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Form 990-PF

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

2009

OMB No 1545-0052

9/2/2009 For calendar year 2009, or tax year beginning . and ending 12/31/2009 G Check all that apply X Initial return Initial return of a former public charity ☐ Final return Amended return Address change Use the IRS A Employer identification number Name of foundation lahel Stiefel Freethought Foundation 27-0858715 Otherwise, Number and street (or P O box number if mail is not delivered to street address) B Telephone number (see page 10 of the instructions) Room/suite print c/o Foundation Source, 501 Silverside Road 123 (800) 839-1754 or type. City or town, state, and ZIP code C If exemption application is pending, check here See Specific Instructions. Wilmington 19809-1377 D 1. Foreign organizations, check here X Section 501(c)(3) exempt private foundation H Check type of organization 2. Foreign organizations meeting the 85% test, Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation check here and attach computation If private foundation status was terminated X Cash Accrual Fair market value of all assets at end J Accounting method under section 507(b)(1)(A), check here Other (specify) of year (from Part II, col (c), If the foundation is in a 60-month termination (Part I, column (d) must be on cash basis) line 16) ▶ \$ under section 507(b)(1)(B), check here 1.738.976 Part I Analysis of Revenue and Expenses (The total of (d) Disbursements (a) Revenue and (b) Net investment (c) Adjusted net for charitable amounts in columns (b), (c), and (d) may not necessarily equal expenses per ıncome income purposes the amounts in column (a) (see page 11 of the instructions)) books (cash basis only) 1,730,000 Contributions, gifts, grants, etc., received (attach schedule) Check ▶ if the foundation is not required to attach Sch B 143 Interest on savings and temporary cash investments Dividends and interest from securities 6,115 6,115 5 a Gross rents **b** Net rental income or (loss) 6 a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a Capital gain net income (from Part IV, line 2) Net short-term capital gain Income modifications 10 a Gross sales less returns and allowances b Less Cost of goods sold c Gross profit or (loss) (attach schedule) 11 Other income (attach schedule) Total. Add lines 1 through 11 12 6,258 1,736,258 OCDEN 13 Compensation of officers, directors, trustees, etc. and Administrative Expenses 14 Other employee salaries and wages 15 Pension plans, employee benefits 16 a Legal fees (attach schedule) **b** Accounting fees (attach schedule) 71 71 c Other professional 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 23 Other expenses (attach schedule) Operating 24 Total operating and administrative expenses. 71 71 Add lines 13 through 23 Contributions, gifts, grants paid 25 26 Total expenses and disbursements. Add lines 24 and 25 71 71 0 27 Subtract line 26 from line 12 1,736,187 a Excess of revenue over expenses and disbursements 6,187 b Net investment income (if negative, enter -0-) c Adjusted net income (if negative, enter -0-)

For Privacy Act and Paperwork Reduction Act Notice, see page 30 of the instructions.

Form 990-PF (2009)

Da	rt II	Balance Sheets Attached schedules and amounts in the description column	Beginning of year	End o	of year	
Га		should be for end-of-year amounts only (See instructions)	(a) Book Value	(b) Book Value	(c) Fair Market Value	
	1	Cash—non-interest-bearing .			<u> </u>	
	2	Savings and temporary cash investments	0	55,792	55,792	
	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 page 15 of the instructions) .				
	7	Other notes and loans receivable (attach schedule)				
ţ		Less allowance for doubtful accounts				
Assets	8	Inventories for sale or use .		··		
As	9	Prepaid expenses and deferred charges				
	10 8	Investments—U S and state government obligations (attach schedule)				
	1	nvestments—corporate stock (attach schedule)		1,630,503	1,631,482	
	•	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)		49,892	51,702	
	14	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				
		instructions Also, see page 1, item l)	0]	1,736,187	1,738,976	
	17	Accounts payable and accrued expenses .				
Ŋ	18	Grants payable				
ij	19	Deferred revenue				
Liabilities	20	Loans from officers, directors, trustees, and other disqualified persons				
<u>.e</u>	21	Mortgages and other notes payable (attach schedule)				
_	22	Other liabilities (describe				
	23	Total liabilities (add lines 17 through 22)	0	0		
		Foundations that follow SFAS 117, check here				
alances		and complete lines 24 through 26 and lines 30 and 31.				
2	24	Unrestricted				
<u>a</u>	25	Temporanly restricted	_			
$\mathbf{\omega}$	26	Permanently restricted				
Net Assets or Fund		Foundations that do not follow SFAS 117, check here and complete lines 27 through 31.				
7	27	Capital stock, trust principal, or current funds				
Š	28	Paid-in or capital surplus, or land, bldg , and equipment fund				
set	29	Retained earnings, accumulated income, endowment, or other funds	O	1,736,187		
AS	30	Total net assets or fund balances (see page 17 of the				
et.		instructions) .	0	1,736,187		
Z	31	Total liabilities and net assets/fund balances (see page 17				
		of the instructions)	_0	1,736,187		
	rt III	Analysis of Changes in Net Assets or Fund Balances				
1		net assets or fund balances at beginning of year—Part II, column (a), line	30 (must agree with			
		of-year figure reported on prior year's return)		. 1	0	
		amount from Part I, line 27a	•	2	<u>1,736,187</u> 0	
3 Other increases not included in line 2 (itemize)						
	Add I	4	1,736,187			
		eases not included in line 2 (itemize)		5	0	
6	Total	net assets or fund balances at end of year (line 4 minus line 5)-Part II, o	olumn (b), line 30	_ 6	1,736,187	

