

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



Form **990-PF**

EXTENDED TO NOVEMBER 16. Return of Private Foundation

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

OMB No 1545-0052

Do not enter social security numbers on this form as it may be made public. Department of the Treasury ▶ Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf. Internal Revenue Service For calendar year 2014 or tax year beginning SEP 22, 2014 , and ending DEC 31, 2014 Name of foundation A Employer identification number SLY WIND FOUNDATION C/O STERLING FOUNDATION MANAGEMENT, LLC 47-1903487 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number 2325 DULLES CORNER BLVD, STE 670 703-437-9720 City or town, state or province, country, and ZIP or foreign postal code C If exemption application is pending, check here HERNDON, VA 20171 X Initial return G Check all that apply: Initial return of a former public charity D 1. Foreign organizations, check here Final return Amended return 2. Foreign organizations meeting the 85% test, check here and attach computation Address change Name change X Section 501(c)(3) exempt private foundation H Check type of organization: E If private foundation status was terminated Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation under section 507(b)(1)(A), check here I Fair market value of all assets at end of year | J | Accounting method: X Cash Accrual If the foundation is in a 60-month termination Other (specify) (from Part II, col (c), line 16) under section 507(b)(1)(B), check here 7,581,928. (Part I, column (d) must be on cash basis.) ▶\$ Part I Analysis of Revenue and Expenses (b) Net investment (d) Disbursements (c) Adjusted net (a) Revenue and (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a)) for charitable purposes (cash basis only) expenses per books income ıncome 7.501.220. Contributions, gifts, grants, etc., received N/A 2 Check If the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 133,456, 133.456 Dividends and interest from securities STATEMENT 5a Gross rents b Net rental income or (loss) 57,772 6a Net gain or (loss) from sale of assets not on line 10 Revenue Gross sales price for all assets on line 6a 6,577,385. ₩, 57,772 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 3. 10a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) 11 Other income 7,692,448. Total Add lines 1 through 11 191,228 1,248 0 Compensation of officers, directors, trustees, etc Other employee salaries and wages 15 Pension plans, employee benefits 16a Legal fees b Accounting fees c Other professional fees 17 Interest ်မ္ 82 18 Taxes 19 Depreciation and depletion 20 Occupancy 21 Travel, conferences, and meetings 22 Printing and publications 1,373 0 STMT 2 <u>1,373.</u> 23 Other expenses 24 Total operating and administrative 0 expenses Add lines 13 through 23 2,621 1,373. 25 Contributions, gifts, grants paid 50,000 50,000. 26 Total expenses and disbursements 0 52,621 Add lines 24 and 25 51,373. 27 Subtract line 26 from line 12: 7,639,827. a Excess of revenue over expenses and disbursements

191,228

N/A

LHA For Paperwork Reduction Act Notice, see instructions

b Net investment income (if negative enter -0-)

c Adjusted net income (if negative, enter -0-)

Form **990-PF** (2014)

		00-PF (2014) C/O STERLING FOUNDATION		LLC 47-1	L903487 Page 2
F	art	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
_			(a) Book Value	(b) Book Value	(c) Fair Market Value
		Cash - non-interest-bearing	-	58,752.	
		Savings and temporary cash investments		13,463.	13,463.
	3	Accounts receivable -			
	ļ	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			
	7	Other notes and loans receivable	·»		lore
		Less: allowance for doubtful accounts			
ets	1	Inventories for sale or use			
Assets		Prepaid expenses and deferred charges			
•	1	Investments - U.S. and state government obligations			
	b	Investments - corporate stock			
	C	Investments - corporate bonds			
	11	Investments - land, buildings, and equipment, basis			à.
		Less accumulated depreciation			**
	12	Investments - mortgage loans			
	13	Investments - other STMT 3	0.	7,568,985.	7,509,713.
	14	Land, buildings, and equipment; basis			
		Less accumulated depreciation			*******
		Other assets (describe ►)			
	16	Total assets (to be completed by all filers - see the	_		
_	_	instructions. Also, see page 1, item I)	0.	7,641,200.	<u>7,581,928.</u>
	1	Accounts payable and accrued expenses			
	18	Grants payable			*
ies	19	Deferred revenue			,
ij	20	Loans from officers, directors, trustees, and other disqualified persons	·		7
Liabilities	21	Mortgages and other notes payable			
_	22	Other liabilities (describe STATEMENT 4)	0.	125.	*
			•	105	,
_	23	Total liabilities (add lines 17 through 22)	0.	125.	
		Foundations that follow SFAS 117, check here			
Ś	l	and complete lines 24 through 26 and lines 30 and 31.		F 544 055	
or Fund Balances	24	Unrestricted		7,641,075.	
ala	25	Temporarily restricted			
d B	26	Permanently restricted			
ä		Foundations that do not follow SFAS 117, check here			
P		and complete lines 27 through 31.			
ets	27	Capital stock, trust principal, or current funds			
Net Assets	28	Paid-in or capital surplus, or land, bldg., and equipment fund			
et/	29	Retained earnings, accumulated income, endowment, or other funds	0.	7 641 075	
Ž	30	Total net assets or fund balances	<u> </u>	7,641,075.	
	24	Total liabilities and not aggets/fund belongs	0.	7 641 200	
=		Total liabilities and net assets/fund balances		7,641,200.	
P	art	Analysis of Changes in Net Assets or Fund B	alances		
1	Total	net assets or fund balances at beginning of year - Part II, column (a), line	30		
		it agree with end-of-year figure reported on prior year's return)		1	0.
2		amount from Part I, line 27a		2	7,639,827.
		r increases not included in line 2 (itemize)		3	0.
		lines 1, 2, and 3	·· ·· -·	4	7,639,827.
5	Decr	eases not included in line 2 (itemize)		5	0.
		net assets or fund balances at end of year (line 4 minus line 5) - Part II, co	olumn (b), line 30	6	7,639,827.
					Form 990-PF (2014)

