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Form **990-P**F

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

OMB No 1545-0052

2015

Department of the Treasury Internal Revenue Service ► Do not enter social security numbers on this form as it may be made public. ► Information about Form 990-PF and its separate instructions is at www.irs.gov/form990pf.

Open to Public Inspection

				<u>-</u> _				en to r done mapection
For c	alenda	ar year 2015, or tax year beginning	Nov 30	, 2015,	and ending De	c 31	, 2015	
Name o	f founda	tion					Employer identification nur	nber
LOO	N PO	INT FOUNDATION					81-0684611	
		eet (or P O box number if mail is not delivered to s	reet address)		Room/suite	В	Telephone number (see instr	uctions)
C/0	ROB	ERT DAHL-83 PECKSLAND	RD				(917) 658-571	L 7
		te or province, country, and ZIP or foreign postal of					· · · · · · · · · · · · · · · · · · ·	
GRE	ENWI	CH		CT	06831	C	If exemption application is	pending, check here . 🕨 📗
G C	neck á	Ill that apply X Initial return	Initial retur	n of a forme	er public charity	1		=
•		Final return	Amended		, pasio snamy	D 1	Foreign organizations, che	ck here ▶ [_]
		Address change				1	Foreign organizations mee	ting the 95% test check
			Name cha				here and attach computation	on
н с			501(c)(3) exemp	t private fou	indation	1	·	لــا
	Se	ection 4947(a)(1) nonexempt chantable	trust Oth	er taxable pi	rivate foundation	E	If private foundation status	was terminated
I Fa	ır mark	et value of all assets at end of year	Accounting meth	od. X C	ash Accrual] '	under section 507(b)(1)(A)	, check here · · · · ►
(fr	от Рап	t II, column (c), line 16)	Other (specify)			F	If the foundation is in a 60-	month termination
>	\$	6,980,000. (P	art I, column (d) n		ash basis)		under section 507(b)(1)(B)	check here
Part		Analysis of Revenue and	1			' T		I
rait		vnonege (The total of amounts in	(a) Reven		(b) Net investmen	it	(c) Adjusted net	(d) Disbursements
	G	xpenses (The total of amounts in olumns (b), (c), and (d) may not neces	expenses p	per books	income		income	for charitable
	s	anly equal the amounts in column (a)						purposes (cash basis only)
		see instructions))						(Gasir basis Grily)
	1	Contributions, gifts, grants, etc, received (attach schedule	7,00	00,000.				
	2	Ck ► if the foundation is not required to attach	Sch B					
						1		
	3	Interest on savings and temporary cash investments -					I RECE	IIVED 7
	4	Dividends and interest from securities						
		a Gross rents					魚	181
		b Net rental income or (loss) · · · ·					A MAY 3	2016
R	6	a Net gain or (loss) from sale of assets not on line 10					[W]	(J)
Ε		b Gross sales price for all					Land Section	
Ā	7	assets on line 6a				- -	LUUDE	V. Lit
E N	8	Net short-term capital gain						
ü	9	Income modifications						
Е	10	a Gross sales less						
	'	returns and allowances						1
		b Less Cost of						
		goods sold · · ·						
		c Gross profit or (loss) (allach schedule)						
	11	Other income (attach schedule)	• •					
	12	Total Add lines 1 through 11	7,00	00,000.				
	13	Compensation of officers, directors, trustees, et						
	14	Other employee salaries and wages						
	15	Pension plans, employee benefits	• •				- ,	
,	. 16	a Legal fees (attach schedule)						
1		b Accounting fees (attach sch)					-	
ï	"	c Other prof fees (attach sch)						
0 !	' ₁₇		-			-		
O I	18							
R) l	, ,, ,,	· ·					ļ
	19	schedule) and depletion • • • • • • • •						
	, 20						· -	
		Travel, conferences, and meetings						
ಅಲ		_				-+		
~~ N)	23	<u> </u>	·				-	
Z ⁰ [Tario, organisco (attaun denedule)				1		
= !	!	T-4-1						
<u> </u>	24	Total operating and administrative expenses Add lines 13 through 23 · · · ·				1		
	25			20 000				00.000
<i></i>	- 1	• • .	· · ·	20,000.		-+		20,000.
爱	26			20 000		ļ		20.000
EVANNED 101	 	Add lines 24 and 25	-: 	20,000.				20,000.
٧	27							
Ø		a Excess of revenue over expenses and disbursements		20 000				
		_		80,000.			.	
		b Net investment income (if negative, enter -0-)	-					ļ
	1	C Adjusted net income (if negative, enter -0-)	• • •		i	ı		I