Part IV Capital Gains and	a Losses for lax on inve	estment incol	ne		
(a) List and describe the	kınd(s) of property sold (e g , real es e, or common stock, 200 shs MLC ((b) How acquired P—Purchase D—Donation	(c) Date acquire (mo , day, yr)	d (d) Date sold (mo , day, yr)
1a					
b					
<u>c</u>					
<u>d</u>			ļ.————————————————————————————————————		
<u>e</u>		· · · · · · · · · · · · · · · · · · ·	<u> </u>		
(e) Gross sales price	(f) Depreciation allowed (or allowable)	1.0	r other basis ense of sale		Gain or (loss) lus (f) minus (g)
_a					
<u>b</u>					
d					
e		· - · · · · · · · · · · · · · · · · · ·	<u>-</u>	·	
Complete only for assets show	ng gain in column (h) and owne	d by the foundate	on on 12/31/69	(I) Gains	(Col (h) gain minus
(i) F M V as of 12/31/69	(j) Adjusted basis as of 12/31/69	(k) Exce	ssofcol(ı) I(ı),ıfany	col (k), bu	t not less than -0-) or es (from col (h))
a					
b	•	ĺ			
С					
d			_		
е					
2 Capital gain net income or (i		also enter in Pa , enter -0- in Pa		2	
3 Net short-term capital gain of					
If gain, also enter in Part I, li		13 and 17 of t	he }		
instructions) If (loss), enter				3	
	er Section 4940(e) for R				
(For optional use by domestic pr	rivate foundations subject to	the section 494	10(a) tax on net ir	vestment incom	ne)
If section 4940(d)(2) applies, lea	eve this part blank			N/A - 19	ST YEAR
Was the foundation liable for the	e section 4942 tax on the dis	tributable amou	ınt of any year ın	the base period	? 🗌 Yes 🗌 No
If "Yes," the foundation does not	t qualify under section 4940	(e) Do not com	plete this part		
1 Enter the appropriate amou	unt in each column for each	year, see page	18 of the instruct	ions before mak	ing any entries
(a)	(b)	1	(c)		(d)
Base period years Calendar year (or tax year beginning in	Adjusted qualifying distribution	ons Net value	of nonchantable-use a	SSAIS I	Distribution_ratio (b) divided by col (c))
2008	' 			(60)	0 000000
2007			 		0 000000
2006					0 000000
2005					0 000000
2004	<u> </u>				0 000000
2 Total of line 1, column (d)				2	0 000000
3 Average distribution ratio for the number of years the four				3	0 000000
4 Enter the net value of nonch	aritable-use assets for 2009	from Part X, lır	ne 5	4	0
5 Multiply line 4 by line 3				5	0
6 Enter 1% of net investment	income (1% of Part I, line 27	'h)		6	0
7 Add lines 5 and 6		-, .		7	0
			•	'- -	
8 Enter qualifying distributions If line 8 is equal to or greate		n Part VI, line 1	b, and complete	8 that part using a	0 1% tax rate See
the Part VI instructions on pa		•	·	•	

General (or designate) of each state as required by General Instruction G? If "No," attach explanation is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3)

10 Did any persons become substantial contributors during the tax year? If "Yes," attach a schedule listing

. .