1

Form 990-PF (2014) C/O	STERLING FOUND and Losses for Tax on	DATION M		IT,	LLC		<u>17-190</u>	3487 Page 3
(a) List and descr	ibe the kind(s) of property sold (rehouse; or common stock, 200	e.g., real estate,	-	(b) H	ow acquired Purchase Donation		acquired day, yr.)	(d) Date sold (mo., day, yr.)
1a BERNSTEIN AND (20				D	08/2	25/14	10/10/14
b CAPITAL GAINS I								
С								
<u>d</u>								
<u>e</u>				Ц,	<u>.</u>			
(e) Gross sales price	(f) Depreciation allowed (or allowable)	plus e	st or other basis expense of sale				Gain or (loss is (f) minus	(g)
a 6,472,193.			6,519,61	.3.				<u>-47,420.</u>
b 105,192.								105,192.
_c								
ď								
Complete only for exects shown	a ann in column (b) and awroad	by the foundation	2 22 10/01/00				<u> </u>	
Complete only for assets showing	· · · · · · · · · · · · · · · · · · ·	1			c	(I) Gains (ol. (k) but	Col. (h) gain not less tha	minus n -0-) or
(i) F.M.V. as of 12/31/69	(j) Adjusted basis as of 12/31/69		col. (j), if any				s (from col.	(h))
<u>a</u>								-47,420.
<u>b</u>	 	_						105,192.
<u>c</u>			<u></u>				<u> </u>	
<u>d</u>						····	····	
<u>e</u>								
2 Capital gain net income or (net cap		nter in Part I, line r -0- in Part I, line		}	2			57,772.
3 Net short-term capital gain or (loss if gain, also enter in Part I, line 8, or short in Part I).	,) and (6):		}			37 / 3	
If (loss), enter -0- in Part I, line 8 Part V Qualification U	nder Section 4940(e) 1	or Reduced	Tax on Net	Inve	3 estment lr	come	N/A	
(For optional use by domestic private	<u></u>	-						N/A
If section 4940(d)(2) applies, leave th		on 4340(a) lax oi	i iiet iiivestiiieiit iii	icome.	.)			N/A
Was the foundation liable for the sect			•	rıod?				Yes No
If "Yes," the foundation does not quali 1 Enter the appropriate amount in e				ntrion	······································			
		ie instructions be	lore making any e					(d)
(a) Base period years Calendar year (or tax year beginnin	(b) Adjusted qualifying	distributions	Net value of no	(c) onchar	table-use asse	ts	Distril (col. (b) div	(d) bution ratio vided by col. (c))
2013								
2012								
2011								
2010								
2009		-	L				T	
2 Total of line 1, column (d)						2		
3 Average distribution ratio for the 5	year base period - divide the to	tal on line 2 by 5,	or by the number	of yea	ars			
the foundation has been in existen	ce if less than 5 years	•	•	·		3		
4 Enter the net value of noncharitable	le-use assets for 2014 from Part	X, line 5				4		
5 Multiply line 4 by line 3						5		
6 Enter 1% of net investment incom	e (1% of Part 1, line 27b)					6		
7 Add lines 5 and 6						7		
8 Enter qualifying distributions from	Dart VII. ling 4							, , , ·
. , .	·	ling 1b and so-	nlote that as the con-		/ tov coto	8_	.1	
If line 8 is equal to or greater than See the Part VI instructions.	inte 7, check the box in Part VI,	iiiie iu, aliu com	piete tilat part usin	iga 1%	o lax rale.			
423521 11-24-14								Form 990-PF (2014)

