

See a Social Security Number? Say Something! Report Privacy Problems to https://public.resource.org/privacy Or call the IRS Identity Theft Hotline at 1-800-908-4490



Department of the Treasury Internal Revenue Service

Return of Private Foundation

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

Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052 Open to Public Inspection

Fo	r ca	lendar year 2012 or tax year beginning	, a	nd ending			
Na	me d	of foundation			A E	Employer identification nu	umber
US	Wi	nd Force Foundation, Inc.				27-3380	430
		r and street (or P O. box number if mail is not delivered to street ad	ldress)	Room/suite	B 1	Felephone number (see ins	
PC) Bo	x 571				(304) 257	-0770
		town, state, and ZIP code			C If	exemption application is pe	
Po	ters	burg	wv	26847	۱	exemption application is pr	anding, check here
_			al return of a former		1	. Foreign organizations, ch	ack here
•	U		ended return	public criainty			_
			ne change		2	Foreign organizations me. check here and attach coi	· ·
	<u></u>				1	CHECK HEIE and attach col	Imputation
		eck type of organization: X Section 501(c)(3) exe				private foundation status w	
<u></u>		ection 4947(a)(1) nonexempt charitable trust 🔲 C	· · · · · · · · · · · · · · · · · · ·		ľ	nder section 507(b)(1)(A), (check here
ı		r market value of all assets at end J Accounting		n ☐ Accrual		the foundation is in a 60-m	
		year (from Part II, col. (c), Other (sp			l u	nder section 507(b)(1)(B), o	check here
Б.		16) ►\$ 35,368 (Part I, column (c	n) must be on cash bas	is)	<u> </u>	T	(d) Disbursements
F	irt l	Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d) may not necessarily equal	(a) Revenue and	(b) Net investm	ent	(c) Adjusted net	for chantable
		the amounts in column (a) (see instructions))	expenses per books	ıncome		ıncome	purposes
							(cash basis only)
	1	Contributions, gifts, grants, etc , received (attach schedule)	30,000			<u> </u>	
	2						
7	3	,,		-			
£107	4	Dividends and interest from securities					<u> </u>
જ	3	a Gross rents					<u> </u>
∌ 9	ے ا	b Net rental income or (loss)	_			·	
ei =	۱ ۰	a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a					
Revenue	7					 	
ے د	8	Net short-term capital gain					
֝֝֝֡֡֝֝֡֝	9						
	l . I	a Gross sales less returns and allowances					
ζ	'`	b Less: Cost of goods sold					
		c Gross profit or (loss) (attach schedule)					
3	11						
	12	Total Add lines 1-through 11	30,000				
	13	107	00,000				
enses	14	Other employee salaries and wages	,			-	
ë	15	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
Exp	16	a Legal fees lattach & GDEN. UT.					
E E	l	b Accounting fees (altach schedule)	2,566				2,566
Administrative	1	c Other professional fees (attach schedule)	40				40
īa	17	Interest					
ist	18	, , , , , , , , , , , , , , , , , , , ,					
nj.	19	Depreciation (attach schedule) and depletion					
þ	20						
		Travel, conferences, and meetings					
ă	22	• •					
Þ	23	·	81				81
ij	24	•					
Operating and	_ [Add lines 13 through 23	2,687			ļ	2,687
Ŏ	25	- · · · · · · · · · · · · · · · · · · ·	54,500				54,500
_	120		57,187				57,187
	27						
	1	a Excess of revenue over expenses and disbursements .	-27,187				
	1	b Net investment income (if negative, enter -0-)				<u> </u>	
	1	c Adjusted net income (if negative, enter -0-)				1	

Dэ	rt II	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only. (See instructions.)	Beginning of year	End o	of year	
Га		should be for end-of-year amounts only (See instructions.)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing	65,759	35,368	35,368	
,	2	Savings and temporary cash investments				
	3	Accounts receivable				
		Less: allowance for doubtful accounts				
	4	Pledges receivable				
		Less allowance for doubtful accounts				
	5	Grants receivable				
	6	Receivables due from officers, directors, trustees, and other				
		disqualified persons (attach schedule) (see instructions)				
	7	Other notes and loans receivable (attach schedule)				
		Less allowance for doubtful accounts				
Ø	8	Inventories for sale or use				
Assets	9	Prepaid expenses and deferred charges				
ŝ	10 a	Investments—U.S. and state government obligations (attach schedule)	- "			
		nvestments—corporate stock (attach schedule)				
	i	Investments—corporate bonds (attach schedule)				
	11	Investments—land, buildings, and equipment basis				
	' '	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 the				
	10	instructions. Also, see page 1, Item I)	65,759	35,368	35,368	
	17	Accounts payable and accrued expenses	6,393	3,189	35,300	
	18	Grants payable	0,090	3,109		
es		· •				
≅	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
=======================================	21	Mortgages and other notes payable (attach schedule)	·			
	22	Other liabilities (describe)	2.222			
	23	Total liabilities (add lines 17 through 22)	6,393	3,189		
uh		Foundations that follow SFAS 117, check here				
lances		and complete lines 24 through 26 and lines 30 and 31.				
띪	24	Unrestricted				
<u>8</u>	25	Temporanly restricted				
9	26	Permanently restricted				
Ē]	Foundations that do not follow SFAS 117, check here . 🕨 🔲				
Net Assets or Fund Ba	1	and complete lines 27 through 31.				
Ö	27	Capital stock, trust principal, or current funds				
ets	28	Paid-in or capital surplus, or land, bldg., and equipment fund				
SS	29	Retained earnings, accumulated income, endowment, or other funds	59,366	32,179		
⋖	30	Total net assets or fund balances (see instructions)	59,366	32,179		
ē	31	Total liabilities and net assets/fund balances (see				
	L	ınstructions)	65,759	35,368		
Pa	rt III	Analysis of Changes in Net Assets or Fund Balances				
1	Total	net assets or fund balances at beginning of year-Part II, column (a), line 3	30 (must agree with			
	end-o	of-year figure reported on pnor year's return)		<u>. 1 .</u>	59,366	
2	Enter	amount from Part I, line 27a		2	-27,187	
3		increases not included in line 2 (itemize)				
4	Add li	nes 1, 2, and 3	· · · · · · · · · · · ·		32,179	
5	Decre	eases not included in line 2 (itemize)		 1		
		net assets or fund balances at end of year (line 4 minus line 5)—Part II, col	lumn (b), line 30		32,179	
				احتساسي المستسيد	32,179	