Page 2

Par	F 11	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End o	f year
- ai		(See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value
	1	Cash - non-interest-bearing	0.	6,980,000.	6,980,000.
	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 sch)			
A		Less allowance for doubtful accounts			
Š	8	Inventories for sale or use			
A S E T	9	Prepaid expenses and deferred charges			
s	10	a Investments — U S. and state government obligations (attach schedule)			
		b Investments — corporate stock (attach schedule)			
		c 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				
		Less accumulated depreciation (attach schedule)			
	15 16	Total assets (to be completed by all filers -			
		see the instructions Also, see page 1, item I)	0.	6,980,000.	6,980,000.
L	17	Accounts payable and accrued expenses			
À	18	Grants payable			
B	19	Deferred revenue			
Ļ	20	Loans from officers, directors, trustees, & other disqualified persons			
I T	21	Mortgages and other notes payable (attach schedule)			
E	22	Other liabilities (describe			
<u> </u>	23				
		Foundations that follow SFAS 117, check here and complete lines 24 through 26 and lines 30 and 31.			
N F E U	24	Unrestricted			
TN	25	Temporanly restricted			
, D	26	,			
A S B S A E L T A		Foundations that do not follow SFAS 117, check here . X and complete lines 27 through 31.			
E L T A	27	Capital stock, trust principal, or current funds			
SN	28	Paid-in or capital surplus, or land, bldg , and equipment fund			
O E	29	Retained earnings, accumulated income, endowment, or other funds	0.	6,980,000.	
ŔS	30	Total net assets or fund balances (see instructions)	0.	6,980,000.	
	31	Total liabilities and net assets/fund balances (see instructions)	0.	6,980,000.	
Par	t III	Analysis of Changes in Net Assets or Fund Balance		0,300,000.	
	Tota	il net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree w	nth	
2		of-year figure reported on prior year's return)			0.
2 3		er amount from Part I, line 27a			6,980,000.
3 4		r increases not included in line 2 (itemize) •		3	6 000 000
_	_			<u> </u>	6,980,000.
6	Tota	eases not included in line 2 (itemize)	art II. column (b) line 20		6 000 000
<u> </u>	. 010		are in, column (b), line 30		6,980,000.