	SLY WIND FOUNDATION			
Form	1990-PF (2014) C/O STERLING FOUNDATION MANAGEMENT, LLC 47-19	903487		Page 4
Pa	irt VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - s	ee instru	ictio	ns)
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)			
b	Domestic foundations that meet the section 4940(e) requirements in Part V, check here and enter 1%		3,8	25.
	of Part I, line 27b			
C	All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b).			
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	_		0.
3	Add lines 1 and 2		3,8	25.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)			0.
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-		3,8	25.
6	Credits/Payments:			
a	2014 estimated tax payments and 2013 overpayment credited to 2014 6a 6a			
b	Exempt foreign organizations - tax withheld at source			
C	Tax paid with application for extension of time to file (Form 8868) 6c 4,000.			
d	Backup withholding erroneously withheld 6d 6			
7	Total credits and payments. Add lines 6a through 6d		4,0	00.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached 8			47.
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed			
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid		1	28.
11	Enter the amount of line 10 to be: Credited to 2015 estimated tax			0.
Pa	rt VII-A Statements Regarding Activities		·	
1a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in		Yes	No
	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 the definition)?	1b	ļ	X
	If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or			
	distributed by the foundation in connection with the activities.			
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. ► \$ O . (2) On foundation managers. ► \$ O .			
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation			
	managers ► \$O.			
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, or			
	bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		X
4a	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X
	If "Yes," has it filed a tax return on Form 990-T for this year?	A <u>4b</u>		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X
	If "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:			
	By language in the governing instrument, or			
	By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law			
	remain in the governing instrument?	6	X	
7	Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col (c), and Part XV	7	X	<u> </u>
_				
8a	Enter the states to which the foundation reports or with which it is registered (see instructions)			
	VA]	
b	If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)			
_	of each state as required by General Instruction G? If "No," attach explanation	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	_	Ì	
	year 2014 or the taxable year beginning in 2014 (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 X Form **990-PF** (2014)

STMT 5

	n 990-PF (2014) C/O STERLING FOUNDATION MANAGEMENT, LLC 47-190 art VII-A Statements Regarding Activities (continued)	<u>3487</u>		Page 5
	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	
	Website address ► N/A			
14	The books are in care of ► STERLING FOUNDATION MANAGEMENT Telephone no. ► 703-4		<u>720</u>	
	Located at ► 2325 DULLES CORNER BLVD, STE 670, HERNDON, VA ZIP+4 ►2	<u>0171</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	N	/ <u>A</u>	
16	At any time during calendar year 2014, did the foundation have an interest in or a signature or other authority over a bank,	,	Yes	No
	securities, or other financial account in a foreign country?	16	<u>.</u>	X
	See the instructions for exceptions and filing requirements for FinCEN Form 114, (formerly TD F 90-22.1). If "Yes," enter the name of the			;
Dr	foreign country ► art VII-B Statements Regarding Activities for Which Form 4720 May Be Required			<u> </u>
Г		1	V	NI.
4.	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
ıa	a During the year did the foundation (either directly or indirectly):		,	, 31
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? (2) Porrow manager from lead manager to an etherwise extend gradit to (or escent to from)		4	/. A
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person? Yes X No		,	
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person?			
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available	3*		e
	for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check "No"	32		
	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.)	1 1		1
b	o 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)?	16		X
	Organizations relying on a current notice regarding disaster assistance check here	1 1		
C	: Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected			ĺ.,
	before the first day of the tax year beginning in 2014?	1c		$ \mathbf{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)):			
a	At the end of tax year 2014, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning	1 1		
	before 2014?			
	If "Yes," list the years \blacktriangleright			
b	Are there any years listed in 2a for which the foundation is not applying the provisions of section 4942(a)(2) (relating to incorrect			
	valuation of assets) to the year's undistributed income? (If applying section 4942(a)(2) to all years listed, answer "No" and attach			
	statement - see instructions.) N/A	2b		
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.			
	>			
3a	a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time			
	during the year?			
b	of "Yes," did it have excess business holdings in 2014 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 2014) N/A	3b		17
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		X
0	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 2014?	,		v
	nao not been removed il dili jeddatav deldie tile mot dav di tije tak vegi tikulitiliti ili 70.147	י אחי		