Form 990-PF (2012) US Wind F	Force Foundation, Inc.				27-3380430 Page 3
	d Losses for Tax on Investn	nent Inco	me	-	
The state of the s	kind(s) of property sold (e.g., real estate, e, or common stock, 200 shs MLC Co.)		(b) How acquired P—Purchase D—Donation	(c) Date acquir (mo , day, yr	
1a			D-Donation		
b					
С					
_d					
е					
(e) Gross sales price	(f) Depreciation allowed (or allowable)		r other basis ense of sale	-	i) Gain or (loss) plus (f) minus (g)
b					
C					.
d					
е					
Complete only for assets shown	ng gain in column (h) and owned by th	e foundation	n on 12/31/69	(I) Gain	s (Col. (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69		ss of col (ı)		out not less than -0-) or ses (from col (h))
а					
b					
<u>c</u>					
d e					
2 Capital gain net income or ((net capital loss) { If gain, also				· · · · · · · · · · · · · · · · · · ·
-	or (loss) as defined in sections 1			2	
	line 8, column (c) (see instructior	ns). If (loss	s), enter -0· }		
				3	
	er Section 4940(e) for Redu				
(For optional use by domestic p	private foundations subject to the	section 49	940(a) tax on net	investment inc	come.)
If section 4940(d)(2) applies, le	ave this part blank.				
	ne section 4942 tax on the distribute qualify under continue 4940(c).			n the base per	iod? Yes X No
	ot qualify under section 4940(e). In the control of			makina anu	
(a)		, see the h		a making any o	entries. (d)
Base period years	(b) Adjusted qualifying distributions	Net value o	(c) of nonchantable-use a	ssets	Distribution ratio
Calendar year (or tax year beginning in 2011	3,365			,825	(b) divided by col (c))
2010	11,420			,368	<u>0.262378</u> 1.364723
2009			<u></u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1.001120
2008					
2007		<u> </u>			
2 Total of line 1, column (d)				. 2	1.627101
•	r the 5-year base period—divide		• •	, , ,	
the number of years the fou	ndation has been in existence if I	ess than 5	years	3	<u>0.8135</u> 51
			_		
4 Enter the net value of nonch	naritable-use assets for 2012 fron	n Part X, li	ne 5	· 4	21,350
5 Multiply line 4 by line 3 .				. 5	17,369
6 Enter 1% of net investment	income (1% of Part I, line 27b)			6	
7 Add lines 5 and 6				. 7	17,369
	s from Part XII, line 4				57,187
If line 8 is equal to or greate the Part VI instructions.	er than line 7, check the box in Pa	art VI, line	1b, and complete	that part usin	g a 1% tax rate. See

۲ā	art V. Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948—see instr	uctio	ns)	
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 instructions)			
ı	b Domestic foundations that meet the section 4940(e) requirements in Part V, check			Ĺ
	here X and enter 1% of Part I, line 27b			
	C All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4%			
2	of Part I, line 12, col. (b)			İ
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 2			├
3	Add lines 1 and 2			<u> </u>
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			├—
5 6	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0			_
-	a 2012 estimated tax payments and 2011 overpayment credited to 2012 6a			
	b Exempt foreign organizations—tax withheld at source 6b			İ
	C Tax paid with application for extension of time to file (Form 8868) 6c			
7 `	Total credits and payments. Add lines 6a through 6d			
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached			
9	Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed			\vdash
10				
11				
Ρa	art VII-A Statements Regarding Activities	Π		<u> </u>
	a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	t	Yes	No
•	participate or intervene in any political campaign?	1a	1.00	X
1	b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see	<u> </u>		-^-
	Instructions for the definition)?	1ь		х
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials	<u></u>	 	 ^-
	published or distributed by the foundation in connection with the activities		İ	
,	C 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:			
	(1) On the foundation. ▶ \$ (2) On foundation managers ▶ \$			
	e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed			
	on foundation managers > \$			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?	2		$\tilde{\mathbf{x}}$
	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			ł
	of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4	a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		Х
1	b If "Yes," has it filed a tax return on Form 990-T for this year?	4b	N/A	
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		Х
	ff "Yes," attach the statement required by General Instruction T			
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either:			1
	By language in the governing instrument, or			ĺ
	 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	<u> </u>	L
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV.	7	X	
8	a Enter the states to which the foundation reports or with which it is registered (see instructions)			
	<u> </u>			
ı	b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney	J		
_	General (or designate) of each state as required by General Instruction G? If "No," attach explanation	8b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)			
	or 4942(j)(5) for calendar year 2012 or the taxable year beginning in 2012 (see instructions for Part XIV)? If "Yes,"	_		l
40	complete Part XIV	9	<u> </u>	<u> </u>
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing			
	their names and addresses	10	l	Х

Par	t VII-A Statements Regarding Activities (continued)		_	
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If "Yes," attach schedule (see instructions)	11		Х
12	Did the foundation make a distribution to a donor advised fund over which the foundation or a disqualified person had			
	advisory privileges? If "Yes," attach statement (see instructions)	12		X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	X	<u> </u>
	Website address ► www.uswff.org			
14	The books are in care of ▶ David Friend Telephone no. ▶ (724) 832-	1709		
	Located at ► 159 Lakewood Road Greensburg PA ZIP+4 ► 15601			<u></u>
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041—Check here	•	•	▶ ∟
	and enter the amount of tax-exempt interest received or accrued during the year			
16	At any time during calendar year 2012, did the foundation have an interest in or a signature or other authority	مدا	Yes	No
	over a bank, secunties, or other financial account in a foreign country?	16	L	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	ŀ		
Pa	rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required	<u> </u>		L
1 U	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.	Т	Yes	No
1a	During the year did the foundation (either directly or indirectly):	 	res	INO
ıa	(1) Engage in the sale or exchange, or leasing of property with a disqualified person?	1		
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from)	1		
	a disqualified person?	İ		
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?	1		
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person?	1	1 1	
	(5) Transfer any income or assets to a disqualified person (or make any of either available		1	
	for the benefit or use of a disqualified person)?		1	
	(6) Agree to pay money or property to a government official? (Exception. Check "No"			ŀ
	if the 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)			•
b	If any answer is "Yes" to 1a(1)-(6), did any of the acts fail to qualify under the exceptions described in Regulations			
	section 53.4941(d)-3 or in a current notice regarding disaster assistance (see instructions)?	1b	N/A	
	Organizations relying on a current notice regarding disaster assistance check here			
С	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 2012?	1c		 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)):			
-	At the end of tax year 2012, did the foundation have any undistributed income (lines 6d			
а	and 6e, Part XIII) for tax year(s) beginning before 2012?			
	If "Yes," list the years 20 , 20 , 20 , 20 , 20			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2)			
	(relating to incorrect valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2)	- <u>-</u> -		
_	to all years listed, answer "No" and attach statement—see instructions.)	2b	N/A	
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			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year?			
b	If "Yes," did it have excess business holdings in 2012 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 2012)	3b	N/A	L
4a	Did the foundation invest during the year any amount in a manner that would jeopardize its chantable purposes?	<u>4a</u>	$\sqcup \sqcup$	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 2012?	1 4D	ı I	ΙX

