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SCANNED JUN 0 2 2010

Department of the Treasury Internal Revenue Service

## Return of Private Foundation or Section 4947(a)(1) Nonexempt Charitable Trust Treated as a Private Foundation Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0052

2009

c Other professional fees (attach schedule)			year 2009,	or t	ax year be	eginning			, 2009	, and end	ling				, 2	20
Name of Coundation   A Employer Identification number   The SECOND FOUNDATION   13-3727668   13-3727668   Number and street (or P O box number if mail a not delivered to sirect address)   Room/stute   B **Temperature**	G Ch	neck all t	that apply		finitial re	turn	Init	al return	of a former p	ublic cha	rity	-		Final r	eturn	
THE SECOND FOUNDATION   13-3727668   13-3727668     13-3727668						d return	<u></u>	Addres	ss change		Nan	ne c	hange			
Community   Com								-	•	•	Α	Emp	loyer identif	ication nur	nber	
Number and street (or P O box number if mail is not delivered to street address)   Room/suite   B   Telepower number (see paye to the minuteur)	Use	the IRS	THE SEC	OND	FOUNDA	NOITA										
print of type.  See Specific Instructions.  City or town, state, and ZIP code  KINNELON, NJ 07405  H Check type of organization	la	abel.	C/O RIC	HAR	RD FACTO	OR							13-	-37276	68	
or type. See Specific Instructions.  City or town, state, and ZiP odde  KINNELON, NJ 07405  H. Check type of organization [X] Section 501(c)(3) exempt private foundation  Section 4947(a)(1) nonexempt chantable trust   Other taxable private foundation of year (from Part II), col. (c), line   Other (specify)   Other (specify)   Taxil Analysis of Revenue and Expenses fill (and the state)   Other (specify)   Toolstooping, Big. opense, ex., exceed lattists hemoder)   Controlling, Big. opense, extended lattists hemoder)   Controlling, Big	Oth	erwise,	Number and	d stre	et (or POb	ox number i	f mail is not deliv	ered to street	address)	Room/su	ute B	Telepi	hone number (se	e page 10 of the	ne instructions	s)
See Specific Instructions.  City or town, state, and ZIP code    City or town, state, and ZIP code	-										- 1					
Instructions. City or fown, state, and ZIP code    City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, and ZIP code   City or fown, state, state, state, and zip code   City or fown, state, state, state, state, state, state, and zip code   City or fown, state, state			638 MOU	NTA	IN ROA	D					1		(	)	-	
Check type of organization   X   Section 501(c)(3) exempt private foundation   Other taxable private foundation   Other (specify)   Other (specify		-	City or town	n, sta	te, and ZIP	code					С	If exe	emption applica	ation is	<del></del>	
KINNELON, NJ 07405	msu	ucuons.										•	-			
H. Check type of organization			KINNELO	N,	NJ 0740	05					١٣					
Section 4947(a)(1) nonexempt chantable trust  Other taxable private foundation  I Fair market value of all assets at end of year (from Part II, col. (c), line of year (from Part II, col. (c), line 16) \$ 152, 177 (Part II nanlysis of Revenue and Expenses (from total of amounts in columns (b), (c), and (d) many not necessarily equal the amounts in columns (b), (c), and (d) many not necessarily equal the amounts in columns (b), (c), and (d) many not necessarily equal the amounts in column (a) (see page 11 of the instructions)  1 Controlumn, gits, grants, excreed (status headule)  1 Controlumn, gits, grants, excreed (status headule)  2 Check	H Ch	neck typ	e of organiza	ation	X Se	ction 501	(c)(3) exemp	t private f	oundation			85	% test check i	here and atta	ch ,	
Fair market value of all assets at end of year (from Part II, col. (c), line year (from Part II, col. (c), line year (from Part II, col. (c), line year (from Part II, line z), line year (from Part II, line z	1 1									hon		co	emputation .		'	
Other (specify)  16) \$ \$ 152,177.    Contributions, gits, emes, effective from securities and expenses (the total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily equal the amounts in columns (b), (c), and (d) may not necessarily expenses per column (a) (see page 11 of the instructions).  1 Contributions, gits, emak, encewed (water shocked) (a) Revenue and expenses per column (a) (see page 11 of the instructions).  1 Contributions, gits, emak, encewed (water shocked) (a) the foundation is not required to the foundation is not required											E					
## Part I Analysis of Revenue and Expenses (The total of amounts in columns (b), (c), and (d)							_	_	3311 ACC	iluai	ŀ					
Part   Analysis of Revenue and Expenses (The fold of amounts in columns (b), (c), and (d) amounts in columns (b), (c), and (d) see page 11 of the instructions)   (a) (see page 11 of the instructions)    1 Contributions, afts, greats, etc. received (statist) schedule)    2 Check     (if the foundation is not required to a linerest on sangus and temporary cash investments   (a) (see page 11 of the instructions)    3 Interest on sangus and temporary cash investments   (b) Net investment income   (c) Adjusted net income (for charitable purposes (cash basis only continued to a linerest on sangus (see page 11 of the instructions)    5a Gross rents   (a) (see page 11 of the instructions)   (b) Net investment income   (c) Adjusted net income (for charitable purposes (cash basis only continued to a line (see page 11 of the instructions)    5a Gross rents   (b) Net investment   (c) Adjusted net income (for charitable purposes (cash basis only cash develops   (c)									cash basis )		F					