SLY WIND FOUNDATION Form 990-PF (2014) C/O STERLING FOUNDATION	MANAGEMENT. I	лС	<u>47-19034</u>	87	Page 6
Part VII-B Statements Regarding Activities for Which I	Form 4720 May Be F	Required (contin	ued)	<u> </u>	r age o
5a During the year did the foundation pay or incur any amount to:					T
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	1 4945(e))?		es 🗶 No		
(2) Influence the outcome of any specific public election (see section 4955); of					
any voter registration drive?	in to barry on, and only or main		es X No	- 1	
(3) Provide a grant to an individual for travel, study, or other similar purposes	2		s X No		
(4) Provide a grant to an organization other than a charitable, etc., organization		۰، ت	יאונים פי		
4945(d)(4)(A)? (see instructions)	ii described in Section		es X No	ŀ	
,			S LALINO		
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational purposes, or i		(TE)	ļ	
the prevention of cruelty to children or animals?			es X No		
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und		in Regulations		. T	
section 53.4945 or in a current notice regarding disaster assistance (see instru			N/A	5b	—
Organizations relying on a current notice regarding disaster assistance check h					
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fi					
expenditure responsibility for the grant?	N	Ī/A	s L No		
If "Yes," attach the statement required by Regulations section 53 494	5-5(d)				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to	pay premiums on				1 1
a personal benefit contract?		Ye	s X No		
b Did the foundation, during the year, pay premiums, directly or indirectly, on a p	ersonal benefit contract?		1.	6ь	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?		s X No	1 ,	
b If "Yes," did the foundation receive any proceeds or have any net income attribu	itable to the transaction?			7b	
Part VIII Information About Officers, Directors, Trust		nagers, Highly		•	—
Paid Employees, and Contractors	•				
1 List all officers, directors, trustees, foundation managers and their	compensation.				
	(b) Title, and average hours per week devoted	(c) Compensation	(d) Contributions to employee benefit plans and deferred compensation	(e) Exp	pense
(a) Name and address	to position	(If not paid, enter -0-)	and deferred compensation	account	i, otner inces
MICHAEL F. CHENOWETH	PRESIDENT/DIR	ECTOR			
2325 DULLES CORNER BLVD	•				
HERNDON, VA 20171	1.00	0.	0.		0.
	SEC'Y/DIRECTO				
2325 DULLES CORNER BLVD		[
HERNDON, VA 20171	1.00	0.	0.		0.
	TREAS./DIRECT				
2325 DULLES CORNER BLVD					
HERNDON, VA 20171	1.00	1,248.	0.		0.
METAL DOTT	1.00	1,240.	<u></u>		- • •
2 Compensation of five highest-paid employees (other than those inc	luded on line 1). If none.	enter "NONE."			
	(b) Title, and average		(d) Contributions to	(e) Exp	pense
(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 compensation	account allowa	t, other
NONE	dovoted to position	-	compensation	anovio	
1111	·	-			
	, , , , , , , , , , , , , , , , , , ,	-			
Total number of other employees paid over \$50,000					
					U

(a) Name and address of each person paid more than \$50,000 (b) Type of service (c) Comp NONE	3 Five highest-paid independent contractors for professional services. If none, ent	er "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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. Expenses N/A 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 All other program-related investments, See instructions.	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	NONE		
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A 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 N/A All other program-related investments. See instructions.			
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A 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 N/A All other program-related investments. See instructions.			
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A 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 N/A All other program-related investments. See instructions.			
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 as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. N/A 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 N/A All other program-related investments. See instructions.			
List the foundation's four largest direct charitable activities during the tax year. Include relevant statistical information such as the number of organizations and other beneficiaries served, conferences convened, research papers produced, etc. 1	Total number of others receiving over \$50,000 for professional services Part IX-A Summary of Direct Charitable Activities		> (
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 N/A All other program-related investments. See instructions.	List the foundation's four largest direct charitable activities during the tax year. Include relevant stat number of organizations and other beneficiaries served, conferences convened, research papers pr	istical information such as the oduced, etc.	Expenses
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 All other program-related investments. See instructions.			
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 All other program-related investments. See instructions.			
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 N/A All other 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 N/A All other program-related investments. See instructions.	4		
All other program-related investments. See instructions.			
All other program-related investments. See instructions.		n lines 1 and 2.	Amount
All other program-related investments. See instructions.			
	•		

0 . Form **990-PF** (2014) Form 990-PF (2014) C/O STERLING FOUNDATION MANAGEMENT, LLC Page 8 Part X Minimum Investment Return (All domestic foundations must complete this part. Foreign foundations, see instructions) Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes; a Average monthly fair market value of securities 1a 6,815,002. b Average of monthly cash balances 1b 780,380. c Fair market value of all other assets 1c ,595,382. d Total (add lines 1a, b, and c) 1d e Reduction claimed for blockage or other factors reported on lines 1a and 0. 1c (attach detailed explanation) 1e Acquisition indebtedness applicable to line 1 assets 2 2 7,595,382. Subtract line 2 from line 1d 3 3 113,931. Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions) 4 Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4 481,451. 5 Minimum investment return Enter 5% of line 5 ADJUSTED FOR SHORT TAX PERIOD 103,513. 6 Part XI Distributable Amount (see instructions) (Section 4942(1)(3) and (1)(5) private operating foundations and certain foreign organizations check here and do not complete this part.) 103,513. Minimum investment return from Part X, line 6 1 1 3,825. Tax on investment income for 2014 from Part VI, line 5 2a 2b Income tax for 2014. (This does not include the tax from Part VI.) c Add lines 2a and 2b 3.825. 2с 99,688. Distributable amount before adjustments. Subtract line 2c from line 1 3 3 Recoveries of amounts treated as qualifying distributions 4 99,688. Add lines 3 and 4 5 Deduction from distributable amount (see instructions) 6 99. 688. Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1 7 Part XII Qualifying Distributions (see instructions) Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes: 51,373. Expenses, contributions, gifts, etc. - total from Part I, column (d), line 26 1a Program-related investments - total from Part IX-B 1b Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes 2 2 Amounts set aside for specific charitable projects that satisfy the: a Suitability test (prior IRS approval required) 3a Cash distribution test (attach the required schedule) 3b 51,373. 4 Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4 4 Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment

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

Form **990-PF** (2014)

373.