	•	•				
·						
rm 990-PF (2012) US Wind Force Foundation,				27-338	<u>0430</u>	Pag
art VII-B Statements Regarding Activiti		m 4/20 May Be R	equired(continued	1)		
 During the year did the foundation pay or incur any (1) Carry on propaganda, or otherwise attempt to (2) Influence the outcome of any specific public on, directly or indirectly, any voter registration 	influence legislation (selection (see section 49	955); or to carry	Yes	X No		
 (3) Provide a grant to an individual for travel, stud (4) Provide a grant to an organization other than in section 509(a)(1), (2), or (3), or section 494 	a chantable, etc., organ	nization described	Yes	X No		
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of		•	· · · Tyes	X No		
If any answer is "Yes" to 5a(1)–(5), did any of the the Regulations section 53 4945 or in a current notice of Organizations relying on a current notice regarding. If the answer is "Yes" to question 5a(4), does the for	regarding disaster assis disaster assistance cho oundation claim exempt	stance (see instruction eck here on from the	s)?	·	5b	N/A
tax because it maintained expenditure responsibility if "Yes," attach the statement required by Regulati Did the foundation, during the year, receive any fun	ons section 53 4945–5	• •	Yes			
premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, If "Yes" to 6b, file Form 8870	directly or indirectly, or	n a personal benefit co	ntract?	X No	6b	
At any time during the tax year, was the foundation	a party to a prohibited	tax shelter transaction	? Yes	X No		. 1
If "Yes," did the foundation receive any proceeds or	have any net income a	attributable to the trans	saction?		7b	N/A
Part VIII Information About Officers and Contractors List all officers, directors, trustees, found					nplo	yees,
(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 pla and deferred compensa	ns (e)	-	e account owances
e Attached Statement						
						<u></u>
2 Compensation of five highest-paid emplo enter "NONE."	yees (other than th	nose included on I	ine 1—see instruct	tions). If no	one,	
(a) Name and address of each employee hald more than \$50	(b) Title, and avera	• I	(d) Contributions employee bene		Expens	e account