If "Yes." complete Part XIV

their names and addresses

or 4942(j)(5) for calendar year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV on page 27)?

8b

10

4h

Forr	n 990-PF (2009)	Stiefel Freethought Foundation	on								27	-085	8715	F	age 6
Pâ	rt VII-B State	ments Regarding Activiti	es f	or Which Forn	n 47	720 May Be R	equi	i red (co	ontii	nued))				
5a	During the year d	id the foundation pay or incur an	y am	ount to									ŀ		
	(1) Carry on pro	opaganda, or otherwise attempt t	o infl	uence legislation	(sec	ion 4945(e))?				Yes	X	No	1		
	(2) Influence th	e outcome of any specific public	elect	ion (see section 4	955)	; or to carry									İ
	on, directly	or indirectly, any voter registratio	n dny	ve?						Yes	[X]	No			
	(3) Provide a g	rant to an individual for travel, stu	idv. c	or other similar pui	nos	es?			\Box	Yes	$\overline{\mathbf{x}}$	No			
		rant to an organization other than	•	•	•			•	ш		نت				
	` '	09(a)(1), (2), or (3), or section 49								Yes	$\left[\mathbf{x} \right]$	No			
		any purpose other than religious				-			ш	.00	ىن				
	` '	purposes, or for the prevention				• '			\Box	Yes	$ \mathbf{x} $	No			}
h	If any answer is "	Yes" to 5a(1)–(5), did any of the	trans	actions fail to qual	lifv i i	nder the excentio	ns de	ecribed	<u></u>	.05	ىن				
_		on 53 4945 or in a current notice								12			5b	N/A	
	_	ying on a current notice regarding	-	-		, , ,	0	, modado		, ·	\Box			14//	
c	•	es" to question 5a(4), does the f					•	•			Ш				
		intained expenditure responsibili		•	,,,,,,,,,	nom the				Yes	X	Nο			
		e statement required by Regulati	-	-	(d)				ш	103	لکا	110			
6a		n, during the year, receive any fu				nav									
ou		ersonal benefit contract?		directly of indirect	٠ y , دد	pay				Yes	X	No	1		
h	•	n, during the year, pay premiums	dire	octly or indirectly o	nn a	nersonal benefit i	contra	act?	ш	103	ш	110	6b		
~	If "Yes" to 6b, file		, unc	ony or maneony, c	л а	personal benefit	COINT	201	•				05		
72	•	the tax year, was the foundation	าวก	arty to a prohibited	t tav	shelter transactu	nn?			Yes	$ \mathbf{x} $	No			
	•	ndation receive any proceeds or	-	• •				n2	ш	163		140	7b	N/A	
		ormation About Officers							Hi	ahly	Daid	Em			
		d Contractors	, 011	ectors, rruste	.63	, i ouiluation	IVIAII	ayers	, , , , , ,	giiiy	ı alu	L	picy	,63,	
1		, directors, trustees, found	atio	n managers and	1 th	eir compensat	ion (see na	ne 2	2 of t	he in	stru	ctions	:)	
<u> </u>	List all Officers	, uncctors, trustees, round		Title, and average) Compensation	, <u>, , , , , , , , , , , , , , , , , , </u>	(d) Cont							
	(a) Nar	ne and address		hours per week evoted to position	(i	f not paid, enter		mployee					Expens ther allo		
SE	E ATTACHMEN	-	<u> </u>	evoted to position		-0-)	ain	d deferred	1 00111	pensau	ion				
<u> </u>															
					\vdash										
2	Compensation	of five highest-paid employ	yees	(other than the	ose	included on li	ne 1-	-see p	age	23 of	fthe	instr	uctio	ns).	
	If none, enter "	'NONE."						-							
		·		(b) Title, and aver	aae					utions t			_		
(a) Name and address o	of each employee paid more than \$50	000	hours per week	:	(c) Compensation	on			benefit deferre			Expens ther allo		
				devoted to position	on		l			sation			aici aii	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
NO	NE		. .				- 1								
							1								
				ŀ											
	 .										_				
							一				1				
											1				
		er employees paid over \$50,													

Form **990-PF** (2009)