5

6

income. Enter 1% of Part I, line 27b

Adjusted qualifying distributions. Subtract line 5 from line 4

4940(e) reduction of tax in those years.

•	(a) Corpus	(b) Years prior to 2013	(c) 2013	(d) 2014
1 Distributable amount for 2014 from Part XI,	00.600			2011
line 7				99,688.
2 Undistributed income, if any, as of the end of 2014				
a Enter amount for 2013 only			0.	
b Total for prior years:				
, ,		0.		.4
3 Excess distributions carryover, if any, to 2014:				
a From 2009				ž
b From 2010				
c From 2011			<* ^	
d From 2012				
e From 2013			^	*
f Total of lines 3a through e	0.			z ₃
4 Qualifying distributions for 2014 from				
Part XII, line 4: ► \$51,373.	19			,
a Applied to 2013, but not more than line 2a	·*		0.	·
b Applied to undistributed income of prior	3,		*; /	
years (Election required - see instructions)		0.	· ·	
c Treated as distributions out of corpus		ş \	,	
(Election required - see instructions)	0.			
d Applied to 2014 distributable amount			·>	51,373.
e Remaining amount distributed out of corpus	0.			•
5 Excess distributions carryover applied to 2014	0.	. 1947)	* *	0.
(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:		***	.4	`
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	0.		`~ \$;;	
b Prior years' undistributed income. Subtract			1	
line 4b from line 2b		0.	,	
c Enter the amount of prior years'		<u> </u>		
undistributed income for which a notice of				
deficiency has been issued, or on which the section 4942(a) tax has been previously				
assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2013. Subtract line	· · · · · ·			
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2014. Subtract				
lines 4d and 5 from line 1. This amount must				
be distributed in 2015				48,315.
7 Amounts treated as distributions out of				4
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3) (Election				
may be required - see instructions)	0.			
8 Excess distributions carryover from 2009			-11-	
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2015				
Subtract lines 7 and 8 from line 6a	0.			
10 Analysis of line 9:		-		
a Excess from 2010				
b Excess from 2011			}	
c Excess from 2012				
d Excess from 2013				
e Excess from 2014				
423581 11-24-14		· · · · · · · · · · · · · · · · · · ·		Form 990-PF (2014)

SLY WIND FOUNDATION Form 990-PF (2014) Page 10 C/O STERLING FOUNDATION MANAGEMENT 47-1903487 Part XIV | Private Operating Foundations (see instructions and Part VII-A, question 9) N/A 1 a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling is effective for 2014, enter the date of the ruling 4942(1)(5) 4942(j)(3) or b Check box to indicate whether the foundation is a private operating foundation described in section 2 a Enter the lesser of the adjusted net Tax year Prior 3 years (a) 2014 (b) 2013 (c) 2012 (d) 2011 (e) Total income from Part I or the minimum investment return from Part X for each year listed **b** 85% of line 2a c Qualifying distributions from Part XII, line 4 for each year listed d Amounts included in line 2c not used directly for active conduct of exempt activities e Qualifying distributions made directly for active conduct of exempt activities. Subtract line 2d from line 2c Complete 3a, b, or c for the alternative test relied upon: a "Assets" alternative test - enter: (1) Value of all assets (2) Value of assets qualifying under section 4942(j)(3)(B)(i) b "Endowment" alternative test - enter 2/3 of minimum investment return shown in Part X, line 6 for each year listed c "Support" alternative test - enter: (1) Total support other than gross investment income (interest, dividends, rents, payments on securities loans (section 512(a)(5)), or royalties) (2) Support from general public and 5 or more exempt organizations as provided in section 4942(j)(3)(B)(iii) (3) Largest amount of support from an exempt organization (4) Gross investment income Part XV | Supplementary Information (Complete this part only if the foundation had \$5,000 or more in assets at any time during the year-see instructions.) Information Regarding Foundation Managers: a List any managers of the foundation who have contributed more than 2% of the total contributions received by the foundation before the close of any tax year (but only if they have contributed more than \$5,000). (See section 507(d)(2).) MICHAEL F. CHENOWETH b List any managers of the foundation who own 10% or more of the stock of a corporation (or an equally large portion of the ownership of a partnership or other entity) of which the foundation has a 10% or greater interest. NONE Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc., Programs: 🔟 if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d. a The name, address, and telephone number or e-mail address of the person to whom applications should be addressed:

