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Form **990-PF**

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

OMB No 1545 0052

2009

Department of the Treasury Internal Revenue Service Note: The foundation may be able to use a copy of this return to satisfy state reporting requirements

For cal	<u>enda</u>	r year 2009, or tax year beginning	, 2009	, and ending	<u>, ,</u>	
G Ch	eck a	II that apply. Initial return I	nitial Return of a former p	ublic charity	Fina	al return
		Amended return	X Address	change Name o	change	
		, when and total it	[22] / (dd, 000)	I A	Employer identification nun	nber
Use t IRS la		New Directions Foundati	on	^	. ,	
Otherv		C/O KKP Group, LLC	OII	<u> </u>	36-4267729	
prir		1603 Orrington Ave #127	<u> </u>	В	Telephone number (see the	instructions)
or ty		Evanston, IL 60201	5		847.328.2288	
See Spe		Evanston, IL 00201		C	If exemption application is	pending, check here
Instruct	IUIIS			D	1 Foreign organizations, chec	k here
H C	heck	type of organization X Section 5	01(c)(3) exempt private for	oundation	2 Foreign organizations meet	ing the 85% test, check
ſ	_	ection 4947(a)(1) nonexempt charitable		orivate foundation	here and attach computation	
I F			Accounting method. X C		If private foundation status	
		art II, column (c), line 16)			under section 507(b)(1)(A)	
▶ §		· ' ' '	Other (specify)	F	If the foundation is in a 60	
			t I, column (d) must be or	r casri basis)	under section 507(b)(1)(B)	, check here
Part I		nalysis of Revenue and	(a) Revenue and	(b) Net investment	(c) Adjusted net	(d) Disbursements
		xpenses (The total of amounts in olumns (b), (c), and (d) may not nece:	expenses per books	ıncome	ıncome	for charitable
	Si	arily equal the amounts in column (a)	? ⁻			purposes (cash basis only)
	(5	see the instructions))				(casii basis diliy)
	1	Contributions, gifts, grants, etc, received (att so	h) 100,000.			
	2	Ck ► If the foundn is not req to att Sch l				
	3	Interest on savings and temporary				
		cash investments				
	4		40,442.	40,442.		
		a Gross rents				
	'	b Net rental income or (loss)		, , , , , , , , , , , , , , , , , , , ,		
R		a Net gain/(loss) from sale of assets not on line 1	o -3,993.			
E		b Gross sales price for all 118, 207	7.			
V E	7	Capital gain net income (from Part IV, line 2)		0.		
Ñ	8	Net short-term capital gain				
ū	9	Income modifications				
Ε	10	a Gross sales less				
		returns and allowances				
		b Less Cost of goods sold				
	Ι.	c Gross profit/(loss) (att sch)				
	11		-	<u> </u>		
	l '''	See Statement	1 5,520.			
	12		141,969.	40,442.	0.	
	13			40,442.	U.	
			٠ 			
5	12	Other employee salaries and wages Pension plans; employee benefits				
1	[2]	r ension plans, employee benefits		<u> </u>		
A	5 6	a Legal fees (attach schedule)	2 5 000	2 222	<u> </u>	1 ((7
Ņ	Pl '	b Accounting fees (attach sch) See St	2 5,000.	3,333.		1,667.
~ N	۱۱۱ (c Other (prof fees (attach sch) 2 See St	3 2,649.	2,649.		
部引	KI/	interest				
思注	18	Trues (aptach schedule) (see instr.) See Stm.	4 1,699.	1,684.		15.
A A	19	Oedredetton (attach				
	20	sch) and depletion				
on γ _G F	20	Occupancy	-			
_ \ - \ -	21	Travel, conferences, and meetings				
	22	Printing and publications.				
OFFICATION OF THE PROPERTY OF	23	Other expenses (attach schedule)]	
i į			- 	-	· · · · · · · · · · · · · · · · · · ·	
	24		9,348.	7,666.		1,682.
\$ 5	25	expenses. Add lines 13 through 23. Contributions, gifts, grants paid Part XV		1,000.	1	141,850.
5			141,850.			141,850.
5	26	Total expenses and disbursements. Add lines 24 and 25	151,198.	7,666.	0.	143,532.
	27		131,130.	7,000.	J	143,332.
		a Excess of revenue over expenses		Ī		
	Ι ΄	and disbursements	-9,229.]	
		b Net investment income (if negative, enter 0)		32,776.		
		C Adjusted net income (if negative, enter 0)		/	0.	
	<u> </u>	, (galive, enter U)	!	·	<u>, , , , , , , , , , , , , , , , , , , </u>	·

