line 5	509,763.	*		in the second second
<b>b</b> Prior years' undistributed income. Subtract line 4b from line 2b				
c Enter the amount of prior years' undistribut-		0.		
ed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed	•			
d Subtract line 6c from line 6b. Taxable amount – see instructions		•		
		0.		
e Undistributed income for 2009. Subtract line 4a from line 2a. Taxable amount — see instructions			67 000	
The 2d Taxable difficulty See Historicities .			67,888.	- ·
f Undistributed income for 2010. Subtract lines				
4d and 5 from line 1. This amount must be distributed in 2011				72,607.
7 Amounts treated as distributions out of				12/007.
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)			·	•
8 Excess distributions carryover from 2005 not		- ,		
applied on line 5 or line 7 (see instructions)	<u>3</u> 1,089.	- 15/		ı
9 Excess distributions carryover to 2011. Subtract lines 7 and 8 from line 6a	478,674.			
10 Analysis of line 9	-		-	;
a Excess from 2006 25, 706.			Ī	,
b Excess from 2007 108, 281.				
c Excess from 2008 . 131, 996.				•
<b>d</b> Excess from 2009 90,004.		İ		
e Excess from 2010 122, 687.				

Form 990-PF, (2010) WILD SHORE FOUND Part XIV Private Operating Foundati		stions and Part	VII.A guestion (	35-194784:	
1 a If the foundation has received a ruling or o	determination letter t				N/A_
is effective for 2010, enter the date of the	ruling			•	<del></del>
<b>b</b> Check box to indicate whether the foundat		ating foundation de		4942(j)(3) or	4942(j)(5)
2a Enter the lesser of the adjusted net income from Part I or the minimum investment return from Part X for each year listed	Tax year (a) 2010	<b>(b)</b> 2009	(c) 2008	<b>(d)</b> 2007	(e) Total
<b>b</b> 85% of line 2a					
c Qualifying distributions from Part XII, line 4 for each year listed					
d Amounts included in line 2c not used directly for active conduct of exempt activities					
<ul> <li>Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c.</li> </ul>					
3 Complete 3a, b, or c for the alternative test relied upon.					
a 'Assets' alternative test — enter					-
<ul><li>(1) Value of all assets</li><li>(2) Value of assets qualifying under</li></ul>		1			<del></del>
section 4942(j)(3)(B)(i) . <b>b</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	10		<u> </u>		
Part XV   Supplementary Information assets at any time during the	i (Complete triis 1e vear — see in	part only if the	organization na	aa \$5,000 or mor	e in
Information Regarding Foundation Manage     a List any managers of the foundation who have     close of any tax year (but only if they have	gers:	re than 2% of the to	otal contributions rec	eived by the foundati	on before the
EVAN L. NOYES, JR.		, , , , , , , , , , , , , , , , ,	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
b List any managers of the foundation who ca partnership or other entity) of which the NONE	own 10% or more of foundation has a 10	the stock of a corpo % or greater interes	oration (or an equally st	y large portion of the	ownership of
2 Information Regarding Contribution, Gran	ot Gift Loan Schol	archin etc Program			
Check here X if the foundation only r requests for funds. If the foundation makes complete items 2a, b, c, and d.	nakes contributions	to preselected char	itable organizations		
a The name, address, and telephone number	r of the person to w	hom applications sh	nould be addressed:		
<b>b</b> The form in which applications should be s	submitted and inform	nation and materials	s they should include	······································	
c Any submission deadlines:					<del></del>
d Any restrictions or limitations on awards, s	such as by geograph	nical areas, charitab	ole fields, kinds of ins	stitutions, or other fac	ctors
BAA	TE	EA0310 02/16/11		F	orm <b>990-PF</b> (2010)

Rank Supplementary Information (continued)