total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) (see page 11 of the instructions)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, prants, bandules, encewed (attach schedule) Check  (ash basis only)  1 Connibutions, gifts, grants, bandules, encewed (ash schedule) Check  (ash basis only)  1 Connibutions, gifts, grants, bandules, encewed (ash schedule) Check  (ash basis only)  1 Connibutions, gifts, grants, bandules, encewed (ash schedule) Check  (ash basis only)  1 Connibutions, gifts, grants, bandules, encewed (ash basis only)  1 Connibutions, gifts, grants, bandules, encewed (ash basis only)  1 Connibutions, gifts, grants, bandules, and all grants, grants, bandules, and grants, grants, bandules, grants, grants, bandules, grants, bandules, grants, grants, bandules, grants, bandules, grants, bandules, grants, grants, bandules, grants, gra		<u> </u>					1	7,000 50 077	oden basic )			unue	r section 507(0	T : -		
Contributions_gate_sprants_ec_receved (attach schedule)	ı arı	total c	of amounts in o	colum	nns (b), (c), a	and (d)			(b) Net inve	estment	(c) A	djus	ted net	, , ,		
1 Contributions, gits, grants, etc., received (attach schedule) 2 Check		may i	not necessarily	y equ	al the amou	ints in			ıncom	ie		inco	me		•	
2 Cneck	Τ.													(cast	ı basıs o	nly)
Check   Chec			[ if the											<del> </del>		
A Dividends and interest from securities	ı		attach	Sch	В									1		
Sa   Cross rents	· ·		•		•			4 050		4 050				7 00 0	77 7	
b Net rental income or (loss)  6 Net garn or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a  7 Capital garn net income (from Part IV, line 2).  8 Net short-term capital gain  9 Income modifications  10 a Gross sales less returns  b Less Cost of goods sold  c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11.  4,959  4,959  4,959  13 Compensation of officers, directors, trustees, etc.  10 Other employee salanes and wages.  15 Pension plans, employee benefits  16 Legal fees (attach schedule)  17 Interest.  18 Taxes (attach schedule) see page 14 of the instructions)  19 Depreciation (attach schedule) and depletion.  20 Occupancy.  21 Travel, conferences, and meetings.  22 Printing and publications  Add lines 13 through 23.  23 Other expenses (attach schedule) ATCH 4.  24 Total operating and administrative expenses.  Add lines 13 through 23.  3,500  3,500  10 MAY 18 2010  9 MAY 18 2010  10 MA	4							4,959.		4,959.				ATC	<u>н т</u>	
Section   Sect	5 8	a Gross	rents													
Scross sales price for all   30,000		<b>b</b> Net ren	ital income or (lo	oss) _			<u> </u>			-						<del>-,</del>
Net short-term capital gain  Income modifications  Income (loss) (attach schedule)  Income (	မ္မ 6 ရ											<u> </u>	_REC	EIVE	<b>D</b>	<del></del>
Net short-term capital gain  Income modifications  Income (loss) (attach schedule)  Income (	ָם '			'		<u>30,000</u> .						<u> </u>		<del></del>	====-(	اد
Net short-term capital gain  Income modifications  Income (loss) (attach schedule)  Income (	<u>6</u> 7	Capita	I gain net ince	ome (	(from Part IV	/, line 2) .						اي	- 14 A V	<del>- 07 201</del>		
a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule)	8	Net sh	ort-term capit	tal ga	ın							33	WAT	TA ZOI	U C	ــــــــــــــــــــــــــــــــــــــ
and allowances																ž
c Gross profit or (loss) (attach schedule)  11 Other income (attach schedule)  12 Total. Add lines 1 through 11	10 3												OGD	EN.L	JT	
11 Other income (attach schedule) 12 Total. Add lines 1 through 11	1	<b>b</b> Less C	ost of goods sole	a . [												
12 Total. Add lines 1 through 11	(	c Gross	profit or (loss)	) (atta	ach schedule	e)										
12 Total. Add lines 1 through 11	11	Other	income (attac	h sch	nedule)											
Travel, conferences, and meetings  Total operating and administrative expenses.  Add lines 13 through 23  Contributions, gifts, grants paid  Table Occupancy  Total operating and administrative expenses.  Add lines 13 through 23  Table Occupancy  Travel, conferences, and meetings  Total operating and administrative expenses.  Add lines 13 through 23  Travel, confirences, and meetings  Travel, conferences, and meetings  Total operating and administrative expenses.  Add lines 13 through 23  Travel, confirences, and meetings  Travel, confirences, and meetings  Total operating and administrative expenses.  Add lines 13 through 23  Travel, confirences, and meetings  Travel, confirences, an	12							4,959.	-	4,959.						
14 Other employee salanes and wages	13	Compe	nsation of office	ers, dır	rectors, truste	es, etc		0.								
15 Pension plans, employee benefits	14															
c Other professional fees (attach schedule)	15															
c Other professional fees (attach schedule)	E   16a			-	-											
c Other professional fees (attach schedule)	X I	b Accou	nting fees (at	tach s	schedule) <sup>A7</sup>	rch 2		850.		425.			0.			425
25 Contributions, girts, grants paid	9 (	c Other	professional f	ees (	attach sched	dule).								1		
25 Contributions, girts, grants paid	17								_							
25 Contributions, girts, grants paid	18					.11.		121.			_			<u> </u>		
25 Contributions, girts, grants paid	<b>≣</b>  19	•		, ,	. •			•						1		
25 Contributions, girts, grants paid	E   20	•	•		•									<del>                                     </del>		<del></del>
25 Contributions, girts, grants paid	<b>₹</b>  24													<del>                                     </del>		
25 Contributions, girts, grants paid													<del></del>			
25 Contributions, girts, grants paid	5 22							150		150.				<del>                                     </del>		
25 Contributions, girts, grants paid	23													1		
25 Contributions, girts, grants paid	24					-		1.121		575			Λ			425
25 Contributions, girts, grants paid	5 .		_				L							<del> </del>	<del></del>	3,500
126 Total expenses and disbursements Add lines 24 and 25   4,021   3,3	25		_	-						575				<del>                                     </del>		3,925
	26					24 and 25		4,021		٠,٠,٠			<u> </u>	<del>'</del>		,, 543
27 Subtract line 26 from line 12								220								
a Excess of revenue over expenses and disbursements 338.								338.		4 304				ļ		
b Net investment income (if negative, enter -0-)	- 1					•				4,384.						
c Adjusted net income (if negative, enter -0-)   -0-    For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.   JSA ** ATCH 3 Form 990-PF (2														.l		