2-story brick warehouse, or common stock, 200 shares MLC Company)					ured	(C) Date acquired (mo , day, yr)	(d) Date sold (mo , day, yr)
1 a				D — Donat	1011		
b							
C							
				<u>-</u>			
e							
(e) Gross sales pr	ıce	(f) Depreciation allowed	(g) Cost or other bas	is		(h) Gain or	(loss)
		(or allowable)	plus expense of sale			(e) plus (f) mı	
а							
b							
С							
d							
е							
Complete only for as	sets showing	gain in column (h) and owned by t	he foundation on 12/31/69		_	(I) Gains (Col	(b)
(i) FMV as of 12/31/69)	(j) Adjusted basis as of 12/31/69	(k) Excess of col. (ı) over col (j), ıf any			ain minus col (k), bi an -0-) o r Losses (fr	ut not less
а							
b	Î			-			
c	İ					· · · · · · ·	
d	İ						
e	Î						
2 Capital gain net inco	ome or (net cap	oital loss) If gain, also	enter in Part I, line 7 ter -0- in Part I, line 7		2		
3 Net short-term capit	al gain or (loss) as defined in sections 1222(5) ai	nd (6):	-			
If gain, also enter in	Part I, line 8, c	olumn (c) (see instructions). If (los	ss), enter -0-	-	3		
		Section 4940(e) for Reduc		nent Inco		<u> </u>	-
	_	ndations subject to the section 49					 -
If section 4940(d)(2) applic						_	_
		4942 tax on the distributable amo nder section 4940(e) Do not com		enod?		· · · L Yes	∐ No
1 Enter the appropriat	e amount in ea	ch column for each year, see the	instructions before making ar	ny entries			
(a) Base period year Calendar year (or tax beginning in)	rs cyear	(b) Adjusted qualifying distributions	(c) Net value of nonchantable-use ass	ets	(col	(d) Distribution (b) divided by co	
2014							
2013							
2012							
2011				-			
2010					_		
2 Total of line 1, colur	nn (d)				2		
3 Average distribution number of years the	ratio for the 5- foundation has	year base penod — divide the tota s been in existence if less than 5 y	of on line 2 by 5, or by the years		3		
4 Enter the net value of	of noncharitable	e-use assets for 2015 from Part X	, line 5	[4		
5 Multiply line 4 by line	e 3				5		
6 Enter 1% of net inve	stment income	(1% of Part I, line 27b)			6		
7 Add lines 5 and 6.					7		
8 Enter qualifying disti	ributions from f	Part XII, line 4		[8		
If line 8 is equal to o	r greater than l	ine 7, check the box in Part VI, lin	e 1b, and complete that part	using a 1%	tax r	ate. See the	

Pai	t VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see	instru	ction	s)		ago .
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 instrs)					
ŧ		1				
	check here . ▶ and enter 1% of Part I, line 27b	\neg			_	
•	All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, col (b)					
2	Tax under section 511 (domestic section 4947(a)(1) trusts and taxable					
_	foundations only. Others enter -0-)	2				
3	Add lines 1 and 2	3				0.
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-)	4			-	
5	Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0	5				0.
6	Credits/Payments:					
á	2015 estimated tax pmts and 2014 overpayment credited to 2015	l				
t	Exempt foreign organizations — tax withheld at source	l				
	Tax paid with application for extension of time to file (Form 8868)					
•	Backup withholding erroneously withheld					
7	Total credits and payments Add lines 6a through 6d	7				0.
8	Enter any penalty for underpayment of estimated tax. Check here if Form 2220 is attached	8				
9	Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	9				0.
10	Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	10				0.
11	Enter the amount of line 10 to be Credited to 2016 estimated tax • Refunded •	11				
Pai	t VII-A Statements Regarding Activities					
1 a	Dunng the tax year, did the foundation attempt to influence any national, state, or local legislation or did it				Yes	No
	participate or intervene in any political campaign?		• • •	1 a		_ X
t	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes					
	(see Instructions for the definition)?	• • •	$\cdot \cdot \cdot $	1 b		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					
	Did the foundation file Form 1120-POL for this year?			1 c		X
	(1) On the foundation > \$ (2) On foundation managers > \$			-		
•	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	-		1		
	foundation managers • \$		İ			
2	Has the foundation engaged in any activities that have not previously been reported to the IRS?		$\cdot \cdot \cdot $	2		X
	If 'Yes,' attach a detailed description of the activities		1	- 1		
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		- 1			
	of incorporation, or bylaws, or other similar instruments? If Yes, attach a conformed copy of the changes		· · ·	3		X
	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	• •	• • •	4 a		_ X
'	olf 'Yes,' has it filed a tax return on Form 990-T for this year?	• • •	• • •	4 b		
3	Was there a liquidation, termination, dissolution, or substantial contraction during the year?		• • •	5		<u> X</u>
6	Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either					
Ü	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?		ŀ			نـــــا
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			6 7	X	
	Enter the states to which the foundation reports or with which it is registered (see instructions)		}		_ X	
	CT - Connecticut		-			
	o If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General		-			
	(or designate) of each state as required by General Instruction G? If 'No,' attach explanation			8 b	X	
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)	(5)	ļ			
•	for calendar year 2015 or the taxable year beginning in 2015 (see instructions for Part XIV)? If 'Yes,' complete Part X	\widetilde{N} .		9		Х
10	Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names		İ	1		
	and addresses			10	х	

