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## Form **990-PF**

Department of the Treasury

## **Return of Private Foundation**

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

OMB No 1545-0052

		enue Service Note. The loundation may t	be able to use a copy of this	return to satisfy state repoi	ting requirements.	
For	calen	dar year 2010, or tax year beginning		, and ending		
G	Check	all that apply: Initial return		ormer public charity	Final return	1
		Amended return	Address chan	ge	Name change	
Na	me of	foundation			A Employer identification	number
		WINSLOW FAMILY FOUNDA	MT ∩N		41 1025002	•
Nu	mber a	nd street (or P O box number if mail is not delivered to street		Room/suite	41-1925882  B Telephone number	<u> </u>
		80 S 8TH ST 4720 IDS	•	Thomas and	612-376-91	00
Cit	v or to	own, state, and ZIP code	TOWER		C If exemption application is p	
"	y Or ic	• •	2-2100		D 1. Foreign organizations	<u> </u>
Н	Check	type of organization: X Section 501(c)(3) ex			Foreign organizations me check here and attach co	eeting the 85% test,
Ï	_		Other taxable private founda	ation		
I F		rket value of all assets at end of year J Accounting		Accrual	E If private foundation sta under section 507(b)(1	
		·	her (specify)		F If the foundation is in a	•
	►\$	355,056 • (Part I, colu	mn (d) must be on cash l	basis)	under section 507(b)(1	
P	art I	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		necessarily equal the amounts in column (a) )	expenses per books	income	income	for charitable purposes (cash basis only)
9	1	Contributions, gifts, grants, etc., received	20,000.		N/A	
<b>⇒</b>		Check In the foundation is not required to attach Sch. B				
S	3	Interest on savings and temporary cash investments	2 252	2.050		
<u></u>	4	Dividends and interest from securities	3,059.	3,059.		STATEMENT 1
다. 두)	1	Gross rents		<del></del>		
≓ ====================================		Net rental income or (loss)	<2,779.			
ON THE THE TON TON BEACH	oa h	Net gain or (loss) from sale of assets not on line 10 Gross sales price for all assets on line 6a 14,811.	<4,113.	<u> </u>		
O SOUTH	7	assets on line 6a 14,011.  Capital gain net income (from Part IV, line 2)		0.		· · · · · · · · · · · · · · · · · · ·
(C)	8	Net short-term capital gain		•		
	1	. •				<del></del>
	10a	Income modifications Gross sales less retireECEIVED and allowances				
	1 .	Less Cost of goods sold				
	C	Gross p 每 or (時段Y 2 3 2011 6				
	11	Other income				
	12	Total. Add lines 1 through 11	20,280.	3,059.		
	13	Compensation of officers, directors, trustees etc	0.	0.		0.
	1	Other employee salaries and wages				
y.		Pension plans, employee benefits Legal fees				
SU	loa	Accounting fees STMT 2	1,250.	0.		1,250.
Ž	-	Other professional fees	1,250.	<u> </u>		1,250.
ď.	17	Interest				-
į	18	Taxes STMT 3	170.	145.		25.
Ţ	19	Depreciation and depletion				
<u> </u>	20	Occupancy				
Ā	21	Travel, conferences, and meetings				
ב ב	22	Printing and publications				
Operating and Administrative Expenses	23	Other expenses STMT 4	81.	81.		0.
ţ	24	Total operating and administrative	4 504	200		4 0==
č	-	expenses. Add lines 13 through 23	1,501.	226.		1,275.
		Contributions, gifts, grants paid	62,500.			62,500.
	720	Total expenses and disbursements.  Add lines 24 and 25	64,001.	226.		63,775.
(		Suptract line 26 from line 12:	04,001.	220.		03,113.
		excess of revenue over expenses and disbursements	<43,721.	>		
		Net investment income (if negative, enter -0-)		2,833.		
_	_ c	Adjusted net income (if negative, enter -0-)			N/A	
023 12-	501 /~~ 07-10	LHA For Paperwork Reduction Act Notice, see	the instructions.			Form <b>990-PF</b> (2010)