Form 990-PF (2009) 13-3727668 Page 2 Attached schedules and amounts in the End of year Beginning of year Part II Balance Sheets description column should be for end-of-year (b) Book Value (a) Book Value amounts only (See instructions ) (c) Fair Market Value 40,371. 38,483. 38,483. 2 3 Accounts receivable ▶ Less allowance for doubtful accounts ▶ Pledges receivable Less: allowance for doubtful accounts ▶ 6 Receivables due from officers, directors, trustees, and other disqualified persons (attach schedule) (see page 16 of the instructions) 7 Other notes and loans receivable (attach schedule) Less allowance for doubtful accounts ▶ \_\_\_\_\_ Inventories for sale or use 8 9 Prepaid expenses and deferred charges 10 a Investments - U S and state government obligations (attach schedule) . 112,607. 114,833. 113,694 b Investments - corporate stock (attach schedule) ATCH 5 c Investments - corporate bonds (attach schedule). . . . . . . Investments - land, buildings, **---**and equipment basis Less accumulated depreciation (attach schedule) 12 13 Land, buildings, and equipment basis Less accumulated depreciation (attach schedule) 15 Other assets (describe > 16 Total assets (to be completed by all filers - see the 152,978. 153,316. 152,177. 17 18 19 20 Loans from officers, directors, trustees, and other disqualified persons Mortgages and other notes payable (attach schedule) . . . . 21 Other liabilities (describe 22 Total liabilities (add lines 17 through 22) . . . . . . . . 23 Foundations that follow SFAS 117, check here ▶ and complete lines 24 through 26 and lines 30 and 31. Balances 24 25 26 Fund Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.  $\blacktriangleright$   $\mid$   $X \mid$ ö Capital stock, trust principal, or current funds . . . . . . . . . 153,409. 152,978 27 Paid-in or capital surplus, or land, bldg , and equipment fund . . . . . 28 -431. 338 29 Retained earnings, accumulated income, endowment, or other funds . . 30 Total net assets or fund balances (see page 17 of the Net 152,978. 153,316 Total liabilities and net assets/fund balances (see page 17 31

	o	f the instructions	٠																
P	art III	Analysis of	C	ha	ng	es	in	N	et	A۶	SS	ets	S (	r	F	u	n	d	<b>Balances</b>

1	Total net assets or fund balances at beginning of year - Part II, column (a), line 30 (must agree with		
	end-of-year figure reported on prior year's return)	1	152,978.
2	Enter amount from Part I, line 27a	2	338.
3	Other increases not included in line 2 (itemize) ▶	3	
4	Add lines 1, 2, and 3	4	153,316.
	Decreases not included in line 2 (itemize) ▶	5	
<u>6</u>	Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30	6	153,316.

152,978.

153,316.

Form 990-P	PF (2009)		13-37276	68		Page 3
Part IV	Capital Gains	and Losses for Tax on Inv	estment Income			
	(a) List and	d describe the kind(s) of property sold (	e g , real estate,	(b) How acquired	(c) Date acquired	(d) Date sold
	2-story bi	rick warehouse, or common stock, 200	shs_MLC Co)	P-Purchase D-Donation	'I (MO day vr )	(mo , day, yr.)
<u>1a</u>				1		_
_Ь				ļ <u>.</u>		<u> </u>
<u> </u>				<b> </b>		
<u>d</u>		<u>.</u>				
<u>e</u>	<del>_</del>			ļ		<u> </u>
(e) G	Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale		(h) Gain or (lo (e) plus (f) min	
<u>a</u>						
b						
_c						
d						
е						
Complet	te only for assets sl	howing gain in column (h) and owr	ned by the foundation on 12/31/69	(1)	Gains (Col. (h) g	ain minus
	V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Excess of col (ı) over col (j), ıf any		(k), but not less Losses (from co	than -0-) or
а						
b						
С	· · · · · · · · · · · · · · · · · · ·				-	
d					•	
e						
		. ( If	gain, also enter in Part I, line 7			
2 Capita	I gain net income or	(net capital loss)	gain, also enter in Part I, line 7 (loss), enter -0- in Part I, line 7	2		
3 Net sh	ort-term capital gain	or (loss) as defined in sections 12				
		line 8, column (c) (see pages 13				
		ine 8		3		
Port V	Qualification Un	nder Section 4940(e) for Redu	road Tay on Not Investment Inc	-		
		·				
(For optio	mai use by domestic	private foundations subject to the	e section 4940(a) tax on net invest	ment inco	ome )	
If section	4940(d)(2) applies,	leave this part blank				
					_	
		the section 4942 tax on the distrib		ase perio	<sup>od?</sup> ∟	_ Yes X No
		not qualify under section 4940(e)				
1 Enter		ount in each column for each year	see page 18 of the instructions be	efore mal	king any entries	
Ba	(a) ase penod years	(b)	(c)		(d) Distribution r	atio
Calendar ye	ear (or tax year beginning in)	Adjusted qualifying distributions	Net value of nonchantable-use assets		(col (b) divided by	col (c))
	2008	6,425.	155,644.			0.041280
	2007	487.	163,242.			0.002983
	2006	462.	151,315.		-	0.003053
	2005	8,209.	148,148.			0.055411
	2004	42,928.	164,333.			0.261226
	2001			<u> </u>		
2 Total	of line 1 column (d)			,		0.363953
2 Avere	as distribution ratio	for the 5-year base period - divide		2		0.303333
						0 070701
numo	er of years the found	dation has been in existence if less	than 5 years	3		0.072791
4 Enter	the net value of non	charitable-use assets for 2009 from	m Part X, line 5	4		134,521.
5 Multip	ly line 4 by line 3			5		9,792.
	•					· - ·· ···
6 Enter	1% of net investmen	nt income (1% of Part I, line 27b)		6		44.
		(1.0 0.1 a.c.), mio 210)	• • • • • • • • • • • • • • • • • • • •	<del> </del>	<del></del>	
7 Add 1	nee 5 and 6			7		9,836.
, Auu III				<del>                                     </del>		
0	- بدر خانده می جانده در کاران در ا	ns from Bort VII. line 4				3 025
o Enter	8 is equal to or gre	ns from Part XII, line 4	n Part VI, line 1b, and complete t	∟ <mark>ठ  </mark> hat part	using a 1% tax	x rate See the
Part V	I instructions on pag-	e 18				