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Form **990-PF** (2015)

•				
	n 990-PF (2015) LOON POINT FOUNDATION 81-068461 rt VII-A Statements Regarding Activities (continued)	1	F	age
	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		x
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		х
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	•
14	Website address	658	-57 <u>1</u>	7_
15	Section 4947(a)(1) nonexempt chantable trusts filing Form 990-PF in lieu of Form 1041 — Check here			
16	At any time during calendar year 2015, did the foundation have an interest in or a signature or other authority over a bank, securities, or other financial account in a foreign country?	40	Yes	
	See the instructions for exceptions and filing requirements for FinCEN Form 114. If 'Yes.'	16		X
Pai	enter the name of the foreign country rt VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
<u>. u</u>	File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.		Yes	No
1 a	During the year did the foundation (either directly or indirectly)		 	···•
	(1) Engage in the sale or exchange, or leasing of property with a disqualified person? Yes X No			
	(2) Borrow money from, lend money to, or otherwise extend credit to (or accept it from) a disqualified person?			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes			1
	(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? Yes X No			
	(5) Transfer any income or assets to a disqualified person (or make any of either available for the benefit or use of a disqualified person)?			
	(6) Agree to pay money or property to a government official? (Exception. Check 'No' 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.)			
ı	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)?	1 b		
	Organizations relying on a current notice regarding disaster assistance check here			
•	c Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that were not corrected before the first day of the tax year beginning in 2015?	1 c		Х
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 2015, did the foundation have any undistributed income (lines 6d and 6e, Part XIII) for tax year(s) beginning before 2015?		<u> </u>	
	If 'Yes,' list the years 20 , 20 , 20			
ı	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.)	2 b	<u></u>	
	the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	2.0		 -
`	► 20, 20, 20			
3 a	Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year?			
ı	b If 'Yes,' did it have excess business holdings in 2015 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 2015)	3 b		
			i .	1

Form 990-PF (2015)

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

Pant VIII Statements Regarding Activiti	es for Which Form	4720 May Be Req	ui red (continued)					
5 a During the year did the foundation pay or incur ar	•							
(1) Carry on propaganda, or otherwise attempt to			· · · · Yes X	No				
(2) Influence the outcome of any specific public election (see section 4955), or to carry on, directly or indirectly, any voter registration drive?								
(4) Provide a grant to an organization other than in section 4945(d)(4)(A)? (see instructions).	No							
(5) Provide for any purpose other than religious, educational purposes, or for the prevention of	charitable, scientific, lite of cruelty to children or ar	rary, or nımals?	· · · · Yes X	No				
b If any answer is 'Yes' to 5a(1)-(5), did any of the described in Regulations section 53 4945 or in a (see instructions)?	current notice regarding	disaster assistance		5 b				
Organizations relying on a current notice regarding	ng disaster assistance ch	eck here	▶					
c If the answer is 'Yes' to question 5a(4), does the tax because it maintained expenditure responsible	foundation claim exempt	on from the	· · · · Yes	No				
If 'Yes,' attach the statement required by Regulat	ions section 53.4945-5(a)						
6 a Did the foundation, during the year, receive any f on a personal benefit contract?	unds, directly or indirectly	y, to pay premiums	Yes X	No				
b Did the foundation, during the year, pay premium If 'Yes' to 6b, file Form 8870	s, directly or indirectly, o	n a personal benefit con		6 b X				
7 a At any time during the tax year, was the foundation	on a party to a prohibited	tax shelter transaction?	· · · · Yes X	No la la la la la la la la la la la la la				
b If 'Yes,' did the foundation receive any proceeds								
Part VIII Information About Officers, D	irectors, Trustees,	Foundation Manag	ers, Highly Paid E	mployees,				
and Contractors								
1 List all officers, directors, trustees, foundatio								
(a) Name and address	(b) Title, and average hours per week devoted to position	(c)Compensation (If not paid, enter -0-)	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances				
W. ROBERT DAHL								
83 PECKSLAND RD.	TRUSTEE							
GREENWICH CT 06831	1.00	0.	0.	0.				
	TRUSTEE							
GREENWICH CT 06831	1.00	0.	0.	0.				
2 Compensation of five highest-paid employee								
(a) Name and address of each employee paid more than \$50,000	(b) Title, and average hours per week devoted to position	(c) Compensation	(d)Contributions to employee benefit plans and deferred compensation	(e) Expense account, other allowances				
NONE		-						
								