b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) (a) Name and address (b) Title, and average hours per week devoted to position (if not paid, enter employee benefit pla and deferred compens. See Attached Statement (b) Title, and average hours per week devoted to position (if not paid, enter employee benefit pla and deferred compens. 2 Compensation of five highest-paid employees (other than those included on line 1—see instruction employee benefit pla and deferred compens. (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation (c) Compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee benefit pla and deferred compensation employee plant emp						1
(2) Influence the outcome of any specific public election (see section 4955): or to carry on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an individual for travel, study, or other similar purposes? (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) If any answer is "Yes" to \$511–\(36\), did any of the transactions fail to qualify under the exceptions described in Regulations section \$3 4945 or in a current notice regarding disaster assistance (see instructions)? (6) Organizations relying on a current notice regarding disaster assistance (see instructions)? (7) Organizations relying on a current notice regarding disaster assistance (see instructions)? (8) If "Yes," attach the statement required by Regulations section \$3 4945–5(a)\$ (9) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? (8) Fryes," to \$6, file Form \$870\$ (9) Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? (9) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? (9) If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? (9) Formation About Officers, Directors, Trustees, Foundation Managers, High and Contractors (9) Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (9) Organization of five highest-paid employees (other than those included on line 1—see instruction enter "NONE." (9) Compensation of five highest-paid employees (other than those included on line 1—see	Yes [Yes	X No	. [ļ	
on, directly or indirectly, any voter registration drive? (3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions). (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (7) Yes b If any answer is "Yes" to 54(1)–(5), did any of the transactions fall to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations refying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 58(4), does the foundation claim exemption from the tax because it imanitianed expenditure responsibility for the grann? If "Yes," attach the statement required by Regulations section 53 4945–5(d) (6) Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes b If the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 Ta At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Yes If Information About Officers, Directors, Trustees, Foundation Managers and their compensation (see instruction the party of the part	,	٠٠٠ لـــا	۰۰۰ رین			1
(3) Provide a grant to an individual for travel, study, or other similar purposes? (4) Provide a grant to an organization other than a chantable, etc., organization described in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions) (5) Provide for any purpose other than religious, chantable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals? (6) If any answer is "Yes" to \$61)—(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here I of If the answer is "Yes" to question \$34(4) does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945—5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," attach the statement required by Regulations section 53 4945—5(d) 6a Did the foundation, during the year, pay premiums, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes," to 60, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) and Contractors (a) Name and address (b) Title, and average (c) Compensation (e)	V06 [T _{Vae}	X No	.		
(4) Provide a grant to an organization other than a chantable, etc., organization described in section 509(a)(1), (2), or (3), or section 494(d)(2)? (see instructions)	i F	=	===			1
in section 509(a)(1), (2), or (3), or section 4940(d)(2)? (see instructions).	Yes [Yes	X No		!	
educational purposes, or for the prevention of cruelty to children or animals? b If any answer is "Yes" to \$5(1)-(5), did any of the transactions fall to qualify under the exceptions described in Regulations section \$3 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? Yes if "Yes," attach the statement required by Regulations section 53 4945–5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 8b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Yes b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions to devote to position) (a) Name and address (b) Title, and average (c) Compensation (d) Contributions to devote to position (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 purpose the paid and Contributions to purpose the paid and Contributions to purpose the paid and Contributions to purpose the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contributions to the paid and Contribution to the paid	Yes [Yes	X No	,		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify under the exceptions described in Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) (a) Name and address (a) Name and address (b) Tille, and average hours per week devoted to position (c) Compensation (d) Contributions to devoted to position (d) Contributions and deferred compensions. 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions to devote to position (d) Contributions and deferred compensions. (a) Name and address of each employee paid more than \$50,000 (b) Tille, and average hours per week devoted to position (c) Compensation (d) Contributions and deferred compensions.	 ₂₉	Yes	X No			
Regulations section 53 4945 or in a current notice regarding disaster assistance (see instructions)? Organizations relying on a current notice regarding disaster assistance check here If the answer is "Yes" to question 54/4, does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5/d) Bod the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions) 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions) (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation plans and deferred compensions and deferred compensions and deferred compensions and deferred compensions and deferred compensions and deferred compensions.	,.05 [النيا النيا		ŀ	
Organizations relying on a current notice regarding disaster assistance check here c if the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it manitamed expenditure responsibility for the grant? \				5b	N/A	
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption from the tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions to devoted to position) (a) Name and address (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1—see instructions to employee benefit pla and deferred compensation. (b) Title, and average hours per week devoted to position of five highest-paid employees (other than those included on line 1—see instructions to employee benefit pla and deferred compensation. (c) Compensation of five highest-paid employees (other than those included on line 1—see instructions to employee benefit pla and deferred compensation. (d) Contributions to employee benefit pla and deferred compensation. (d) Contributions to employee benefit pla and deferred compensation. (e) Compensation of five highest-paid employees (other than those included on line 1—see instructions to employee benefit pla and deferred compensation.	اً 🕳	_		1	1	1
tax because it maintained expenditure responsibility for the grant? If "Yes," attach the statement required by Regulations section 53 4945–5(d) 1 Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? If "Yes" to 6b, file Form 8870 7 A At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instruction) and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instruction) hours pre week devoted to position See Attached Statement 2 Compensation of five highest-paid employees (other than those included on line 1—see instruction enter "NONE." (d) Contributions employee benefit pla and deferred compensation (c) Compensation (d) Contributions employee benefit pla and deferred compensation (e) Compensation (d) Contributions employee benefit pla and deferred compensation (e) Compensation (d) Contributions employee benefit pla and deferred compensation (e) Compensation (d) Contributions employee benefit pla and deferred compensation (e) Compensation (d) Contribution employee benefit pla and deferred compensation (e) Compensation (d) Contribution employee benefit pla and deferred compensation (e) Compensation (e) Compensation (d) Contribution employee benefit pla and deferred compensation (e) Compensatio			لـــا			1
## "Yes," attach the statement required by Regulations section 53 4945–5(d) 6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? # "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? b if "Yes." did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instruction) (a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plant devoted to position (e) Title, and average hours per week devoted to position (e) Compensation (d) Contributions to employee benefit plant devoted to position (e) Compensation (e) Compensation (d) Contributions to employee benefit plant devoted to position (e) Compensation (e) Compensation (e) Compensation (file not paid, enter devoted to position (e) Compensation (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (e) Compensation (file not paid, enter devoted to position (fi	Yes [Yes	No	.		1
6a Did the foundation, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) (a) Name and address (a) Name and address (b) Tille, and average (c) Compensation (d) Contributions to employee benefit plan and deferred compensition (see instructions) (find paid, enter devoted to position) 2 Compensation of five highest-paid employees (other than those included on line 1—see instructions (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 plan and deference compensions) (d) Contributions to employee benefit plan and deference compensions) (d) Contributions to employee benefit plan and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee benefit plan and deference compensions and deference compensions and deference compensions and deference compensions and deference compensions and deference compensation (c) Compensation (d) Contributions to employee benefit plan and deference compensions and deference compensions and deference compensions and deference compensions and deference compensions and deference compensions are the first plan and deference compensions and deference compensions are the first plan and deference compensions and deference compensions are the first plan and deference compensions are the first plan and deference compensions are the first plan and deference compensions are the first	ן ייטט נ				1	1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors (a) Name and address (b) Title, and average devoted to position (c) Compensation (d) Contributions to employee benefit pla and deferred compens. See Attached Statement. (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 pla and deferred compens. (d) Contributions to employee benefit pla and deferred compens. (d) Contributions to employee benefit pla and deferred compens. (e) Compensation (file to paid, enter employee paid more than \$50,000 for than those included on line 1—see instruction employee benefit pla and average hours per week devoted to position (e) Compensation (f) Contributions to employee benefit pla and average hours per week devoted to position (f) Compensation (g) Contributions to employee benefit pla and average hours per week devoted to position (h) Title, and average hours per week devoted to position (h) Title, and average hours per week devoted to position (h) Title, and average hours per week devoted to position (h) Compensation						1
b Did the foundation, during the year, pay premiums, directly or indirectly, on a personal benefit contract? If "Yes" to 6b, file Form 8870 A tary time during the tax year, was the foundation a party to a prohibited tax shelter transaction? If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) to the compensation (a) Name and address (b) Title, and average hours per week devoted to position See Attached Statement 2 Compensation of five highest-paid employees (other than those included on line 1—see Instructions to the compensation of five highest-paid employees (other than those included on line 1—see Instructions to the compensation of five highest-paid employees (other than those included on line 1—see Instructions to the compensation of the paid, enter hours per week devoted to position (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 plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and deferred compensation of the plant and the p	Yes	Yes	X No	.		
# "Yes" to 6b, file Form 8870 7a At any time during the tax year, was the foundation a party to a prohibited tax shelter transaction?	,		۰۰۰ ۲۰۰	6b	-	
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) (a) Name and address (b) Title, and average hours per week devoted to position (if not pald, enter employee benefit pla and deferred compensation of five highest-paid employees (other than those included on line 1—see instruction enter "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 pla and deferred compensation (fine) to the part of the process of the part					\top	
b If "Yes," did the foundation receive any proceeds or have any net income attributable to the transaction? Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instructions) (a) Name and address (b) Title, and average hours per week devoted to position (if not pald, enter employee benefit pla and deferred compensation of five highest-paid employees (other than those included on line 1—see instruction enter "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 pla and deferred compensation (fine) to the part of the process of the part	Yes	Yes	X No	,		1
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, High and Contractors 1	,		٠٠٠ ي	7b	N/A	
and Contractors 1 List all officers, directors, trustees, foundation managers and their compensation (see instruction (a) Name and address (b) Title, and average hours per week devoted to position See Attached Statement 2 Compensation of five highest-paid employees (other than those included on line 1—see instruction enter "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 senefit pia and deferred compensation (fir of paid, enter employee senefit pia and deferred compensation of five highest-paid employees (other than those included on line 1—see instruction enter "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 (c) Compensation employee bene plans and deferred compensation (c) Compensation employee bene plans and deferred compensation (c) Compensation employee bene plans and deferred compensation (c) Compensation employee benefit pia and deferred compensation (d) Contributions to employee benefit pia and deferred compensation (d) Contributions to employee benefit pia and deferred compensation (d) Contributions to employee benefit pia and deferred compensation (d) Contributions to employee benefit pia and deferred compensation (d) Contributions to employee benefit pia and deferred compensation (d) Contributions to employee the employee pia employee (d) Compensation (d) Contributions to employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Compensation (d) Contribution employee (d) Contribution employee (d) Compensation (d) Contribution employee (d) Contribution employee (d) Contribution employee (d) Contribution employee (d) Contribut	liahly		v Paid			
1 List all officers, directors, trustees, foundation managers and their compensation (see instruction (a) Name and address (b) Title, and average hours per week devoted to position 2 Compensation of five highest-paid employees (other than those included on line 1—see instruction enter "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 plan and deferred compensation (lf not paid, enter employee in employee in the employee in the paid and deferred compensation (lf not paid, enter employee in employee in the employee in the paid and deferred compensation (lf not paid, enter employee in employee in the employee in the paid and deferred compensation employee in the paid and deferred compensation (lf not paid, enter employee in employee in the paid and deferred compensation emplo		,	,		-,	-,
(a) Name and address (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions to employee benefit plan and deferred compens. (d) Contributions to employee benefit plan and deferred compens. (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position (c) Compensation employee to plans and deferred compens.	uctions	structio	ns).			
See Attached Statement 2 Compensation of five highest-paid employees (other than those included on line 1—see instruct enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Trite, and average hours per week devoted to position NONE (c) Compensation (d) Contributions employee bene plans and deferr compensation	ons to	butions to		(e) Expe	nse acc	ount
See Attached Statement 2 Compensation of five highest-paid employees (other than those included on line 1—see instruct enter "NONE." (a) Name and address of each employee paid more than \$50,000 (b) Title, and average hours per week devoted to position NONE (c) Compensation (d) Contributions employee bene plans and defer compensation			5		allowand	
2 Compensation of five highest-paid employees (other than those included on line 1—see instruct enter "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 (c) Compensation employee beneplans and defendence compensation compensation (c) Compensation (d) Contributions employee beneplans and defendence plans are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant and defendence plant are plant as a plant and defendence plant are plant as a plant and defendence plant are plant as a plant and defen	periodilei	-				
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
enter "NONE." (a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (b) Title, and average hours per week devoted to position (c) Compensation (d) Contributions employee beneplans and deferr compensation						
(a) Name and address of each employee paid more than \$50,000 NONE (b) Fitte, and average hours per week devoted to position (c) Compensation employee bene plans and deferr compensation	tructio	nstructi	ions). If	none,	,	
(a) Name and address of each employee paid more than \$50,000 hours per week devoted to position NONE (c) Compensation employee beneplans and deferr compensation						
NONE Compensation				e) Expe	nse acc	
			, a	Other a	JIIOWAIR	JE\$
Total number of other employees paid over \$50,000			_			~