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Par	t VI、 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see page 18 of t	he ins	truction	ons)		
ĺа	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 ruling letter if necessary - see instructions)					
b	Domestic_foundations that meet the section 4940(e) requirements in Part V, check			88.		
	here ▶ and enter 1% of Part I, line 27b					
С	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			88.		
4	Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4			0.		
5	Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0	88				
6	Credits/Payments:					
а	2009 estimated tax payments and 2008 overpayment credited to 2009   6a					
b	, , , , , , , , , , , , , , , , , , , ,					
C	Tax paid with application for extension of time to file (Form 8868) 6c 0.					
d				_		
7	Total credits and payments Add lines 6a through 6d			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			88.		
10	Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid					
11	Enter the amount of line 10 to be Credited to 2010 estimated tax ▶ Refunded ▶ 11		<del>.</del>			
	t VII-A Statements Regarding Activities					
1 a	During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it	<u> </u>	Yes	No X		
	participate or intervene in any political campaign?	1a				
b	Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see page 19			Х		
	of the instructions for definition)?	1b		Λ		
	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			Х		
	Did the foundation file Form 1120-POL for this year?	1 c				
d	Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year  (1) On the foundation   \$\bigsim \bigsim \b					
_						
е	Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed					
2	on foundation managers   \$  Has the foundation engaged in any activities that have not previously been reported to the IRS?			Х		
2	If "Yes," attach a detailed description of the activities	2				
3	Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of					
3	incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes	3		Х		
43	Did the foundation have unrelated business gross income of \$1,000 or more during the year?	4a		X		
h	If "Yes," has it filed a tax return on Form 990-T for this year?	4b		Х		
5	Was there a liquidation, termination, dissolution, or substantial contraction during the year?	5		X		
J	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	Х			
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	Х			
8a	Enter the states to which the foundation reports or with which it is registered (see page 19 of the					
	instructions) ► NJ,					
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 ATTACHMENT 6	8ь		Х		
9	Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or					
	4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page					
	27)? If "Yes," complete Part XIV	9		X		
10	Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing their					
	names and addresses	10		Х		

Par	t VII-A Statements Regarding Activities (continued)			age J
•				
11	At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the			v
	, , ,	11		X
12	Did the foundation acquire a direct or indirect interest in any applicable insurance contract before			1.7
	August 17, 2008?	12	<del>-,,</del>	X
13	Did the foundation comply with the public inspection requirements for its annual returns and exemption application?	13	Х	
	Website address N/A	-22		
14	The books are in care of PRICHARD FACTOR  Located at Section 1. Telephone no Section 212-219  ZIP+4 07405	-022		
	Located at ►038 MOUNTAIN ROAD KINNELON, NI ZIP+4 ► 07405			
15	Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 - Check here	٠	►	Ш
	and enter the amount of tax-exempt interest received or accrued during the year			
Par	t VII-B Statements Regarding Activities for Which Form 4720 May Be Required			
	File Form 4720 if any item is checked in the "Yes" column, unless an exception applies.		Yes	No
1a	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? Yes X No			
	(3) Furnish goods, services, or facilities to (or accept them from) a disqualified person? Yes X No		İ	
	(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		l	
	the benefit or use of a disqualified person)? Yes X No		ŀ	
	(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		ĺ	
	termination of government service, if terminating within 90 days ) Yes X No			
ь	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 page 20 of the instructions)?	1b		
	Organizations relying on a current notice regarding disaster assistance check here			
С	Did the foundation engage in a prior year in any of the acts described in 1a, other than excepted acts, that			
	were not corrected before the first day of the tax year beginning in 2009?	1c		X
2	Taxes on failure to distribute income (section 4942) (does not apply for years the foundation was a private			
	operating foundation defined in section 4942(j)(3) or 4942(j)(5))		1	
а	At the end of tax year 2009, did the foundation have any undistributed income (lines 6d and			
	6e, Part XIII) for tax year(s) beginning before 2009? Yes X No		ĺ	
	If "Yes," list the years ▶,		l	
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 page 20 of the instructions )	2b		X
C	If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here			
	<b>&gt;</b>			
3a	Did the foundation hold more than a 2% direct or indirect interest in any business			
	enterprise at any time during the year? Yes X No			
b	If "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or		l	
	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 2009 )	3ь		
	Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		<u>X</u>
Ь	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 lax year beginning in 2009?	46	}	Х

Part VIII	Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid Emp	loyees,
3 Five high	est-paid independent contractors for professional services (see	page 23 of the instructions). If non	e, enter "NONE."
	(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE			
		NONE	0
Total numb	er of others receiving over \$50,000 for professional services	· <u> </u>	▶ NONE
Part IX-A	Summary of Direct Charitable Activities		
	dation's four largest direct charitable activities during the tax year. Include relevant states ons and other beneficianes served, conferences convened, research papers produced, to		Expenses
1 N/A	<del></del>	· · · · · · · · · · · · · · · · · · ·	
			_
2			-
			-
3			_
			-
4			-
			-
Part IX-B			
1011	e two largest program-related investments made by the foundation during the tax year o	n lines 1 and 2	Amount
1 NONE			-
			-
2			_
			-
All other pro	gram-related investments. See page 24 of the instructions		
3 NONE			_
			-
T-4-1 A-1-1	Leas Adhanah 2		
rotal, Add I	lines 1 through 3		<b>▶</b> 1