			<u> </u>					
Total number of other employees paid over \$50,000 .		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · ·	None				

3 Five highest-paid independent contractors for professional services (see in		
(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		None
		None
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct chantable activities during the tax year. Include relevant statistical organizations and other beneficiaries served, conferences convened, research papers produced, etc.	information such as the number of	Expenses
1		
2		i
		ı
3		
		-
4		
Part IX-B Summary of Program-Related Investments (see instru	ctions)	
Describe the two largest program-related investments made by the foundation during	the tax year on lines 1 and 2	Amount
1		
2		
All other program-related investments See instructions		
3		
Total. Add lines 1 through 3		
BAA		Form 990-PF (2015)

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Form 990-PF (2015)

	`see instructions.)		_
а	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes Average monthly fair market value of securities	1 a	
	Average of monthly cash balances	1 b	3,500,000.
C	Fair market value of all other assets (see instructions)	1 c	
C	Total (add lines 1a, b, and c) · · · · · · · · · · · · · · · · · ·	1 d	3,500,000.
e	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	_3,500,000.
4	Cash deemed held for charitable activities Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	52,500.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	3,447,500.
6	Minimum investment return. Enter 5% of line 5	6	15,112.
Pa	Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating	found	
	and certain foreign organizations check here ► and do not complete this part.) Minimum investment return from Part X, line 6		
1		1	15,112.
	Income tax for 2015. (This does not include the tax from Part VI)		_
		2 c	0.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	15,112.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	15,112.
6	Deduction from distributable amount (see instructions)		
	Distributable amount as adjusted Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	15,112.
Pa	Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish chantable, etc, purposes		
	Expenses, contributions, gifts, etc — total from Part I, column (d), line 26		20,000.
	Program-related investments – total from Part IX-B		
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the	3 a	
ŧ	Cash distribution test (attach the required schedule)	3 b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	20,000.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment income. Enter 1% of Part I, line 27b (see instructions)	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	20,000.
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the fo qualifies for the section 4940(e) reduction of tax in those years	undatio	<u></u>

Part XIII Undistributed Income (see instructions)

4. Distributable amount for 2045 from Dat VI	2015
1 Distributable amount for 2015 from Part XI,	
2 Undistributed income, if any, as of the end of 2015	15,112.
b Total for prior years 20 , 20 , 20	
3 Excess distributions carryover, if any, to 2015	
a From 2010 0 .	
b From 2011 0 .	
c From 2012 0.	
d From 2013 0 .	
e From 2014 0 .	
f Total of lines 3a through e	
4 Qualifying distributions for 2015 from Part	
XII, line 4 > \$ 20,000.	
a Applied to 2014, but not more than line 2a	
h Applied to undetributed income of prior years	
b Applied to undistributed income of prior years (Election required — see instructions)	
c Treated as distributions out of corpus (Election required – see instructions)	
d Applied to 2015 distributable amount	15,112.
e Remaining amount distributed out of corpus	
5 Excess distributions carryover applied to 2015	
(If an amount appears in column (d), the same amount must be shown in column (a))	
Same anount mast be shown in column (a)	
6 Enter the net total of each column as	
indicated below:	
a Corpus Add lines 3f, 4c, and 4e Subtract line 5 4,888.	
b Pnor years' undistributed income Subtract line 4b from line 2b	
c Enter the amount of prior 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	
e Undistributed income for 2014 Subtract line 4a from	
line 2a Taxable amount — see instructions	
f Undistributed income for 2015 Subtract lines 4d and 5 from line 1. This amount must be	
distributed in 2016	0.
7 Amounts treated as distributions out of	
corpus to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (Election	
may be required — see instructions)	
8 Excess distributions carryover from 2010 not applied on line 5 or line 7 (see instructions)	
applied on line 5 or line 7 (see instructions) 0 .	
9 Excess distributions carryover to 2016. Subtract lines 7 and 8 from line 6a	
10 Analysis of line 9	
a Excess from 2011 0.	
b Excess from 2012 0 .	
c Excess from 2013 0 .	
d Excess from 2014 0 .	
e Excess from 2015 4,888.	