回	Part II Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only		Beginning of year	End of	End of year			
드	arı	column should be for end-of-year amounts only	(a) Book Value	(b) Book Value	(c) Fair Market Value			
	1	Cash - non-interest-bearing	17,677.		23,820.			
	2	Savings and temporary cash investments	54,967.	19,600.	19,600.			
	3	Accounts receivable ►						
		Less; allowance for doubtful accounts ▶			<u> </u>			
	4	Pledges receivable ►						
		Less: allowance for doubtful accounts						
	5	Grants receivable						
	6	Receivables due from officers, directors, trustees, and other						
		disqualified persons						
	7	Other notes and loans receivable		İ				
		Less: allowance for doubtful accounts ▶			<u>.</u>			
şte	8	Inventories for sale or use			_			
Assets	9	Prepaid expenses and deferred charges						
⋖	10a	Investments - U.S. and state government obligations						
		Investments - corporate stock STMT 5	17,590.	0.	0 <u>.</u>			
		Investments - corporate bonds						
	11	Investments - land, buildings, and equipment basis						
		Less accumulated depreciation						
	i	Investments - mortgage loans	220 070	222 172	211 626			
	13	Investments - other STMT 6	230,079.	233,172.	311,636.			
	14	Land, buildings, and equipment: basis		į				
	45	Less accumulated depreciation		<u></u>				
	15	Other assets (describe ►)			<del> </del>			
	16	Total assets (to be completed by all filers)	320,313.	276,592.	355,056.			
_	17	Accounts payable and accrued expenses	320,313.	210,352.	333,030.			
	18	Grants payable						
S	19	Deferred revenue						
Liabilıtıes	20	Loans from officers, directors, trustees, and other disqualified persons						
abil	21	Mortgages and other notes payable						
Ë		Other liabilities (describe )						
				<u> </u>				
	23	Total liabilities (add lines 17 through 22)	0.	0.				
	İ	Foundations that follow SFAS 117, check here						
S		and complete lines 24 through 26 and lines 30 and 31.						
	24	Unrestricted						
Assets or Fund Balance	25	Temporarily restricted						
ä	26	Permanently restricted						
Š		Foundations that do not follow SFAS 117, check here						
P		and complete lines 27 through 31.	0	0				
ţş	27	Capital stock, trust principal, or current funds	<u> </u>	0.				
SS	28	Paid-in or capital surplus, or land, bldg., and equipment fund						
Net A	29	Retained earnings, accumulated income, endowment, or other funds  Total net assets or fund balances	320,313. 320,313.	276,592. 276,592.				
Z	30	Total het assets of lying balances	320,313.	210,392.				
	31	Total liabilities and net assets/fund balances	320,313.	276,592.				
	•			2,0,050				
LF	art	Analysis of Changes in Net Assets or Fund B	aiances					
1	Tota	I net assets or fund balances at beginning of year - Part II, column (a), line	30					
	(mu	st agree with end-of-year figure reported on prior year's return)		1	320,313.			
2	Ente	r amount from Part I, line 27a		2	<43,721.>			
		r increases not included in line 2 (itemize)	<u> </u>	3	0.			
		lines 1, 2, and 3		4	276,592.			
		eases not included in line 2 (itemize)			0.			
<u>6</u>	Tota	I net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	276,592.			
					Form <b>990-PF</b> (2010)			

		SLOW FAMILY FOUR					4	<u>1-192</u>	5882	Page 3
F	Part IV Capital Gains a	and Losses for Tax on I	<u>nvestment</u>	Income		······································				
		ribe the kind(s) of property sold (e. rehouse; or common stock, 200 st				ow acquired Purchase Donation	(c) Date a (mo., da	acquired ay, yr.)	(d) Dat (mo., da	e sold ay, yr.)
1a	400 SHS WALGRE	EN CO				P	04/1	6/09	04/1	2/10
b	CAPITAL GAINS	DIVIDENDS								
C										
d		<del></del>								
е		(O.D	T ()0		L				<u> </u>	
	(e) Gross sales price	(f) Depreciation allowed (or allowable)		t or other basis xpense of sale				ain or (loss s (f) minus	(g)	
a				17,59	0.				<3	<u>,059 .</u> :
b	280.		<del> </del>							280.
C			_							
d			-							
е	,	or some or column (h) and accord by	· the foundation	on 10/01/00	-+		0 /0			
_	(i) F.M.V. as of 12/31/69	g gain in column (h) and owned by (j) Adjusted basis as of 12/31/69	(k) Ex	cess of col. (1)			(I) Gains (C ol. (k), but n Losses		n -0-) <b>or</b>	
_		40 01 12/01/00		(), u.i.y		_				050
a b			<del> </del>			_			< 3	,059. 280.
0		<del></del>								2001
ď			1			-				
e										
_		C If gain, also ast	or in Dort Llino		7					
2	Capital gain net income or (net ca	$\{$ If gain, also entipolations) $\{$ If (loss), enter-	0- in Part I, line	<i>7</i> 7	<b>}</b>	2			<2	<u>,779.</u>
3		ss) as defined in sections 1222(5) a	and (6):		٦					
	If gain, also enter in Part I, line 8, If (loss), enter -0- in Part I, line 8	column (c).			- }	,		N/A		
F		nder Section 4940(e) fo	r Reduced	Tax on Net	Inve	stment in	come	11/23	<u> </u>	
Ľ		foundations subject to the section								
ζ, ,	or optional use by domestic private	Touridations subject to the section	1 4540(a) tax on	not investment in	1601116.	,				
lf :	section 4940(d)(2) applies, leave th	nis part blank.								
W	as the foundation liable for the sec	tion 4942 tax on the distributable a	mount of any ve	ear in the base per	rod?				Yes	X No
		lify under section 4940(e). Do not o								
1	Enter the appropriate amount in	each column for each year; see ins	tructions before	making any entri	es.					
	(a) Base period years	(b)			(c)			Dietril	(d) oution ratio	
	Calendar year (or tax year beginni	ng in) Adjusted qualifying d	istributions	Net value of no	ncharit	able-use asset	s	(col. (b) div	rided by col.	(c))
_	2009		33,275.			329,19	9.			01079
	2008		10,600.			61,06				<u>73583</u>
_	2007		10,408.			43,98				<u> 36626</u>
_	2006		1,500.			42,14				<u>35592</u>
_	2005		8,833.			<u>38,10</u>	2.		.2	<u>31825</u>
									_	
	Total of line 1, column (d)						2		.7	<u> 78705</u>
3	· · · · · · · · · · · · · · · · · · ·	5-year base period - divide the tota	I on line 2 by 5,	or by the number	of yea	rs				
	the foundation has been in existe	nce if less than 5 years					3		.1	<u>55741</u>
4	Enter the net value of noncharitat	ple-use assets for 2010 from Part X	C, line 5				4		335	<u>,882.</u>
_									F 2	211
5	Multiply line 4 by line 3						5		52	<u>,311.</u>
_	Faton 40/ of the	(40) ( D )								20
6	Enter 1% of net investment incor	ne (1% of Part I, line 27b)					6			28.
_	Addition For CO								F 0	220
1	Add lines 5 and 6						7		52	<u>,339.</u>
8	Enter qualifying distributions from	m Part XII, line 4					8		63	,775.
	If line 8 is equal to or greater than See the Part VI instructions.	n line 7, check the box in Part VI, lin	ne 1b, and comp	olete that part usin	ng a 1%	tax rate.				