Form 990-PF (2009) Stiefel Freethought Foundation		27-0858715	Page 7
Part VIII Information About Officers, Directors, Trustees, Foundat and Contractors (continued)	ion Managers, Highly Paid	d Employees,	
3 Five highest-paid independent contractors for professional services (see page 23 of	of the instructions). If none, ente	or "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensati	on
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 chantable activities during the tax year. Include relevant statistical in the number of organizations and other beneficianes served, conferences convened, research papers produ		Expenses	
1 NONE			
2			
3			
4		•	
Part IX-B Summary of Program-Related Investments (see page 24 of the	e instructions)		
Describe the two largest program-related investments made by the foundation during the tax year on lines 1	and 2	Amount	
1 NONE			
2			
All other program-related investments See page 24 of the instructions			
Total Add lines 1 through 3	•		0

Pa	Minimum Investment Return (All domestic foundations must complete this part. Foreign see page 24 of the instructions.)	foundation	ons,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc.,		
•	purposes		
а	Average monthly fair market value of securities .	1a	420,796
b	Average of monthly cash balances	1b	6,974
c	Fair market value of all other assets (see page 24 of the instructions)	1c	0,574
d	Total (add lines 1a, b, and c)	1d	427,770
e	Reduction claimed for blockage or other factors reported on lines 1a and	··-	
_	1c (attach detailed explanation) . 1e		
2	Acquisition indebtedness applicable to line 1 assets	2	
3	Subtract line 2 from line 1d	3	427,770
4	Cash deemed held for chantable activities Enter 1½ % of line 3 (for greater amount, see page 25		
	of the instructions)	4	6,417
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4.	5	421,353
6	Minimum investment return. Enter 5% of line 5 MIR PRORATED - SHORT TAX YEAR	6	6,984
Par	t XI Distributable Amount (see page 25 of the instructions) (Section 4942(j)(3) and (j)(5) private of	perating	
	foundations and certain foreign organizations check here and do not complete this part)		
1	Minimum investment return from Part X, line 6	11	6,984
2a	Tax on investment income for 2009 from Part VI, line 5		
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
c	Add lines 2a and 2b	2c	124
3	Distributable amount before adjustments Subtract line 2c from line 1	3	6,860
4	Recoveries of amounts treated as qualifying distributions	4	0
5	Add lines 3 and 4	5	6,860
6	Deduction from distributable amount (see page 25 of the instructions)	6	
7	Distributable amount as adjusted Subtract line 6 from line 5 Enter here and on Part XIII,		
	line 1 .	7	6,860
Dos	t XII Qualifying Distributions (see page 25 of the instructions)		
rai	Qualifying Distributions (see page 25 of the instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes		
а	Expenses, contributions, gifts, etc —total from Part I, column (d), line 26	1a	0
b	Program-related investments—total from Part IX-B .	1b	0
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc.,		
	purposes .	2	0
3	Amounts set aside for specific charitable projects that satisfy the		
а	Suitability test (prior IRS approval required) .	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions. Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	_0
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 page 26 of the instructions)	5	0
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	0
	Note. The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foun qualifies for the section 4940(e) reduction of tax in those years	dation	

b Excess from 2006

c Excess from 2007

d Excess from 2008 e Excess from 2009 0

0

0

	990-PF (2009) Stiefel Freethought Foundations (s		ne instructions ai	nd Part VII-A ru	27-0858	8715 Page 10
_	If the foundation has received a ruling or determination foundation, and the ruling is effective for 2009, ent	ation letter that it is a	private operating		10011011 07	
b	Check box to indicate whether the foundation is a		•	n section	4942(J)(3) or	4942(j)(5)
2 a	Enter the lesser of the adjusted net	Tax year		Prior 3 years		
	income from Part I or the minimum investment return from Part X for each	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(e) Total
	year listed .					
b	85% of line 2a .		·			
С	Qualifying distributions from Part XII, line 4 for each year listed					
d	Amounts included in line 2c not used directly for active conduct of exempt activities					
е	Qualifying distributions made directly for active conduct of exempt activities Subtract line 2d from line 2c					-
3 a	Complete 3a, b, or c for the alternative test relied upon "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					
Pa	t XV Supplementary Information (Cor				000 or more in	
1	assets at any time during the ye Information Regarding Foundation Manag		8 of the instruc	tions.)		
-	List any managers of the foundation who have conbefore the close of any tax year (but only if they have	tributed more than 2			the foundation	
	d Stiefel List any managers of the foundation who own 10%	ar mars of the stee	k of a comprehen (o	s on occupilly losses of	ndian of the	
NOI	ownership of a partnership or other entity) of which		The state of the s		ortion of the	
2	Information Regarding Contribution, Gran	t, Gift, Loan, Sch	olarship, etc., Pr	ograms:		
	Check here ► X if the foundation only makes unsolicited requests for funds. If the foundation maunder other conditions, complete items 2a, b, c, ar	contributions to pre ikes gifts, grants, etc	selected charitable o	organizations and do		ons
а	The name, address, and telephone number of the	person to whom app	olications should be	addressed		
b	The form in which applications should be submitted	d and information ar	nd materials they sho	ould include		
С	Any submission deadlines	-		-		
d	Any restrictions or limitations on awards, such as b factors	by geographical area	ns, charitable fields, l	kinds of institutions,	or other	