art XIV Private Operating Foundat			<u> </u>	<u>, </u>	N/A
a If the foundation has received a ruling or detus effective for 2015, enter the date of the ruli	ermination letter tha	at it is a private opera	ating foundation, and	the ruling	
b Check box to indicate whether the foundation	_			4942(j)(3) or	4942(j)(5)
a Enter the lesser of the adjusted net	Tax year		Pnor 3 years	1 4042()(0) 01	1342()(3)
income from Part I or the minimum investment return from Part X for each year listed	(a) 2015	(b) 2014	(c) 2013	(d) 2012	(e) Total
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					
art XV Supplementary Information	(Complete this	s part only if the	e foundation had	1 \$5,000 or more	in
assets at any time during th		nstructions.)	<u> </u>		
Information Regarding Foundation Managa List any managers of the foundation who have close of any tax year (but only if they have co	e contributed more	e than 2% of the total in \$5,000) (See sect	contributions receive	ed by the foundation be	efore the
W. ROBERT DAHL					
b List any managers of the foundation who ow a partnership or other entity) of which the foundation	n 10% or more of the ndation has a 10%	ne stock of a corpora or greater interest	tion (or an equally lar	ge portion of the owner	ership of
Information Regarding Contribution, Gran Check here	kes contributions to	o preselected charita	ible organizations and	d does not accept unso	olicited ons,
a The name, address, and telephone number of	or e-mail address ==	f the person to when	a applications about	ho oddrosed	
- The hame, address, and telephone humber t	or e-mail address of	i the person to whom	r applications should	be addressed	
b The form in which applications should be sub-	mitted and informa	ition and materials th	ney should include		
c Any submission deadlines.					
•					

81-0684611 Part XV | Supplementary Information (continued) 3 Grants and Contributions Paid During the Year or Approved for Future Payment If recipient is an individual, show any relationship to any foundation manager or substantial contributor Foundation Recipient Purpose of grant or contribution status of **Amount** recipient Name and address (home or business) a Paid during the year ST. PAUL'S SCHOOL ANNUAL FUND TO SUPPORT THE 325 PLEASANT ST. MISSION OF THE CONCORD NH 03301 501 (C) (3) SCHOOL 20,000. 20,000. b Approved for future payment

3 b

PartXXVI-A Analysis of Income-Producing Activities

gross amounts unless otherwise indicated	Unrelated	business income	Excluded by	section 512, 513, or 5	14 (e)
Program service revenue	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	Related or exem function income (See instructions
•			1 3000		
		· · · · · · · · · · · · · · · · · · ·		 	
			+	 	
	1 -	· · · · · · · · · · · · · · · · · · ·	+	 -	
		-			
				··· · · · · · · · · · · · · · · · · ·	-
Fees and contracts from government agencies	 				
Membership dues and assessments					
Interest on savings and temporary cash investments					
Dividends and interest from securities			_		-
Net rental income or (loss) from real estate					
Debt-financed property					
Not debt-financed property			 		-
Net rental income or (loss) from personal property		 	+		
Other investment income			+-+	 _	
Gain or (loss) from sales of assets other than inventory		<u> </u>		 -	
Net income or (loss) from special events			++		
Gross profit or (loss) from sales of inventory			+		
Other revenue					
Other revenue					
	+		 -		
			++		_
	 				