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_	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or	4948	- see i	nstru	ctior	າຮ)
1a	Exempt operating foundations described in section 4940(d)(2), check here  and enter "N/A" on line 1.					
	Date of ruling or determination letter: (attach copy of letter if necessary-see instructions)		1			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here X and enter 1%	1				<u>28.</u>
	of Part I, line 27b					
	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				<u>0.</u>
3	Add lines 1 and 2	3	ļ			<u> 28.</u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4				<u>0.</u>
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-	5	ļ .			<u> 28.</u>
	Credits/Payments:					
	2010 estimated tax payments and 2009 overpayment credited to 2010 6a 6a	4				
	Exempt foreign organizations - tax withheld at source	_				
	Tax paid with application for extension of time to file (Form 8868)					
	Backup withholding erroneously withheld 6d 6					_
	Total credits and payments. Add lines 6a through 6d	7	1			0.
	Enter any <b>penalty</b> for underpayment of estimated tax. Check here if Form 2220 is attached	8_	<del> </del>			
	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed	9	-			<u> 28.</u>
	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				
	Enter the amount of line 10 to be: Credited to 2011 estimated tax	11				
	art VII-A Statements Regarding Activities			1	Vaa	NIa
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or interve	ne in			Yes	
	any political campaign?			1a		X
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)			1b		X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published	ned or				
	distributed by the foundation in connection with the activities.					77
	Did the foundation file Form 1120-POL for this year?			1c		X
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year:					
		•				
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation					
_	managers. ► \$				ı	₩.
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?			2		X
•	If "Yes," attach a detailed description of the activities.					
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation	i, Ui		, '		х
4.	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes  Did the foundation have unrelated business gross income of \$1,000 or more during the year?			3 4a		X
	of "Yes." has it filed a tax return on Form 990-T for this year?	7	A\N	4b		
	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	•	. 7 11	5		х
J	If "Yes," attach the statement required by General Instruction T.			<b> </b>		
6	and the second s			1		
Ü	By language in the governing instrument, or					
	<ul> <li>By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the st</li> </ul>	ate law				ļ
	remain in the governing instrument?	u.o .u.,		6	х	
7	Did the foundation have at least \$5,000 in assets at any time during the year?			7	X	<b></b> -
•	If "Yes," complete Part II, col (c), and Part XV.					
8:	a Enter the states to which the foundation reports or with which it is registered (see instructions)					
56	MN					Į.
,	o If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)					
•	of each state as required by General Instruction G? If "No," attach explanation			8b	х	
9		alendar		<u> </u>		t
٠	year 2010 or the taxable year beginning in 2010 (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		Х

c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.

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

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

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

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?