STERLING FOUNDATION MANAGEMENT, LLC, 703-437-9720

2325 DULLES CORNER BLVD, STE 670, HERNDON, VA 20171

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

NONE PRESCRIBED

c Any submission deadlines

NONE

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

RECOGNIZED SECTION 501(C)(3) CHARITABLE ORGANIZATIONS ONLY

C/O STERLING FOUNDATION MANAGEMENT, LLC

47-1903487 Page 11

Supplementary Information (continued)

Form 990-PF (2014)

3 Grants and Contributions Paid During the Recipient	If recipient is an individual.		Durance of event or	
Name and address (home or business)	show any relationship to any foundation manager or substantial contributor	Foundation status of recipient	Purpose of grant or contribution	Amount
a Paid during the year				
WOMEN'S EMERGENCY NETWORK, INC 7400 SW 88TH ST. MIAMI, FL 33156	NONE	501(C)(3)	GENERAL SUPPORT	22,000
DOCTORS WITHOUT BORDERS USA INC 333 7TH AVE, 2ND FLOOR NEW YORK, NY 10001	NONE	501(C)(3)	GENERAL SUPPORT	18,000
CPR FOUNDATION OF THE CAROLINAS 314 VINTAGE HILL LN. HUNTERSVILLE, NC 28078	NONE	501(C)(3)	GENERAL SUPPORT	<u>5,000</u>
EVERGLADES LAW CENTER INC 331 W. CENTRAL AVE. WINTER HAVEN, FL 33880	NONE	501(C)(3)	GENERAL SUPPORT	2,000
FRIENDS OF THE EVERGLADES INC 11767 SOUTH DIXIE HWY 232 MIAMI, FL 33156	NONE	501(C)(3)	GENERAL SUPPORT	1,000
Total SEE CO	ONTINUATION SHE	ET(S)	▶ 3a	50 000
NONE				
Total			▶ 3b	0

Form 990-PF (2014) Part XVI-A

Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated.	Unrelate	ed business income		ided by section 512, 513, or 514	(e)
•	(a) Business	(b) Amount	(C) Exclu- sion	(d) Amount	Related or exempt function income
1 Program service revenue:	code	7	code	Amount	Turicuon income
a					
b					
C					
d					
e	[-
1					
g Fees and contracts from government agencies		· · · · · · · · · · · · · · · · · · ·			<u> </u>
2 Membership dues and assessments					• • • • • • • • • • • • • • • • • • • •
3 Interest on savings and temporary cash					
investments			1 4	122 456	
4 Dividends and interest from securities			14		
5 Net rental income or (loss) from real estate:	<u> </u>		% (· · · * * * · · · · · · · · · · · · · ·
Debt-financed property	-1417-				
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property					
7 Other investment income					
8 Gain or (loss) from sales of assets other					
			18	E7 772	
than inventory			10	57,772.	
9 Net income or (loss) from special events			ļ <u>.</u>		
10 Gross profit or (loss) from sales of inventory					
11 Other revenue:					
a					
b					
C					
d					
е					
12 Subtotal. Add columns (b), (d), and (e)		0.	_	191,228.	0.
13 Total. Add line 12, columns (b), (d), and (e)		<u> </u>	<u> </u>		
				13	131,240.
(See worksheet in line 13 instructions to verify calculations.)				·	
Part XVI-B Relationship of Activities to	the Acc	omplishment of Ex	emp	t Purposes	
Line No Explain below how each activity for which incom	ne is reported	ın column (e) of Part XVI-A	contril	outed importantly to the accor	nplishment of
the foundation's exempt purposes (other than b					
ALL SOURCES OF INCOME A	RE USE	D TO INVEST	IN	SECURITIES OR	
				IS USED FOR	
CHARITABLE PURPOSES AS					RS
IN ACCORDANCE WITH THE					KO,
THE RECORDINGE WITH THE	LOONDA	TION D EXEMP	<u> </u>	ORF ODE.	