3 Grants and Contributions Paid During the Y				
Recipient	If recipient is an individual, show any relationship to any foundation manager or	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	substantial contributor	recipient		
a Paid during the year				
Nature Conservancy				
4245 N Fairfax Dr.Ste 100			1	
Arlington VA 2220	3	509(a)(1)	Conserve Nature	50,000.
Martin University				
2171 N. Avondale Place			Para ta an	4 000
Indianapolis IN 4621	3	509(a)(1)	Education	4,000.
Lake Superior State University Foundation 650 W. Easterday Ave.	n			
Sault Ste Marie MI 4978		500(2)(1)	Study Rare Birds	20 000
Les Cheneaux Community Foundatio	1	309 (a) (1)	Study Raie Bilds	20,000.
PO Box 249	•••			
Cedarville MI 4974	1	509 (a) (1)	Preserve Area	12,000.
Great Lakes Boat Building Schoo		303(4)(1)	liteserve mred	12,000.
485 S. Meridian Rd.				•
Cedarville MI 4971		509(a)(1)	Education	8,000.
Cedar Cove			Retirement	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
266 Mary L Street			Facility	
Cedarville MI 4971		509(a)(1)	Not for profit	20,000.
			_	
				'
	İ			
		1		
				ļ
Total	<u> </u>	<u> </u>	► 3a	114,000.
b Approved for future payment		· ·		114,000.
a ripproved for falaro paymone				
Total	<u> </u>		<u> </u> ▶ 3h	
Total	<u> </u>		► 3b	l

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

Enter gross amounts unless otherwise indicated		Unrelat	ed business income	Exclude	d by section 512, 513, or 514	(e)	
1	Progr	am service revenue:	(a) Business code	<b>(b)</b> Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income (see the instructions)
а							
b					ļ. ——		
С							
							<u> </u>
f			<u> </u>			ļ <u></u>	
_		and contracts from government agencies	ļ		-		
		pership dues and assessments				<u> </u>	
		t on savings and temporary cash investments			<u> </u>		
		ends and interest from securities			14		
		ental income or (loss) from real estate:	· -			~ ' .	- ,
		financed property ·					
		ebt-financed property					
		tal income or (loss) from personal property					
		investment income					
		(loss) from sales of assets other than inventory.					
		come or (loss) from special events .					
10	Gross	profit or (loss) from sales of inventory					
11	Other	revenue:	, , ,		-		*
а							
b					İ		
С							
đ							-
е							
		tal. Add columns (b), (d), and (e)				15,997.	
		Add line 12, columns (b), (d), and (e)				. 13	15,997.
(See	works	heet in line 13 instructions to verify calculation	ns.)			······································	
Parl	XVI-	B: Relationship of Activities to the	Accompl	ishment of Exempt	t Purpo	oses	
	No.						1 - 41
	<b>7</b>	Explain below how each activity for which included accomplishment of the foundation's exempt p	ourposes (oth	ner than by providing fur	nds for s	such purposes) (See the	instructions)
							· · · · · · · · · · · · · · · · · · ·
				<del></del>		<del></del>	
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		· · · · · · · · · · · · · · · · · · ·				<del></del>	F. 000 DT 10011