Form 990-PF (2012) US Wind Force Foundation, Inc.	27-3380430 Page 7
Part VIII Information About Officers, Directors, Trustees, Foundation Managers, H	
and Contractors (continued)	
3 Five highest-paid independent contractors for professional services (see instructions). If none, enter "I	NONE."
(a) Name and address of each person paid more than \$50,000 (b) Type of service	(c) Compensation
NONE	
Total number of others receiving over \$50,000 for professional services	. •
Part IX-A Summary of Direct Charitable Activities	
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such a the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc.	Expenses
1 N/A	
2	
3	
	-
*	

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
1 N/A	
•••••	
2	
All other program-related investments See instructions	
3	
Total. Add lines 1 through 3	

Par	Minimum Investment Return (All domestic foundations must complete this part. Foreign see instructions.)	ı foundati	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out chantable, etc.,	1	
•	purposes:		
а	Average monthly fair market value of securities	1a	
b	Average of monthly cash balances	1b	21,675
c	Fair market value of all other assets (see instructions)	ic	
đ	Total (add lines 1a, b, and c)	1d	21,675
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation)		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	21,675
4	Cash deemed held for charitable activities. Enter 1 ½ % of line 3 (for greater amount, see		
	instructions)	4	325
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	21,350
6	Minimum investment return. Enter 5% of line 5	6	1,068
Par	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.)	-	
1	Minimum investment return from Part X, line 6	1	1,068
2a	Tax on investment income for 2012 from Part VI, line 5		
b	Income tax for 2012. (This does not include the tax from Part VI.)	1	
C	Add lines 2a and 2b	2c	
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	1,068
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	1,068
6	Deduction from distributable amount (see instructions)	6	, ,,,,,,,
7	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII,		
_	line 1	7	1,068
Par	Qualifying Distributions (see instructions)	- I	
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		
a	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	57,187
b	Program-related investments—total from Part IX-B	1b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
-	purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
a	Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	*
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4.	4	57,187
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment	- -	07,107
•	Income Enter 1% of Part I, line 27b (see instructions)	5	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	57,187
-	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundations are the second and the second are the second and the second are the second ar	<u> </u>	37,107
	qualifies for the section 4940(e) reduction of tax in those years.	20011	