N/A

Yes X No

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X

3b

4a

during the year?

orm 990-PF (2010) WINSLOW FAMILY FOUNDATIO	N		41-19258	82	Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4720 May Be R	lequired (continu	ued)		_ <del></del>
5a During the year did the foundation pay or incur any amount to:			[		
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?	Ye	s X No		
(2) Influence the outcome of any specific public election (see section 4955); of	r to carry on, directly or indire				İ
any voter registration drive?			s X No		
(3) Provide a grant to an individual for travel, study, or other similar purposes?	7	Ye	s X No		1
(4) Provide a grant to an organization other than a charitable, etc., organization	n described in section				1
509(a)(1), (2), or (3), or section 4940(d)(2)?		Ye	s X No		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or fo				
the prevention of cruelty to children or animals?		Ye	s X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	der the exceptions described i	n Regulations			
section 53.4945 or in a current notice regarding disaster assistance (see instru	ctions)?		N/A	5b	
Organizations relying on a current notice regarding disaster assistance check h	ere		▶□		
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr	om the tax because it maintai	ned	1		
expenditure responsibility for the grant?	N	/A 🔲 Ye	s No		
If "Yes," attach the statement required by Regulations section 53 4945	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	pay premiums on				
a personal benefit contract?		☐ Ye	s X No		
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?			6b	X
If "Yes" to 6b, file Form 8870.					
7a At any time during the tax year, was the foundation a party to a prohibited tax s	helter transaction?	Ye	s X No		<u> </u>
b If "Yes," did the foundation receive any proceeds or have any net income attribu				7b	
Part VIII Information About Officers, Directors, Trusto	ees, Foundation Ma	nagers, Highly	/		
1 List all officers, directors, trustees, foundation managers and their		(-) Companyotion	(d) Contributions to	1	
(a) Name and address	(b) Title, and average hours per week devoted	(c) Compensation (If not paid,	(d) Contributions to employee benefit plans and deferred compensation	accou	xpense nt, other
	to position	enter -0-)	compensation	allov	vances
	PRESIDENT/TRE	ASURER			
1205 FRENCH CREEK DRIVE					_
WAYZATA MN	2.00	0.	0.	<u> </u>	<u>       0                             </u>
	VICE PRESIDEN	LT			
1205 FRENCH CREEK DRIVE	1 00				^
WAYZATA MN	1.00	0.	0.	1	0.
···	SECRETARY				
10660 47TH AVENUE NORTH	1 00			1	^
PLYMOUTH MN	1.00	0.	0.		0.
	_				
2 Compensation of five highest-paid employees (other than those inc	cluded on line 1) If none	enter "NONE "	l		
2 Compensation of five highest-paid employees (other than those inc	(b) Title, and average	enter NONE.	(d) Contributions to	(e) F	xpense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	employee benefit plans and deferred	accou	xpense int, other wances
NONE	devoted to position		compensation	ano	Walles
NOME	-			1	
				<del> </del>	
	-				
				<u> </u>	
	1				
		1		<del>                                     </del>	
	†				
			<del>                                     </del>	<u> </u>	
	1				
Total number of other employees paid over \$50,000	·	1	<u> </u>		0
- Care					

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Part VIII Information About Officers, Directors, Trustees, Foundation Paid Employees, and Contractors (continued)	Managers, Highly		
3 Five highest-paid independent contractors for professional services. If none, enter "NOI	VE."		
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Con	npensation
NONE	•		
	<del>-</del>		
			<del></del>
Total number of others receiving over \$50,000 for professional services  Part IX-A Summary of Direct Charitable Activities		<b>&gt;</b>	0
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical infinumber of organizations and other beneficiaries served, conferences convened, research papers produced,		Expense	s 
1 N/A			
2			
3			
4			
Port IV B Comment of Days and			
Part IX-B   Summary of Program-Related Investments  Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2.	Amount	
1 <u>N/A</u>			
2			
All other program-related investments. See instructions.  3			
Total. Add lines 1 through 3	<b>&gt;</b>		0.

P	Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations	ndations, s	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	275,738.
	Average of monthly cash balances	1b	275,738. 65,259.
C	Fair market value of all other assets	1c	
d	Total (add lines 1a, b, and c)	1d	340,997.
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	2	0.
3	Subtract line 2 from line 1d	3	340,997.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	5,115.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	335,882.
6	Minimum investment return Enter 5% of line 5	6	16,794.
P	pistributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations are foreign organizations check here and do not complete this part.)	nd certain	
1	Minimum investment return from Part X, line 6	1	16,794.
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	28.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	16,766.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	16,766.
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	16,766.
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	63,775.
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	63,775.
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	28.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	63,747.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation	nualifies for	the section

4940(e) reduction of tax in those years.