Pa	Part X Minimum Investment Return (All domestic fou see page 24 of the instructions.)	indations must complete this part. Foreig	gn foundations,	
1	1 Fair market value of assets not used (or held for use) direct	ly in carrying out charitable, etc.,		
	purposes			
а	a Average monthly fair market value of securities		1a	96,277.
b	<b>b</b> Average of monthly cash balances		1b	40,293.
С	c Fair market value of all other assets (see page 24 of the inst	ructions)	1c	0.
d	d Total (add lines 1a, b, and c)		1d	136,570.
е	<ul> <li>Reduction claimed for blockage or other factors reported or</li> </ul>	lines 1a and		
	1c (attach detailed explanation)			
2	2 Acquisition indebtedness applicable to line 1 assets		2	0.
3			3	136,570.
4	4 Cash deemed held for charitable activities. Enter 1 1/2 % of I	ine 3 (for greater amount, see page 25		
	of the instructions)		4	2,049.
5	5 Net value of noncharitable-use assets. Subtract line 4 from	line 3 Enter here and on Part V, line 4	5	134,521.
6		· · · · · · · · · · · · · · · · · · ·	6	6,726.
Pa	Part XI Distributable Amount (see page 25 of the instributable and certain foreign organizations check			
1		<del></del>	1	6,726.
2 a	2a Tax on investment income for 2009 from Part VI, line 5	<b>2a</b>   88.		
	b Income tax for 2009 (This does not include the tax from Par	t VI ) 2b		
С	c Add lines 2a and 2b	/ · · · · · · · · · · · · · · · · · · ·	2c	88.
3	c Add lines 2a and 2b  Distributable amount before adjustments Subtract line 2c fi	om line 1	3	6,638.
4	4 Recoveries of amounts treated as qualifying distributions		4	
5	E Add Imag 2 and 4		5	6,638.
6		structions)	6	
7		5 Enter here and on Part XIII,		
	line 1		7	6,638.
Б	Don't VIII Our life in an District Airms (and page 05 of the in-			
Pe	Part XII Qualifying Distributions (see page 25 of the ins	structions)		
1	1 Amounts paid (including administrative expenses) to accom	nplish charitable, etc., purposes		
а		n (d), line 26	1a	3,925.
b			1b	0.
2	2 Amounts paid to acquire assets used (or held for use) direct	ctly in carrying out charitable, etc.		
	purposes		2	0.
3	3 Amounts set aside for specific charitable projects that satisf	fy the		
а	a Suitability test (prior IRS approval required)		3a	0.
b	b Cash distribution test (attach the required schedule)		3b	0.
4		on Part V, line 8, and Part XIII, line 4	4	3,925.
5				
	Enter 1% of Part I, line 27b (see page 26 of the instructions)	)	5 N	I/A
6	Adjusted qualifying distributions. Subtract line 5 from line	4	6	3,925.
	Note: The amount on line 6 will be used in Part V, column (	(b), in subsequent years when calculating w	hether the foundat	ion
	qualifies for the section 4940(e) reduction of tax in the	ose years.		

Fe	Undistributed income (see page	26 of the instruction	115)		
	. ,	(a)	(b)	(c)	(d)
1	Distributable amount for 2009 from Part XI,	Corpus	Years prior to 2008	2008	2009
	line 7				6,638.
2	Undistributed income, if any, as of the end of 2009				
а	Enter amount for 2008 only				
b	Total for pnor years 20_07_,20_06_,20_05_				
3	Excess distributions carryover, if any, to 2009				
а	From 2004				
	From 2005			:	
С	From 2006				
d	From 2007				
	From 2008				
	Total of lines 3a through e	35,769.			
	Qualifying distributions for 2009 from Part XII,				
	line 4. ▶ \$3,925.				
а	Applied to 2008, but not more than line 2a				· · · · · · · · · · · · · · · · · · ·
b	Applied to undistributed income of prior years (Election required - see page 26 of the instructions)				
С	Treated as distributions out of corpus (Election required - see page 26 of the instructions)				
d	Applied to 2009 distributable amount				3,925.
	Remaining amount distributed out of corpus	0.			
5		2,713.			2,713.
	(If an amount appears in column (d), the same				
	amount must be shown in column (a) )				<b>,</b>
6	Enter the net total of each column as indicated below:				
а	Corpus Add lines 3f, 4c, and 4e Subtract line 5	33,056.	,,	. ,	
b	Prior years' undistributed income Subtract				
	line 4b from line 2b				
С	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			<del></del>	<del></del>
d	Subtract line 6c from line 6b Taxable				
	amount - see page 27 of the instructions				
е	Undistributed income for 2008 Subtract line 4a from line 2a Taxable amount - see page				
	27 of the instructions				
f	Undistributed income for 2009 Subtract lines				
•	4d and 5 from line 1. This amount must be				
	distributed in 2010				
7	Amounts treated as distributions out of corpus				
	to satisfy requirements imposed by section 170(b)(1)(F) or 4942(g)(3) (see page 27 of the				
8	instructions)				<del> </del>
•	applied on line 5 or line 7 (see page 27 of the instructions)	32,152.			
9	Excess distributions carryover to 2010.	204			
	Subtract lines 7 and 8 from line 6a	904.			
	Analysis of line 9				
	Excess from 2005 904.				
b	Excess from 2006				
C	Excess from 2007				
	Excess from 2008				
е	Excess from 2009				