Part IV Capital Gains and	Losses for Fax on investment	t income			
(a) List and describ 2-story brick warehou	red (c) Date acquired (month, day, year)	(d) Date sold (month, day, year)			
1a 12,121.2100 shs MF	P	1/02/09	2/24/09		
b 2500 shs MFC Eaton	<u>-</u> -	11/13/09	10/05/09		
c	 :	11/10/03	10/03/03		
d	- ·				
e					
(e) Gross sales price	(f) Depreciation allowed (or allowable)	(g) Cost or other basis plus expense of sale	,	(h) Gain or (e) plus (f) m	
95 646	†	<u> </u>	000		
a 85,646.	+ -		,000.		14,354. 10,361.
b 32,561.	 		, 200.		10,301.
<u> </u>	 	·····			
d	+	·			
Complete only for exacts show		no foundation on 12/21/60			
(i) Fair Market Value as of 12/31/69	ng gain in column (h) and owned by the (j) Adjusted basis as of 12/31/69	(k) Excess of column (over column (j), if any		(1) Gains (Coli gain minus column (k than -0-) or Losses (fi	(), but not less
a	+	· · · · · · · · · · · · · · · · · · ·			-14,354.
b					10,361.
c		, .			
d	†				
e	†				
2 Capital gain net income or (net	capital loss) If gain, also If (loss), enti-	enter in Part I, line 7 er -0- in Part I, line 7		2	-3,993.
3 Net short-term capital gain or (loss) as defined in sections 1222(5) ar		<u> </u>		<u> </u>
	,	``			
in Part I, line 8	8, column (c) (see the instructions) I	r (loss), enter -u-		3	0.
Part V Qualification Unde	r Section 4940(e) for Reduced	d Tax on Net Investmen	nt Incom	<u></u> е	
	tion 4942 tax on the distributable amou ify under section 4940(e). Do not comp		riod?	Yes	X No
1 Enter the appropriate amount ii	n each column for each year; see the i	instructions before making an	y entries.		
(a) Base period years Calendar year (or tax year beginning in)	(b) Adjusted qualifying distributions	(c) Net value of noncharitable-use asse	ts ((d) Distribution (column (b) divided	
2008	164,916.	1,580	.217.		0.104363
2007	231,780.	1,322			0.175239
2006	264,610.	1,025			0.258047
2005	219,740.		,260.		0.283440
2004	236,560.		,497.		0.446764
2 Total of line 1, column (d)				2	1.267853
	-6	l l 0 h- 5 1 - 1	<u> </u>		
	e 5-year base period — divide the total i has been in existence if less than 5 y		<u> </u>	3	0.253571
4 Enter the net value of nonchar	table-use assets for 2009 from Part X,	line 5	_	4	1,705,861.
5 Multiply line 4 by line 3				5	432,557.
6 Enter 1% of net investment inc	ome (1% of Part I, line 27b)			6	328.
7 Add lines 5 and 6				7	432,885.
8 Enter qualifying distributions fro	om Part XII, line 4			8	143,532.
If line 8 is equal to or greater th	nan line 7, check the box in Part VI, lir	ne 1b, and complete that part	using a 1%	6 tax rate See the	
Part VI instructions	·	•	•		

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Part VI Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see the in	structio	ns)		
1 a Exempt operating foundations described in section 4940(d)(2), check here				
Date of ruling or determination letter (attach copy of letter if necessary - see instr.)				
b Domestic foundations that meet the section 4940(e) requirements in Part V,	ļ			556.
check here ▶and enter 1% of Part I, line 27b				
c All other domestic foundations enter 2% of line 27b Exempt foreign organizations enter 4% of Part I, line 12, column (b).				
2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable				•
foundations only. Others enter -0-)	┼──			0.
3 Add lines 1 and 2	 			<u>556.</u>
4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only Others enter -0-)	┼──			<u>0.</u> 556.
5 Tax based on investment income. Subtract line 4 from line 3 If zero or less, enter -0-	 			150.
6 Credits/Payments. a 2009 estimated tax pmts and 2008 overpayment credited to 2009 6a 2,502.				
b Exempt foreign organizations — tax withheld at source				
c Tax paid with application for extension of time to file (Form 8868)				
d Backup withholding erroneously withheld 6d				
7 Total credits and payments. Add lines 6a through 6d	İ		2.	502.
8 Enter any penalty for underpayment of estimated tax. Check here	†		2/5	
9 Tax due If the total of lines 5 and 8 is more than line 7, enter amount owed	 		-	0.
10 Overpayment If line 7 is more than the total of lines 5 and 8, enter the amount overpaid	1		1.8	346.
11 Enter the amount of line 10 to be Credited to 2010 estimated tax 1,846. Refunded	†			0.
Part VII-A Statements Regarding Activities	<u> </u>			
1a During 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		Х
b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes				
(see the instructions for definition)?	L	1Ь		X
If the answer is 'Yes' to 1a or 1b, attach a detailed description of the activities and copies of any materials published	1	- 1		
or distributed by the foundation in connection with the activities		1		
c Did the foundation file Form 1120-POL for this year?	L	1 c		X
d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year. (1) On the foundation ► \$ 0. (2) On foundation managers ► \$	0.	1		ĺ
e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on	-∵	- 1		
foundation managers \blacktriangleright \$ 0.		I		
2 Has the foundation engaged in any activities that have not previously been reported to the IRS?	_	2		X
If 'Yes,' attach a detailed description of the activities		1		ĺ
3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles		I		ļ
of incorporation, or bylaws, or other similar instruments? If 'Yes,' attach a conformed copy of the changes	-	3		X
4a Did the foundation have unrelated business gross income of \$1,000 or more during the year?	⊢	4a		X_
b If 'Yes,' has it filed a tax return on Form 990-T for this year?	⊢	4b	N	/A
5 Was there a liquidation, termination, dissolution, or substantial contraction during the year?		5		X
If 'Yes,' attach the statement required by General Instruction T		1		
 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either By language in the governing instrument, or 		1		ĺ
	- 1	I		į
 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? 	- 1	6	Х	ĺ
7 Did the foundation have at least \$5,000 in assets at any time during the year? If 'Yes,' complete Part II, column (c), and Part XV	 	7	X	 -
8a Enter the states to which the foundation reports or with which it is registered (see the instructions)		-	••	
IL	— I	I		Ė
b If the answer is 'Yes' to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General	_	- 1		ĺ
(or designate) of each state as required by General Instruction G? If 'No,' attach explanation	L	8ь	Χ	L
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)? If 'Yes,' complete Part	χίν	9		X
10 Did any persons become substantial contributors during the tax year? If 'Yes,' attach a schedule listing their names	- 1			
and addresses.		10	0 F.=	X _
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Part VII-A Statements Regarding Activities Continued			
11 At any time during the year, did the foundation, directly or indirectly, own a controlled entity within the meaning of section 512(b)(13)? If 'Yes', attach schedule (see instructions)	11		Х
12 Did the foundation acquire a direct or indirect interest in any applicable insurance contract before August 17, 2008?	12		Х
Did the foundation comply with the public inspection requirements for its annual returns and exemption application? Website address ► N/A	13	Х	
14 The books are in care of ► Philip C. Fontana Telephone no ► 847.3	28 2	288	
Located at ► 1603 Orrington Ave. Ste. 1275 Evanston IL ZIP + 4 ► 60201	20.23	= 00	
15 Section 4947(a)(1) nonexempt charitable trusts filing Form 990-PF in lieu of Form 1041 — Check here	N/A		m-
and enter the amount of tax-exempt interest received or accrued during the year	14/ 21		N/A
Part VII-B Statements Regarding Activities for Which Form 4720 May Be Required			11/ 11
File Form 4720 if any item is checked in the 'Yes' column, unless an exception applies.	Т	Yes	No
1a During the year did the foundation (either directly or indirectly).		163	110
(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			
(4) Pay compensation to, or pay or reimburse the expenses of, a disqualified person? X Yes No	1 1		
(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)? Yes X No			
(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.) Yes X No			
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 the instructions)?	1 b		Х
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 2009?	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)).			
a 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?			
If 'Yes,' list the years ▶ 20, 20, 20	1 1		
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 the instructions.)	2b	N	/ ħ
c If the provisions of section 4942(a)(2) are being applied to any of the years listed in 2a, list the years here.	² "	IA	11
► 20, 20, 20			
3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time during the year? 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 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)	3b	N	/A
· ·			
4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?	4a		Х
b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that had not been removed from jeopardy before the first day of the tax year beginning in 2009?	4b		Х
BAA F	orm 99	0-PF ((2009)