## Form 990-PF (2010) WILD SHORE FOUNDATION 35-1947845 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

							τ		
1 Did the	organization directly	or indirectly engage	ge in any of the following	with any oth	er organization		ļ	Yes	No
describe	ed în section 501(c) o to political organizati	of the Code (other	than section 501(c)(3) or	ganızations)	or in section 5	27,	g . na	, -	ſ
_			oncharitable exempt orga	nization of			3.34	;	j
(1) Cas			one manage of the organ				1a (1)		X .
(2) Othe	er assets .						1a (2)		Х
<b>b</b> Other tra	ansactions:								,
<b>(1)</b> Sale	es of assets to a none	charitable exempt	organization	•			1b (1)		X
<b>(2)</b> Puro	chases of assets from	n a noncharitable	exempt organization .				1 b (2)		X
<b>(3)</b> Ren	tal of facilities, equip	ment, or other as:	sets				1b (3)		Х
<b>(4)</b> Rein	nbursement arranger	ments			•	•	1b (4)		X
	ns or loan guarantees		•				1 b (5)		X
<b>(6)</b> Perf	ormance of services	or membership oi	r fundraising solicitations				1 b (6)		X
<b>c</b> Sharing	of facilities, equipme	ent, mailing lists, o	other assets, or paid emp	loyees			1c	_ •	<u>X</u>
d If the an	swar to any of the ab	nova is 'Vas ' sam	plete the following schedi	do Column	(h) aboutd alwa	uo abau tha fau	مدامد تقماه	-4	
the good	ls, other assets, or se	ervices aiven by tl	he reporting foundation. I	f the foundat	ion received les	s than fair market v	ket value alue in	ΟT	
			in column (d) the value of						
(a) Line no.	(b) Amount involved	(c) Name of no	ncharitable exempt organization	(d)	Description of tra	nsfers, transactions, and s	sharing arran	gement	3
						<u>. —</u>			
		-			<del>-</del>	· <del>-</del> · · · · · · · · · · · · · · · · · · ·			
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			<del> </del>						
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						· · · ·		•	
					_				
2a Is the for	undation directly or in	ndirectly affiliated	with, or related to, one or	r more tax-e:	xempt organiza	tions			
describe	d in section 501(c) of	f the Code (other	than section 501(c)(3)) or	in section 5	277 .		Yes	ΧJ	Vo
	complete the followin	<del></del>							
(a)	Name of organization	on .	<b>(b)</b> Type of organiza	tion	(0	c) Description of rela	tionship		
	<del></del>								
<del> </del>		-							
·		·····	<del>.</del>						
Under o	enalties of perium-hideclare	e that I have exampled	this return, including accompany	no schedules an	d statements, and to	the hest of my knowledge	and helief it	ıs truo	
	and complete Declaration	of preparer (other than	this return, including accompanyi tarpayer or fiduciary) is based or	all information	of which preparer ha	s any knowledge	and bener, it	is true,	_
Sign	(	[_ /// X	(	. ~	1, 1, .	Λ	_		
Here				7	<u> </u>	DRESIDA	W (		
Sigi	nature of officer or trustee		Dianoralia anno la	Date	[ /	Title	ST11.		
	Print/Type preparer's nam		Prepareks signature	_	Date	Check if if	PTIN		
Paid	David J. You		ا بریب	`	L-30-11	self-employed	<del></del>		
Preparer		ount and Co		- 110		Firm's EIN ►			
Jse Only	i r irm s address	<u>665 North P</u> ndianapolis	ost Road., Suit		216		546 1	000	
BAA	. 11	nuranapor15		IN 46	C T D	Phone no (317)	546-1		
2AA							Form <b>990</b>	J-PF (2	2010)

Form 990-PF, Page 1, Part I, Line 23

Line 23 Stmt

Other expenses:	Rev/Exp Book	Net Inv Inc	Adj Net Inc	Charity Disb
Bank Fees	120.			120.
Investment Mgt Fees	4,907.			4,907.

Total 5,027. 5,027.

Form 990-PF, Page 1, Part I

Line 16a - Legal Fees

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
Tom H Evashevski Brown & Brown	Legal Legal	580. 580.			580. 580.	

Total

1,160.

1,160.

Form 990-PF, Page 1, Part I

**Line 16b - Accounting Fees** 

Name of Provider	Type of Service Provided	Amount Paid Per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes	
YOUNT & COMPANY	ACCOUNTING	2,500.			2,500.	
Total		2,500.			2,500.	

Form 990-PF, Page 2, Part II, Line 10b

L-10b Stmt

	End of Year		
Line 10b - Investments - Corporate Stock:	Book Value	Fair Market Value	
2585.891 SH VANGUARD SPECIAL ENERGY MUTUAL FUND	86,736.	167,798.	
INTEL	195,100.	210,300.	
AMERICAN INTERNATIONAL GROUP	206,040.	8,643.	
Total	487,876.	386,741.	