Fe	Private Oper	ating Foundations	(see page 27 of the	instructions and P	'art vII-A, question 9)	NOT APPLICABL
1 a՝	If the foundation has	received a ruling or o	letermination letter tha	t it is a private op	erating	
	foundation, and the ruling	g is effective for 2009, e	enter the date of the ruling			
þ	Check box to indicate wh				on 4942(	j)(3) or 4942(j)(5)
2 a	Enter the lesser of the ad-	Tax year		Prior 3 years		(e) Total
	justed net income from Part  I or the minimum investment	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(0) 10121
	return from Part X for each year listed					
b	85% of line 2a					
С	Qualifying distributions from Part					
d	XII, line 4 for each year listed.  Amounts included in line 2c not used directly for active conduct					
е	of exempt activities					
3	Complete 3a, b, or c for the alternative test relied upon					
а	"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 invest- ment return shown in Part X,					
	line 6 for each year listed					
¢	"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(X3)(B)(iii)		_			
	organization (4) Gross investment income				· · · · · · · · · · · · · · · · · · ·	<del>-</del>
Рa		ary Information (C	omplete this part	only if the foun	dation had \$5,000	or more in assets
	at any time o	during the year - se	e page 28 of the in			
1	Information Regarding	_				
а	List any managers of before the close of any	tax year (but only if th				
	RICHARD FAC					
b	List any managers of ownership of a partner					large portion of the
	N/A					
2	Information Regarding	_		• •		
	Check here ► X if the unsolicited requests for organizations under other contents.	or funds If the foun	dation makes gifts, g	rants, etc (see pag	ritable organizations a ge 28 of the instruction	and does not accept ons) to individuals or
a	The name, address, at	<u> </u>	·		he addressed	
	· · · · · · · · · · · · · · · · · · ·					
IJ	The form in which appl	ications should be SU	omitted and information	on and materials the	y should include:	
С	Any submission deadlii	nes				
đ	Any restrictions or lif	mitations on awards,	such as by geogra	phical areas, charm	table fields, kinds of	institutions, or other

Part XV Supplementary Information (co	ontinued)			
3 Grants and Contributions Paid Durin	ng the Year or Appr		uture Payment	
Recipient	If recipient is an individual show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
Name and address (home or business)	or substantial contributor	recipient	contribution	
a Paid during the year				
ATTACHMENT 7				
			1	
	!			
Total				3,500.
b Approved for future payment				
Total				1

Form 990-	PF (2009)			13-	-3727668	Page <b>12</b>
Part X	VI-A Analysis of Income-Produ	icina Acti	vities			
	ss amounts unless otherwise indicated.	г	ated business income	Excluded by	y section 512, 513, or 514	(e)
	am service revenue	(a) Business code	(b)	(c) Exclusion code	(d)	(e) Related or exempt function income (See page 28 of the instructions)
a						mo mondenono y
ь _						
d _						
e _						
f _						<del></del>
	ees and contracts from government agencies					
	pership dues and assessments			<del></del>		
	st on savings and temporary cash investments ends and interest from securities	<del></del>		14	4,959.	<del></del>
	ental income or (loss) from real estate	}				
	ebt-financed property					
	ot debt-financed property					
	ntal income or (loss) from personal property					·
7 Other	investment income					
	or (loss) from sales of assets other than inventory			18		
	come or (loss) from special events					
	s profit or (loss) from sales of inventory				·	****
	revenue a					
_						
е _					- "	
12 Subto	tal Add columns (b), (d), and (e)				4,959.	
13 Total.	Add line 12, columns (b), (d), and (e)				13	4,959.
	ksheet in line 13 instructions on page 28 to					
Part X\	VI-B Relationship of Activities					*********
Line No. ▼	Explain below how each activities the accomplishment of the formage 29 of the instructions.)					
-				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·
			·			
			· · · · · · · · · · · · · · · · · · ·			
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	<del> </del>		<del></del>			
		<u> </u>	NOT APPLICAB	LE		· · · · · · · · · · · · · · · · · · ·
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				<del></del>		
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	<u> </u>				<del> </del>	
	<del> </del>					
	<del>                                     </del>				<del></del>	

Form	990-PF	(2009)							13-	-37276	68	•	•	Pa	age 13
Pa	rt XVI		formation cempt Orga	Regarding anizations	Transfer	s To and	Transa	ctions	and	d Relat	ionship	s With	Nonc		
1	in se	ction 50		y or indirectly ode (other tha										Yes	No
а	Trăns			oundation to a i											
															X
<b>.</b>		ther asset		• • • • • • • •					• •				. 1a(2)		Х
U		-		haritable exempt	organization								15/1)	ŀ	x
				a noncharitable											X
				nent, or other ass											Х
				ents											Х
															Х
				or membership o											Х
С				nt, mailing lists,										L	X
d				the above is											
				assets, or ser											
	value 	in any	transaction of	r sharing arrai	ngement, sl	how in colu	mn ( <b>d</b> ) ti	ne value	of	the good	ls, other	assets, o	r service	es rec	ceived
(a) l	Line no	<del>  ' '                                  </del>	ount involved	(c) Name of	noncharitable	e exempt organi	zation		scripti	on of trans	fers, transac	tions, and sl	hanng arra	ngeme	nts
		N/A				<del></del>		N/A							
	<u>-</u>	<b> </b>		<del>                                     </del>											
				-											
	-		<del></del>					<del></del>							
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				Ĭ											-
										REC	EIVE				
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						· -			8	MAY	17 201				
									<u> </u>	OGE	FN L	JT T			
2 a				indirectly affili				nore tax-	exem	pt_organi	zations de	escribed if	,	_	ה
				her than section	501(c)(3)) o	r in section 5	277						Ye	×s <u>l</u>	No
D	IT Ye		ete the following me of organization	•	T	(b) Type of orga	anization				(c) Descript	tion of relation	nchin		
	<del></del>	(4) 112	or organization	·· <u>·</u>		(b) Type of org	a1112811011				(C) Descript	non or relation	nisinp		
			<del> </del>				=								
Ì	Under	penalties of	of perjury, I deci	are that I have explete Declaration	xamined this	return, including	g accompa	nying sche	dules	and state	nents, and	to the best	of my ki	nowled	ge and
	Denei,	11 13 1100, 1	correct, and cor	Decial ation	or preparer (	ottier than taxp	ayer or not	131	M	3210		vilicii prepa	e nas ar	iy kilo	wieuge
_	_							127	1.6		K	1315			
ere	₹ Si	gnature of	officer or trustee					Date M	My	-	Title	T <u></u>			
Ĭ	_			H//	- /		Date		c	heck if	<u>,                                    </u>	Preparer number (	's identify See Signa		n
Sign Here	- je 등	Preparer		///			05/	12/201		elf-employ	ed ►	page 30 d	of the instr		
S	Paid Preparer's Use Only	signatur	-	RRAND	SONNEN	SCHINE I		12/201	.0]		I FINE S	P0001 13-338			
	Pre Us	I .	ame (or yours if ploved), address			SUITE 6				-	EIN ▶	13-336	2301		