			 		_
Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation	ns.)		-	-	3
Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation WIB Relationship of Activities to the	ns.) he Accompli	ishment of Exer	npt Purpos	ses	
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation WIES Relationship of Activities to the No. Explain below how each activity for which in	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation WIES Relationship of Activities to the columns of	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation WIES Relationship of Activities to the columns of	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
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Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation WHB Relationship of Activities to the columns of the	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
rotal. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation WIES Relationship of Activities to the columns. Explain below how each activity for which in	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
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Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation WHB Relationship of Activities to the columns of	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
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Total. Add line 12, columns (b), (d), and (e) vorksheet in line 13 instructions to verify calculation WHB Relationship of Activities to the columns of	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation We Relationship of Activities to the Relationship of Activities to the Relationship of Activity for which in	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
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Total. Add line 12, columns (b), (d), and (e) worksheet in line 13 instructions to verify calculation We Relationship of Activities to the Relationship of Activities to the Relationship of Activity for which in	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the
Subtotal. Add columns (b), (d), and (e)	ns.) he Accompliacome is reporte	ishment of Exen	npt Purpos	ses	to the

Page 13

Form 990-PF (2015) LOON POINT FOUNDATION 81-0684611 Part XVIII Information Regarding Transfers To and Transactions and Relationships With Noncharitable Exempt Organizations

									T 1	
descr	ne organization directly abed in section 501(c) ng to political organiza	of the Code (othe	age in any of the f or than section 501	following with any 1(c)(3) organizati	other orgar ons) or in se	nization ection 527,			Yes	No
a Trans	fers from the reporting	foundation to a r	nonchantable exe	mpt organization	of					
	ash							1 a (1)		Χ_
(2) C	Other assets							1 a (2)		X
b Other	transactions						ı			
(1) S	ales of assets to a no	ncharitable exemp	ot organization					1 b (1)		X
(2) P	urchases of assets fro	om a noncharitable	e exempt organiza	ation				1 b (2)		X
• •	Rental of facilities, equi							1 b (3)		X
• •	Reimbursement arrang	•						1 b (4)	-	<u>x</u>
• • •	J								-	
	oans or loan guarante							1 b (5)		<u>X</u>
• •	erformance of service	•	•					1 b (6)		<u>X</u> _
c Sharii	ng of facilities, equipm	ent, mailing lists,	other assets, or p	aid employees.				1 c		X
the ac	answer to any of the a oods, other assets, or ransaction or sharing a	services given by	the reporting four	ndation If the fou	indation rece	eived less thai	n fair market value i	alue of n	_	
(a) Line no	(b) Amount involved	(c) Name o	of noncharitable exem	pt organization	(d) Des	scription of transf	ers, transactions, and s	haring arran	gements	;
						-				
			-							
							 "			
										
										
										
	<u> </u>									
			-						_	
										
descr	e foundation directly or ribed in section 501(c) s,' complete the follow	of the Code (other	d with, or related er than section 50	to, one or more to 1(c)(3)) or in sect	ax-exempt on 527? .	rganizations		. Yes	s X	No
	(a) Name of organiza	tion	(b) Type	of organization		(c)	Description of relati	ionship		
	· · · · · · · · · · · · · · · · · · ·			<u> </u>						
										
			·						_	
Tiles	der penalties of perjury, I decl	are that I have every	Sthie return, including a	accompanying schedu	loc and stateme	nte and to the hee	t of my knowledge and be	dief it is true	_	
Sign Here	rect, and coordinate Declaration	on of preparer (other tha	an Jaxpayer) is based or	n all information of whit	ch preparer has	any knowledge	corny miomozgo dile so	May the I this return preparer	n with the	9
4	signature of officer or trustee		min.	05/15/16 Date	TRU	JSTEE		(see instr	uctions)?	<u>~</u>
	Print/Type preparer's r		Preparer's &			ate	-1 1.1	PTIN X	Yes	No
			reparers	yingure 7	\sim		Checkif			
Paid	STEVEN MOS	KOWITZ CPA		$\frac{\mathcal{L}}{\mathcal{L}}$	10	5/12/16	self-employed	P00166	<u> 5473</u>	
Preparei	r Firm's name	STEVEN MOS	SKOWÍTZ CPA	PC			Firm's EIN <u>13-39</u>	923827		
Use Only		660 WHITE	PLAINS RD	5TH FL						
	1	TARRYTOWN			VY 1059	1-5187	Phone no (914) 366-	6714	
BAA				.		L	, ,	Form 99		
-									(4	, , ,