## Part XIII Undistributed Income (see instructions)

, ,	(a) Corpus	(b) Years prior to 2009	(c) 2009	( <b>d)</b> 2010
1 Distributable amount for 2010 from Part XI,				
line 7				16,766.
2 Undistributed income, if any, as of the end of 2010			_ ]	
a Enter amount for 2009 only			0.	· · · · · · · · · · · · · · · · · · ·
b Total for prior years:		0		
3 Excess distributions carryover, if any, to 2010:		0.		
a From 2005 6,930.				
b From 2006				
c From 2007 8,393.				
d From 2008 7,547.				
e From 2009 16,843.				
f Total of lines 3a through e	39,713.			
4 Qualifying distributions for 2010 from	337,130			•
Part XII, line 4: ▶\$ 63,775.				
a Applied to 2009, but not more than line 2a			0.	
<b>b</b> Applied to undistributed income of prior				
years (Election required - see instructions)	į	0.		
c Treated as distributions out of corpus				
(Election required - see instructions)	0.			
d Applied to 2010 distributable amount				16,766.
e Remaining amount distributed out of corpus	47,009.			2011001
5 Excess distributions carryover applied to 2010 (If an amount appears in column (d), the same amount	0.			0.
must be shown in column (a))  6 Enter the net total of each column as				
indicated below:	86,722.	•		
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 b Prior years' undistributed income. Subtract	00,122.			
line 4b from line 2b		0.		
c Enter the amount of prior years'		0.		
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		0.		
amount - see instructions		0.		
e Undistributed income for 2009. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2010. Subtract		-		
lines 4d and 5 from line 1. This amount must				
be distributed in 2011				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.			
8 Excess distributions carryover from 2005				
not applied on line 5 or line 7	6,930.			
9 Excess distributions carryover to 2011.				
Subtract lines 7 and 8 from line 6a	79,792.			
10 Analysis of line 9:				
a Excess from 2006				
b Excess from 2007 8,393.				
c Excess from 2008 7,547.				
d Excess from 2009 16,843.				
e Excess from 2010 47,009.				
				Earm <b>QQA_PF</b> (2010)

Form 990-PF (2010) WINSLOW	FAMILY FOU	NDATION		41-19	25882 Page 10
Part XIV Private Operating F			A, question 9)	_ N/A	
1 a If the foundation has received a ruling of					
foundation, and the ruling is effective for			▶ └		
<b>b</b> Check box to indicate whether the found		ng foundation described in		4942(J)(3) or 49	42(j)(5)
2 a 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					
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					
3 Complete 3a, b, or c for the alternative test relied upon;					
a "Assets" alternative test - enter:					
(1) Value of all assets					
(2) Value of assets qualifying under section 4942(j)(3)(B)(i)					
b "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	rmation (Comple	te this part only i	f the foundation	had \$5,000 or mo	ore in assets
at any time during t	he year-see the i	instructions.)			
1 Information Regarding Foundation	n Managers:		-		_
a List any managers of the foundation wh			butions received by the	foundation before the clos	se of any tax
year (but only if they have contributed n	nore than \$5,000). (See s	ection 507(d)(2).)			
SEE STATEMENT 7					
<b>b</b> List any managers of the foundation wh			or an equally large portion	on of the ownership of a p	artnership or
other entity) of which the foundation ha	s a 10% or greater interes	st.			
NONE					
2 Information Regarding Contribut	on, Grant, Gift, Loan,	Scholarship, etc., Pr	ograms:		
Check here 🕨 🔲 if the foundation of	nly makes contributions	to preselected charitable o	organizations and does r	ot accept unsolicited requ	ests for funds. If
the foundation makes gifts, grants, etc.	(see instructions) to indiv	viduals or organizations ui	nder other conditions, co	omplete items 2a, b, c, and	l d.
a The name, address, and telephone num	ber of the person to who	m applications should be	addressed:		
CLARK WINSLOW					
80 SOUTH 8TH ST, MIN	NEAPOLIS, M	N 55402			
b The form in which applications should be GENERAL INFORMATION		<del>-</del>			
c Any submission deadlines: NONE	<u> </u>				
d Any restrictions or limitations on award	s, such as by geographic	al areas, charitable fields.	kinds of institutions, or o	other factors:	
NONE	.,				
			<del></del>		

Recipient   If recipient is an individual, show any relationship to any foundation manager or substantial contributor   Foundation status of recipient   Purpose of grant or contribution      A Paid during the year   If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Amount
a Paid during the year	
SEE STATEMENT 8	
Total  b Approved for future payment	52,500.
• Approved for lattire payment	
NONE	
	0.