Part XV Supplementary Information (continued)

	Recipient	If recipient is an individual, show any relationship to any foundation manager	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				
	Total .		'	▶ 3a	0
b	Approved for future payment				
	Total			▶ 3h	0

Enter gro	oss amounts unless otherwise indicated	Unrelated bus	siness income	Excluded by section	on 512, 513, or 514	(e) Related or exempt
4.5		(a) Business code	(b) Amount	(c) Exclusion code	(d) Amount	function income (See page 28 of
	am service revenue					the instructions)
ç _						
_						
e _					-	
' <u>-</u>	and analysis from any amount account					
_	ees and contracts from government agencies					
	pership dues and assessments			14	142	
	est on savings and temporary cash investments and interest from securities		<u></u>	14 14	143	
				14	6,115	
	ental income or (loss) from real estate					-
	ebt-financed property					
	ot debt-financed property					
	ental income or (loss) from personal property					
	investment income					
	or (loss) from sales of assets other than inventory					
	come or (loss) from special events			<u>-</u>		
	s profit or (loss) from sales of inventory					
	revenue a					
-1						
u					_	
е	stal Add columns (b) (d) and (a)		0		6 259	
e	otal Add columns (b), (d), and (e)		0		6,258	
e 12 Subto 13 Total	. Add line 12, columns (b), (d), and (e)	. (ations)	0		6,258 13	0 6,258
e	. Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to venfy calcul					
e 12 Subto 13 Total See work Part XV	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculars. Relationship of Activities to the Acc	omplishment	of Exempt P	urposes	13	
e 12 Subto 13 Total See work Part XV	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt process.	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt process.	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
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e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
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e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
e	Add line 12, columns (b), (d), and (e) sheet in line 13 instructions on page 28 to verify calculated Relationship of Activities to the Acc Explain below how each activity for which income the accomplishment of the foundation's exempt page 28 of the instructions)	omplishment	of Exempt Poumn (e) of Part X	urposes VI-A contributed in	13	
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Part XVII	Information Regarding	g Transfers T	o and	Transactions	and Relation	nships V	With No	ncharitable
	Exempt Organization	s						