	···-				
		, <u>,</u>			
		 			
		· -			
		-		<u> </u>	
					
		***		*	
423621					Form 990-PF (2014)
11-24-14					101111 330-1 1 (2014)

SLY WIND FOUNDATION C/O STERLING FOUNDATION MANAGEMENT, LLC Form 990-PF (2014) 47-1903487 Part XVII Information Regarding Transfers To and Transactions and Relationships With Noncharitable **Exempt Organizations** Yes No 1 * Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations? a Transfers from the reporting foundation to a noncharitable exempt organization of: (1) Cash Х 1a(1) (2) Other assets 1a(2) Other transactions: (1) Sales of assets to a noncharitable exempt organization 1b(1) (2) Purchases of assets from a noncharitable exempt organization 1b(2) (3) Rental of facilities, equipment, or other assets 1b(3) (4) Reimbursement arrangements 1b(4) (5) Loans or loan guarantees 1b(5) (6) Performance of services or membership or fundraising solicitations 1b(6) Sharing of facilities, equipment, mailing lists, other assets, or paid employees 1c If the answer to any of the above is "Yes," complete the following schedule. Column (b) should always show the fair market value of the goods, other assets, or services given by the reporting foundation. If the foundation received less than fair market value in any transaction or sharing arrangement, show in column (d) the value of the goods, other assets, or services received. (a) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements N/A 2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described X No in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes b If "Yes," complete the following schedule. (a) Name of organization (b) Type of organization (c) Description of relationship N/A ave examined this return, including accompanying schedules and statements, and to the best of my knowledge May the IRS discuss this (other than taxpayer) is based on all information of which preparer has any knowledge Sign return with the prepare Here 750p52015 X Yes LOS IDONT Signature of officer or trustee Date Title Print/Type preparer's name PTIN Check f Preparer's signature Date self- employed BARRY B. BONDROFF, Paid P00087387 Preparer SCHILLER Firm's name ► GORFINE, & Firm's EIN \triangleright 52-1231901

SUITE 250

MD 21117

Phone no. 410-356-5900

Use Only

Firm's address ► 10045 RED RUN BLVD',

OWINGS MILLS,

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.

Information about Schedule B (Form 990, 990-EZ, or 990-PF) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047

2014

Employer identification number

		47-1903487
Organization type (check one) Filers of: Section: Form 990 or 990 EZ		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
Note. Only a section 501(c	c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Ru on filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling	\$5,000 or more (in money or
Special Rules		
sections 509(a)(1 any one contribu) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990 or 990-EZ), Part II, line 13, 16a, tor, during the year, total contributions of the greater of (1) \$5,000 or (2) 2% of the amoun	or 16b, and that received from
year, total contrib	outions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educ-	,
year, contributior is checked, enter purpose Do not	on described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from an exclusively for religious, charitable, etc., purposes, but no such contributions totaled marker the total contributions that were received during the year for an exclusively religious complete any of the parts unless the General Rule applies to this organization because it tole, etc., contributions totaling \$5,000 or more during the year	ore than \$1,000 If this box , charitable, etc ,
_	that is not covered by the General Rule and/or the Special Rules does not file Schedule E	, , , , , , , , , , , , , , , , , , , ,

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

Name of organization

SLY WIND FOUNDATION

C/O STERLING FOUNDATION MANAGEMENT, LLC

Employer identification number

47-1903487

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	nal space is needed	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	MICHAEL CHENOWETH 724 CAMILO AVENUE CORAL GABLES, FL 33134	\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Oncash Ocomplete Part II for noncash contributions)

Name of organization

SLY WIND FOUNDATION

C/O STERLING FOUNDATION MANAGEMENT, LLC

Employer identification number

47-1903487

	Noncash Property (see instructions) Use duplicate copies of F	'art II if additional space is needed	
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
1	VARIOUS INVESTMENTS		
		\$ <u>7,500,000</u> .	09/29/14
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. om art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
		\$	
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received
(a) No. rom art I	(b) Description of noncash property given	(c) FMV (or estimate) (see instructions)	(d) Date received

Employer identification number

SLY WIND FOUNDATION

C/O ST Part III	the year from any one contributor. Complete	tributions to organizations described columns (a) through (e) and the follow	in section 501(c)(7), (8), or (10) that total more than \$1,000 for wing line entry. For organizations					
	completing Part III, enter the total of exclusively religion Use duplicate copies of Part III if addition	us, charitable, etc., contributions of \$1,000 or nal space is needed.	less for the year (Enter this into once)					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
T Car C y								
-	(e) Transfer of gift							
_	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from	(1) D							
Part I	(b) Purpose of gift (c) Use of g		(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee					
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held					
	(e) Transfer of gift							
	Transferee's name, address, a		Relationship of transferor to transferee					

C/O STERLING FOUNDATION MANAGEMENT, LLC 47-1903487 Part XV Supplementary Information Grants and Contributions Paid During the Year (Continuation) If recipient is an individual, show any relationship to any foundation manager or substantial contributor Recipient Purpose of grant or contribution Foundation Amount status of Name and address (home or business) recipient NONE PEOPLE'S HEALTH AND WELLNESS CLINIC 501(C)(3) GENERAL SUPPORT 553 NORTH MAIN ST. BARRE, VT 05641 2,000.

2,000.