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Part VII-B Statements Regarding Activiti	ies for Which Forn	n 4720 May Be Req	uired (continued)		
5a During the year did the foundation pay or incur	any amount to				
(1) Carry on propaganda, or otherwise attempt	t to influence legislation	(section 4945(e))?	Yes X	No	
(2) Influence the outcome of any specific publi on, directly or indirectly, any voter registral	c election (see section tion drive?	4955), or to carry	Yes X	No	
(3) Provide a grant to an individual for travel,	study, or other sımılar p	ourposes?	Yes X	No	
(4) Provide a grant to an organization other th in section 509(a)(1), (2), or (3), or section 4	an a charitable, etc, org 4940(d)(2)? (see instruc	ganization described ctions)	Yes X	No	
(5) Provide for any purpose other than religiou educational purposes, or for the preventior	is, charitable, scientific, n of cruelty to children o	literary, or or animals?	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 (see instructions)?			ons	5b	N/A
Organizations relying on a current notice regar	ding disaster assistance	e check here	▶ □		
c If the answer is 'Yes' to question 5a(4), does to tax because it maintained expenditure respons If 'Yes,' attach the statement required by Regu	ibility for the grant?		N/A Yes	No	***************************************
6a Did the foundation, during the year, receive an on a personal benefit contract?	y funds, directly or indi	rectly, to pay premiums	Yes X	No	
b Did the foundation, during the year, pay premiing the Yes' to 6b, file Form 8870.	ums, directly or indirect	ly, on a personal benefit	t contract?	6ь	X
7a At any time during the tax year, was the found	ation a party to a prohit	oited tax shelter transac	tion? Yes X	No	I
b If yes, did the foundation receive any proceeds	s or have any net incom	ne attributable to the trai	nsaction?	7ь	N/A
Part VIII Information About Officers, D	irectors, Trustees	, Foundation Mana	igers, Highly Paid	Employee	s,
and Contractors					
1 List all officers, directors, trustees, foundation	T			435	
(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 other allo	e account, wances
Kay Schlozman	President	0.	0.		0.
45 Warren St.	2.00				
Boston, MA 02445					
Stanley Schlozman	Secretary	0.	0.		0.
45 Warren St.	1.00				
Boston, MA 02445					
Paul A. Lehman	Director	0.	0.		0 .
1126 Michigan	0.50				
Evanston, IL 60201					
2 Compensation of five highest-paid employees	(other than those incl	ded on line 1- see inst			
(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) Expens other allo	e account, owances
None			- Componeditor		
				-	
Total number of other employees paid over \$50,000	L		<u> </u>	<u> </u>	0
				Earm 00	U-DE (2000