a Transfers from the reporting foundation to a noncharitable exempt organization of (1) Cash . (2) Other ressets	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?										Yes	No
(1) Cash (2) Other assets City Cash of a sasets to a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (1) Sales of assets from a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Rembursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (7) Sales of facilities, equipment, analytic solicities of facilities, equipment, analytic solicities of the development of facilities, equipment, and analytic solicities of the development of facilities, equipment, and analytic solicities of facilities, equipment, analytic solicities of facilities, equipment, and analytic solicities of facilities, and analytic solicities of facilities, and analytic solicities of facilities of facilities, and analytic solicities of facilities of	а	a Transfers from the reporting foundation to a noncharitable exempt organization of										
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(1) Sales of assets to a noncharitable exempt organization (2) Purchases of assets from a noncharitable exempt organization (3) Rental of facilities, equipment, or other assets (4) Remibursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Sharing of facilities, equipment, mailing lists, other assets, or paid employees (8) International organization or sharing arrangement, show in 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 (e) Line no (b) Amount involved (c) Name of nonchantable evempt 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 in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? 2b If (%s, "complete the following schedule (a) Name of organization (b) Type of organization (c) Description of transfers, transactions, and sharing arrangements N/A Under penalties of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, if is nue, cornect, and compiligh. Declarement of the following schedules Under penalties of perjuny, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, if is nue, cornect, and compiligh. Declarement of the following schedules and statements, and to the best of my knowledge and belief, if is nue, cornect, and compiligh. Declarement of the following schedules and statements, and to the best of my knowledge and statements, and to the bes		(2) Ot	her assets							1a(2)		Х
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(3) Rental of facilities, equipment, or other assets (4) Reimbursement arrangements (5) Loans or loan guarantees (6) Performance of services or membership or fundraising solicitations (6) Performance of services or membership or fundraising solicitations (7) Loans or loan guarantees (8) Loans or loan guarantees (8) Performance of services or membership or fundraising solicitations (8) Loans or loan guarantees (8) Loans or loan guarantees (8) Loans or loan guarantees (9) Life answer to any of the above is "Yes," complete the following schedule Collumn (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 (9) Line no (b) Amount involved (c) Name of noncharitable exempt organization (d) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved (b) Name of noncharitable exempt organization (c) Description of transfers, transactions, and sharing arrangements (a) Line no (b) Amount involved (b) Trees (c) Name of noncharitable exempt organizations of transfers, transactions, and sharing arrangements (b) If "Yes," Complete the following schedule (a) Name of organization (b) Type of organization (c) Description of relationship Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declarement of the pentile that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declarement of the pentile that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declarement of the pentile that I have examined th												
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2a Is the foundation directly or indirectly affiliated with, or related to, one or more tax-exempt organizations described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527?			(b) Amount involved	(c) Name	of nonchantable exemp	t organization	(d) De	scription of transfers,	transactions, and si	narıng arı	angem	ents
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No	N/A						┼					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No							 					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No			· · · · ·				}					
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No							 	-				
described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No												
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No							+					
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described in section 501(c) of the Code (other than section 501(c)(3)) or in section 527? Yes No									- -			
Under penalties of penjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Total		describ	ped in section 501(c) o ," complete the following	f the Code (o	ther than section 5	501(c)(3)) or in		527? .	<u></u>		No	
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer or fiduciary) is based on all information of which preparer has any knowledge Total Tritle	N/A		(a) Harrie of organization		(Б) туре	o. organization		(c) Des	Siphon of relations	p		
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signature	e)	belie	f, it is true, correct, and comp						which preparer has			• ——
signature	ē	▼ Sig	nature of officer of trustee			Dia	ate	▼ Titl	e			
seri-employed), address, and ZIP code 55 WALLS DRIVE, FAIRFIELD, CT 06824 Phone no (800) 839-1754	Sign F	aid arer's Only	Preparer's	ov D. Has	kall		, ,	1	number (see	Signatu	re on	
seri-employed), address, and ZIP code 55 WALLS DRIVE, FAIRFIELD, CT 06824 Phone no (800) 839-1754		Prep Use				0/21/20	IU_	<u> </u>				
			self-employed), address,			1.D. OT 0000 4			-		1751	
			and ZIP code	55 WALLS	5 DRIVE, FAIRFIE	LD, CT 06824						

Schedule B

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

Department of the Treasury
Internal Revenue Service

Schedule of Contributors

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

OMB No 1545-0047

Name of the organization	Employer identification number					
Stiefel Freethought Found	dation	27-0858715				
Organization type (chec	k one)					
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 priv	rate foundation				
	501(c)(3) taxable private foundation					
• •	n is covered by the General Rule or a Special Rule. (c)(7), (8), or (10) organization can check boxes for both the Gei	neral Rule and a Special Rule See				
General Rule						
	on filing Form 990, 990-EZ, or 990-PF that received during the young contributor. Complete Parts I and II	ear, \$5,000 or more (in money or				
Special Rules						
sections 509(a)(1	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3) and 170(b)(1)(A)(vi), and received from any one contributor, dual 2) 2% of the amount on (i) Form 990, Part VIII, line 1h or (ii) Form	uring the year, a contribution of the greater				
the year, aggrega	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that re- te contributions of more than \$1,000 for use <i>exclusively</i> for reliques, or the prevention of cruelty to children or animals. Complet	gious, charitable, scientific, literary, or				
For a section 501(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions for use <i>exclusively</i> for religious, charitable, etc., purposes, but these contributions did not aggregate to more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an <i>exclusively</i> religious, charitable, etc., purpose. Do not complete any of the parts unless the General Rule applies to this organization because it received nonexclusively religious, charitable, etc., contributions of \$5,000 or more during the year.						
990-EZ, or 990-PF), but i	that is not covered by the General Rule and/or the Special Rule t must answer "No" on Part IV, line 2 of its Form 990, or check t 00-PF, to certify that it does not meet the filing requirements of S	the box on line H of its Form 990-EZ,				