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

		business income		ded by section 512, 513, or 514	(e)
Program service revenue:	Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exempt function income
a					
b	_	<del></del>	<u> </u>		
c					
d	l l	_	<del>  </del>		
e	_ <del>                                    </del>		+		
g Fees and contracts from government agencies			+		
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash			1	-	
investments					
4 Dividends and interest from securities			14	3,059.	
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		<del></del> .	<del>  </del>		····
7 Other investment income					
8 Gain or (loss) from sales of assets other				0 550	
than inventory			18	<2,779.	<u>&gt;</u>
Net income or (loss) from special events     Gross profit or (loss) from sales of inventory					
1 Other revenue:		<del></del>	-	·	
a					
b					
C			<del> </del>		
d					
e					
2 Subtotal. Add columns (b), (d), and (e)		0	•	280.	0
- Cabrolai riod oblamno (b), (d), and (6)				13	280
3 Total Add line 12, columns (b), (d), and (e)					
3 Total Add line 12, columns (b), (d), and (e)	.)				
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.		mplishment of E	xemp	t Purposes	
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No. Explain below how each activity for which in	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No. Explain below how each activity for which in	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
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3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
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3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of
3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			applishment of
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3 Total Add line 12, columns (b), (d), and (e) See worksheet in line 13 instructions to verify calculations.  Part XVI-B  Relationship of Activities  Line No.  Explain below how each activity for which in the foundation's exempt purposes (other the	s to the Accor	column (e) of Part XVI-			nplishment of

Part X			OW FAMIL		ATION and Transactions a	and Polotion		<u>925882</u>	Pag	ge 13
Taltx		mpt Organ		insiers to a	ina iransacuons a	and Relations	snips with Non	cnamable		
1 Did t			_	of the following	g with any other organizati	on described in sec	tion 501(c) of	<del></del>	Yes	No
		-		•	7, relating to political organ					
			ation to a nonchar							
(1)		, ,						1a(1)		X
(2) Other assets								1a(2)		X
	r transactions:									
(1)	Sales of assets	to a noncharita	ble exempt organı	zation				1b(1)		X
(2)	Purchases of a	ssets from a no	ncharitable exemp	t organization				1b(2)		X
(3)	Rental of faciliti	es, equipment,	or other assets					1b(3)		<u>X</u>
(4)	Reimbursemen	t arrangements						1b(4)		<u>X</u>
(5)	Loans or Ioan (	juarantees						1 <u>b(</u> 5)		<u>X</u> _
(6)	Performance o	f services or me	mbership or fundi	raising solicitatio	ns			1b(6)		<u>X</u> _
	•		iling lists, other as					1c		<u>X</u> _
					dule. Column (b) should al				ts,	
					ed less than fair market vali	ue in any transactio	n or sharing arrangem	ent, show in		
(a) Line no	<del>,                                    </del>	nt involved	other assets, or se		exempt organization	(d) D				
(a) Line no	(0)////////	THE HIT OF CO.	(c) Name	N/A	compt organization	(U) Description	on of transfers, transaction	s, and snamy and	urgerner	
	<del> </del>			N/ A						
					<del></del>					
	1						<del> </del>			
-										
	-				<del></del>					
<u> </u>	. ( 1-11				· · · · · · · · · · · · · · · · · · ·					
					or more tax-exempt organ	izations described			77	٦.,
			r than section 501	(c)(3)) or in seci	1011 5277			Yes	LA.	] No
<u> </u>		ne following sch (a) Name of org			(b) Type of organization	1	(c) Description of rela	tionship	-	
		N/A	garnization.		(b) Typo or organization	<del>                                     </del>	(v) Doddription of for		-11	
			··			<u> </u>				
	<del>-</del>	<del> </del>	<del></del>	<del>-</del>					_	
					ing accompanying schedules ar ased on all information of which			and belief, it is true	в, соттес	ct,
Sign	and complete L	) // A	are (other than taxpa)	O —	ased on all information of which	preparer has any know	ິດ ` .	<b>Ø</b> )		
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(612)876-4500 Form **990-PF** (2010)

Phone no.

MINNEAPOLIS, MN 55402

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

Department of the Treasury Internal Revenue Service

#### Schedule of Contributors

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

OMB No 1545-0047

**2010** 

**Employer identification number** Name of the organization 41-1925882 WINSLOW FAMILY FOUNDATION Organization type (check one): Filers of: Section: 501(c)( Form 990 or 990-EZ ) (enter number) organization 4947(a)(1) nonexempt charitable trust not treated as a private foundation 527 political organization X 501(c)(3) exempt private foundation Form 990-PF 4947(a)(1) nonexempt charitable trust treated as a private foundation 501(c)(3) taxable private foundation Check if your organization is covered by the General Rule or a Special Rule. Note. Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions General Rule For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or more (in money or property) from any one contributor Complete Parts I and II **Special Rules** For a section 501(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), and received from any one contributor, during the year, a contribution of the greater of (1) \$5,000 or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II. 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, aggregate contributions of more than \$1,000 for use exclusively 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 aggregate to more than \$1,000. If 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 that is not covered by the General Rule and/or the Special Rules does not file Schedule 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) (2010)

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 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).