Phone no. 212-219-0220

self-employed), address,

and ZIP code

299 BROADWAY SUITE 600

10007

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FOR

THE SECOND FOUNDATION

NET INVESTMENT INCOME	4,959.	4,959.
REVENUE AND EXPENSES PER BOOKS	4,959.	4,959.
		TOTAL
DESCRIPTION	MERRIL LYNCH	

ATTACHMENT 1

l	C	J
	THAPHOLITA	
•		

FEES
ACCOUNTING
ı
Н
PART
990PF,
FORM

CHARITABLE PURPOSES	425.	425.
ADJUSTED NET INCOME		0.
NET INVESTMENT INCOME	425.	425.
REVENUE AND EXPENSES PER BOOKS	850.	850.
		TOTALS
DESCRIPTION	PROFESSIONAL FEE	

FORM 990PF, PART I - TAXES

REVENUE AND

DESCRIPTION

EXPENSES PER BOOKS

EXCISE TAX

121.

TOTALS

121.

## FORM 990PF, PART I - OTHER EXPENSES

THE SECOND FOUNDATION

	REVENUE AND	NET
DESCRIPTION BANK CHARGES	EXPENSES PER BOOKS 150.	INVESTM

NET	INCOME INCOME 150.	150.
AND	PER BOOKS 150.	150.
		TOTALS

49,076. 28,238. 36,380.

ENDING FMV

113,694.

- CORPORATE STOCK

PART II

FORM 990PF,

ATTACHMENT 5

ENDING BOOK VALUE	49,520. 32,335. 32,978.	114,833.			
	< FUND	TOTALS			3:23:54 PM V 09-6.1
	P 500 INDEX FUND				5/12/2010
NO	OCKS&				F482
DESCRIPTION	ML BLACKROCKS&P GE PFIZER				47004T

FORM 990PF, PART VII-A, LINE 8B - EXPLANATION OF NON-FILING

NJ DOES NOT REQUIRE A COPY OF THE 990-PF

OUNDATION

FORM 990PF, PART XV - GRANTS AND CONTRIBUTIONS PAID DURING THE YEAR

13-3727668

47004T F482 5/12/2010

v 09-6 1

AMOUNT ATTACHMENT 7 PURPOSE OF GRANT OR CONTRIBUTION

CHARITABLE

RELATIONSHIP TO SUBSTANTIAL CONTRIBUTOR

FOUNDATION STATUS OF RECIPIENT

RECIPIENT NAME AND ADDRESS

THE SETI LEAGUE INC

EXEMPT NONE

3,500

TOTAL CONTRIBUTIONS PAID

ATTACHMENT 7

PAGE 20

## SCHEDULE D (Form 1041)

Department of the Treasury Internal Revenue Service

## **Capital Gains and Losses**

▶ Attach to Form 1041, Form 5227, or Form 990-T. See the instructions for Schedule D (Form 1041) (also for Form 5227 or Form 990-T, if applicable). OMB No 1545-0092

20**ng** 

Name of estate or trust THE SECOND FOUNDATION Employer identification number C/O RICHARD FACTOR 13-3727668 Note: Form 5227 filers need to complete only Parts I and II Short-Term Capital Gains and Losses - Assets Held One Year or Less (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (see page 4 of the (d) Sales pnce the entire year Subtract (e) from (d) (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) instructions) 1a **b** Enter the short-term gain or (loss), if any, from Schedule D-1, line 1b 1b Short-term capital gain or (loss) from Forms 4684, 6252, 6781, and 8824 2 3 Short-term capital loss carryover. Enter the amount, if any, from line 9 of the 2008 Capital Loss Carryover Worksheet ...... Net short-term gain or (loss). Combine lines 1a through 4 in column (f) Enter here and on line 13, column (3) on the back Long-Term Capital Gains and Losses - Assets Held More Than One Year (e) Cost or other basis (f) Gain or (loss) for (a) Description of property (b) Date acquired (c) Date sold (d) Sales price (see page 4 of the the entire year (Example 100 shares 7% preferred of "Z" Co) (mo, day, yr) (mo, day, yr) instructions) Subtract (e) from (d) 6a 0. 6b Long-term capital gain or (loss) from Forms 2439, 4684, 6252, 6781, and 8824 Net long-term gain or (loss) from partnerships, S corporations, and other estates or trusts 9 Gain from Form 4797, Part I 10 10 Long-term capital loss carryover Enter the amount, if any, from line 14 of the 2008 Capital Loss 11 Net long-term gain or (loss). Combine lines 6a through 11 in column (f) Enter here and on line 14a, 0.