Schedule B	(Form 990, 990-EZ, or 990-PF) (2009)		Page 1 of 1 of Part
	rganization		Employer identification number
Stiefel Fre	eethought Foundation		27-0858715
Part I	Contributors (see instructions)		
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	Stiefel, Todd 11213 Jonas Ridge Lane Raleigh NC 27613 Foreign State or Province Foreign Country	\$1,730,000	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	Foreign State or Province Foreign Country	\$0_	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a)	(b)	(c)	(d)
No.	Name, address, and ZIP + 4	Aggregate contributions	Type of contribution
3	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
5	Foreign State or Province Foreign Country	\$0	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
6			Person Payroll

Foreign State or Province Foreign Country (Complete Part II if there is a noncash contribution)

Noncash

Stiefel Freethought Foundation

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

TOTAL: 71 71 71 0 (a) (b) (c) (c) Expenses per Books Income Inco		(d) Charitable Purpose	l					
TOTAL: (a) (b) Expenses per Net Investment Books Income	0	(c) Adjusted Net Income						
Expenses p Books	71	(b) Jet Investment Income						
101		(a) Expenses per Books	71					
Investment Management Services	TOTAL:							
Investment Management Services		:						
Investment M			anagement Services					
			Investment M					10

Form 990-PF, Part II, Line 10b - Investments: Corporate Stock

	TOTAL:	1,630,503	1,631,482
		Line 10b - Column (b)	Line 10b - Column (b) Line 10b - Column (c)
Description/Symbol/CUSIP Number	Shares	Book Value	Fair Market Value
1 ARTIO GLOBAL HIGH INCOME FUND CLASS I (JHYIX)	4,955	066,03	50,194
2 COLUMBIA SELECT SMALL CAP FUND CLASS Z (UMLCX)	5,451	000'52	74,400
3 DWS INVESTMENT TR DWS CAPITAL GROWTH FUND INSTITU (SDGTX)	11,601	250,000	549,768
4 EATON VANCE STRUCTURED EMERGING MARKETS I (EIEMX)	7,692	100,000	101,231
5 HENDERSON EUROPEAN FOCUS FD CL A (HFEAX)	8,369	205,725	204,368
6 ISHARES MSCI PACIFIC EX-JAPAN (EPP)	1,260	50,032	52,126
7 ISHARES MSCI-JAPAN (EWJ)	009'2	74,466	74,024
8 MORGAN STANLEY INSTIFDS, GLOBAL REAL ESTATE PTF C (MRLAX)	6,803	50,000	50,816
9 PIMCO DEVELOPING LOCAL MRKTS FD INSTI CL (PLMIX)	2,518	25,000	25,227
10 PIMCO FUNDS TOTAL RETURN FUND CLASS A (PTTAX)	36,934	400,000	398,892
11 STREETTRACKS GOLD SHARES (GLD)	470	49,890	50,436

Form 990-PF, Part II, Line 13 - Investments - Other

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Stiefel
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For	n 990-PF, Part VII-A, Line	Form 990-PF, Part VII-A, Line 10 - Substantial Contributors			
	Name	Street	Cıty	State	Zip Code
-	Diana Stiefel	11213 Jonas Ridge Lane	Raleigh	NC	27613
7	Todd Strefel	11213 Jonas Ridge Lane	Raleigh	S	27613
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Stiefel Freethought Foundation

Form 990-PF, Part VIII, Line 1 - Compensation of Officers, Directors, Trustees and Foundation Managers

0	Expense Account	0						:			
0	Benefits	0									
0	Сотр.	0									
TOTAL	Avg Hrs.	_									
	Title	President / Director / Secretary									
	Zip Code	19809									
	State	DE									
	City	Wilmington									
	Street	c/o Foundation Source 501 Silverside Road Suite 123									
	Name	. Todd Stefel									
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