Form 990-PF (2009) New Directions Foundation

36-4267729

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Par	X Minimum Investment Return (All domestic foundations must complete this part. F see instructions.)	oreig	n foundations,
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc, purposes.		740 610
	Average monthly fair market value of securities	1a	749,612.
	Average of monthly cash balances	1b	977, 935.
	Fair market value of all other assets (see instructions)	1 c	4,292.
d	Total (add lines 1a, b, and c)	1 d	1,731,839.
е	Reduction claimed for blockage or other factors reported on lines 1a and 1c]	
	(attach detailed explanation) 1e 0.	1 1	
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,731,839.
4	Cash deemed held for charitable activities. Enter 1-1/2% of line 3 (for greater amount, see instructions)	4	25,978.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3 Enter here and on Part V, line 4	5	1,705,861.
6	Minimum investment return. Enter 5% of line 5	6	85,293.
Par		ratıng	foundations
	and certain foreign organizations check here ► and do not complete this pa	art.)	
1	Minimum investment return from Part X, line 6	1	85,293.
2a	Tax on investment income for 2009 from Part VI, line 5	1 1	
b	Income tax for 2009 (This does not include the tax from Part VI)	1	
c	: Add lines 2a and 2b	2c	656.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	84,637.
4	Recoveries of amounts treated as qualifying distributions	4	
5	Add lines 3 and 4	5	84,637.
6	Deduction from distributable amount (see instructions)	6	<u> </u>
_ 7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	84,637.
Par	Qualifying Distributions (see Instructions)	······	
1 a	Amounts paid (including administrative expenses) to accomplish charitable, etc, purposes. Expenses, contributions, gifts, etc — total from Part I, column (d), line 26	1a	_ 143,532.
ь	Program-related investments – total from Part IX-B	1 b	
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc, purposes	2	
3 a	Amounts set aside for specific charitable projects that satisfy the a Suitability test (prior IRS approval required)	3a	
b	Cash distribution test (attach the required schedule)	3b	
4	Qualifying distributions Add lines 1a through 3b Enter here and on Part V, line 8, and Part XIII, line 4	4	143,532.
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	
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	143,532.
	Note: The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating wheth qualifies for the section 4940(e) reduction of tax in those years	er the	foundation

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Part XIII Undistributed Income (see instructions)

•	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,				84,637.
Inne 7 2 Undistributed income, if any, as of the end of 2009				04,057.
a Enter amount for 2008 only			0.	
b Total for prior years 20 , 20 , 20		0.		······································
3 Excess distributions carryover, if any, to 2009				
a From 2004 123, 898.				
b From 2005 185, 292.	7			
c From 2006 220, 808.	₹ :			
d From 2007 231, 780.	⊣			
e From 2008 164, 916.				
f Total of lines 3a through e	926,694.			
4 Qualifying distributions for 2009 from Part				
XII, line 4. ► \$ 143,532.				
a Applied to 2008, but not more than line 2a			0.	
b Applied to undistributed income of prior years				
(Election required – see instructions)		_0.		
c Treated as distributions out of corpus	142 522			
(Election required — see instructions)	143,532.			0.
d Applied to 2009 distributable amount e Remaining amount distributed out of corpus	0.			
	84,637.	[84,637.
5 Excess distributions carryover applied to 2009. (If an amount appears in column (d), the	04,037.		·····	04,037.
same amount must be shown in column (a))				
		I .		
6 Enter the net total of each column as indicated below:				
a Corpus Add lines 3f, 4c, and 4e Subtract line 5	985,589.	.		
	300/003.			
b Prior years' undistributed income Subtract line 4b from line 2b		0.		
c Enter the amount of prior years' undistribut-				
ed income for which a notice of deficiency has been issued, or on which the section				
4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b Taxable				
amount - see instructions		0.		
e Undistributed income for 2008 Subtract line 4a from		‡		
line 2a Taxable amount — see instructions			0.	
f Undistributed income for 2009. Subtract lines		<u> </u>		
4d and 5 from line 1. This amount must be				0
distributed in 2010				0.
7 Amounts treated as distributions out of corpus to satisfy requirements imposed				
by section 170(b)(1)(F) or 4942(g)(3)				
(see instructions)	0.			
8 Excess distributions carryover from 2004 not applied on line 5 or line 7 (see instructions)	39,261.			
, ,	39,201.			
9 Excess distributions carryover to 2010. Subtract lines 7 and 8 from line 6a	946,328.			
10 Analysis of line 9				
a Excess from 2005 185, 292	.]			
b Excess from 2006 220, 808		1		
c Excess from 2007 231, 780		1		
d Excess from 2008 164, 916	 1			
e Excess from 2009 143, 532				

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Part XIV Private Operating Foundations (see instructions and Part VII-A, question 9) 1a If the foundation has received a ruling or determination letter that it is a private operating foundation, and the ruling							
is effective for 2009, enter the date of the	ruling			_ ` •	4942()(5)		
•	b Check box to indicate whether the foundation is a private operating foundation described in section 4942(j)(3) or						
2a Enter the lesser of the adjusted net income from Part I or the minimum	Tax year		Prior 3 years	1 (1) 0005	.		
investment return from Part X for each year listed	(a) 2009	(b) 2008	(c) 2007	(d) 2006	(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							
3 Complete 3a, b, or c for the alternative test relied upon.							
a 'Assets' alternative test — enter							
(1) Value of all assets					<u> </u>		
(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.							
 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	1		<u> </u>				
Part XV Supplementary Information assets at any time during t	า (Complete thi: he year — see i	s part only if the	e organization l	nad \$5,000 or mo	ore in		
Information Regarding Foundation Manage a List any managers of the foundation who close of any tax year (but only if they have Stanley Schlozman	gers:		otal contributions re section 507(d)(2))	ceived by the founda	tion before the		
b List any managers of the foundation who a partnership or other entity) of which the None	own 10% or more o foundation has a 1	f the stock of a corp 0% or greater intere	oration (or an equa st.	lly large portion of the	e ownership of		
2 Information Regarding Contribution, Grant, Gift, Loan, Scholarship, etc, Programs: Check here if the foundation only makes contributions to preselected charitable organizations and does not accept unsolicited requests for funds. If the foundation makes gifts, grants, etc, (see instructions) to individuals or organizations under other conditions, complete items 2a, b, c, and d							
a The name, address, and telephone numb	er of the person to	whom applications s	should be addressed	1			
See Statement 9							
b The form in which applications should be	submitted and infor	mation and material	s they should includ	de.			
See Statement for Line 2a				<u> </u>			
c Any submission deadlines							
See Statement for Line 2a	cuch as his sassing	high gross should	hla fields lands of "	netitutions or other fo	entors		
d Any restrictions or limitations on awards,	sucn as by geograp	nicai areas, charital	vie fielas, Kinas of li	ismunoris, or other to	aciuls.		
See Statement for Line 2a	. –						

. .