	4	4	
Page	⊥ of	L of Part I	1

Name of organization

Employer identification number

## WINSLOW FAMILY FOUNDATION

41-1925882

Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	CLARK & SHARON WINSLOW  1205 FRENCH CREEK DR  WAYZATA, MN 55391	\$\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate 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) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II if there is a noncash contribution.)

Page of of Part II

Name of organization

Employer identification number

### WINSLOW FAMILY FOUNDATION

41-1925882

Part II	Noncash Property (see instructions)		
(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. 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
		<b>\$</b>	
(a) No. from Part I	(b)  Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		     \$	

of Part III

Name of organization Employer identification number WINSLOW\_FAMILY FOUNDATION 41-1925882 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organizations aggregating more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. Part III Part III, enter the total of exclusively religious, charitable, etc., contributions of \$1,000 or less for the year (Enter this information once See instructions.) > \$ (a) No. from (b) Purpose of gift (c) Use of gift (d) Description of how gift is held Part I (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, 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, 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, and ZIP + 4 Relationship of transferor to transferee

FORM 990-PF DIVIDENT	OS AND	INTER	EST FROM	SECUE	RITIES	STATEMENT	1	
SOURCE		GROSS	AMOUNT		TAL GAINS	COLUMN (A	)	
US BANCORP	-	<del></del>	3,339.		280.	3,0	59.	
TOTAL TO FM 990-PF, PART I, I	LN 4 =		3,339.		280.	3,0	59.	
FORM 990-PF	AC	COUNTI	NG FEES			STATEMENT	2	
DESCRIPTION	EXPE		NET INV	EST-		(D) CHARITAI E PURPOSI		
ACCOUNTING FEES	:	1,250.		0.		1,2	1,250.	
TO FORM 990-PF, PG 1, LN 16B		1,250.		0.		1,2	50.	
FORM 990-PF		TAX	ES			STATEMENT	3	
DESCRIPTION	EXPE	A) NSES BOOKS	NET INV		(C) ADJUSTED NET INCOM	CHARITA		
MN TAXES FOREIGN TAXES	_	25. 145.		0. 145.		,	25.	
TO FORM 990-PF, PG 1, LN 18		170.		145.			25.	
FORM 990-PF	O'	THER E	XPENSES			STATEMENT	4	
DESCRIPTION	EXPE	A) NSES BOOKS	(B) NET INV MENT IN	EST-				
BANK CHARGES		81.	-	81.			0.	
TO FORM 990-PF, PG 1, LN 23		81.	-	81.		<del></del>	0.	

	DRPORATE STOCK		STATEMENT	Ę
DESCRIPTION		BOOK VALUE	FAIR MARKE VALUE	T
UBS EQUITY INVESTMENTS	•	0.		0.
TOTAL TO FORM 990-PF, PART II, LIN	0.			
FORM 990-PF OTH	HER INVESTMENTS		STATEMENT	
DESCRIPTION	VALUATION METHOD	BOOK VALUE	FAIR MARKE VALUE	T
MAINSTAY GROWTH WINSLOW LARGE CAP GROWTH FD I TRADEWINDS GLBL ALL CAP CL I	COST COST COST	28,692. 100,816. 103,664.	24,8 145,6 141,1	38.
TOTAL TO FORM 990-PF, PART II, LIN	NE 13	233,172.	311,6	36.

NAME OF MANAGER

CLARK J. WINSLOW SHARON L. WINSLOW

FORM 990-PF

STATEMENT

	DURING THE YEAR		EMENT 0
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT
THE MINNESOTA OPERA 620 N 1ST ST MINNEAPOLIS, MN 55401	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
YALE UNIVERSITY PO BOX 2038 NEW HAVEN, CT 06521-2038	NONE GENERAL OPERATING	PUBLIC CHARITY	25,000.
THE BLAKE SCHOOL 110 BLAKE ROAD SOUTH HOPKINS, MN 553434	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
THE LINCOLN SOCIETY 439 NORTH RIVER STREET GUILFORD, CT 06437	NONE GENERAL OPERATING	PUBLIC CHARITY	5,000.
SCIENCE MUSEUM OF MINNESOTA 120 WEST KELLOGG BOULEVARD ST. PAUL, MN 55102		PUBLIC CHARITY	5,000.
LINK COMMUNITY SCHOOL 120 LIVINGSTON STREET NEWARK, NJ 07103			2,500.
MINNEAPOLIS INSTITUTE OF ARTS 2400 THIRD AVENUE SOUTH MINNEAPOLIS, MN 55404	NONE GENERAL OPERATING	PUBLIC CHARITY	10,000.
SAN FRANCISCO YACHT CLUB 98 BEACH ROAD, PO BOX 379 BELVEDERE, CA 94920	NONE YOUTH SAILING PROGRAM	PUBLIC CHARITY	2,500.