## Form **8868**(Rev January 2011)

### Application for Extension of Time To File an Exempt Organization Return

OMB No 1545-1709

Department of the Treasury Internal Revenue Service

File a separate application for each return.

titling your eturn. See Instructions In 46033-7730  City, town or post office, state, and ZIP code For a foreign address, see instructions  CARMEL IN 46033-7730  Enter the Return code for the return that this application is for (file a separate application for each return)  Application is For Return Code Return Code	,	e filing for an <b>Automatic 3-Month Extension, com</b>				<b>►</b> X
Electronic filing 6-R/B(-) You can electronically file Form 8868 for you need a 3-month automatic extension of time to the 6-months for a corporation required to the Form 990-17, or an additional (not automatic) 3-month extension of time to the 6-months for a corporation required to the Form 990-17, or an additional (not automatic) 3-month extension of time to the form 8868 to require an extension of time to the form 890-17 and 18-months which must be seen to the RFs in page format (see in structurons). For more details on the selections, thing of this form, work work way governed to the form 900-18 and click on +file for Charles & Aborptofits.  Part I   Automatic 3-Month Extension of Time, Only Symboth original (no copies needed).  A corporation required to file Form 990-18 and requesting an automatic 6-month extension – check this box and complete Part I only in the form 800-18 and requesting an automatic 6-month extension – check this box and complete Part I only in the form 800-18 and requesting an automatic 6-month extension – check this box and complete Part I only in the form 800-18 and the corporation required to file Form 990-18 and the form 800-18 and 8-months for 8-months						
corporation required to file form 990-Th or a additional (not automatic) 3-month extension of time to the learny of the forms isseld in Part I or Part I with the exception of Form 890. Information Return for Transfer eleasts on the service of the part of the forms stated in Part I or Part I with the exception of Form 890. Information Return for Transfer eleasts on the extension of the form 990-Th and requesting an automatic 3-month Extension of Time. Only submit original (no copies needed).  **Application**    Name of exempt original and the part of th	Do not com	plete Part II unless you have already been granted	l an automa	atic 3-month extension on a previously fi	led Form 8868	
A corporation required to file Form 990-T and requesting an automatic 6-month extension — check this box and complete Part I only     Automatic Progression (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file months for exemption application in the partnerships of the partnerships (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file months for exemption application in the partnerships (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of the file by the partnerships (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of the file by the partnerships (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of the file by the partnerships (including 1120-C filerships), partnerships, REMICS, and trusts must use Form 7004 to request an extension on market in the state of the partnerships, REMICS, and trusts must use Form 7004 to request an extension on market in the state of the partnerships, REMICS, and trusts must use Form 7004 to request an extension on market in the state of the return that this application is for (file a separate application for each return)    Partnerships	corporation request an e Associated \	required to file Form 990-T), or an additional (not extension of time to file any of the forms listed in F With Certain Personal Benefit Contracts, which mu	automatic) : Part I or Par ist be sent t	3-month extension of time. You can elect II with the exception of Form 8870, Info to the IRS in paper format (see instruction	ctronically file Form 8	868 to
All other corporations (including   1/20-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file incomerce fax returns (including   1/20-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file incomerce fax returns (including   1/20-C filers), partnerships, REMICS, and trusts must use Form 7004 to request an extension of time to file incomerce fax returns	Part I A	automatic 3-Month Extension of Time.	Only subn	nit original (no copies needed).		
Type or type or the complete and the com	A corporatio	in required to file Form 990-T and requesting an ai	utomatic 6-r	month extension - check this box and co	omplete Part I only	•
WILD SHORE FOUNDATION   35-1947845			REMICS, an	nd trusts must use Form 7004 to request	an extension of time	to file
WILD SHORE FOUNDATION Number, sitest, and room or suite number if a P O box, see matructions Interpretation of the part of their states, and 2P code For a foreign address, see instructions CARMEL  IN 46033-7730  Enter the Return code for the return that this application is for (file a separate application for each return)  Return Code Torm 990  10 1 Form 990-T (corporation)  10 2 Form 1901-T (corporation)  10 70		Name of exempt organization			Employer identification	number
WILD SHORE FOUNDATION    WILD SHORE FOUNDATION   35-1947845					35-1947845	
1950 E. GREYHOUND PASS , #18-364	print	WILD SHORE FOUNDATION				
1950 E. GREYHOUND PASS	File by the tue date for	Number, street, and room or suite number. If a P O box, see in	nstructions			
CARMEL  TN 46033-7730  Enter the Return code for the return that this application is for (file a separate application for each return)  Return Code  Todd  Application S For Code  Town 990  Town 990-10   iling your	1950 E. GREYHOUND PASS , #18-	364				