Part XV Supplementary Information (continued)							
3 Grants and Contributions Paid During the Year or Approved for Future 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)	substantial contributor	recipient	Contribution				
Name and address (home or business) a Paid during the year See attached "Grants" statement ,	any foundation manager or substantial contributor	recipient	All contributions were made for the general, charitable, educational or scientific purpose of each organization.	141,850.			
				141 050			
Total	,	<u> </u>	<u>► 3a</u>	141,850.			
b Approved for future payment							
Total			► 3b	ol			

Part XVI-A Analysis of Income-Producing Activities

Enter gross amounts unless otherwise indicated	Unrelated	business income	Excluded by s	section 512, 513, or 514	
1 Program service revenue.	(a) Business code	(b) Amount	(c) Exclu- sion code	(d) Amount	(e) Related or exempt function income (see the instructions)
a	 		+		
c	 				
d					
e					
f					
g 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 a Debt-financed property b 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 Net income or (loss) from special events Gross profit or (loss) from sales of inventory			14	-3,993.	
11 Other revenue					
a Non-Taxable Return of Cap			1		5,520.
b			 		
cd			 		
de	 		 		
12 Subtotal Add columns (b), (d), and (e)				36,449.	5,520.
13 Total. Add line 12, columns (b), (d), and (e)		-		13	41,969.
(See worksheet in the instructions for line 13 to verify cale	culations)				

Part XVI-B Relationship of Activities to the Accomplishment of Exempt Purposes

Line No. ▼	Explain below how each activity for which income is reported in column (e) of Part XVI-A contributed importantly to the accomplishment of the foundation's exempt purposes (other than by providing funds for such purposes). (See the instructions.)
N/A	
	

,	art XVII	Information Re Exempt Organ	egarding Tr	ansfers To and 1	Fransaction	ons an	d Relations	hips With No	ncharitab	le	
		Exempt Organ	izations					· -		Yes	No
	1 Did the organization directly or indirectly engage in any of the following with any other organization described in section 501(c) of the Code (other than section 501(c)(3) organizations) or in section 527, relating to political organizations?										
	a Transfers from the reporting foundation to a noncharitable exempt organization of										
	(1) Cash								1a (1)		<u>X</u>
	(2) Oth	er assets							1a (2)		Χ
	b Other tra	ansactions									
	(1) Sale	es of assets to a non-	charitable exei	npt organization					1 b (1)		X
				ble exempt organizati	ion				1 b (2)		X
	• •	tal of facilities, equip		assets					1b (3)		X
	, -	mbursement arrangei							1 b (4) 1 b (5)		X
		ns or loan guarantee		p or fundraising solic	itations				1b (5)		X
	* -			s, other assets, or pa		es			1c		X
	o onamig	or idominooy oquipino	, , , , , , , , , , , , , , , , , , ,	, o dood.o, o. po							
	the good	ds, other assets, or s	services given	complete the following by the reporting found low in column (d) the	dation If the	founda	tion received le:	ss than fair mark	et value in	e of	
(2	a) Line no	(b) Amount involved	T	f noncharitable exempt org				sfers, transactions, a		ngement	s
V	/A					-					
_											
_										_	
_											
_				<u> </u>				<u> </u>			
_	<u> </u>							-			
		· · · · · · · · · · · · · · · · · · ·									
		<u></u>	ļ								_
_	-										
	2a Is the fo	oundation directly or i	I Indirectly affilia of the Code (ot	ted with, or related to her than section 501(o, one or mo	re tax-e ection 5	xempt organiza 27?	tions	Yes	s X	No
		complete the follows									
) Name of organizati	on	(b) Type of organization (c)			(c) Description of relationship				
V	/A								"-"		
					_						
_									·		
_	Linder negalite	s of negury I declare man ha	ave examined this re	turn including accompanying	schedules and st	atements a	and to the hest of my	knowledge and belief, it	is true, correct, a	and	
	complete Dec	s of perjury, I declare habl ha claration of prepare (timer	than taxpayer or fi	turn, including accompanying duciary) is based on all infor	mation of which	preparer l	nas any knowledge	,			
•	-	Any	She				7/23/10	- Vice Praid	last		
ì	Signatui	re of officer or truster				Date		Title			
	Paid si Pre-	reparer's Wesl	, ey Naviau	* MN/Out		Date	8/18/10	Check if (S	reparer's Identify See Signature in I/A		
	parer's F	ırm's name (or Navi		w & Harris LI	.C			EIN - N/A			
	Use yo Only er ad	ours if self-mployed), ddress, and	est Jacks	on Blvd. Suit	e 718			Phone no ► (312) 461	08	 76
	address, and Chicago, IL 60604-3747						1	,		_	