GRANTS AND CONTRIBUTIONS

WINSLOW FAMILY FOUNDATION

41-1925882

YALE ALUMNI ASSOCIATION NONE
21 EAST OAKS ROAD NORTH OAKS, GENERAL OPERATING MN 55127

PUBLIC CHARITY

2,500.

TOTAL TO FORM 990-PF, PART XV, LINE 3A

62,500.

## Form **8868**

\* 1 1 P

(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

<ul><li>If you a</li></ul>	are filing for an Automatic 3-Month Extension, complet	te only Pa	rt I and check this box		<b>•</b>	LXJ
If you a	are filing for an Additional (Not Automatic) 3-Month Ex	tension, c	complete only Part II (on page 2 of this	form)		
Do not c	omplete Part II unless you have already been granted a	in automa	tic 3-month extension on a previously fil	led For	m 8868.	
Electroni	ic filing (e-file). You can electronically file Form 8868 if y	ou need a	3-month automatic extension of time to	o file (6	months for a corpe	oration
	to file Form 990-T), or an additional (not automatic) 3-mol				·	
	file any of the forms listed in Part I or Part II with the exc				=	
	Benefit Contracts, which must be sent to the IRS in pap	•	·			
	urs gov/efile and click on e-file for Chanties & Nonprofits		(see mondenens). For more details on a	10 0100	arome ming or and r	Oiiii,
Part I	Automatic 3-Month Extension of Time		hmit original (no copies needed)			
	ation required to file Form 990-T and requesting an autor		***	nloto		
Part I onl	, , ,	natio o me	man extension seneck this box and con	ipiete	_	
	y corporations (including 1120-C filers), partnerships, REM	ICo and t	nusto muet uso Form 7004 to request on	ovton	over of time	ш
	corporations (including 1120-C mers), partnerships, held			ехсен	sion or time	
Type or	Name of exempt organization			Employer identification number		
print						
	WINSLOW FAMILY FOUNDATION			4	1-1925882	
File by the due date for	Number, street, and room or suite no If a P O. box, s	ee instruc	tions.			
filing your return See	80 S 8TH ST 4720 IDS TOWER					
nstructions	City, town or post office, state, and ZIP code For a fo	reign add	ress, see instructions.			
	MINNEAPOLIS, MN 55402-2100	)				
Enter the	Return code for the return that this application is for (file	a separa	te application for each return)			0 4
Applicat	on	Return	Application			Return
ls For		Code	Is For			Code
Form 990	)	01	Form 990-T (corporation)			07
Form 990	D-BL	02	Form 1041-A			08
Form 990	)-EZ	03	Form 4720			09
Form 990		04	Form 5227			10
Form 990	O-T (sec 401(a) or 408(a) trust)	05	Form 6069			11
	O-T (trust other than above)	06	Form 8870			12
	CLARK WINSLOW	<u> </u>				<u> </u>
• The b	ooks are in the care of > 80 SOUTH 8TH ST	r. 4°	720 IDS TOWER - MINN	EAP	OLIS. MN 5	55402
	none No ► (612)376-9100		FAX No. ▶			
	organization does not have an office or place of business	s in the Ur	· · · · · · · · · · · · · · · · · · ·			
	is for a Group Return, enter the organization's four digit		-	is is fo	r the whole aroup. a	check this
box ►	If it is for part of the group, check this box	1	ich a list with the names and EINs of all		= :	
	equest an automatic 3-month (6 months for a corporation				ore the extendent to	, , , , , , , , , , , , , , , , , , , ,
, ,,,			tion return for the organization named a		The extension	
us f	or the organization's return for	. organiza	tion rotalin for the organization harned t		THE CALCHOIGH	
.5.	X calendar year 2010 or					
	tax year beginning	an	d ending			
	tax year beginning	, uii			_	
2 If t	he tax year entered in line 1 is for less than 12 months, o	hock rose	on. Initial return Fina	al retur	'n	
- I	Change in accounting period	ileek leas	on	ai ietui	.,	
_	Change in accounting period					
3a If t	his application is for Form 990-BL, 990-PF, 990-T, 4720,	or 6069, e	nter the tentative tax, less any			
	nrefundable credits See instructions	•	•	3a	\$	0.
	his application is for Form 990-PF, 990-T, 4720, or 6069,	enter anv	refundable credits and	T	-	
	timated tax payments made Include any prior year overg	-		3b	\$	0.
	lance due. Subtract line 3b from line 3a Include your pa			"	<u> </u>	
	using EFTPS (Electronic Federal Tax Payment System)	-	•	3c	s	0.
	. If you are going to make an electronic fund withdrawal		· -	•	<u>. *</u>	_
	For Paperwork Reduction Act Notice, see Instructions		sore, our own o too to and rom	55,5	Form <b>8868</b> (R	
	or apprison readoustrate notice, see man notices	••			1 0000 (11	J. , 2011