Form 9	990-PF (2012) US Wind Force Foundation, Inc.			27-3	380430 Page 9
Part	XIII Undistributed Income (see instructions)	· · · · ·			
1	Distributable amount for 2012 from Part XI,	(a) Corpus	(b) Years prior to 2011	(c) 2011	(d) 2012
	line 7				1,068
2	Undistributed income, if any, as of the end of 2012:				
a	Enter amount for 2011 only				
b	Total for prior years: 20, 20, 20				· · · · · · · · · · · · · · · · · · ·
3	Excess distributions carryover, if any, to 2012:			1	
a	From 2007				!
b	From 2008				į
С	From 2009				,
d	From 2010				į
e	From 2011				
_ T	Total of lines 3a through e				
4	Qualifying distributions for 2012 from Part				
_	XII, line 4: 5 57,187				
_	Applied to 2011, but not more than line 2a				
b	Applied to undistributed income of prior years				
_	(Election required—see instructions)				
С	Treated as distributions out of corpus (Election				,
-4	required—see instructions)				4.000
d	Applied to 2012 distributable amount	FC 110			1,068
е 5	Remaining amount distributed out of corpus	56,119			
3	Excess distributions carryover applied to 2012 (If an amount appears in column (d), the same amount must be shown in column (a).)				
6	Enter the net total of each column as indicated below:	:			ı
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	56,119			
	Prior years' undistributed income. Subtract				· - · · · · · · · · · · · · · · · · · ·
	line 4b from line 2b				•
C	Enter the amount of pnor years' undistributed				
	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				
е	Undistributed income for 2011 Subtract line		_		
	4a from line 2a. Taxable amount—see				
	instructions				1
f	Undistributed income for 2012. Subtract				
	lines 4d and 5 from line 1. This amount must				
	be distributed in 2013				
7	Amounts treated as distributions out of				•
	corpus to satisfy requirements imposed by				
_	section 170(b)(1)(F) or 4942(g)(3) (see instructions).				<u> </u>
8	Excess distributions carryover from 2007				
_	not applied on line 5 or line 7 (see instructions)				
9	Excess distributions carryover to 2013	==			
40	Subtract lines 7 and 8 from line 6a	56,119			
10	Analysis of line 9:	İ			Ī
a	Excess from 2008				•
D	Excess from 2009				A
2	Excess from 2010				1
đ	Excess from 2011 2,724				
	Excess from 2012				

	US Wind Force Foundation,				27-338	
Pa	t XIV Private Operating Foundations (s	see instructions	and Part VII-A, o	question 9)		N/A
	If the foundation has received a ruling or determina			· · · ·	•	
	foundation, and the ruling is effective for 2012, enter				•	
_	•		_	L		
	Check box to indicate whether the foundation is a p	private operating four	ndation described in	section	4942(j)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year	ĺ	Prior 3 years		
	income from Part I or the minimum	— — · ·-	ļ	T		(e) Total
	investment return from Part X for each	(a) 2012	(b) 2011	(c) 2010	(d) 2009	
	year listed	İ	j	İ	i i	
h	85% of line 2a					
					 	
С	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	ļ				
6	Qualifying distributions made directly				 	
·	for active conduct of exempt activities.	i				
	Subtract line 2d from line 2c					
2						
3	Complete 3a, b, or c for the]			
_	alternative test relied upon: "Assets" alternative test—enter.					
а						
	(1) Value of all assets	ļ 				
	(2) Value of assets qualifying					
	under section 4942(j)(3)(B)(i)	l				
h	"Endowment" alternative test—enter 2/3					
U	of minimum investment return shown in		i			
	Part X, line 6 for each year listed	ŀ				
_		-		 	 	
С						
	(1) Total support other than gross					
	investment income (interest,					
	dividends, rents, payments on securities loans (section					
	512(a)(5)), or royaltes)					
				ļ		
	(2) Support from general public and 5 or more exempt					
	organizations as provided in					
	section 4942(j)(3)(B)(iii)					
	2			<u> </u>		
	(3) Largest amount of support					
	from an exempt organization					
	(4) Gross investment income					
Pa	rt XV Supplementary Information (Co	mplete this par	t only if the for	undation had \$	5 000 or more it	
	assets at any time during the ye			andanon naa y	0,000 01 111010 11	
			ctions.j			
1	Information Regarding Foundation Manage					
а	List any managers of the foundation who have con-	tributed more than 2	% of the total contrib	outions received by t	he foundation	
	before the close of any tax year (but only if they ha	ve contributed more	than \$5,000). (See :	section 507(d)(2).)		
No	ne					
	List any managers of the foundation who own 10%	or more of the stock	of a corporation (or	an equally large per	ton of the	
U	ownership of a partnership or other entity) of which				uon or the	
	• • • • • • • • • • • • • • • • • • • •	the roundation has	a 10 % or greater little	crest.		
No				· · · · ·		
2	Information Regarding Contribution, Gran	nt, Gift, Loan, Sc	:holarship, etc., l	Programs:		
	Check here ▶ ☐ if the foundation only makes	contributions to pres	selected charitable o	roanizations and doe	es not accept	
	unsolicited requests for funds. If the foundation ma	kes gifts, grants, etc	. (see instructions) to	o individuals or organ	nizations under	
	other conditions, complete items 2a, b, c, and d	3 3	. (00000 0000) (o marriadalo or orga	inzadorio arigo:	
_		al of the second to	h l' d' l-	- 141 - 11 - 1		
а	The name, address, and telephone number or e-ma	an or the person to w	nom applications sh	outa de addressed.		
	Millian Fr. Jake 1 - BOB - FF		4 7 (00 t) 5 5			
<u>US</u>	Wind Force Foundation, Inc. PO Box 571 Pe	tersburg, WV 268	<u>47 (304) 257-077</u>	0 toundation@us	wff.org	
b	The form in which applications should be submitted	and information and	d materials they sho	uld include:		
Pre	scribed grant forms are available from founda	ation				
	Any submission deadlines:					
•	•					
N/A						
	Any restrictions or limitations on awards, such as b	v deographical areas	chantable fields 1	inde of methylana -	r other	
u	factors.	, goograpinoaraiea:	o, orianiable fields, K	แกนอ บา เกอบเนนบการ, 0	i other	
C	contly limited to charitable organizations in th		- Minarel On 140	,		

Form **990-PF** (2012)

Part XV Supplementary Information (continued)