Total from continuation sheets

FORM 990-PF	DIVIDENDS	S AND INTE	REST	FROM S	ECUR	ITIES		STATEME	NT	1
GROSS SOURCE AMOUNT		CAPITAL GAINS DIVIDENDS		(A) REVENUE PER BOOKS		(B) NET INVEST- MENT INCOME				
SANFORD C. BERNSTEIN & CO, LLC	238,648.	105,1	92.	133,456.		133,456.		•		_
TO PART I, LINE 4 =	238,648.	105,1	92.	2. 133,456.		133,456.		•		
FORM 990-PF		OTHER	EXPE	NSES	•			STATEME	NT	2
DESCRIPTION		(A) EXPENSES PER BOOKS		(B) T INVEST- NT INCOME		(C) ADJUSTED NET INCOME		(D) CHARITABLE PURPOSES		
STATE FILING FEES INSURANCE	125 1,248		0.				-	125. 1,248.		
TO FORM 990-PF, PG 1	., LN 23 =	1,373	<u>.</u> _		0.				1,37	73.
FORM 990-PF		OTHER IN	VEST	MENTS				STATEME	NT	3
DESCRIPTION			ALUA' METH		воо	K VALU		FAIR MA VALU		7
BERNSTEIN & CO	COST		7	7,568,985.		7,509,713.				
TOTAL TO FORM 990-PE	r, PART II,	LINE 13		_	7	,568,9	985.	7,50	9,71	.3.
FORM 990-PF		OTHER LI	ABIL	ITIES	·			STATEME	NT	4
DESCRIPTION					воч	AMOUN	1 T	EOY AMO	UNT	
DUE TO STERLING FOUNDATION MGMT, LLC					0.			125.		
TOTAL TO FORM 990-PF	, PART II,	LINE 22					0.		12	25.

FORM 990-PF	LIST OF SUBSTANTIAL CONTRIBUTORS PART VII-A, LINE 10	STATEMENT	5
NAME OF CONTRIBUTOR	ADDRESS		
MICHAEL CHENOWETH	724 CAMILO AVENUE CORAL GABLES, FL 33134		

If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II and check this box	Page 2		
, - =	▶ [X]		
Note. Only complete Part II if you have already been granted an automatic 3-month extension on a previously filed Form 8868			
If you are filing for an Automatic 3-Month Extension, complete only Part I (on page 1)			
Part II Additional (Not Automatic) 3-Month Extension of Time. Only file the original (no copies needed).		
Enter filer's identifying number, see	instructions		
Type or Name of exempt organization or other filer, see instructions Employer identification nu	ımber (EIN) or		
print SLY WIND FOUNDATION	45 1002405		
File by the due date for Number street and some south no. (6.8 D.O. have one street and south no. (6.8 D.O. have one street and south no. (6.8 D.O. have one			
filing your Number, street, and room or suite no if a P O box, see instructions	SN)		
return See Instructions 2325 DULLES CORNER BLVD, STE 670 City, town or post office, state, and ZIP code For a foreign address, see instructions			
HERNDON, VA 20171			
FIERCE ON , VII BOTT	 -		
Enter the Return code for the return that this application is for (file a separate application for each return)	0 4		
and the state of the stat	<u> </u>		
Application Return Application	Return		
Is For Code Is For	Code		
Form 990 or Form 990-EZ 01			
Form 990-BL 02 Form 1041-A	08		
Form 4720 (individual) 03 Form 4720 (other than individual)	09		
Form 990-PF 04 Form 5227	10		
Form 990-T (sec 401(a) or 408(a) trust) 05 Form 6069	11		
Form 990-T (trust other than above) 06 Form 8870	12		
STOP! Do not complete Part II if you were not already granted an automatic 3-month extension on a previously filed Form 8868.			
STERLING FOUNDATION MANAGEMENT • The books are in the care of ▶ 2325 DULLES CORNER BLVD, STE 670 - HERNDON, VA 201 Telephone No ▶ 703-437-9720 Fax No ▶	71		
• If the organization does not have an office or place of business in the United States, check this box			
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN) If this is for the whole group	check this		
box If it is for part of the group, check this box and attach a list with the names and EINs of all members the extension			
4 I request an additional 3-month extension of time until NOVEMBER 15, 2015			
5 For calendar year, or other tax year beginning SEP 22, 2014 , and ending DEC 31, 201	4		
6 If the tax year entered in line 5 is for less than 12 months, check reason Change in accounting period Final return			
7 State in detail why you need the extension			
ADDITIONAL TIME IS NEEDED TO FILE A COMPLETE AND ACCURATE RETURN.			
			
8a If this application is for Forms 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
nonrefundable credits. See instructions 8a \$	4,000.		
b If this application is for Forms 990-PF, 990-T, 4720, or 6069, enter any refundable credits and estimated			
tax payments made include any prior year overpayment allowed as a credit and any amount paid	4 000		
previously with Form 8868 8b \$	4,000.		
Balance due. Subtract line 8b from line 8a Include your payment with this form, if required, by using	0		
EFTPS (Electronic Federal Tax Payment System) See instructions 8c \$ Signature and Verification must be completed for Part II only.	0.		
Under penalties of perjury, I declare that I have examined this form, including accompanying schedules and statements, and to the best of my knowledge ar	id helief		
it is true, correct, and complete, and that I am authorized to prepare this form.	1 UGIIGI,		
Signature Melin & West Title > CPA Date > 7/2	415		
Form 8868	(Rev 1 2014)		