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

2009

Name of the organization New Direction	ons Foundation	Employer identification number	
C/O KKP Grou	p, LLC	36-4267729	
Organization type (check one).			
Filers of: Form 990 or 990-EZ	Section: 501(c)() (enter number) organization 4947(a)(1) nonexempt charitable trust in 527 political organization		
Form 990-PF	X 501(c)(3) exempt private foundation 4947(a)(1) nonexempt charitable trust to 501(c)(3) taxable private foundation	reated as a private foundation	
Check if your organization is covered b Note: Only a section 501(c)(7), (8), or (y the General Rule or a Special Rule (10) organization can check boxes for both the Gener	al Rule and a Special Rule. See instructions	
General Rule — X For an organization filing Form 990 contributor. (Complete Parts I and	, 990-EZ, or 990-PF that received, during the year, \$! II)	5,000 or more (in money or property) from any one	
Special Rules —			
509(a)(1)/170(b)(1)(A)(vi) and recei	n filing Form 990 or 990-EZ, that met the 33-1/3% sup ved from any one contributor, during the year, a cont line 1h or (ii) Form 990-EZ, line 1. Complete Parts I a	tribution of the greater of (1) \$5,000 or (2) 2% of the	
aggregate contributions of more that	organization filing Form 990 or 990-EZ, that received an \$1,000 for use <i>exclusively</i> for religious, charitable, animals. Complete Parts I, II, and III.	I from any one contributor, during the year, , scientific, literary, or educational purposes, or the	
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, contribution	ons of \$5,000 or more during the year.	- \$	
990-PF) but it must answer 'No' on Pai	vered by the General Rule and/or the Special Rules of t IV, line 2 of their Form 990, or check the box on lin the filing requirements of Schedule B (Form 990, 990	ne H of its Form 990-EZ, or on line 2 of its Form	
BAA For Privacy Act and Paperwork for Form 990, 990EZ, or 990-PF.	Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)	

Schedule	B (Form 990, 990-EZ, or 990-PF) (2009)	Page 1	of 1 of Part I
			267729
		130-44	201129
Part I	Contributors (see instructions.)		
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	New Prospect Foundation 1603 Orrington Ave., Ste. 1275 Evanston, IL 60201	\$ <u>100,000.</u>	Person X Payroll Noncash (Complete Part II if there is a noncash contribution)
(2)	45	(6)	(d)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) Number	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution)

. '•				
	(Form 990, 990-EZ, or 990-PF) (2009)	Page	<u>1 of</u>	
lame of organ			Employer ider	ntification number
	Noncash Property (see instructions)		130-4207	123
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
-	N/A			
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) structions)	(d) Date received
		,		
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV (d	(c) or estimate) estructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV ((see ir	(c) or estimate) structions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV ((c) or estimate) estructions)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	FMV ((c) or estimate) ostructions)	(d) Date received

Schedule **B** (Form 990, 990-EZ, or 990-PF) (2009)

Relationship of transferor to transferee

Transferee's name, address, and ZIP + 4

(e) Transfer of gift

Pederal Statements New Directions Foundation C/O KKP Group, LLC		Page 1 36-4267729
Statement 1 Form 990-PF, Part I, Line 11 Other Income		
Non-Taxable Return of Cap	(a) (b) Net Revenue Investment per Books Income \$ 5,520. Total \$ 5,520.\$ 0.	(c) Adjusted Net Income
Statement 2 Form 990-PF, Part I, Line 16b Accounting Fees		
Accounting - KKP Fees To	(a) (b) Net (c) Expenses per Books Income Net Income \$ 5,000. \$ 3,333. \$ 141 \$ 5,000. \$ 3,333. \$ 0	(d) Charitable Purposes \$ 1,667. \$ 1,667.
Statement 3 Form 990-PF, Part I, Line 16c Other Professional Fees		
Account Management Fees - North	\$ 2,649. \$ 2,649.	(d) Charitable Purposes . \$ 0.
Statement 4 Form 990-PF, Part I, Line 18 Taxes		
Foreign Taxes IL Filing Fee Tax on Net Investment Income To	(a) (b) Net (c) Expenses Investment Adjusted per Books Income Net Income \$ 684. \$ 684. 15. 1,000. 1,000. \$ 1,699. \$ 1,684. \$ 0	(d) Charitable Purposes \$ 15 \$ 15.

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2009 Federal St			Page 2
C/O KKP Gi			36-4267729
Statement 5 Form 990-PF, Part II, Line 10b Investments - Corporate Stocks			
Corporate Stocks		Book Value	Fair Market <u>Value</u>
2,000 SHS Plains Expl & Prod Co. 3,500 SHS Tortoise Energy Cap Corp. 3,500 SHS Annaly Capital Management Inc. 1,200 SHS Entergy Corp 2,000 SHS Hatteras Finl Corp Com REIT 9,076.46 SHS MFB NT Emerging Mkts Equity 9,587.89 SHS MFO CGM Focus FD 9,426.9 SHS Fidelity INVT TR SE Asia 5,000 SHS Pfizer Inc.	Cost \$ Cost Cost Cost Cost Cost Cost Cost Cost	70,855. 49,175. 50,365. 90,138. 48,260. 101,060. 250,296. 207,548. 75,558. 943,255.	\$ 55,320. 80,080. 60,725. 98,208. 55,920. 100,204. 285,336. 239,726. 90,950. \$ 1,066,469.
Statement 6 Form 990-PF, Part II, Line 10c Investments - Corporate Bonds			
Corporate Bonds		Book Value	Fair Market Value
7,500 SHS Eaton Vance SR 14,728.660 SHS Third Ave Focused CR	Cost \$ Cost Total \$	60,660. 151,825. 212,485.	\$ 109,350. 154,651. \$ 264,001.
Statement 7 Form 990-PF, Part II, Line 15 Other Assets			
Accrued Dividends Receivable	<u>Bool</u> \$ \$	6,714. 6,714.	Fair Market Value \$ 6,714. \$ 6,714.
Statement 8 Form 990-PF, Part II, Line 22 Other Liabilities		_	
Pending Purchase Payable Rounding			\$ 296. 2.