3 Grants and Contributions Paid During the Year or Approved for Future Payment							
Dociniont	If recipient is an individual,	Foundation	I				
Recipient	show any relationship to	status of	Purpose of grant or	Amount			
Name and address (home or business)	any foundation manager or substantial contributor	recipient	contribution				
a Paid during the year							
Elk District VFD (Challenge Hunt Fund)	None	EO, other	Hunting blinds at JR	750			
PO Box 33		,	Lake for physically	. • • •			
Elk Garden, WV 26717			challenged				
Mineral County BOE (Elk Garden School PTO)	None	Government	Construction of 1/4 mile	5,000			
RR1 Box 320		unit	walking track	,			
Elk Garden, WV 26717							
Friends of Jennings Randolph Lake, Inc.	None	Public charity	Handicapped accessible	250			
PO Box 247			gazebo at Kalbaugh				
Elk Garden, WV 26717		1	Pond				
Mineral County BOE (Campaign for KHS)	None	Government	Payment of lend/lease	3,000			
One Tornado Way		unit	agreement with MC BoE				
Keyser, WV 26726		ĺ					
Mineral County Family Resource Network	None	Public charity	Support of 3 Energy	2,000			
251 1/2 West Piedmont St	i		Express sites				
Keyser, WV 26726	i						
Mineral County Historical Foundation, Inc.	None	Public charity	Restoration work at	5,000			
PO Box 1325			Carskadon Mansion				
Keyser, WV 26726							
New Creek Primary School	None		Picnic tables for outdoor	500			
PO Box 97		unit	instruction pavilion				
New Creek, WV 26743	ļ <u>.</u> .	L					
Warm the Children Program	None	Public charity	New winter clothing to	2,000			
PO Box 879		1	needy children				
Keyser, WV 26726	None	D. 1819 - 18 - 184	D				
Developmental Center & Workshop, Inc.	None	Public charity	Purchase of high volume	3,500			
50 Clary Street Keyser, WV 26726			shredding machine				
Eastern WV Community and Technical College	None	Government	Scholarship to Mineral	4 000			
316 Eastern Drive	None	unit	County resident	1,200			
Morefield, WV 26726		""	County resident				
Elk District Ambulance Service	None	 Public charity	Equipment/supplies for	3,000			
PO Box 183	110110	, abilo orialit,	building repairs	3,000			
Elk Garden, WV 26717			Jamanig repaire				
Total See Attached Statement			▶ 3a	54,500			
b Approved for future payment				- 1,000			
.,							
Takel	L						
Total	<u> </u>	<u></u>	<u> ▶ 3b</u>				

Part XVI-A Analysis of Income-Producing Activ	vities			21-338	U430 Page 14
Enter gross amounts unless otherwise indicated.	Unrelated busi	ness income	Excluded by section	on 512, 513, or 514	(e)
	(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	Related or exemp function income
1 Program service revenue:				<u> </u>	(See instructions
a					
b					
c					
d					
e			ļ		
f					
g Fees and contracts from government agencies			ļ <u>.</u>		
2 Membership dues and assessments				-	
3 Interest on savings and temporary cash investments			ļ		
4 Dividends and interest from securities			ļ		
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			ļ		
7 Other investment income			-		
8 Gain or (loss) from sales of assets other than inventory			 		-
9 Net income or (loss) from special events					
Oross profit or (loss) from sales of inventory					-
11 Other revenue: a				· · · · · · · · · · · · · · · · · ·	
b			-		
c					
d e					
12 Subtotal. Add columns (b), (d), and (e)					
13 Total. Add line 12, columns (b), (d), and (e)			<u>.</u> k	13	
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities to the Acc	complishment	of Exempt	Purnoses		•
Line No. Explain below how each activity for which income is				oortantly to	
the accomplishment of the foundation's exempt pu					tions.)
				, ,	,
W-12-7m.					
					·-
					·
					
				<u> </u>	
					
					
					
		 			
	_				
	=				

Part		nformation Regarding exempt Organizations	~	To and	Transactions an	d Relationships	With Nonchari	table
		xempt Organizations						
1 [Did the ord	panization directly or indi	rectly engage	in any of	the following with:	any other organiza	tion described	

		engage in any of the follow section 501(c)(3) organiza					Yes	No
 (2) Other assets b Other transactions: (1) Sales of assets to a (2) Purchases of asset (3) Rental of facilities, (4) Reimbursement arr (5) Loans or loan guara (6) Performance of ser c Sharing of facilities, equition d If the answer to any of the yalue of the goods, other 	a noncharitable ex s from a nonchari equipment, or oth rangements antees vices or members uipment, mailing I the above is "Yes, er assets, or servi	empt organization table exempt organization er assets ship or fundraising solicitar ists, other assets, or paid	tions	nn(b) should alwa	ays show the faceived less tha	n fair n	narke	X X X X X X X
(a) Line no (b) Amount involv	ed (c) Name	of noncharitable exempt organiza	tion (d) De	scription of transfers,	transactions, and sl	narıng arı	angem	ents
**							-	
				- ,				
				· - ·-				
			-					
2a Is the foundation direct described in section 50b If "Yes," complete the formula in the for	1(c) of the Code (other than section 501(c)(ne or more tax 3)) or in section	-exempt organiza n 527?		es X	No	
(a) Name of organ	ızatıon	(b) Type of organiz	zation	(c) [Description of relation	nship		
								
	1	<u></u>		L				
Sign Here Under penalties of perjury, I correct, and complete Decla	ration of preparer (other than	this return, including accompanying sche	which preparer has any t	and to the best of my know knowledge	May the IRS d with the prepa instructions)?	scuss th	n b <u>elov</u>	
Print/Type prepa	rer's name	Preparer's signature	··	Date		PTIN		
Paid		SELF-PREPARED	RETURN		Check if self-employed			
Preparer Use Only	-	1		L	Firm's EIN			
Firm's address	—				Phone no			

Schedule B

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

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

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

OMB No 1545-0047

Employer identification number

US Wind Force Foundation	. Inc.	27-3380430
Organization type (check o		<u></u>
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private fou	ndation
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private founda	tion
	501(c)(3) taxable private foundation	
	s covered by the General Rule or a Special Rule . (7), (8), or (10) organization can check boxes for both the General Rule a	ınd a Special Rule. See
General Rule		
	filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,00 one contributor. Complete Parts I and II.	0 or more (in money o
Special Rules		
sections 509(a)(1) a)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support and 170(b)(1)(A)(vi) and received from any one contributor, during the yea 2% of the amount on (i) Form 990, Part VIII, line 1h, or (ii) Form 990-EZ,	ar, a contribution of the greater
the year, total contr)(7), (8), or (10) organization filing Form 990 or 990-EZ that received fron ibutions of more than \$1,000 for useexclusively for religious, charitable, ses, or the prevention of cruelty to children or animals. Complete Parts I, II	scientific, literary, or
the year, contribution total to more than \$ year for an exclusive applies to this organ	(7), (8), or (10) organization filing Form 990 or 990-EZ that received from the form use exclusively for religious, charitable, etc., purposes, but these of 1,000. If this box is checked, enter here the total contributions that were rely religious, charitable, etc., purpose. Do not complete any of the parts unization because it received nonexclusively religious, charitable, etc., continuous contributions.	contributions did not received during the unless the General Rule tributions of \$5,000 or more
Caution. An organization th	at is not covered by the General Rule and/or the Special Rules does not f	île Schedule B (Form 990,