Application   Return	City, town or post office, state, and ZIP code. For a foreign add	ress, see instru	uctions			
Application s for Return Code for the return that this application is for (file a separate application for each return)    Application   Return   Return   Return   Return   Return   Separate application   Return   Return   Return   Return   Return   Separate   Return   Ret		CARMEL			IN 4603	3-7730
Application   Return   Code   Is For   Code   Is For   Code   Code   Is For   Code   Is For   Code   Is For   Code   Code   Is For   Code   Is For   Code				•		
Sefor   Code   Is For   Company	Enter the Re	eturn code for the return that this application is for	(file a sepa	rate application for each return)		04
Form 990-BL  O2 Form 1041-A  O8  Form 990-EZ  O3 Form 4720  O9  Form 990-FF  O4 Form 6069  11  Form 990-T (section 401(a) or 408(a) trust)  O5 Form 8870  12  Telephone No (317) 844-8009  If the organization does not have an office or place of business in the United States, check this box  If this s for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's return for the organization named above the extension is for  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15	Application s For					1
Form 990-EZ  O3 Form 4720  O9  Form 990-PF  O4 Form 5227  O5  Form 6669  11  Form 990-T (trust other than above)  O6 Form 8870  12  The books are in the care of KELLY MILLS  Telephone No (317) 844-8009  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If the stension is for  I I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15  The extension is for the organization's return for  X calendar year 20 10 or  X c	orm 990		01	Form 990-T (corporation)		07
Form 990-PF Form 990-T (section 401(a) or 408(a) trust)  O5 Form 6069  11 Form 990-T (trust other than above)  O6 Form 8870  12  The books are in the care of KELLY MILLS  Telephone No (317) 844-8009  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for part of the group, check this box  If it is for part of the group, check this box  If request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 11 _, to file the exempt organization return for the organization named above  The extension is for the organization's return for  X calendar year 20 10 or  X calendar year entered in line 1 is for less than 12 months, check reason  initial return  interior  initial return  Change in accounting period  3a if this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits See instructions  3a   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 allowed as a credit  3b   4,780.  C Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions  3a   0.  Caution, If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions	orm 990-BI	<u> </u>	02	4		08
Form 990-T (section 401(a) or 408(a) trust)  The books are in the care of FKELLY MILLS  Telephone No F(317) 844-8009  FAX No F  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)  If this is for a Group Return, enter the organization's return for and attach a list with the names and ElNs of all members the extension is for  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 11, to file the exempt organization return for the organization named above  The extension is for the organization's return for  X calendar year 20 10_ or  X calendar year 20 10_ or  X calendar year entered in line 1 is for less than 12 months, check reason  Initial return  Final return  Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonretundable credits See instructions  3a S 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 allowed as a credit  4,780.  c Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using	orm 990-E	Z	03	Form 4720		09
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The books are in the care of ► KELLY MILLS  Telephone No ► (317) 844-8009 FAX No ►  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► If this for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for  I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for  ► X calendar year 20 10 or  ► It ax year beginning, 20, and ending, 20  If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated tax payments made. Include any prior year overpayment allowed as a credit  C Balance due. Subtract line 3b from line 3a Include your payment with this form, if required, by using EFTPS (Electronic Federal Tax Payment System) See instructions  Caution, If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Form 8879-EO for payment instructions	orm 990-T	(section 401(a) or 408(a) trust)	05	Form 6069	11	
Telephone No ► (317) 844-8009 FAX No ►  If the organization does not have an office or place of business in the United States, check this box  If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group, check this box ► If it is for part of the group, check this box ► and attach a list with the names and EINs of all members the extension is for  1 I request an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time until Aug 15, 20 11, to file the exempt organization return for the organization named above. The extension is for the organization's return for  ► X calendar year 20 10 or  ► It ax year beginning, 20, and ending, 20  2 If the tax year entered in line 1 is for less than 12 months, check reason Initial return Final return Change in accounting period  3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any nonrefundable credits. See instructions	orm 990-T	(trust other than above)	06	Form 8870		12
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