Total 💲

298.

San Burk

Federal Statements

New Directions Foundation C/O KKP Group, LLC

Page 3

36-4267729

Statement 9 Form 990-PF, Part XV, Line 2a-d **Application Submission Information**

Name of Grant Program:

Name:

Stanley & Kay Schlozman

Care Of:

Street Address: City, State, Zip Code: Telephone:

1603 Orrington Ave., Ste. 1275 Evanston, IL 60201 847.328.2288

No particular form is required. No deadline exists.

Form and Content: Submission Deadlines:

Restrictions on Awards: The organization must be qualified under IRS Sec 170(c).

GENERAL ELECTIONS

PAGE 1

CLIENT KKP1000

NEW DIRECTIONS FOUNDATION C/O KKP GROUP, LLC

36-4267729

8/18/10

03 38PM

SECTION 49(H)(2) ELECTION AS TO THE TREATMENT OF QUALIFYING DISTRIBUTIONS

PURSUANT TO IRC SECTION 4942(H)(2) AND REGULATION 53.4942(A)-3(D)(2), THE FOUNDATION HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF CORPUS.

SIGNED:

New Directions Foundation (3b-4267729)Contributions made For the tax year ended 12/31/2009

Arts		
Handel & Haydn Society	Boston, MA	5,000
Handel & Haydn Society	Boston, MA	5,000
WBUR	Boston, MA	1,500
WGBH	Boston, MA	1,500
Arts Total	200,011, 11	13,000
Tito Total		70,000
Advocacy		
ACLU Foundation of Mass	Boston, MA	1,500
Brennan Center	New York, NY	1,000
Center for Constitutional Rights	New York, NY	1,000
Childrens Defense Fund	Washington, DC	1,000
Demos	New York, NY	2,000
Jewish Fund for Justice	New York, NY	2,500
Jewish Organizing Initiative	Boston, MA	500
Massachusetts Community Action Network	Boston, MA	2,000
Right Question Project	Cambridge, MA	500
Institute for Women's Policy Research	Washington, DC	2,500
Mass COSH	Boston, MA	2,500
Women Employed	Chicago, IL	1,000
Advocacy Total	55ug5,	18,000
navocacy rotal		. 5,555
Reproductive Rights		
Abortion Access Project	Cambridge, MA	2,500
National Abortion Federation	Washington, DC	1,500
Nat'l Family Planning & Repro Health Assn.	Washington, DC	1,000
Planned Parenthood of America	New York, NY	1,000
Planned Parenthood of Mass.	Boston, MA	7,500
Pro Choice Massachusetts Foundation	Boston, MA	2,500
Repro Rights Total	,	16,000
		·
Children		
Associated Early Care & Education	Boston, MA	500
Boston Childrens Museum	Boston, MA	2,500
Boston Childrens Museum	Boston, MA	2,500
Citizen Schools	Boston, MA	2,500
Edward Lewis Foundation (WEH)	Boston, MA	1,000
West End House	Allston, MA	1,000
West End House	Allston, MA	10,000
Strategies for Children	Boston, MA	4,000
Children Total		24,000
Education		
Boston College	Boston, MA	1,000
Cornell University	Ithaca, NY	1,500

Wellesley College Education Total	Wellesley, MA	2,500 5,000
Health Childrens Hospital Crohn's and Colitis Fdn NE Crohn's and Colitis Foundation Our Bodies Ourselves Health Total	Boston, MA Needham, MA New York, NY Cambridge, MA	25,000 1,000 1,000 250 27,250
Human Services Boston Food Bank Boston Food Bank Boston Women's Fund First Literacy Friends of Boston Homeless Pine Street Inn Project Bread Rediscovery House Rosies Place United Way of Massachusetts Human Services Total	Boston, MA	1,500 1,000 500 250 250 500 500 250 750 10,000 15,500
International American Jewish World Service American Jewish World Service Equality Now Global Fund for Women New Israel Fund Americans for Peace Now International Total	New York, NY New York, NY New York, NY San Francisco, CA New York, NY Washington, DC	2,500 5,000 1,500 2,000 3,500 1,000 15,500
Martha's Vineyard/Brookline Martha's Vineyard Hospital Island Affordable Housing Fund Martha's Vineyard Community Svs. Vineyard House Martha's Vineyard Hebrew Center BCF/Steps to Success Fund Brookline Community Foundation Brookline Educational Foundation Brookline Educational Foundation MV/Brookline Total	Edgartown, MA Vineyard Haven, MA Edgartown, MA Vineyard Haven, MA Vineyard Haven, MA Brookline, MA Brookline, MA Brookline, MA Brookline, MA	500 750 750 250 250 250 250 600 3,000 6,600
Other Northlight Theatre Hull House Dystonia Medical Research Fdn. For Friends Total	Northbrook, IL Chicago, IL Chicago, IL Grand Total	500 250 250 1,000 141,850

i i

Form **8868** (Rev April 2009)

Application for Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

File a separate application for each return.