990-EZ, or 990-PF), but itmust answer "No" on Part IV, line 2 of its Form 990; or check the box on line H of its Form 990-EZ or on Part I, line 2 of its Form 990-PF, to certify that it does not meet the filing requirements of Schedule B (Form 990, 990-EZ, or 990-PF

	Form 990, 990-EZ, or 990-PF) (2012)		Page 2
	ganization Force Foundation, Inc.		Employer identification number 27-3380430
Part I	Contributors (see instructions). Use duplicate copie	es of Part I if additional space i	s needed.
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	Pinnacle Wind, LLC 3 MKacArther Place Santa Ana CA 92707 Foreign State or Province: Foreign Country:	\$20,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
2	US Wind Force, LLC 645 E. Pittsburgh St, #356 Greensburg PA 15601 Foreign State or Province: Foreign Country:	\$10,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province: Foreign Country:	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province: Foreign Country	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
	Foreign State or Province ⁻ Foreign Country:	\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash

Foreign State or Province:

Foreign Country

(Complete Part II if there is a noncash contribution)

Name of organization
US Wind Force Foundation, Inc.

Employer identification number 27-3380430

Part II	Noncash Property (see instructions). Use duplicate co	pies of Part II if additional spa	ace is needed.
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. 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
		\$	

	-			27-3380430
Part III		individual co	ntributions to section	
•				
	For organizations completing Part III, ent	er the total of	exclusively religious, cha	aritable, etc.,
				nstructions.) > \$
/=\ \\ \ \ .	Use duplicate copies of Part III if addition	al space is ne	eded	
from	(b) Purpose of gift	(с) Use of gift	(d) Description of how gift is held
Part I				
		(e) T	ransfer of gift	
	Transferen's name address and	71D ± 4	Dalationak	in of transferor to transferor
	For. Prov. Country			
(a) No. from	According to the proce Foundation, Inc. 27-338430 Exclusively religious, charitable, etc., individual contributions to section 501(c)(7), (8), or (10) organization total more than \$1,000 for the year. Complete columns (a) through (e) and the following line entry. For organizations completing Part III, enter the total ofexclusively religious, charitable, etc., contributions of \$1,000 or less for the year. (Enter this information once. See instructions.) \$ Use duplicate copies of Part III if additional space is needed.		(d) Description of how gift is held	
Part i	(2) (3) (3)		, out or g	(a) Decemption of flow gift to field
		(e) T	ransfer of gift	<u> </u>
			•	
	Transferee's name, address, and	ZIP+4	Relationsh	ip of transferor to transferee

(a) No.	(L) Duman of sife		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(1) 5
Part I	(b) Purpose of gift	(6) Use or gift	(a) Description of now giπ is neig
		(e) T	ransfer of gift	<u> </u>
		(5)		
	Transferee's name, address, and	ZIP+4	Relationsh	ip of transferor to transferee
	For Prov. Country			
(a) No.				
from Part i	(b) Purpose of gift	(c)) Use of gift	(d) Description of how gift is held
		(a) T	ranefar of aift	
		(6) 1	ransier or gift	
	Transferee's name, address, and	ZIP+4	Relationsh	ip of transferor to transferee
				•
	For. Prov. Country		l	

Part I, Line 16b (990-PF) - Accounting Fees

	Time tob (occit) Accounting t	<u> </u>			
		2,566			2,566
	•				Disbursements
		Revenue and			for Charitable
١.		Expenses per	Net Investment	Adjusted Net	Purposes
	Description	Books	Income	Income	(Cash Basis Only)
1	Prep of 2011 form 990-pf	2,566		1	2,566

Part I, Line 16c (990-PF) - Other Professional Fees

	ilai i ccs			
	40			40
•				Disbursements
	Revenue and			for Charitable
•	Expenses per	Net Investment	Adjusted Net	Purposes
Description	Books	Income	Income	(Cash Basis Only)
1 Computer Consulting	40			40

Part I, Line 23 (990-PF) - Other Expenses

	Zine ze (ece i i j etner zapene	04			
		81			81
	. Description	Revenue and Expenses per Books	Net Investment Income	Adjusted Net Income	Disbursements for Charitable Purposes
1	Bank Fees	33			33
2	USPS Mailbox Rental	48			48

©2012 CCH Small Firm Services All rights reserved

Ś	I
ager	١
Man	I
tion	I
d Foundati	1
d Fo	1
san	l
stee	l
ī,	ŀ
tors	
Direc	
ī,	
ffice	
9	
tion	
ansa	
a E	
ပိ	
0-PF)	
066)	I
ne 1	
≡ , ⊏	
711	
<u>۾</u>	

US Wind Force Foundation, Inc

asu:	Account	•						
Expe	Acc							
	Benefits							
	Compensation							
Avg Hrs	Per Week	1 00	2 00	0.50	0 20	0 20	0 50	0 20
		President & Director	VP & Director	Treasurer & Director	Director	Director	Director	Director
	Foreign Country							THE CONTRACTOR CONTRAC
	Zip Code	26847-9608	15601-9784	18644-1310	16046	15005	15101	60605
	State	M	PA	PA 1	PA	PA	PĀ	و
	Ğ	Petersburg	Greensburg	West Wyoming	Mars	Baden	Alison Park	Chicago
	Street	22 Point Drive	159 Lakewood Road	108 Lincoln Ave	207 Adams Pointe Blvd	121 Buckthome Road	4231 Hauf Bnon Court	440 S LaSalle St
Check 'X'	if Business					-	7	4
	Name	James M Cookman	Davd K Fnend	Michael J Dolan	Dawd F McAnally	Joseph E Trainor	G Thomas Matthews	Susan Olivama
		<u> </u>	0	!≥	<u>α</u>	13	iQ.	3