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, 990-PF) and its instructions is at www.irs.gov/form990. OMB No 1545-0047

2015

Employer identification number

LOON POINT FOUNDATION		81-0684611
Organization type (check one):		
Filers of:	Section:	
Form 990 or 990-EZ	501(c)() (enter number) organizatio	on
	4947(a)(1) nonexempt chantable trust not	treated as a private foundation
	527 political organization	
	327 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt chantable trust treat	ted as a nevate foundation
		teu as a private roundation
	501(c)(3) taxable private foundation	
Check if your organization is covered by the Gen	eral Rule or a Special Rule.	
Note. Only a section 501(c)(7), (8), or (10) organ	ization can check boxes for both the General Rul	e and a Special Rule. See instructions
General Rule		
X For an organization filing Form 990, 990-EZ,	or 990-PF that received, during the year, contribu	utions totaling \$5,000 or more (in money or
property) from any one contributor Complete	e Parts I and II. See instructions for determining a	contributor's total contributions
Special Rules		
	(c)(3) filing Form 990 or 990-EZ that met the 33-1	
received from any one contributor, during the), that checked Schedule A (Form 990 or 990-EZ) e year, total contributions of the greater of (1) \$5,0), Part II, line 13, 16a, or 16b, and that 200 or (2) 2% of the amount on (i)
Form 990, Part VIII, line 1h, or (ii) Form 990-	EZ, line 1 Complete Parts I and II.	. (-)
For an organization described in section 501	(c)(7), (8), or (10) filing Form 990 or 990-EZ that r	received from any one contributor
during the year, total contributions of more th	nan \$1,000 exclusively for religious, chantable, so	ectived from any one contributor, sentific, literary, or educational
purposes, or for the prevention of cruelty to c	children or animals. Complete Parts I, II, and III	
	(c)(7), (8), or (10) filing Form 990 or 990-EZ that religious, charitable, etc., purposes, but no such of	
	total contributions that were received during the	
chantable, etc., purpose Do not complete ar	ny of the parts unless the General Rule applies to	this organization because
	e, etc., contributions totaling \$5,000 or more during	
Caution. An organization that is not covered by 1990-PE), but it must answer 'No' on Part IV, line	the General Rule and/or the Special Rules does n 2, of its Form 990, or check the box on line H of i	not file Schedule B (Form 990, 990-EZ, or uts Form 990-EZ or on its Form 990-PE
Part I, line 2, to certify that it does not meet the fi	ling requirements of Schedule B (Form 990, 990-	EZ, or 990-PF)
BAA For Paperwork Reduction Act Notice, see the Inst	tructions for Form 990, 990-EZ, or 990-PF.	Schedule B (Form 990, 990-EZ, or 990-PF) (2015)

Schedule B (Form 990, 990-EZ, or 990-PF) (2015)	Page	1	of	1	of Part I
Name of organization		Employer identification number			
LOON POINT FOUNDATION	81-06	5846.	<u>l 1</u>		

Part Contributors (see instructions).	Use duplicate copies of Part I if additional space is needed
---------------------------------------	--

(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
1	W. ROBERT AND LESLIE DAHL 83 PECKSLAND RD GREENWICH CT 06831	\$7 <u>.000.000</u> .	Person X Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions)
(a) Number	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)

Additional Information

LIST OF SUBSTANTIAL CONTRIBUTORS	_
W. ROBERT DAHL	
83 PECKSLAND RD.	
GREENWICH, CT 06831	
LESLIE A. DAHL	
83 PECKSLAND RD.	
GREENWICH, CT 06831	