For Paperwork Reduction Act Notice, see the Instructions for Form 1041.

Schedule D (Form 1041) 2009

Sched	dule D (Form 1041) 2009					Page <b>2</b>
Pår	t III Summary of Parts I and II		(1) Beneficiaries'	(2) Esta	ate's	(2) Total
	Caution: Read the instructions before completing this	part	(see page 5)	or trus	st's	(3) Total
13	Net short-term gain or (loss)	13				
14	, , , , , , , , , , , , , , , , , , ,					
а	Total for year	14a				0.
b	Unrecaptured section 1250 gain (see line 18 of the wrksht)	14b				
С	28% rate gain	14c				
	Total net gain or (loss). Combine lines 13 and 14a ▶	15		<u> </u>		0.
	e: If line 15, column (3), is a net gain, enter the gain on Form 1041, line 4 (or Fo					
	rt V, and <b>do not</b> complete Part IV If line 15, column (3), is a net loss, complete F	Part IV	and the Capital Loss Ca	rryover Works	sneet,	as necessary
Par	t IV Capital Loss Limitation					
16	Enter here and enter as a (loss) on Form 1041, line 4 (or Form 990-T, f		•			(.
a	The loss on line 15, column (3) or b \$3,000			با بر ي ا	16	(
Carry	<b>2:</b> If the loss on line 15, column (3), is more than \$3,000, <b>or</b> if Form 1041, pag <b>over Worksheet</b> on page 7 of the instructions to figure your capital loss carryove	je 1, lir er	ne 22 (or Form 990-1,	line 34), is a l	oss, c	omplete the Capital Loss
Par						<del></del>
	n 1041 filers. Complete this part only if both lines 14a and 15 in colu		2) are gains, or an a	mount is ent	tered	in Part I or Part II and
	e is an entry on Form 1041, line 2b(2), and Form 1041, line 22, is mo					
	tion: Skip this part and complete the worksheet on page 8 of the instru	ctions	ıf			
	other line 14b, col. (2) or line 14c, col. (2) is more than zero, or					
	oth Form 1041, line 2b(1), and Form 4952, line 4g are more than zero.				. 1	
	<b>n 990-T trusts.</b> Complete this part <b>only</b> if both lines 14a and 15 ar orm 990-T, <b>and</b> Form 990-T, line 34, is more than zero. Skip this pa					
	er line 14b, col (2) or line 14c, col (2) is more than zero	art aric	complete the work	valleer on be	age o	of the matractions if
		24)	147		т	
17	Enter taxable income from Form 1041, line 22 (or Form 990-T, line 3	34) .	17		ŀ	
18	Enter the smaller of line 14a or 15 in column (2) but not less than zero				I	
40	but not less than zero				}	
19	· I I					
	from Form 1041, line 2b(2) (or enter the qualified dividends included in income in Part I of Form 990-T) 19			1		
20	Add lines 18 and 19				}	
21	If the estate or trust is filing Form 4952, enter the					
2 1	amount from line 4g, otherwise, enter -0-					
22	Subtract line 21 from line 20. If zero or less, enter -0-		22		ľ	
23	Subtract line 22 from line 17 If zero or less, enter -0-		23		ŀ	
	oublidge mile 22 from mile 17 in 2016 of 1666, officer of 1, 1, 1, 1, 1, 1	• • •			Ì	
24	Enter the smaller of the amount on line 17 or \$2,300		24		l	
25					ļ	
	Yes. Skip lines 25 and 26; go to line 27 and check the "No" box					
	No. Enter the amount from line 23		25		ŀ	
26	Subtract line 25 from line 24		26		1	
27	Are the amounts on lines 22 and 26 the same?	• • •		_		
	Yes. Skip lines 27 thru 30, go to line 31 No. Enter the smaller of line 17 or li	ine 22	27		ŀ	
				-	]	
28	Enter the amount from line 26 (If line 26 is blank, enter -0-)		28		İ	
						İ
29	Subtract line 28 from line 27		29			
30	Multiply line 29 by 15% ( 15)				30	
31	Figure the tax on the amount on line 23 Use the 2009 Tax Rat	te Sch	nedule for Estates a	nd Trusts	j	
	(see the Schedule Ginstructions in the instructions for Form 1041)				31	<u> </u>
					. [	
32	Add lines 30 and 31			[	32	
33	Figure the tax on the amount on line 17 Use the 2009 Tax Rat	te Sch	nedule for Estates a	ind Trusts	I	
	(see the Schedule Ginstructions in the instructions for Form 1041).				33	<u> </u>
34	Tax on all taxable income. Enter the smaller of line 32 or line 33					
	G, line 1a (or Form 990-T, line 36)	<u></u>	<u> </u>	<u> </u>	34	
					Sche	dule D (Form 1041) 2009

Employer identification number

THE SECOND FOUNDATION				13-37276	68
Part II Long-Term Capital Gains	and Losses - Asset	s Held More Tha	n One Year		
(a) Description of property (Example 100 sh 7% preferred of "Z" Co )	(b) Date acquired (mo , day, yr )	(c) Date sold (mo , day, yr )	(d) Sales price (see page 4 of the instructions)	(e) Cost or other basis (see page 4 of the instructions)	(f) Gain or (loss) Subtract (e) from (d)
6a CD FIFTH THIRD BK	10/24/2008	10/29/2009	30,000.	30,000.	
					· · · · · · · · · · · · · · · · · · ·
<del></del>	-				
				·	
					<u> </u>
6b Total. Combine the amounts in colu	umn (f). Enter here ar	nd on Schedule D, I	ine 6b		0 . D-1 (Form 1041) 200

Name of estate or trust as shown on Form 1041 Do not enter name and employer identification number if shown on the other side