OMB No 1545 1709

If you are	filing for an Automatic 3-Month Extension, complete only Part I and check this box .	► X		
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of this form)				
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previously filed Form 8868				
Part/138	Part Automatic 3-Month Extension of Time. Only submit original (no copies needed).			
•	required to file Form 990-T and requesting an automatic 6-month extension - check this box and c			
All other corp income tax re	orations (including 1120-C filers), partnerships, REMICS, and trusts must use Form 7004 to request turns	an extension of time to file		
the additiona Form 990-T	ing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic extensi below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a instead, you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more det www.irs gov/efile and click on e-file for Charities & Nonprofits	on of time to file one of the selectronically if (1) you want composite or consolidated tails on the electronic filing of		
	Name of Exempt Organization	Employer identification number		
Type or	New Directions Foundation			
print		36-4267729		
File by the due date for	Number, street, and room or suite number. If a P.O. box, see instructions			
filing your return See	1603 Orrington Ave #1880			
instructions	City, town or post office, state, and ZIP code. For a foreign address, see instructions			
	Evanston, IL 60201			
	f return to be filed (file a separate application for each return):			
Form 990	Form 990-T (corporation)	0		
Form 990	-BL Form 990-T (section 401(a) or 408(a) trust) Form 522	7		
Form 990	-EZ Form 990-T (trust other than above) Form 606	9		
X Form 990	-PF Form 1041-A Form 887	0		
	are in the care of Philip C. Fontana			
Telephone	No. ► 847.328.2288 FAX No. ►			
If the org	anization does not have an office or place of business in the United States, check this box			
If this is f	or a Group Return, enter the organization's four digit Group Exemption Number (GEN)	this is for the whole group,		
check this	box If it is for part of the group, check this box I and attach a list with the names at	nd EINs of all members		
	sion will cover			
until _	t an automatic 3-month (6 months for a corporation required to file Form 990-T) extension of time $8/15$, 20 _10 _, to file the exempt organization return for the organization named above ension is for the organization's return for.			
▶ 🗒	calendar year 20_09_ or tax year beginning, 20, and ending, 20			
2 If this to	x year is for less than 12 months, check reason: Initial return Final return Cl	nange in accounting period		
	oplication is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any indable credits. See instructions.	3a \$ 656.		
b If this a made I	oplication is for Form 990-PF or 990-T, enter any refundable credits and estimated tax payments include any prior year overpayment allowed as a credit	36\$ 2,502.		
deposit See ins	Due. Subtract line 3b from line 3a. Include your payment with this form, or, if required, with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System). ructions	3c \$ 0.		
Caution. If yo	u are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and Forr uctions	n 8879-EO for		

BAA For Privacy Act and Paperwork Reduction Act Notice, see instructions.

Form 8868 (Rev 4-2009)

Form 8868	(Rev 4-2009)	···	Page 2
• If you a	ire filing for an Additional (Not Automatic) 3-Month Extension, complete only	y Part II and check this t	oox ► X
Note. Only	complete Part II if you have already been granted an automatic 3-month exte	ension on a previously fi	led Form 8868.
	ire filing for an Automatic 3-Month Extension, complete only Part I (on page		
	Additional (Not Automatic) 3-Month Extension of Time. Only		
	Name of Exempt Organization	Empl	oyer identification number
Type or	NEW DIRECTIONS FOUNDATION		
print	C/O KKP GROUP, LLC	36-4267729	
51- b. H.	Number, street, and room or suite number. If a P.O. box, see instructions.	For II	RS use only
File by the extended	NAVIAUX, DUBOW & HARRIS LLC		
due date for filing the	53 WEST JACKSON BLVD. SUITE 718		
return See instructions.	City, town or post office, state, and ZIP code. For a foreign address, see instructions.	14.0	
	CHICAGO, IL 60604-3747	т. У де и	The second second
Check type	of return to be filed (File a separate application for each return):	<u> </u>	
Form 99	90 X Form 990-PF	Form 1041-A	Form 6069
Form 99	90-BL Form 990-T (section 401(a) or 408(a) trust)	Form 4720	Form 8870
Form 99		Form 5227	
	not complete Part II if you were not already granted an automatic 3-month ex	tension on a previously	filed Form 8868.
	ks are in care of. PHILIP C. FONTANA		
•	one No. ► 847 , 328 , 2288 FAX No ►		_
If the or	rganization does not have an office or place of business in the United States,	check this box	▶ 🗍
• If this is	s for a Group Return, enter the organization's four digit Group Exemption Nur	nber (GEN)	. If this is for the
whole group	p, check this box > 🔝 . If it is for part of the group, check this box > 🔲	and attach a list with the	e names and EINs of all
	ne extension is for.		
4 i requ	lest an additional 3-month extension of time until $11/15$, 20 1	. <u>0</u> .	
5 For ca	alendar year 2009, or other tax year beginning	, and ending	, 20
			change in accounting period
	in detail why you need the extension ADDITIONAL TIME IS NE	EDED TO GATHER	ALL THE INFORMATION
REQ	UIRED TO PREPARE A COMPLETE AND ACCURATE RETURN.		
8a If this	application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tental	ative tax, less any	0.00
nonre	fundable credits. See instructions		8a \$ 656.
D II this	application is for Form 990-PF, 990-T, 4720, or 6069, enter any refundable cents made. Include any prior year overpayment allowed as a credit and any a	redits and estimated tax imount haid previously	
	orm 8868	· · · · · · · · · · · · · · · · · · ·	8b\$ 2,502.
c Balan	ce Due. Subtract line 8b from line 8a. Include your payment with this form, or	r, if required, deposit	
with F	TD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment		8c \$ 0.
	Signature and Verification		
Under panalties correct, and cor	of perjury, I declare that I have examined this form, including accompanying schedules and statements inplete, and that I am authorized to prepare this form.	, and to the best of my knowledg	ge and belief, it is true,
>	Why nair Title - C/A	_	E Date - 8/12/10
Signature -	Title Title		Date
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BAA	FIFZ0502L 03/11/09	mark the second of the	Form 8868 (Rev 4-2009)
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